

A Celebration of Children's Health

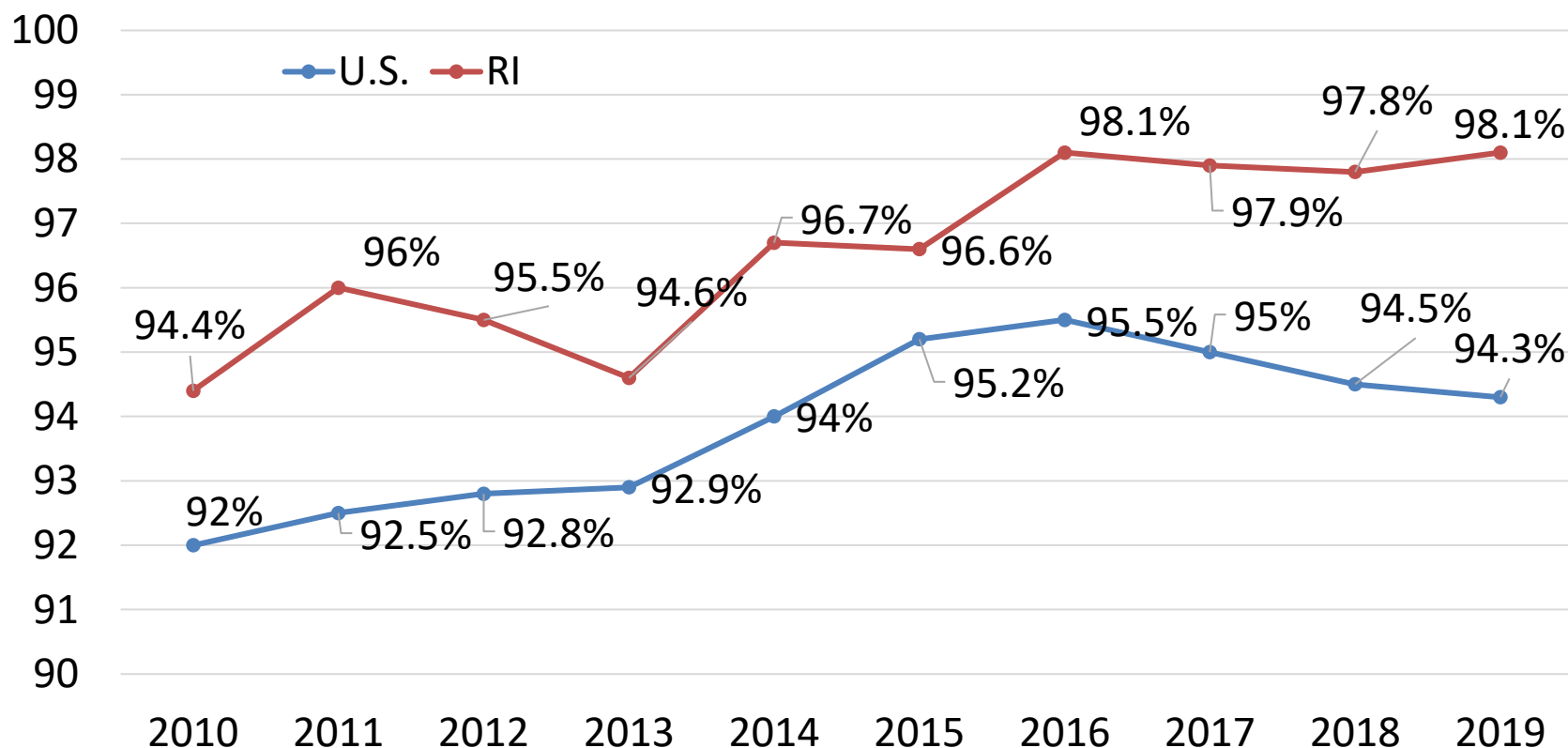


November 16, 2020
#RIteCareWorks

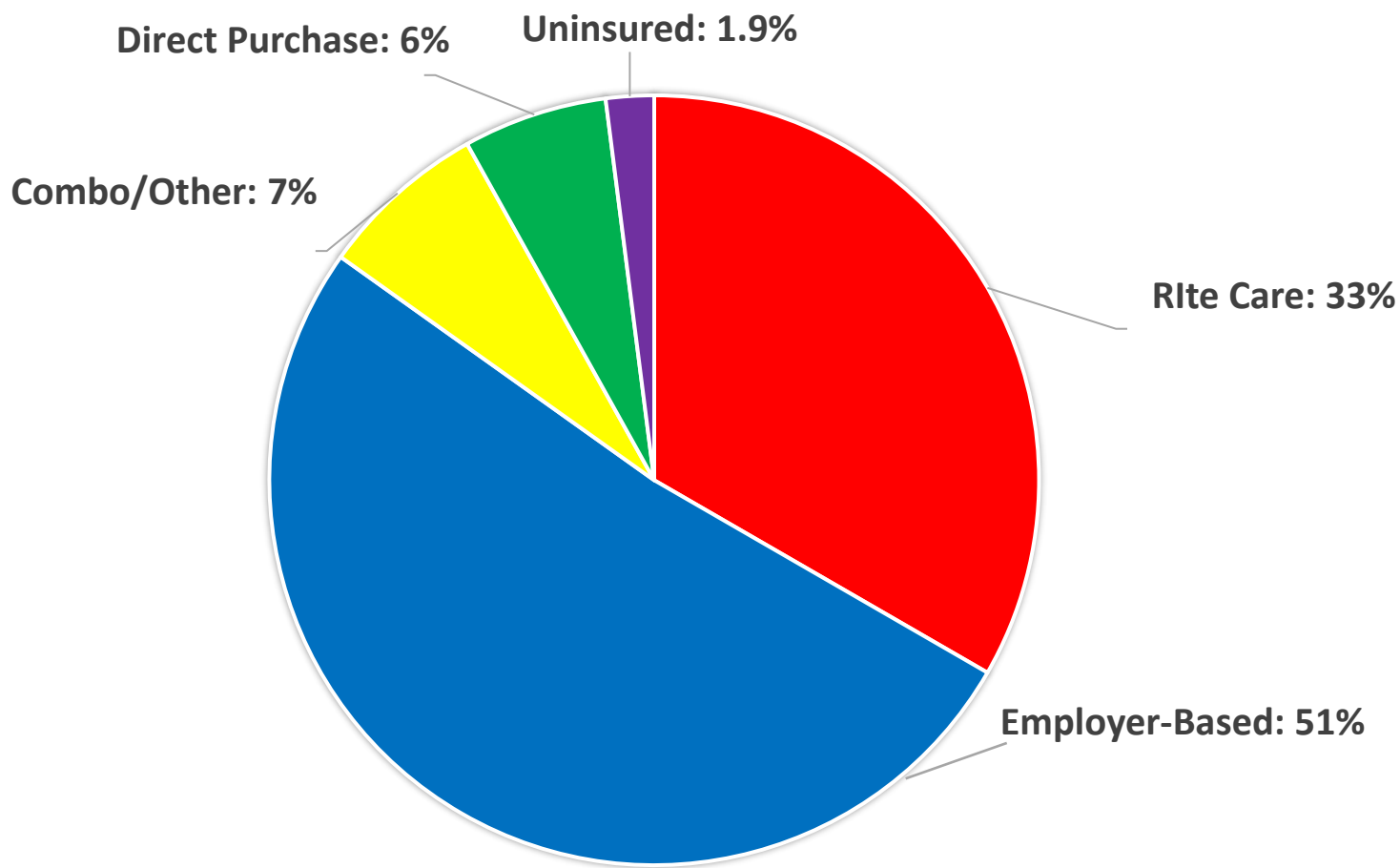
Impact of COVID-19

- In Rhode Island, the COVID-19 pandemic is disproportionately impacting our Latino and Black communities.
- Since the onset of the COVID-19 pandemic, many Rhode Islanders have experienced a loss of employment.
- Loss of employment in low-income households is expected to impact economic mobility and have devastating long-lasting effects on children's economic well-being and health.
 - Children and families at risk for losing employer-based insurance coverage.
- Black and Hispanic households are projected to face the greatest increase in poverty, and racial and ethnic disparities may be exacerbated for children and families of color.

