

Fact Sheet: What Does Health Systems Transformation Mean for Children?



Health Care For All New York: Building Quality, Affordable Health Care for ALL New Yorkers

New York has consistently been a leader in the United States in ensuring access to health insurance coverage for children. Thanks to the Children's Health Insurance Program (CHIP), the Affordable Care Act, and significant investments in Medicaid, New York has created a robust network of health insurance options for children. All children, regardless of immigration status, are eligible for free or low-cost health insurance in New York State. Accordingly, close to 97% of all New York children have insurance.

These efforts must continue in 2016. At the same time, much of the focus of the health reform policy is shifting to initiatives to control costs and promote coordinated delivery of quality health care. These efforts are often referred to collectively as health systems "transformation" or "innovation" and consists of three main strategies: payment reform, integration and coordination, and transparency about quality and prices. Health systems transformation can provide opportunities to improve the quality and coordination of health care for children. However, these changes could also disrupt systems of care that currently exist for children or leave children's issues on the sidelines by focusing narrowly on the most expensive health care consumers.

Opportunities

- Development of policies and payment structures that recognize the important role that families and caregivers play in a child's health, including transparency about quality and costs.
- Increased attention and funding support for addressing social determinants of health. Children across the state experience negative health outcomes, often due to poor quality housing, crime, and poor access to healthy food.
- Increased funding support for integrated primary care. Children in New York State are hospitalized for primary-care sensitive conditions at high rates.
- Transformation of the health care workforce to include sufficient child-focused providers and to be more culturally and linguistically reflective of New York's children.
- Increased understanding of the importance of social-emotional development in the early years to an individual's lifelong health and success.

Challenges

- Preventive services for children, such as vaccinations, nutritional counseling, and developmental and social-emotional supports, may not pay off for many years and the benefits may accrue outside of the health care context (for example, improvements in educational outcomes, child welfare, and better employment prospects). Value-based contracts may not provide sufficient incentives for providing those services without careful attention.
- Children are not included in many of the current health transformation projects and demonstrations. Pediatric providers may not be recruited to participate in health transformation.
- Lack of transparency to patients about the new financial incentives that may be influencing their health providers' recommendations against more expensive medications and procedures.
- Potential privacy concerns for adolescents who seek care for sensitive health issues without the knowledge of a parent or guardian.

We welcome your participation in our work!

For more information, contact: Amanda Dunker, adunker@cssny.org



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