

## **COMMENTS: 12 YEARS OF ABCD**

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In NC, the Assuring Better Child Health and Development (ABCD) project began 2000. NC was in the first group of states funded by the Commonwealth Fund to promote developmental services in primary care for the period of early childhood. The CCNC (Community Care of NC) infrastructure facilitated piloting and spread so that statewide implementation was well on its way in just a few years. Now NC leads the nation in rates of developmental and behavioral screening for children 0-5 years of age (National Survey of Children's Health, 2007). As a result of ABCD, children with developmental needs are identified earlier. Referrals to the Early Intervention Program are on average made at an earlier age, and have more than quintupled since 2004. The rate of screening at the designated EPSDT visits is 81.4%. Since 2010, routine screening for autism at the 18 month and 24 month well-visits has been incorporated into the ABCD Project. In addition, practices in eight of the 14 CCNC networks have begun to screen routinely for postpartum depression.

But early screening isn't only about finding problems. An equally important benefit is that discussion of screening between the parent and PCC (Primary Care Clinician) supports parents in parenting skills, promotes strengths, and enhances parents' understanding of healthy development. With better understanding of development, parents report better ability to manage their child's behavior and to have appropriate expectations.

A unique feature of the ABCD project in NC is that it has always included both pediatric and family medicine practices. This was possible because of the participation of both pediatricians and family physicians in CCNC, and also due to the involvement of the NC AFP and NC Pediatric Society in the ABCD State Advisory group from its inception. PCC's have not only integrated screening, but they have also learned to build systems in their practices and networks for communication, referral, and linkages to community resources.

CCNC has facilitated widespread implementation of screening for developmental and behavioral issues through several quality initiatives. These include the ABCD program, two initiatives for mental health integration in primary care, the establishment of behavioral teams in every network, and Medical Home learning collaboratives funded through the NC CHIPRA Child Health Quality grant.

As a result of the ABCD data and uptake by PCC's, Medicaid has made EPSDT policy changes:

- 2004- requirement for use of a formal, validated screening tool at the 6, 12, 18 or 24, 36, 48, and 60 month well-visits.
- 2010- requirement for autism screening at the 18 and 24 month visits
- 2012- recommendation for routine screening for risks and strengths at annual school-age and adolescent well-visits

In addition Medicaid opened the 99420 code to reimburse PCC's for social-emotional screening across the 0-20 year old age span in 2009, as part of CCNC's mental health integration initiatives.

It has been a privilege to lead the ABCD Project for these 12 years and into the future. The most rewarding aspect of the work has been to help enhance relationships between PCC's and the families they serve. To assure the sustainability of ABCD by establishing it within CCNC ongoing Quality Improvement has been the greatest accomplishment. Quarterly measurement of developmental and behavioral screening (in place for several years) and autism screening has become part of the indicator set for CCNC's QMAF (Quality Measurement and Feedback) as of 2012. These measures are shared with practices and networks quarterly to promote improvement at the practice and community level. These, and several other measures, make up the EPSDT profile now shared with practices quarterly.