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# **Preventive Care for Children in HUSKY A: 2007**

**Presentation to Medicaid Managed Care Council**

**January 9, 2009**



# Purpose

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- ▶ To describe preventive care utilization by health plan and by selected factors that may affect access to care
- ▶ To evaluate utilization trends that indicate problems or improvements in access to care

# Methods

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- ▶ Using 2007 HUSKY A enrollment data, identified children who were continuously enrolled
- ▶ After 180+ days, searched 2007 encounter data for records for:
  - ▶ Well-child visits including developmental screening
  - ▶ Dental care including sealants
  - ▶ No care during one-year period

Beneficiary ID	Claim Date	Claim Ref. Number	Claim Line Number	Procedure Code	Dx Code	Dx Name	Label Name
123456789	1/2/2005	200509822964676	1	99213	49300	EXT ASTHMA W/O STAT ASTH	
123456789	1/2/2005	200509822964676	2	81002	49300	EXT ASTHMA W/O STAT ASTH	
123456789	1/4/2005	300230625888876	1				FLOVENT 110 MCG INHALER
123456789	1/4/2005	300230625888976	1				PREDNISOLONE 15 MG/5 ML SYRUP
123456789	1/21/2005	300230628788476	1				PREDNISOLONE 15 MG/5 ML SYRUP
123456789	2/25/2005	200519830617576	1	99245	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519830617576	2	94760	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519830617576	3	94010	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519820077376	1	E0570	49390	ASTHMA W/O STATUS ASTHM	
123456789	2/25/2005	200519820077376	2	A7015	49390	ASTHMA W/O STATUS ASTHM	
123456789	2/25/2005	200519820077376	3	A7005	49390	ASTHMA W/O STATUS ASTHM	
123456789	2/25/2005	300230632629876	1				FLOVENT 220 MCG INHALER
123456789	2/25/2005	300230632629976	1				SEREVENT DISKUS 50 MCG
123456789	2/25/2005	300230632630176	1				ACCOLATE 10 MG TABLET
123456789	3/28/2005	200519820380976	1	99213	49300	EXT ASTHMA W/O STAT ASTH	
123456789	4/4/2005	300230642004576	1				ACCOLATE 10 MG TABLET
123456789	4/4/2005	300230642004776	1				COMBIVENT INHALER
123456789	4/4/2005	300230642437176	1				ALBUTEROL 0.83 MG/ML SOLUTION
123456789	4/20/2005	200525324125176	1	99282	49390	ASTHMA W/O STATUS ASTHM	Emergency Room
123456789	4/20/2005	200525324125176	1	99282	49390	ASTHMA W/O STATUS ASTHM	Emergency Room
123456789	4/20/2005	300230649000176	1				SAN 25 MG SUPP
123456789	4/20/2005	300230649000376	1				10 MCG INHALER
123456789	5/8/2005	300230649000576	1				10 MG TABLET
123456789	5/18/2005	300230649000876	1				ALBUTEROL 0.83 MG/ML SOLUTION
123456789	5/24/2005	200525122768076	1	99213	49301		
123456789	5/24/2005	300230649003876	1				PREDNISOLONE 6.7 MG/5 ML SOLN
123456789	5/24/2005	300230649003976	1				ALBUTEROL 0.83 MG/ML SOLUTION
123456789	6/21/2005	300230653929976	1				PREDNISOLONE 6.7 MG/5 ML SOLN
123456789	6/21/2005	300230654449076	1				ACCOLATE 10 MG TABLET
123456789	6/29/2005	200528721549476	1	0	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Pharmacy
123456789	6/29/2005	200528721549476	1	0	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Pharmacy
123456789	6/29/2005	200528721549476	3	99282	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Emergency Room
123456789	6/29/2005	200528721549476	3	99282	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Emergency Room
123456789	6/29/2005	200528721549476	4	94640	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Other Therapeutic Services
123456789	6/29/2005	200528721549476	4	94640	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Other Therapeutic Services

