



## ***Report spotlights ways to enhance health care for GA children***

### **New study sponsored by Voices for Georgia's Children, Georgians for a Healthy Future**

ATLANTA, Ga. (January 17, 2012) – Two of Georgia's leading health care advocacy organizations today issued a report saying the state could significantly expand medical care to more than 200,000 uninsured children with administrative practices, coverage policies and technologies already being used in other states.

The report, titled "Modernizing Medicaid and PeachCare: Promising Program Design Options for Georgia's Children" – was commissioned by Voices for Georgia's Children and Georgians for a Healthy Future, and compares Georgia systems for child health coverage and access to those in a variety of other states. Researched and prepared by Kellenberg Consulting, the study sought to identify existing programs that have improved health care outcomes, ensured access to vital services, controlled the utilization of available health care resources, and generated administrative cost savings. The report is part of a larger initiative supported by the Georgia Healthcare Foundation – called *Care for Georgia's Kids: Modernizing Medicaid and PeachCare* - which focuses on the importance of optimizing the provision of health care to Georgia's neediest children.

The issuance of the new report comes as the Georgia Department of Community Health (DCH) is conducting a broader study as prelude to a redesign of the state's Medicaid and PeachCare for Kids™ programs. DCH's Medicaid & CHIP Redesign Process follows Georgia's transition six years ago to a managed care environment for its Medicaid and PeachCare for Kids™ programs.

In a cover letter transmitting the report to DCH officials, Pat Willis, executive director of Voices for Georgia's Children, and Cindy Zeldin, executive director of Georgians for a Healthy Future, wrote: "Even in these difficult times, we believe Georgia has significant opportunities to make real progress in improving coverage, access and quality of medical care for the state's neediest children. Measures implemented in other states make it clear that Georgia can greatly increase the number of children covered under PeachCare, even as we trim administrative costs and improve quality outcomes. In the Southeast alone, Alabama and Louisiana have paved the way with initiatives that have yielded impressive results."

According to the Voices/GHF study, Alabama has been particularly aggressive – and successful – in taking advantage of opportunities to expand coverage to children under the Children's Health Insurance Program Renewal Act of 2009. In 2010, Alabama exceeded its enrollment target by nearly 133,000 children. Now, 94% of children in Alabama have health coverage. As a result, Alabama earned far and away the largest bonuses granted by the federal government for successful enrollment programs – a combined total of \$94.6 million for 2010 and 2011, and have just been awarded nearly \$20 million for

2012. The State of Georgia earned no federal bonuses for 2010 or 2011 two-year period, and were awarded only \$5 million for 2012.

Similarly, the report says, Louisiana has made significant strides by streamlining its enrollment procedures and transitioning to technology systems that allow data sharing between Medicaid and other public assistance programs. This so-called Express Lane Eligibility (ELE) system enabled the Louisiana Department of Health and Hospitals (DHH) to enroll more than 10,000 children the month after the program was launched, and within a few months that number reached 14,000. More than 30 percent of newly enrolled children in the Louisiana program have already used their coverage to obtain care, particularly dental services and prescription drugs, according to the study.

Other state-based initiatives which the report said hold potential for Georgia include:

- The Texas Health Passport program, a web-based electronic health records system used by state officials, managed care plans and providers to share medical history and coordinate care for children in the state's foster care system. The Texas Health Passport system was developed with a \$4 million grant from the Centers for Medicare and Medicaid Services (CMS).
- The State of Utah's electronic notifications project, which has helped cut that state's administrative and mailing costs by giving residents on various types of public assistance (including Medicaid, CHIP and Child Care Assistance, among others) the option of receiving important state communications electronically, either by email or text message. By the end of the second quarter of the Utah pilot, nearly 120,000 people had signed up for the program – and 11 percent of those had opted to receive all of their state correspondence electronically. The state's governor has estimated savings from the program to reach \$6 million.
- Rhode Island's Pediatric Practice Enhancement Project is an eight-year-old initiative aimed at improving care to children and youth with special health care needs. This program relies on a system of specially trained parent consultants, called Family Resource Specialists, who work in participating pediatric practices to identify medical resources for children whose needs exceed the practices' capabilities. Among the results from this program were significant reductions in both inpatient utilization and patient costs; indeed, program participants saw a 39 percent reduction in their annual healthcare costs after beginning to participate in the program, according to the Voices/GHF study.

“Georgia has made admirable progress in many ways in recent years,” said Rebecca Kellenberg of Kellenberg Consulting, who led the study. “The state's current review of its Medicaid and PeachCare for Kids™ program is obviously aimed at identifying opportunities to improve the health care delivery system and make it more efficient. The purpose of the study commissioned by Voices for Georgia's Children and Georgians for a Healthy Future is to help identify proven initiatives that could be adapted to Georgia.”