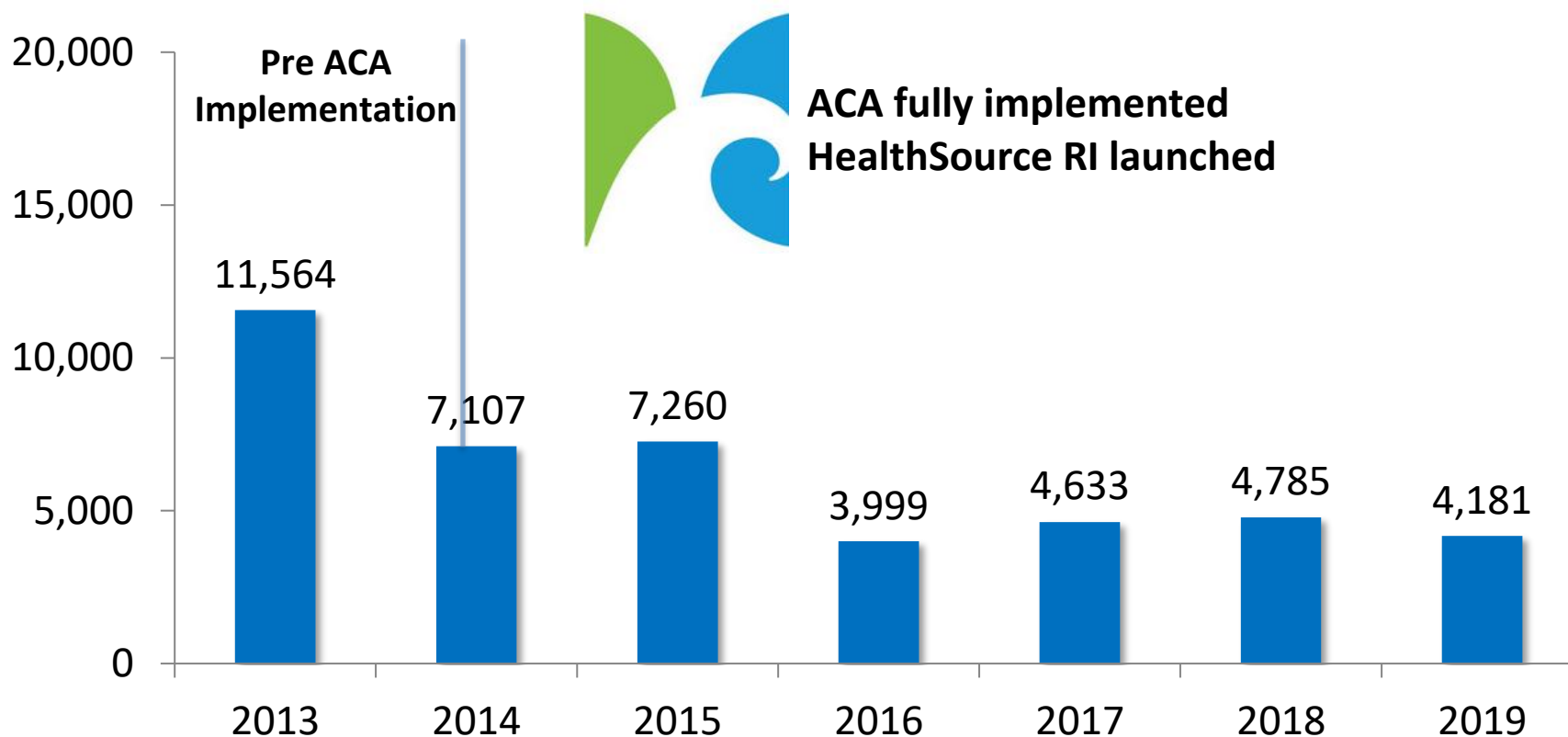
Children with Health Insurance



How are RI Children Covered?



Decline in Uninsured Rates Among RI Children



Rhode Island's Achievements in Children's Health



- Adolescent HPV Vaccination (1st)
- Children's Health Insurance Coverage (2nd)
- Child & Teen Deaths (1st)
- Teen Births (6th)

Rite Care Works



- National model of comprehensive health care for over 25 years
- Well-documented positive and sustained outcomes
- Cost-effective investment in RI children and families

Rlte Care's National Excellence

Rlte Care Remains a
Top-Quality Performer:

**Primary Care Access and
Preventive Care**

**Maternal and Perinatal
Health**



Source: *2018 Child Health Care Quality Measures*. (2019). Rockville, MD:
U.S. Department of Health and Human Services. Retrieved November 10,
2020, from data.Medicaid.gov

Rlte Care: High-Quality Care

Rlte Care Health Plans Receive Top Ratings Among Medicaid Health Plans in the U.S. in 2019

(2 of 15 in the U.S. rated 4.5 or higher)

4.5/5.0



Source: 2020 National Committee on Quality Assurance Rankings.

298 Medicaid Health Plans were evaluated and 178 were rated based on clinical performance, member satisfaction, and NCQA Accreditation.

Rlte Care Works for Pregnant Women

- **91.5%** of pregnant women enrolled in Rlte Care received timely prenatal care.
- **Rates of delayed prenatal care are lower** among women with Rlte Care coverage than those who are uninsured.



Source: 2018 Child Health Care Quality Measures. (2019). U.S. Department of Health and Human Services. Retrieved November 18, 2019, from data.Medicaid.gov