**These claims are for 1 person**

Beneficiary ID	Claim Date	Claim Ref. Number	Claim Line Number	Procedure Code	Dx Code	Dx Name	Label Name
123456789	1/2/2005	200509822964676	1	99213	49300	EXT ASTHMA W/O STAT ASTH	
123456789	1/2/2005	200509822964676	2	81002	49300	EXT ASTHMA W/O STAT ASTH	
123456789	1/4/2005	300230625888876	1				FLOVENT 110 MCG INHALER
123456789	1/4/2005	300230625888976	1				PREDNISOLONE 15 MG/5 ML SYRUP
123456789	1/21/2005	300230628788476	1				PREDNISOLONE 15 MG/5 ML SYRUP
123456789	2/25/2005	200519830617576	1	99245	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519830617576	2	94760	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519830617576	3	94010	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519820077376	1	E0570	49390	ASTHMA W/O STATUS ASTHM	
123456789	2/25/2005	200519820077376	2	A7015	49390	ASTHMA W/O STATUS ASTHM	
123456789	2/25/2005	200519820077376	3	A7005	49390	ASTHMA W/O STATUS ASTHM	
123456789	2/25/2005	300230632629876	1				FLOVENT 220 MCG INHALER
123456789	2/25/2005	300230632629976	1				SEREVENT DISKUS 50 MCG
123456789	2/25/2005	300230632630176	1				ACCOLATE 10 MG TABLET
123456789	3/28/2005	200519820380976	1	99213	49300	EXT ASTHMA W/O STAT ASTH	
123456789	4/4/2005	300230642004576	1				ACCOLATE 10 MG TABLET
123456789	4/4/2005	300230642004776	1				COMBIVENT INHALER
123456789	4/4/2005	300230642137176	1				ALBUTEROL 0.83 MG/ML SOLUTION
123456789	4/20/2005	200525324125176	1	99282	49390	ASTHMA W/O STATUS ASTHM	Emergency Room
123456789	4/20/2005	200525324125176	1	99282	49390	ASTHMA W/O STATUS ASTHM	Emergency Room
123456789	4/20/2005	300230641994476	1				PROMETHEGAN 25 MG SUPP
123456789							FLOVENT 110 MCG INHALER
123456789							ACCOLATE 10 MG TABLET
123456789							ALBUTEROL 0.83 MG/ML SOLUTION
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123456789	6/21/2005	300230654449076	1				ACCOLATE 10 MG TABLET
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123456789	6/29/2005	200528721549476	1	0	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Pharmacy
123456789	6/29/2005	200528721549476	3	99282	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Emergency Room
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123456789	6/29/2005	200528721549476	4	94640	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Other Therapeutic Services
123456789	6/29/2005	200528721549476	4	94640	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Other Therapeutic Services

**These claims are for services provided on one day**

Beneficiary ID	Claim Date	Claim Ref. Number	Claim Line Number	Procedure Code	Dx Code	Dx Name	Label Name
123456789	1/2/2005	200509822964676	1	99213	49300	EXT ASTHMA W/O STAT ASTH	
123456789	1/2/2005	200509822964676	2	81002	49300	EXT ASTHMA W/O STAT ASTH	
123456789	1/4/2005	300230625888876	1				FLOVENT 110 MCG INHALER
123456789	1/4/2005	300230625888976	1				PREDNISOLONE 15 MG/5 ML SYRUP
123456789	1/21/2005	300230628788476	1				PREDNISOLONE 15 MG/5 ML SYRUP
123456789	2/25/2005	200519830617576	1	99245	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519830617576	2	94760	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519830617576	3	94010	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519820077376	1	E0500	49390	ASTHMA W/O STATUS ASTHM	
123456789	2/25/2005	200519820077376	2	A7015	49390	ASTHMA W/O STATUS ASTHM	
123456789	2/25/2005	200519820077376	3	A7005	49390	ASTHMA W/O STATUS ASTHM	
123456789	2/25/2005	300230632629876	1				FLOVENT 220 MCG INHALER
123456789	2/25/2005	300230632629976	1				SEREVENT DISKUS 50 MCG
123456789	2/25/2005	300230632630176	1				ACCOLATE 10 MG TABLET
123456789	3/28/2005	200519820380976	1	99213	49300	EXT ASTHMA W/O STAT ASTH	
123456789	4/4/2005	300230642004576	1				ACCOLATE 10 MG TABLET
123456789	4/4/2005	300230642004776	1				COMBIVENT INHALER
123456789	4/4/2005	300230642437176	1				ALBUTEROL 0.83 MG/ML SOLUTION
123456789	4/20/2005	200525324125176	1	99282	49390	ASTHMA W/O STATUS ASTHM	Emergency Room
123456789	4/20/2005	200525324125176	1	99282	49390	ASTHMA W/O STATUS ASTHM	Emergency Room
123456789	4/20/2005	300230641994476	1				PROMETHEGAN 25 MG SUPP

**These codes are Current Procedural Terminology (CPT) codes for provider services**

123456789	6/21/2005	300230654449076	1				ACCOLATE 10 MG TABLET
123456789	6/29/2005	200528721549476	1	0	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Pharmacy
123456789	6/29/2005	200528721549476	1	0	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Pharmacy
123456789	6/29/2005	200528721549476	3	99282	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Emergency Room
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123456789	1/4/2005	300230625888876	1				FLOVENT 110 MCG INHALER
123456789	1/4/2005	300230625888976	1				PREDNISOLONE 15 MG/5 ML SYRUP
123456789	1/21/2005	300230628788476	1				PREDNISOLONE 15 MG/5 ML SYRUP
123456789	2/25/2005	200519830617576	1	99245	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519830617576	2	94760	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519830617576	3	94010	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519820077376	1	E0570	49390	ASTHMA W/O STATUS ASTHM	
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123456789	2/25/2005	200519820077376	3	A7005	49390	ASTHMA W/O STATUS ASTHM	
123456789	2/25/2005	300230632629876	1				FLOVENT 220 MCG INHALER
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123456789	4/4/2005	300230642437176	1				ALBUTEROL 0.83 MG/ML SOLUTION
123456789	4/20/2005	200525324125176	1	99282	49390	ASTHMA W/O STATUS ASTHM	Emergency Room
123456789	4/20/2005	200525324125176	1	99282	49390	ASTHMA W/O STATUS ASTHM	Emergency Room
123456789	4/20/2005	300230641994476	1				PROMETHEGAN 25 MG SUPP

