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Testimony Before the District of Columbia Council
Committee on Health and Human Services
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Good morning Councilmember Alexander and members of the Committee. My name is Sharra E. Greer. I am the Policy Director of Children's Law Center¹ and a resident of the District. I am testifying today on behalf of Children's Law Center, which fights so every DC child can grow up with a loving family, good health and a quality education. With 100 staff and hundreds of pro bono lawyers, Children's Law Center reaches 1 out of every 8 children in DC's poorest neighborhoods – more than 5,000 children and families each year. Almost every one of our clients is a Medicaid beneficiary.

I am testifying today in support of the Mayor's proposed FY16 budget for the Department of Health Care Finance (DHCF). Approximately 75 percent of the children in the District, 93,000 children and youth under 21 years of age, are enrolled in the District's Medicaid program.² A properly functioning Medicaid system is vital not only for ensuring the physical and mental health of DC's children, but it is also the backbone of our early intervention and child welfare systems -- providing the services that ensure children reach developmental milestones, aid their academic achievement and reduce their stay in foster care.

The Department's budget has been increased by 1.7% for FY16, demonstrating the District's continued commitment to public insurance for our neediest residents. There is a \$61,000 (1 FTE) decrease proposed for Preventative and Acute Care

(Children's Health Services), but we are confident this will not result in a significant impact on services for children.³

One of the areas where we have seen significant progress this year, as highlighted in our third annual Report Card on Children's Mental Health in the District of Columbia released Tuesday,⁴ is an increase in children receiving mental health services in FY14 over FY13, about 3,000 more.⁵ This increase is largely due to DHCF's focus on the managed care organizations (MCOs) program delivery of children's mental health services. MCOs play a central role in the provision of children's mental health services because ninety percent of children on DC Medicaid receive their health care through managed care organizations.⁶

DHCF has also continued to make progress on the integration of children's health. One of the best ways to detect developmental and behavioral health issues early and ensure children receive proper care is to ensure pediatricians are trained and reimbursed to properly screen children for these issues. Pediatricians across the District are now required to screen children for mental health needs using standardized screening tools. Since two-thirds of children in DC regularly visit their pediatricians, this is an excellent way to identify mental health issues early.⁷ The DHCF FY15 budget included local dollars to help fund this initiative. This funding does not appear in the FY16, for good and positive reasons. Over the course of the year DHCF implemented new rates and billing requirements for FY15, which ensures that pediatricians will get

paid for performing and scoring these mental health screenings through Medicaid.⁸

The MCOs began implementing this new requirement in January 2015. The new billing protocols also allow DHCF to confirm that the mental health screenings are regularly performed thus allowing the agency to track compliance with the law. The new billing protocols additionally eliminate the need for dedicated local funding.

Thank you for the opportunity to testify. I welcome any questions.

¹ Children's Law Center fights so every child in DC can grow up with a loving family, good health and a quality education. Judges, pediatricians and families turn to us to be the voice for children who are abused or neglected, who aren't learning in school, or who have health problems that can't be solved by medicine alone. With 100 staff and hundreds of pro bono lawyers, we reach 1 out of every 8 children in DC's poorest neighborhoods – more than 5,000 children and families each year. And, we multiply this impact by advocating for city-wide solutions that benefit all children.

² US Census Current Population Survey, census.gov; Department of Health Care Finance, District of Columbia's Managed Care End-of-Year Performance Report (July 2013-June 2014), 3 (Feb. 2015).
<http://dhcf.dc.gov/page/dhcf-policies-and-publications>

³ DHCF FY16 Proposed Budget and Financial Plan, Table HT0-3 (E-176).

⁴ Available at <http://www.childrenslawcenter.org/sites/default/files/2015-Childrens-Mental-Health-Report-Card.pdf>

⁵ Last year, DHCF reported to Children's Law Center that only 6,575 low-income children on Medicaid were treated for mental health issues in FY13. This year, that number has been revised upward by DHCF because of two factors: updated billing information, and a new methodology that includes additional treatment codes in their analysis of mental health services. Those data tables are on file with Children's Law Center.

⁶ Approximately 90% of children on Medicaid were automatically enrolled in an MCO as of FY14. Email from DHCF on file with CLC. The MCOs under the District's Medicaid Managed Care Program are: AmeriHealth DC, MedStarFamily Choice, Trusted Health Plan and Health Services for Children with Special Needs (which serves disabled children up to age 26).

⁷ In FY13, 63% of children enrolled in Medicaid received their appropriate well child visits. Centers for Medicare & Medicaid Services, *Annual EPSDT Participation Report, Form CMS-416 (2013)*, available at <https://dhcfp.nv.gov/pdf%20forms/EPSDT/CMS%20416%20FFY%202011%20FINAL%20120727%20CORRECTED.pdf>.

⁸ DHCF FY14 Oversight Responses, Question 50, Attachment 1.