Rtite Care Works for Children

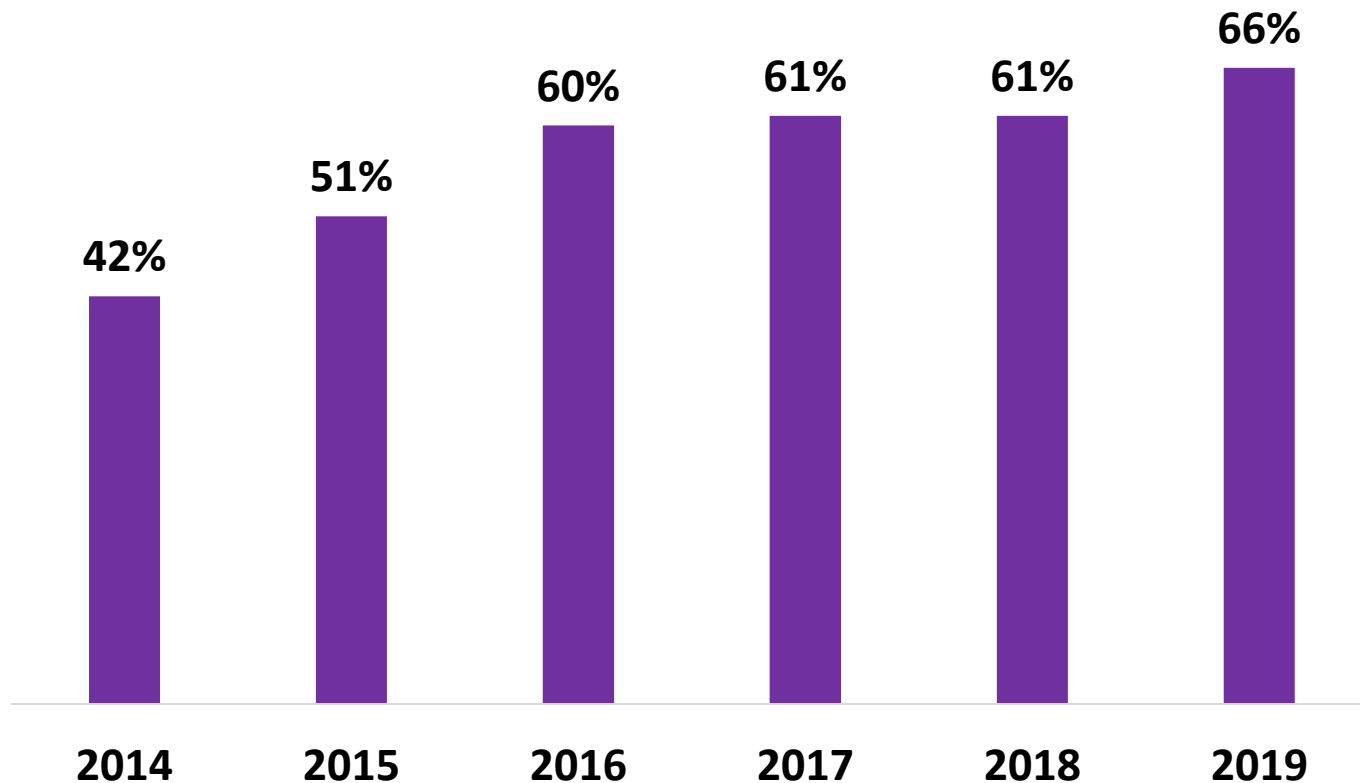
2019 Primary Care Visits

- **96%** of infants and toddlers
- **88%** of preschool and early elementary school-age
- **93%** preteens
- **92%** Teens



Improvement in Developmental Screening

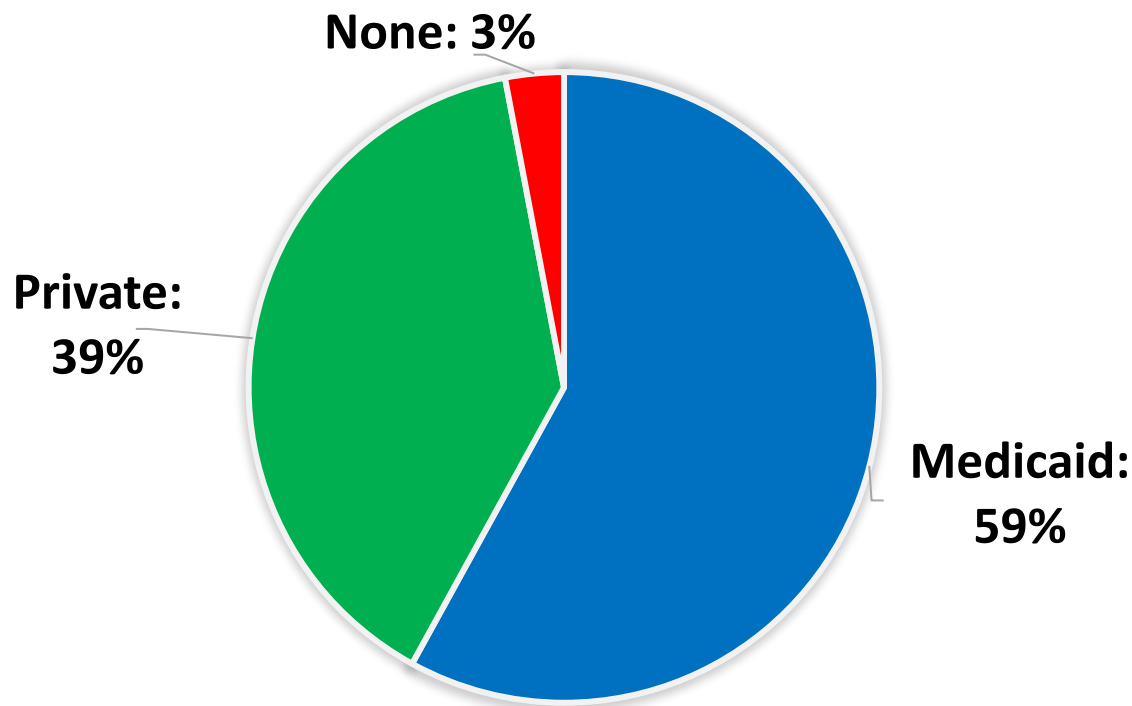
% Children Up to Age 3 Covered by RIte Care Who Received at Least One Developmental Screening with Standardized Tool