**These codes and labels correspond to diagnosis for which services were provided**

123456789	6/21/2005	300230654449076	1				ACCOLATE 10 MG TABLET
123456789	6/29/2005	200528721549476	1	0	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Pharmacy
123456789	6/29/2005	200528721549476	1	0	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Pharmacy
123456789	6/29/2005	200528721549476	3	99282	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Emergency Room
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123456789	1/4/2005	300230625888876	1				FLOVENT 110 MCG INHALER
123456789	1/4/2005	300230625888976	1				PREDNISOLONE 15 MG/5 ML SYRUP
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123456789	2/25/2005	200519830617576	1	99245	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519830617576	2	94760	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519830617576	3	94010	49300	EXT ASTHMA W/O STAT ASTH	
123456789	2/25/2005	200519820077376	1	E0570	49390	ASTHMA W/O STATUS ASTHM	
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123456789	2/25/2005	200519820077376	3	A7005	49390	ASTHMA W/O STATUS ASTHM	
123456789	2/25/2005	300230632629876	1				FLOVENT 220 MCG INHALER
123456789	2/25/2005	300230632629976	1				SEREVENT DISKUS 50 MCG
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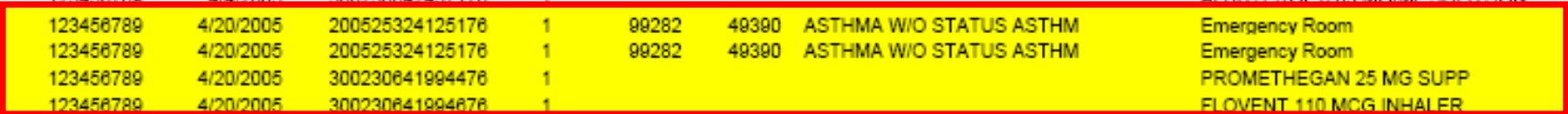
FLOVENT 220 MCG INHALER  
SEREVENT DISKUS 50 MCG  
ACCOLATE 10 MG TABLET

**These claims are for medications that correspond to National Drug Codes (NDC)**

123456789	6/21/2005	300230654449076	1				ACCOLATE 10 MG TABLET
123456789	6/29/2005	200528721549476	1	0	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Pharmacy
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123456789	6/29/2005	200528721549476	3	99282	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Emergency Room
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123456789	4/20/2005	200525324125176	1	99282	49390	ASTHMA W/O STATUS ASTHM	Emergency Room
123456789	4/20/2005	300230641994476	1				PROMETHEGAN 25 MG SUPP
123456789	4/20/2005	300230641994676	1				FLOVENT 110 MCG INHALER
123456789	5/8/2005	300230646426276	1				ACCOLATE 10 MG TABLET
123456789	5/18/2005	300230649008176	1				ALBUTEROL 0.83 MG/ML SOLUTION
123456789	5/18/2005	300230649008376	1				ALBUTEROL 0.83 MG/ML SOLUTION
123456789	5/18/2005	300230649008576	1				ALBUTEROL 0.83 MG/ML SOLUTION
123456789	6/29/2005	200528721549476	4	94640	49392	UNSPEC ASTHMA W/ACUTE EXACERB	Other Therapeutic Services



