



Developmental Screening: Oregon’s Health and Early Learning System Transformation

Developmental screening – the administration of a brief, validated screening tool at regular intervals to identify children at risk for developmental delay – is central to Oregon’s transformation efforts in health and early learning. Early identification and appropriate intervention offer the best opportunity for children to achieve maximal emotional and intellectual development and arrive at school ready to succeed. Developmental screening increases the accuracy of assessing children’s developmental status and provides an important opportunity to engage families in child development.

Building a Strong Foundation: Oregon’s ABCD Program

Prior to recent reform efforts, Oregon had already realized significant gains in developmental screening through support from the [Assuring Better Child Health and Development \(ABCD\) Program](#), funded by the Commonwealth Fund and administered by the National Academy for State Health Policy. Through participation in the ABCD Screening Academy and ABCD III, critical policy and system improvements were established in Oregon including: improvement projects for managed care organizations focused on developmental screening; a special payment code within the state Medicaid program to prioritize developmental screening; reimbursement for case management and care coordination; a standard referral form for parent and agency; and agreements for claims data sharing to assess progress in performance improvement goals. These foundational improvements and the overall success of [Oregon’s ABCD Program](#) provided the opportunity to highlight and enhance developmental screening within Oregon’s current transformation efforts across health and early learning.

New Opportunities: Health and Early Learning System Transformation

Under Governor Kitzhaber’s leadership, Oregon is simultaneously transforming its [health](#) and [early learning](#) systems. New regional structures integrate physical, mental and dental Medicaid services (coordinated care organizations, or CCOs) and early learning services (Early Learning Hubs). These organizations are held accountable to specific metrics and outcomes, but they have substantial flexibility to develop strategies to meet the needs of their local and diverse communities. Developmental screening is central to these concurrent transformation efforts in multiple ways:

- Developmental screening is an established best practice for primary care providers and various early learning providers
- New state policies have extended the practice of developmental screening to child care providers with implementation of Oregon’s Quality Rating and Improvement System
- Developmental screening has been established as an accountability measure for CCOs and Early Learning Hubs
- Developmental screening has been incorporated into the state’s Patient-Centered Primary Care Home Program as a requirement for child-serving medical homes

- Oregon’s Joint Policy Committee (connecting the Oregon Health Policy Board and Early Learning Council) has prioritized coordination across child-serving systems as a key focus area

Each of these elements demonstrates an unprecedented opportunity to enhance developmental screening in Oregon with a focus on performance improvement, cross-system coordination and improved health and early learning outcomes for children.

Accountability measures. Developmental screening in the first three years of life is one of Oregon’s CCO incentive measures as adopted by the state’s CCO [Metrics & Scoring Committee](#). Quality pool dollars are distributed, in part, based on a CCO’s ability to improve or meet a benchmark for this measure. Oregon’s [CCO incentive measure](#) for developmental screening is based on the National Quality Forum measure #1448: Developmental screening in the first 36 months of life. The percentage of children in Oregon who were screened for the risk of developmental, behavioral and social delays increased from a 2011 baseline of 20.9% to 33.1% in 2013, an increase of 58%. In 2013, all CCOs exceeded their improvement target and four surpassed the state benchmark of 50%. In addition to quarterly reporting of state level data for the Medicaid population, developmental screening rates are reported publicly by CCO, race and ethnicity.

The same developmental screening accountability measure is being used for [Early Learning Hubs](#). During the competitive Hub application process, applicants had to work with their local CCO(s) to determine one- and five-year performance improvement targets for developmental screening, which were subsequently incorporated into state contracts. Limitations to using an accountability measure based on Medicaid claims data for the early learning system have been identified, since the measure may not reflect developmental screenings administered by early learning providers. However, multiple Hubs have acknowledged that the shared measure has provided further incentives for coordination and collaboration with their local CCO(s). Work is underway to develop methods for secure exchange of developmental screening results between a child’s health and early learning care team using health information exchange technology.

Joint Policy Committee. Recognizing the opportunity to impact mutual policy goals, Oregon’s Health Policy Board and Early Learning Council came together in 2011 to form the [Joint Policy Committee](#). With goals to align health and early learning systems and improve outcomes for children, the committee has adopted [recommendations](#) for a statewide, coordinated effort to achieve mutual policy goals, including a focus on developmental screening. In close partnership with the Early Learning Division and with funding from Oregon’s Race to the Top-Early Learning Challenge grant and the Early Childhood Comprehensive Systems grant, a new Child Well-being Team within the Oregon Health Authority will oversee implementation of these recommendations.

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