Source: 2018 Child Health Care Quality Measures. (2019). U.S. Department of Health and Human Services. Retrieved November 18, 2019, from data.Medicaid.gov

Early Intervention (Part C)

HEALTH INSURANCE FOR EARLY INTERVENTION PARTICIPANTS, RHODE ISLAND, 2018



Source: Rhode Island KIDS COUNT analysis of EOHHS Children Enrolled in Early Intervention. June 2018

Neonatal Abstinence Syndrome

- Neonatal Abstinence Syndrome (NAS) refers to the objective and subjective signs and symptoms attributed to the cessation of prenatal exposure of substances.
- In Rhode Island in 2018, 108 newborns were diagnosed with NAS, a rate of 106 per 10,000 births; almost as high as the highest rate in 2015 at 114 per 10,000 births and more than double the rate of 37.2 in 2006.
- Seventy-seven percent of babies born with NAS in 2018 were born to White mothers, 92% were born to mothers who were covered by Medicaid.

Rlte Smiles

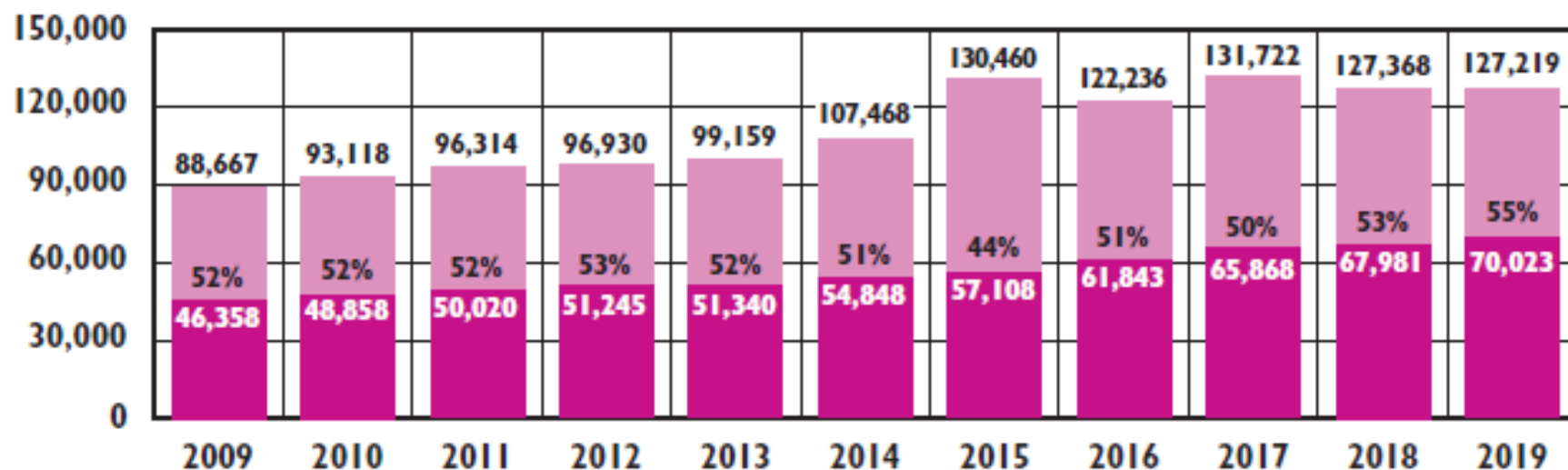
- The number of dentists accepting qualifying children on Medicaid increased from **27** before Rlte Smiles began **to 90** at the launch of Rlte Smiles.
- **By FY 2019, there were 312 unduplicated dentists** in 176 practice locations participating in Rlte Smiles.

Rlte Smiles



Children Under 21 Enrolled in Medical Assistance* Programs Who Received Any Dental Service, Rhode Island, SFY 2009-2019