**These claims are for same client for same diagnosis but for different date of service and different services**

# Data Problem: BlueCare

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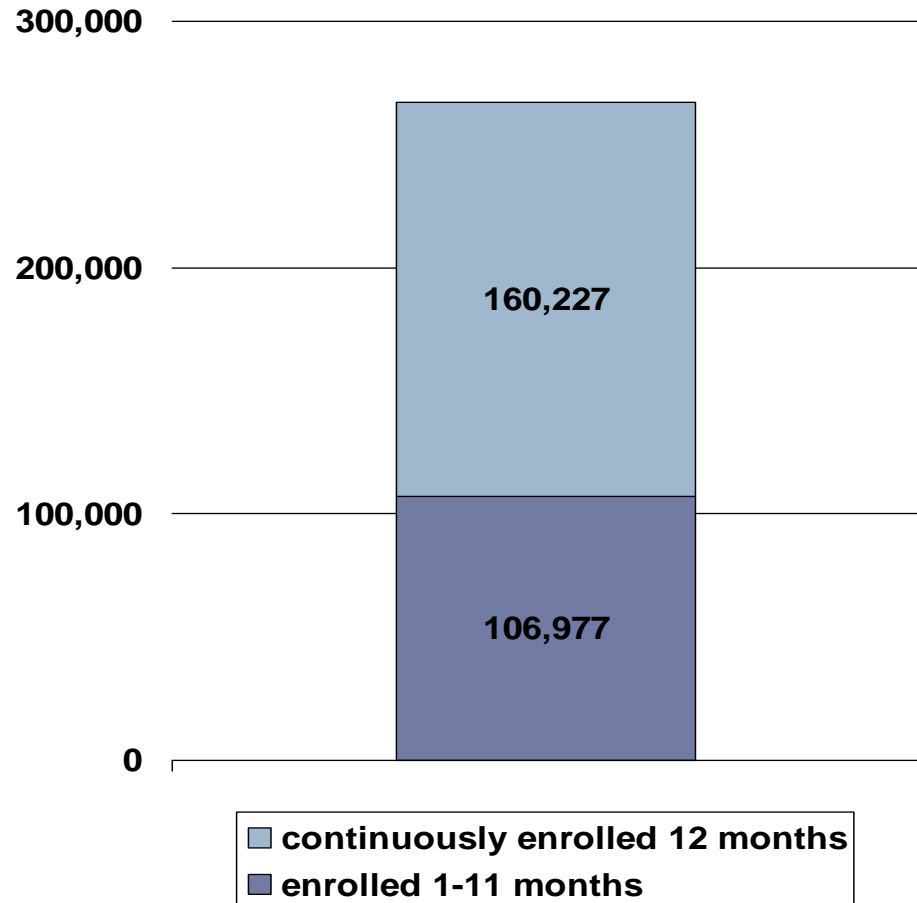
- ▶ Number of encounter records for 2007 was considerably less than in 2005 or 2006 for all types of services except dental care
- ▶ Compared with Jan - Aug 2007, the monthly average number of encounter records for Sep – Dec 2007 was less for office visits, clinic visits, and inpatient care, and dental care

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# ENROLLMENT

# Continuously Enrolled Children

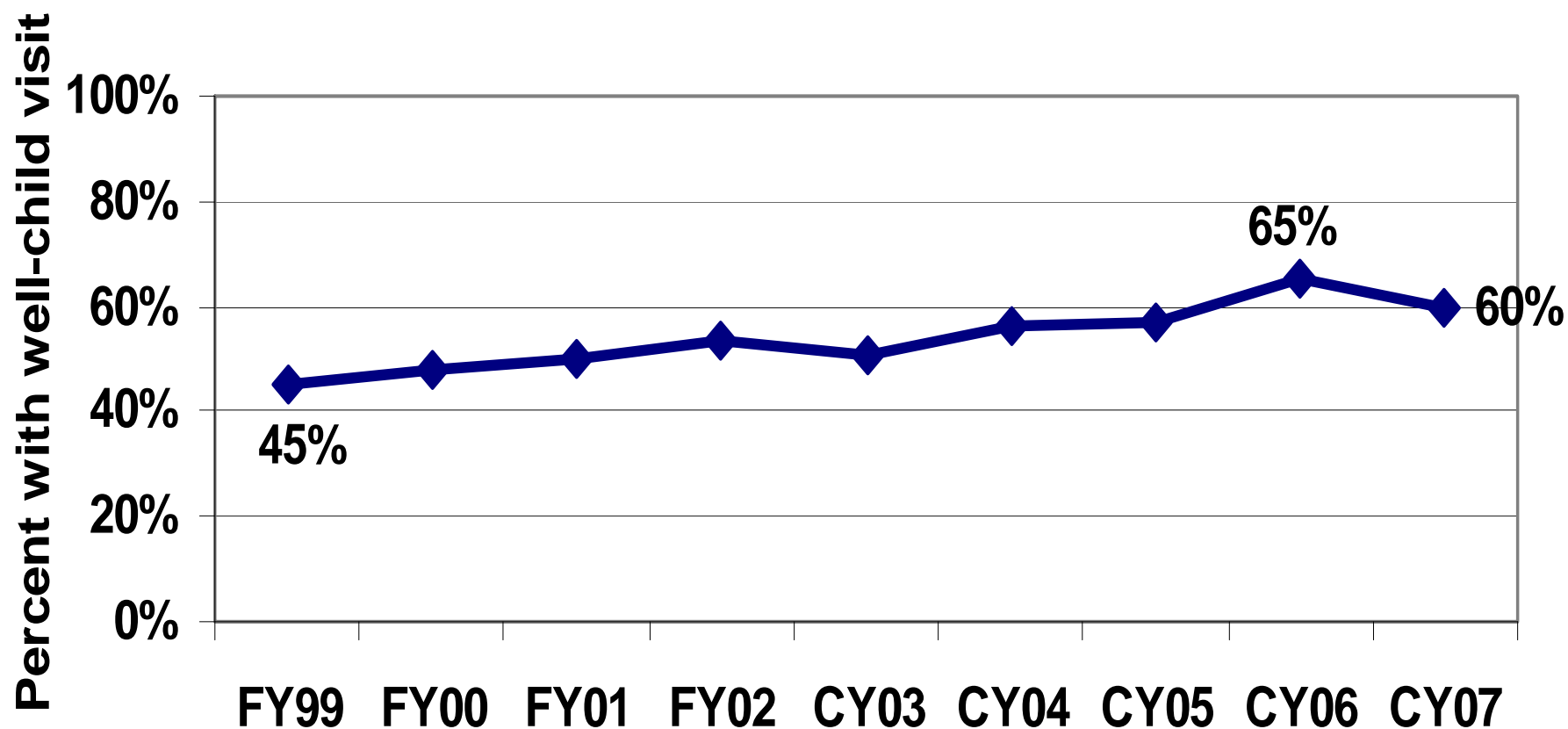
- ▶ 60% of children birth - 19 who were enrolled in HUSKY A for a month or more were continuously enrolled in 2007



