

## High-Performing Clinics Meet Goal for MHCP Child and Teen Checkups

An ongoing Medica goal is to increase the rate of age-appropriate preventive care provided via Child and Teen Checkups (C&TC) for children enrolled in Minnesota Health Care Programs (MHCP) — i.e., Medica ChoiceCare<sup>SM</sup> and Medica MinnesotaCare.

The Minnesota Child and Teen Checkup program is governed by the Minnesota Department of Human Services (DHS) and is based on the Federal Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program, which was established in 1967 as a preventive component of the Medicaid program. In accordance with DHS, health plans are required to promote and measure the rate at which children in this population are seen for a complete C&TC exam. To qualify as a complete C&TC, the exam must include all of the age-appropriate elements as recommended by DHS.

During 2007, Medica's Clinical and Service Quality Review program examined the performance of 49 clinic groups for their compliance with documentation of a complete C&TC for Medica MHCP members 0-20 years of age. Three of the four clinic groups that stood out prominently this year were also on the list last year, demonstrating an ongoing commitment to excellence with the Child and Teen Checkups program. Following are their scores and methods used to attain a high level of compliance. The percentages cited below refer to positive answers to the measurement question, "Is this a complete child and teen checkup?" By comparison, the aggregate score for all groups in the review was 77 percent.

**Pediatric & Adolescent Services** achieved 97 percent compliance for the second year. Appointments are not scheduled, including C&TC, as this is a walk-in clinic. However, when a child is seen for an illness or well visit, they "seize the day" and complete a C&TC if the child is not too ill. Staff members are well trained on the required elements for each age group and help to ensure that documentation is complete using the well-child forms. They feel that much of their success may be attributed to the fact that they are a small clinic with one doctor who really makes an effort to get to know the patients and families.

**Southside Community Clinic and Green Central Community Clinic** achieved 97 percent compliance for the second year. Education and reeducation of staff has been a primary reason for attaining great results. Their forms and processes are streamlined to remind the staff of C&TC. Internal audits are performed; if deficiencies in documentation are found, specific feedback is provided.

**Partners in Pediatrics** achieved 91 percent compliance. At each visit, a staff member checks to see if a child is due for a C&TC. If a C&TC is due and the child is not too ill, it is completed during that visit. The staff also makes an effort to call all of their known MHCP members and encourage them to come in for a visit. The staff uses a form to check if all elements have been documented. In an effort to increase blood lead testing rates, they complete this test in the clinic. On-site testing provides immediate results and supports efficient action when an elevated blood lead level is found.

New to the list this year is **Children's Hospitals and Clinics of Minnesota**, which achieved 91 percent compliance. C&TC documentation forms have a check box prompt to remind providers of what needs to be completed for each C&TC checkup. Internal and external audits provide feedback to providers to assist in improvement.

Providers interested in learning more about the successful methods of these provider groups may contact Judy Fundingsland, RN, Medica clinical reviewer, at 952-992-2974 or by e-mail at [judy.fundingsland@medica.com](mailto:judy.fundingsland@medica.com).

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