

**Healthy North Dakota Early Childhood Alliance (HNDECA)
Access to Health Insurance & Medical Home Subcommittee
May 27, 2009**

Draft Meeting Summary

Proposed Meeting Goals:

- To identify the top 3 key priorities for the work of the group;
- To compare these priorities to the overall goals developed by the Stakeholder committee;
- To complete the logic model for the priorities;
- To identify any missing goals, data or stakeholders;
- To identify outcome/performance indicators; and
- To complete the needs assessment per NDDoH instruction.

Meeting Participants: Cheryle Masset-Martz, Jodi Hulm, Sue Burns, Tricia Kiefer, Linda Rorman, Kora Dockter and Missi Baranko.

Facilitated by: The Consensus Council, Inc.

Welcome, Introductions and Process Review: Participants were welcomed to the meeting and provided self-introductions. Participants reviewed and affirmed the use of consensus as the rule of decision and reaffirmed the ground rules for discussion as follows:

1. It's our show.
2. Everyone is equal.
3. No relevant topic is excluded.
4. No discussion is ended.
5. Respect opinions.
6. Respect the time.
7. Silence is agreement.
8. Non-attribution.
9. Keep the facilitator accurate.
10. Have fun!

Participants agreed to begin the meeting in the spirit of having our "eyes match our stomachs," a phrase used by Dr. Richard Rathge, HNDECA epidemiologist and evaluator to help the group in focusing efforts and selecting priorities. Dr. Rathge also encouraged the group to think in a one year-two year timeframe when selecting priorities and setting goals. Participants discussed the various roles that have been played or could be played by HNDECA (as defined by Cheryle's role/job in the ND Department of Health). Ideas included:

- Healthcare benefits counseling training as a potential collaboration with the ND Center for Persons with Disabilities (NDCPD) at Minot State University

- Development of a single access point for information (like the Wisconsin ABC4HEALTH)
- Driving HNDECA members and their constituents to the CHAT developed by the ND Insurance Commissioners office to evaluate insurance needs
- Assist with applying for/receiving the Medical Home Grant with the assistance of Medicaid
- Work with Dr. Rathge to assess various screening tools and to determine which are the best
- Make strong, long-lasting connections with the members of the Governors Early Learning Council, once appointed

Prioritizing of Access to Health Insurance and Medical Home Initiatives: Participants brainstormed a list of priority work and then, using a nominal process, ranked the three most important priorities for work in the coming year. The list, in prioritized order, is as follows:

1. To develop an information and referral process, identification and training program that will implement a benefits counseling program and promote application for public services routinely, in light of changing circumstances. (7 dots)
2. To clarify a needs assessment process and screening needs/screening tool needs. (5 dots)
3. To sustain the medical home program. (4 dots)
4. To educate the public and policy-makers about the importance of access to health insurance. (3 dots)
5. To develop a white paper/blueprint on the status of early childhood in ND. (1 dot)
6. To develop a stronger partnership between medical and dental home. (1 dot)
7. To promote participation in the ND Insurance Department CHAT simulation. (0 dots)

Completion of Logic Model Elements for Each Priority: Participants produced the following information relative to the top three priorities for Access to Health Insurance and Medical Home:

Priority #1: To develop an information and referral process, identification and training program: relates to over-arching HNDECA Goals #2 and #3.

Resources Needed:

- Funding for convening
- Interested, engaged parents and families

Activities to Achieve Goals:

- Convening a program for training
- Developing public relations messages
- Development of a benefits planning system

Outputs Produced:

- A partnership with the Children’s Defense Fund to produce an accurate website
- A working benefits planning system

Outcomes Desired:

- **Short term:** Convening of a discussion regarding development of website, tools
- **Long term:** A usable process for people to receive accurate, timely information

Priority #2: To clarify a needs assessment process and to identify screening needs: relates to over-arching HNDECA Goals #1, #3 and #4.

Resources Needed:

- Seek assistance from Dr. Rathge for assessment
- Secure funds for training on screenings
- Collaborate with NDSEDA

Activities to Achieve Goals:

- Develop survey to assess HNDECA members and others regarding what screenings (for all populations of children) are required, optional and commonly utilized
- Also assess where there are gaps in screening services
- Assess the best practices and determine which screenings are evidence based
- Convene a cross-section of HNDECA members to receive the report and begin discussion of implementation of best practices

Outputs Produced:

- Decisions about recommended use of screening tools to assure healthy children
- Exploration of potential traction for universal screening

Outcomes Desired:

- **Short term:** Convening of a cross-section of HNDECA members who are interested/knowledgeable in assessment and screening
- **Long-term:** An inventory of evidence-based recommended tools that promote intervention and prevention. Greater involvement by the members of the American Academy of Pediatrics in this initiative.

Priority #3: To sustain the Medical Home program: relates to over-arching HNDECA Goals #2 and #3.

Resources Needed:

- Buy-in and participation by Medicaid and Blue Cross/Blue Shield of ND
- Maintenance of the Integrated Services Grant through May 2011
- Education for medical homes and teams
- Federal policy that supports medical home in healthcare reform options

Activities to Achieve Goals:

- HNDECA supports the Integrated Services Grant program as the lead group in medical home
- Integration of health into other transition activities
- Explore development of legislation to support medical home in the future

Outputs Produced:

- A disease management system that includes quality improvement systems and involves parent/family participation.

Outcomes Desired:

- **Short term:** A decrease in hospitalizations, overall health care costs and reduction in provision of unnecessary services

- **Long term:** All North Dakotans have a medical home

Cheryle asked that each participant provide her with information regarding the availability of any study results or needs assessment models or results that could help to inform the future work of the Maternal and Child Health Division. The meeting was adjourned by consensus of the group.

Other Upcoming HNDECA Subcommittee Meetings:

- Family Support: May 28: 9-noon: Sakakawea Room @ Capitol
- Mental Health: May 28: 1-4, Sakakawea Room @ Capitol