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# WELL-CHILD CARE

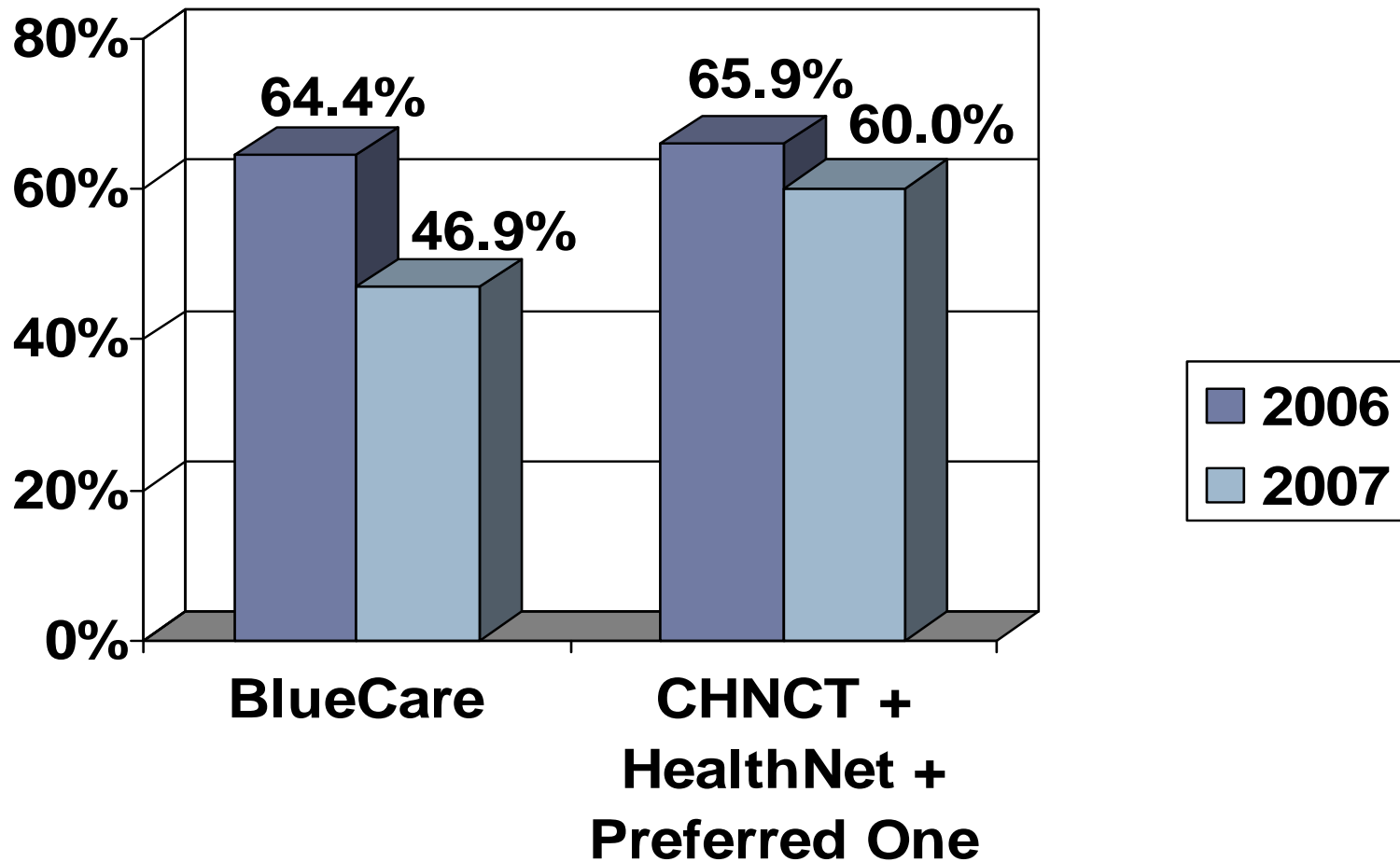
### Well-Child Care for Children 2 to 19 in HUSKY A: 1999-2007