■ # Received Dental Service ■ # Enrolled in Medical Assistance

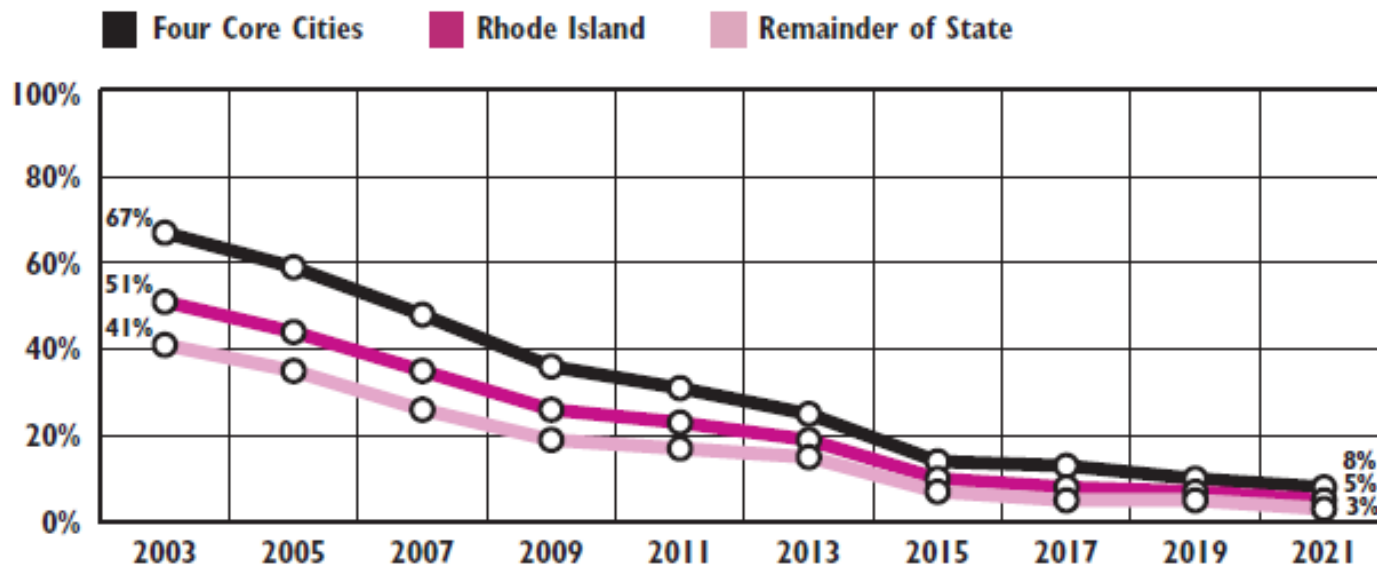


Source: Rhode Island Executive Office of Health and Human Services, State Fiscal Years (SFY) 2009-2019. *Medical Assistance includes Rlte Care, Rlte Share, and Medicaid fee-for-service.

Children with Lead Poisoning



**Children Entering Kindergarten with History of
Elevated* Blood Lead Level Screening (≥ 5 $\mu\text{g/dL}$),
Rhode Island, Four Core Cities, and Remainder of State, 2003-2021**

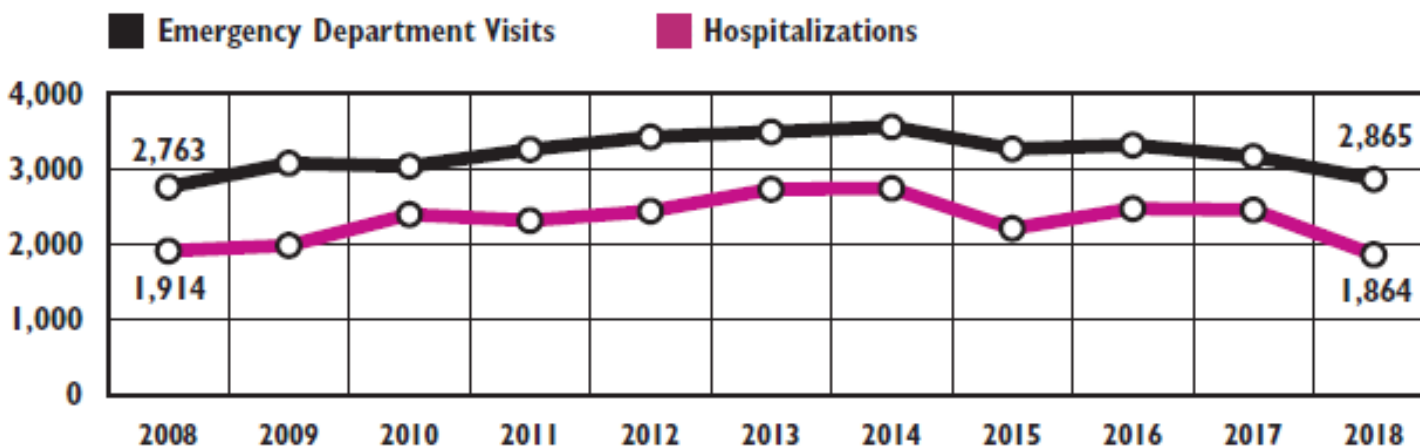


Source: Rhode Island Department of Health, Healthy Homes and Childhood Lead Poisoning Prevention Program, Children entering kindergarten between 2003 and 2021. *Elevated blood lead level of ≥ 5 $\mu\text{g/dL}$.

Children's Mental Health



Emergency Care for Primary Diagnosis of Mental Disorder, Children Under Age 18, Rhode Island, 2008-2018*



Source: Rhode Island Department of Health, Hospital Discharge Database, 2008-2018. *Data are for emergency department visits and hospitalizations, not children. Children may visit emergency department or be hospitalized more than once. Trend line is comparable to Factbooks since 2012. *Note: Effective October 1, 2015, the International Classification of Disease (ICD) codes changed from the 9th classification to the 10th classification, which may impact comparability across the years. As of 2018, data only includes Rhode Island resident children.*

Kids Link RI



Gun Violence as a Public Health Issue

- In Rhode Island between 2014 and 2018, there were 153 emergency department visits and 36 hospitalizations among children and youth attributed to firearms.
- 8 deaths of children and youth ages 15 to 19

