The ABCD II Program, sponsored by The Commonwealth Fund, is designed to strengthen primary health care services and systems that support the healthy mental development of young children, ages 0-3. The program focuses particularly on preventive care of children whose health care is covered by state health care programs, especially Medicaid. Research has shown that services that support young children’s healthy mental development can reduce the prevalence of developmental and behavioral disorders which have high costs and long-term consequences for health, education, child welfare, and juvenile justice systems.

The National Academy for State Health Policy administers the ABCD II Program, helping states create models of service delivery and financing that promote healthy mental development for Medicaid eligible children. Five states -- California, Illinois, Iowa, Minnesota, and Utah -- were awarded grants for this program in 2004. Although the projects are led by the states’ Medicaid agencies, they all entail working in partnership with other key stakeholders to achieve their objectives. Together, these states form the ABCD II Consortium, a laboratory for program development and innovation that shares its findings with all 50 states.

This news brief is one in a series designed to address issues of interest and concern to states seeking to improve services and systems that support young children’s healthy mental development. Additional information about the ABCD II initiative is available at www.nashp.org.

Using Title V to Improve the Health of Mothers and Children

The Maternal and Child Health block grant, authorized under Title V of the 1935 Social Security Act, is a federal/state partnership to promote maternal and child health. Title V integrates health care with other child and family services such as those provided in child care and school settings. Title V grants are used to meet locally determined needs that are consistent with national health objectives. Most state Title V programs, including those in the states that are participating in the ABCD II Consortium, currently have additional federal funds earmarked to support the development of collaborative early childhood systems. The ultimate goal of these efforts is to support families and children who are healthy and ready to learn at school entry. Promoting young children’s mental health and socio-emotional development is one of the central missions of these collaborative early childhood systems.
Collaboration between Title V and Medicaid Programs

State Title V and Medicaid agencies, which serve similar populations and have overlapping goals, have found they can expand their reach and effectiveness by partnering. Some examples of collaboration related to ABCD II goals are provided from the Consortium states:

Medicaid provider communication
- Title V agencies collaborate with Medicaid to develop contract language and conduct monitoring of Medicaid managed care contractors for child health and prenatal care. (IA, UT)
- Title V provides technical assistance on development of Medicaid provider manuals. (IA, UT)
- Title V and Medicaid staff collaborate to develop and select screening tools for use in EPSDT screenings. Title V provides training for providers on the screenings. (MN)

Data matching and sharing
- Medicaid administrative data (claims/encounter data and eligibility) are matched with vital records to examine birth outcomes. (IA, IL, MN, UT)
- Medicaid administrative data and childhood immunization data from public health registries are combined to calculate immunization status and provide child-specific immunization information. (IA, IL, MN, UT)

Family case management
- Title V administers a program to perform outreach and case management/care coordination services to Medicaid infants, pregnant women, and other populations that vary by state. The Medicaid agency conducts the administrative claiming process to qualify for federal Medicaid match. (IA, IL)
- Title V administers a program developed as part of ABCD I to provide case management services to Medicaid infants enrolled in the Medicaid program. (UT)

Screening
- Collaborative programs train providers on screening, establish referrals to the Part C/Early Intervention Program, and implement a mental health consultation line for primary care providers. (IL, MN in part, UT)
- Title V contractors provide screening, referrals, evaluation services, service coordination, and other IFSP services for the Part C/Early Intervention system. (IA)

Medicaid eligibility
- Title V-funded providers conduct Medicaid presumptive eligibility for pregnant women. (IL, UT)

Reproductive health
- A pregnancy hotline is partially supported by Medicaid funding on a pro-rata basis. (UT)
- Collaboration through a family planning waiver provides family planning and other women’s health care benefits to women whose Medicaid coverage is ending. (IA, IL, MN)

Building Partnerships

In addition to Title V and Medicaid agencies, the ABCD II states have worked with other partners, including universities, advocacy groups, provider organizations, and local health departments. ABCD II states recommend building positive relationships with potential partners by focusing on shared visions, identifying opportunities for “win-win” partnerships, and recognizing the strengths, limitations, and interests of each partner. In at least one ABCD state, Title V and Medicaid agencies have used their interagency agreement to describe the respective roles, responsibilities and financial obligations of each agency; delineate the outreach and case management services of the MCH population; facilitate the claim for federal matching funds, and describe data sharing and outcome evaluation activities. Similar agreements can be reached with other public and private partners.

For more information on the collaborations described, please visit the NASHP website for a list of state project directors: www.nashp.org, choose “Assuring Better Child Health and Development (ABCD)” and then “ABCD II Initiative”.