**Note: CY07 rate does not include data for children in BlueCare Family Plan**



# Well-Child Care by MCO



# Most Likely to Have Had Well-Child Care

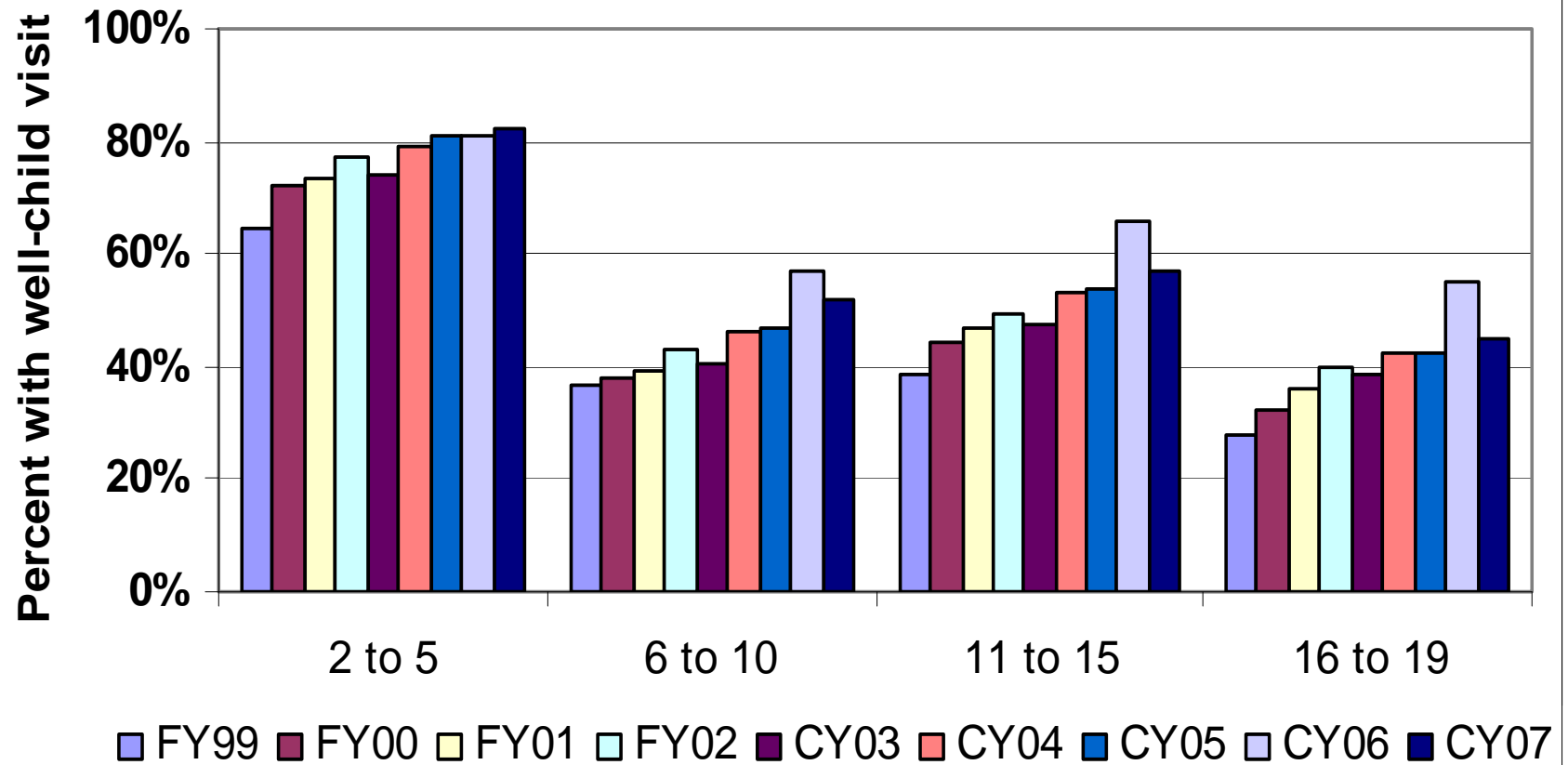
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- ▶ Young children 2 to 5
- ▶ Hispanic and White children (though rate for African American children was only slightly less)
- ▶ Children in Bridgeport, compared to Hartford, New Haven, and other towns