Racial and Ethnic Disparities



Health Outcomes, by Race and Ethnicity, Rhode Island

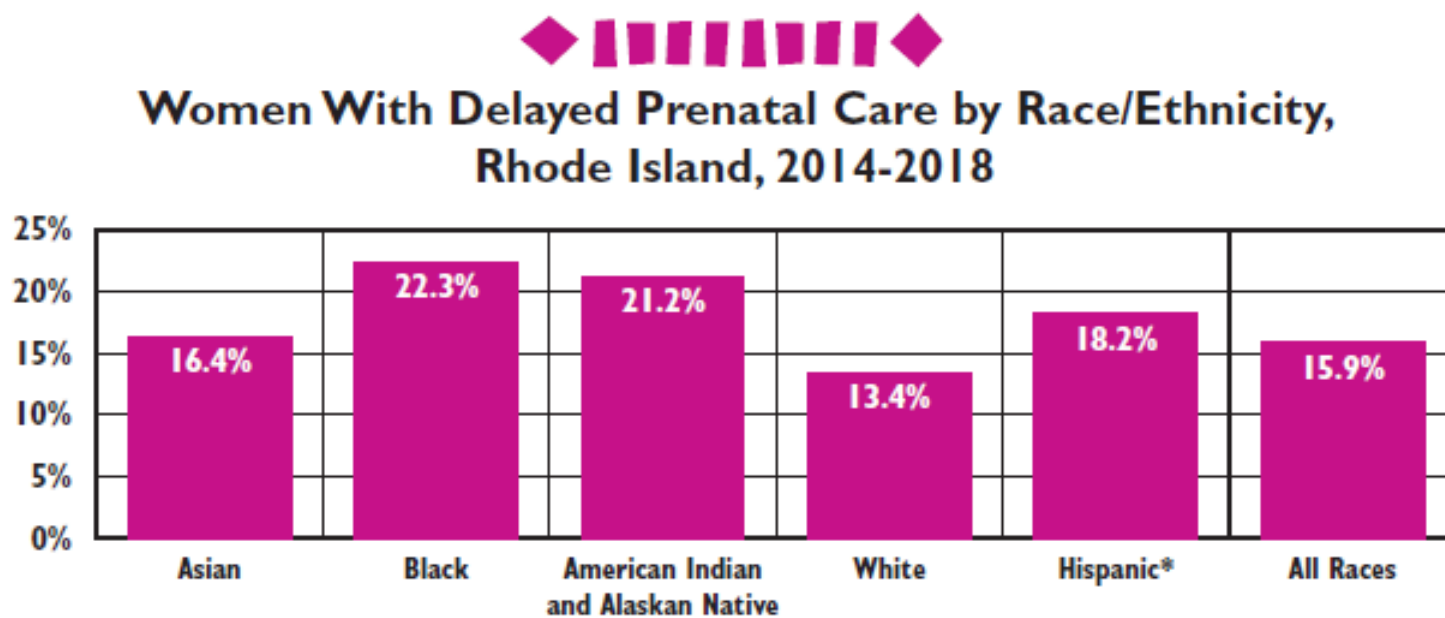
	WHITE	HISPANIC	BLACK	ASIAN	NATIVE AMERICAN	ALL RACES
Children Without Health Insurance	2.4%	2.3%	1.4%	4.9%	NA	2.2%
Women With Delayed or No Prenatal Care	13.4%	18.2%	22.3%	16.4%	21.2%	15.9%
Preterm Births	8.1%	9.3%	11.2%	7.5%	13.2%	8.7%
Low Birthweight Infants	6.6%	8.0%	11.1%	7.5%	12.5	7.5%
Infant Mortality (per 1,000 live births)	3.3	5.5	10.6	5.2^	*	5.2
Births to Teens Ages 15-19 (per 1,000 teens)	7.5	31.7	16.6	3.3	26.7	14.0

Sources: All data are from the Rhode Island Department of Health, Center for Health Data and Analysis, Maternal and Child Health Database, 2014-2018 unless otherwise specified. Race and ethnicity is self-reported. Race data is non-Hispanic, except for *Infant Mortality* where Hispanic can be of any race. *Children Without Health Insurance* data are from the U.S. Census Bureau, American Community Survey, 2018, Tables B27001, B27001A, B27001B, B27001D & B27001I. For U.S. Census Bureau data, Hispanic also may be included in any of the race categories. For *Births to Teens* the denominator is the female population ages 15 to 19 by race and ethnicity from CDC Wonder. Note that the All Races total for *Births to Teens* does not match the Rhode Island total presented by city and town in the *Births to Teens* indicator, which uses American Community Survey data by city and town as the denominator.

*The data are statistically unreliable and rates are not reported and should not be calculated.

^The data are statistically unstable and rates or percentages should be interpreted with caution..

Women with Delayed Prenatal Care



Source: Rhode Island Department of Health, Center for Health Data and Analysis, Maternal and Child Health Database, 2014-2018. * Race categories are non-Hispanic..

Infant Mortality



**Infant Mortality Rate per 1,000 Live Births by Race/Ethnicity,
Rhode Island, 2014-2018**



Source: Rhode Island Department of Health, Center for Health Data and Analysis, Maternal and Child Health Database, 2014-2018. [^]The data are statistically unstable and should be interpreted with caution. *Hispanic infants can be of any race.