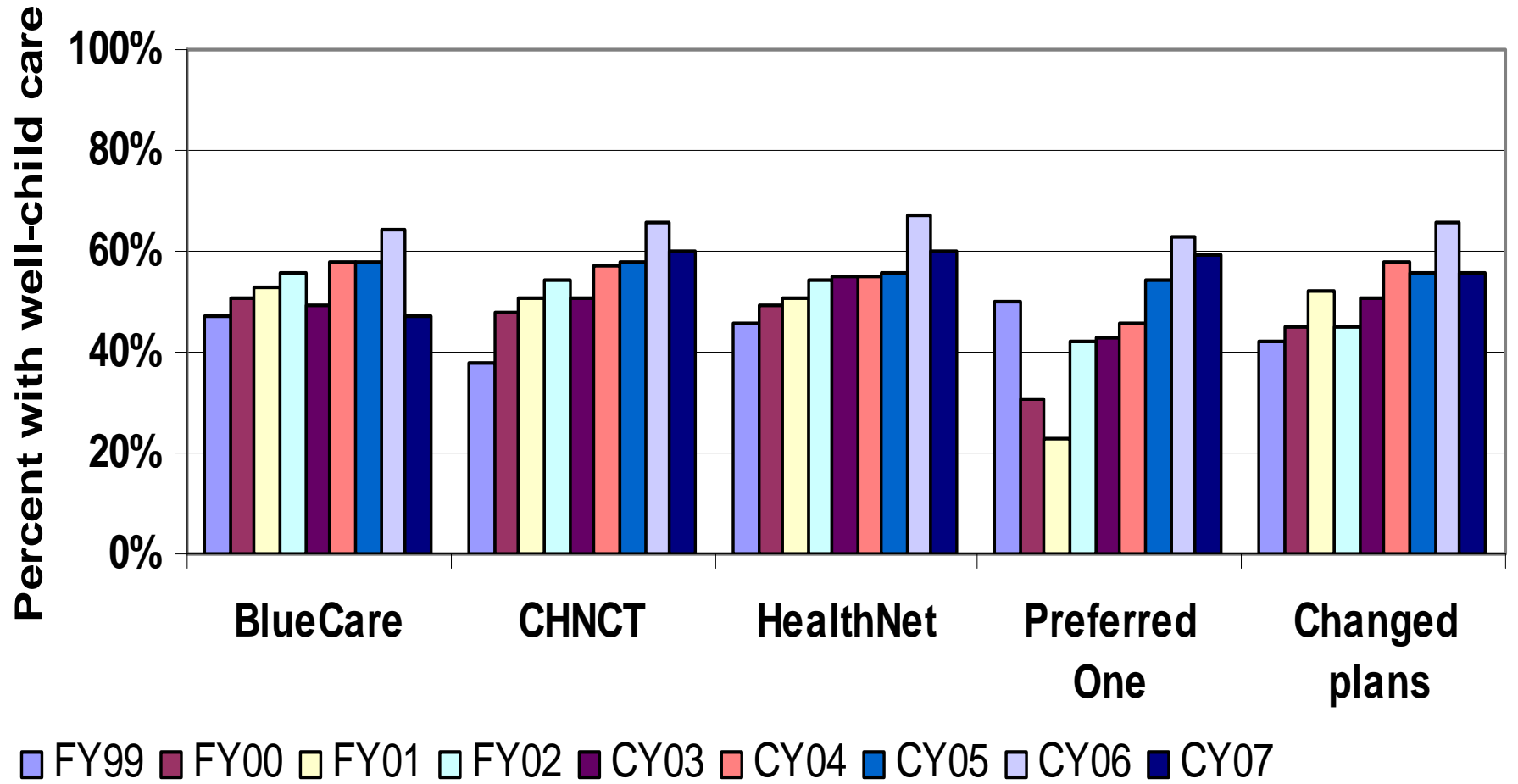


## Well-Child Care by Age in HUSKY A: 1999-2007



**Note: CY07 rate does not include data for children in BlueCare Family Plan**

## Well-Child Care by Health Plan in HUSKY A: 1999-2007



**Note: CY07 rate does not include data for children in BlueCare Family Plan**



# Developmental Screening

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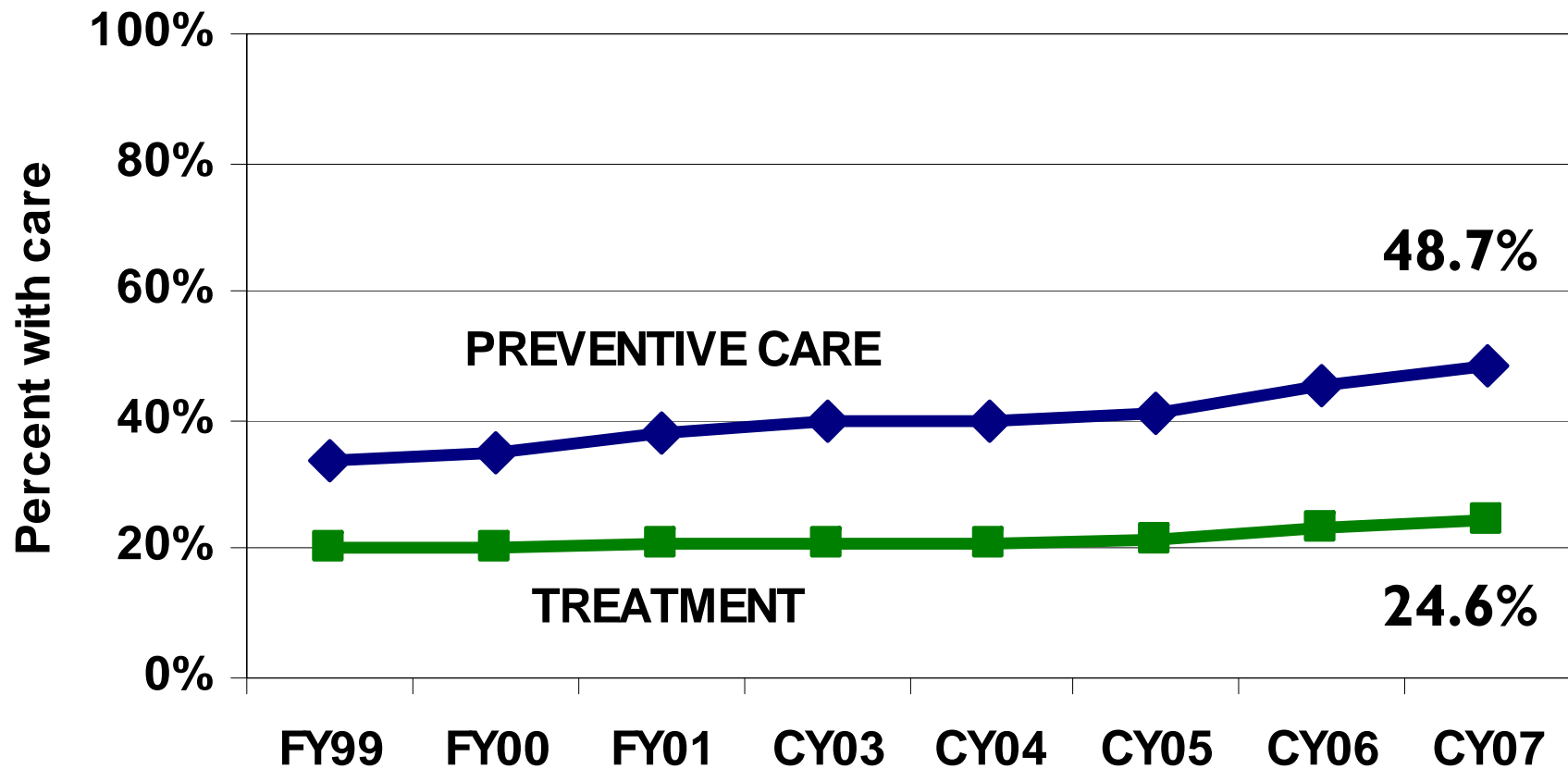
- ▶ Among children birth to less than 6, just 2% had an encounter record for developmental testing (limited or extended)
- ▶ New Policy: Pediatric providers may bill for developmental screening (limited) on same day as a well-child visit



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# DENTAL CARE

## Children 3-19 with Dental Care in HUSKY A: 1999-2007



**Note:** As in previous years, CY07 rate includes all plans and children who changed plans



# Most Likely to Have Had Preventive Dental Care

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- ▶ School-aged children 6-11
- ▶ Hispanic children
- ▶ Children living in East Hartford, Hartford, New Britain, Stamford, and Torrington
- ▶ Children enrolled in BlueCare Family Plan



# Dental Sealants

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- ▶ Nearly 15% of children 6-8 and 12-14 received sealants
- ▶ Percentage of children with sealants has increased steadily:
  - ▶ 2007: 9.1% (average 4.4/child)
  - ▶ 2006: 8.3% (average 3.4/child)
  - ▶ 2005: 7.0% (average 3.4/child)