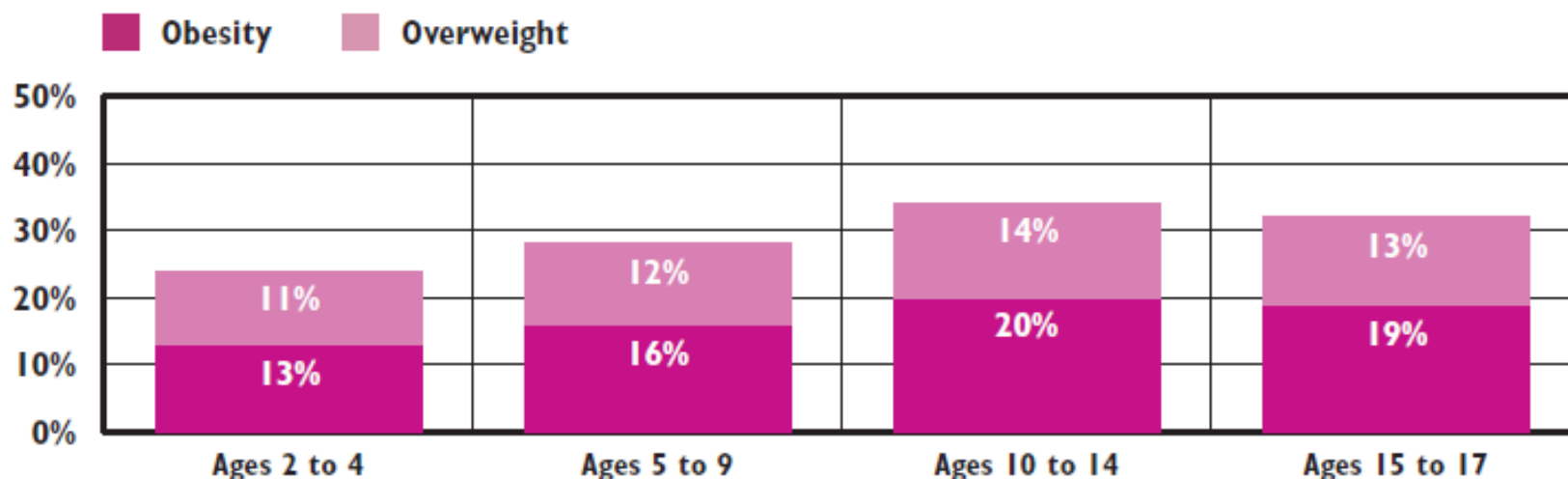
Racial and Ethnic Disparities in Maternal Mortality and Morbidity

- Nationally, Black women are three to four times more likely than White women to die of pregnancy-related complications.
- In 2014-2018, the Rhode Island severe maternal morbidity rate was 223 per 10,000 delivery hospitalizations.
- Black (345 per 10,000), Hispanic (254 per 10,000), and Asian (262 per 10,000) women all had higher rates of maternal morbidity than White women (189 per 10,000).

Overweight & Obesity



Rhode Island Childhood Overweight and Obesity by Age, 2018



Source: Hassenfeld Child Health Innovation Institute analysis of BMI clinical and billing records of children ages two to 17 in Rhode Island from KIDSNET, Current Care, Blue Cross & Blue Shield of Rhode Island, Neighborhood Health Plan of Rhode Island, and United Healthcare collected by the Department of Health, 2018.

Youth Tobacco Use

**BOTH MIDDLE AND HIGH SCHOOL STUDENTS REPORT USING E-CIGARETTES
AT MUCH HIGHER RATES THAN TRADITIONAL CIGARETTES**

YOUTH CIGARETTE AND ELECTRONIC VAPOR PRODUCT USE*,
MIDDLE AND HIGH SCHOOL STUDENTS, RHODE ISLAND, 2009-2019



Source: Rhode Island Department of Health, Youth Risk Behavior Survey, 2009-2019.

Notes: *Use is defined as currently smoking cigarettes or an electronic vapor product at least one day during the 30 days before the survey. **Electronic Vapor Use was not asked on the YRBS survey before 2015.

Moving Forward

- Outreach to and enroll the remaining small number of children who are eligible for Rlte Care but not yet enrolled. Cover **all kids** regardless of immigration status
- **Extend postpartum coverage for women on Rlte Care from 60 days to 12 months and improve Rhode Island's Paid Family Leave Program**
- Address the impact of COVID-19:
 - Expand public assistance programs to meet the needs of families and children with a focus on **equity**
- Close **racial/ethnic disparities** across health indicators with a focus on Black **maternal and infant morbidity/mortality**
 - **Expand access to community-based doula services through Medicaid and commercial insurance**

- Provide **comprehensive mental health services** in schools and community-based settings and continue tele-health services
- **Continued focus on patient-centered care for children and families- PCMH-Kids**
- Opportunities of the **First 1,000 Days of Rlte Care and the Right From the Start Campaign**