# Oral Health Care from Primary Care Providers

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- ▶ **New Policy:** Pediatric primary care providers who have attended the ABC Program's continuing medical education program offered by UConn School of Dentistry may bill for these services:
  - ▶ Oral evaluation and hygiene instruction for patients under 3
  - ▶ Topical therapeutic fluoride varnish application for children at risk for dental caries (decay)



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**NO CARE**



# Had No Care in 2007

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- ▶ 10.9% of children 2-19 had no encounter records for care
- ▶ Combined rate for CHNCT + Health Net + PrefOne is 9.3%
- ▶ Rate would be lower if children <2 were included

## MCO-specific Rates

▶ BlueCare	13.2%
▶ CHNCT	9.3%
▶ Health Net	8.8%
▶ Preferred One	10.3%
▶ Changed plans	9.3%

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# CONCLUSIONS

# Preventive Care in 2007

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- ▶ Well-child care utilization decreased among all but the youngest children
- ▶ Preventive dental care utilization increased
- ▶ Care for young children is likely to improve due to policy changes

# Monitoring Care in 2008

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- ▶ Impact of HUSKY Program transition and policy changes can be evaluated by comparing utilization rates to data for previous years *BUT...*
- ▶ Evaluation is entirely dependent on complete and accurate data

# For more information:

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