

## Health Transformation Innovation Fund

The Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA) established performance bonuses for states to support the enrollment and retention of eligible children in Medicaid. To get the bonus, (1) a state's child enrollment in Medicaid must exceed a baseline target and (2) the state must have implemented at least five of eight policies that are known to boost enrollment among children.

By April 2010, Ohio had implemented the following five policies that met the test to qualify for the CHIPRA bonus: use of the same application and renewal forms, elimination of in-person interview requirements, elimination of asset tests in certain cases, 12-month continuous eligibility and presumptive eligibility. As a result, 92,503 Ohio children were enrolled above the 2010 baseline target and 119,212 Ohio children were enrolled above the 2011 baseline target.

Ohio received a total \$33.9 million in CHIPRA bonus payments in 2010 and 2011. HB 153 appropriated \$29.3 million of the CHIPRA bonus for "Ohio Health Care Grants" (JFS Fund 3FAO). The Governor's Office of Health Transformation (OHT) further specified through Controlling Board that "money from the CHIPRA payment will be held in reserve to help implement modernization strategies. Examples could include: streamlining the Medicaid eligibility process, increasing the state's analytical capacity and other strategies that are identified through budget deliberations." (approved 2/28/2011)

OHT established a process to allocate Health Transformation Innovation Funds through the OHT Cabinet. The OHT Cabinet reviews every funding request that is sponsored and presented by a department director and makes funding decisions based on the extent to which each request advances the Governor's health system modernization strategies.

### **Projects Receiving Health Transformation Innovation Funds:**

- **Expanding and Improving Presumptive Eligibility for Pregnant Women and Children:** (\$2,750,000)  
Ohio Medicaid announced in June 2012 that it would expand presumptive eligibility for Medicaid to pregnant women and allow certain qualified providers—federally qualified health centers (and look-alikes), children's hospitals and other providers—to perform a simplified check and grant immediate medical assistance to both children and pregnant women. Ohio has begun testing the enhanced presumptive eligibility program at Nationwide Children's Hospital in Columbus, MetroHealth System in Cleveland and the Community Action Committee of Pike County, with implementation statewide by January 2013. ([press release](#) and [one page summary](#))
- **The First Five Years: A Whole Child Approach to Autism Spectrum Disorders:** (\$975,000) Funding will build upon existing programs that target early identification and intervention for Ohio's youngest children with autism spectrum disorders (ASD) and advance ASD research. The Autism Diagnostic Education Pilot Project will be expanded to provide training to pediatricians to help them accurately identify the early signs of autism. Early interventionist training will also be expanded to include best practice interventions that nurture the parent/child relationship. Funding will also support a research study that will explore the impact of nutrition and wellness in alleviating the characteristics and symptoms of ASD. ([one page summary](#))

- **Realizing Employment First:** (\$350,000) The Ohio Center for Autism and Low Incidence (OCALI), the Ohio Interagency Work Group on Autism (IWGA) and the Ohio Department of Developmental Disabilities will collaborate on a two-year project that will provide high-quality training and professional development for practitioners, individuals and families to improve employment outcomes for young adults with ASD and other developmental disabilities who are exiting high school, with an emphasis on community integrated employment. This initiative will create new training opportunities while enhancing and aligning with current efforts. ([one page summary](#))
- **Region V County Collaborative:** (\$500,000) The 18 counties in Ohio's Developmental Disabilities Region V have formed a planning collaborative to standardize processes and reduce duplicative administrative services. The scope of this project is to create an end-to-end system that will support the collaborative's "person-centered" approach to intake/eligibility, assessment, planning and monitoring outcomes, and in addition, promote potential expansion outside the county collaborative.
- **Individual Options Waiver Pilot Proposal:** (\$800,000) A one-year pilot project will test a method whereby the Homemaker Personal Care (HPC) billing unit is increased from a quarter hour unit to a weekly unit, giving the provider increased responsibility for service utilization and freedom from complex billing requirements. The objectives of this pilot are to: (1) determine how much money could be saved using the new method, (2) give the state and county boards an assurance of cost control and (3) allow the SSA and program manager to focus on creating a better life with the consumer rather than trying to manage quarter hour units and ratios.
- **Ohio Learn to Earn:** (\$500,000) This project will pay for any workers' compensation claims incurred for participants in a program that will allow workers collecting unemployment compensation to train with a potential employer for a maximum of 24 hours a week up to 6 weeks. The participants are not eligible for workers' compensation by the training employer during the training period. Unemployed workers will continue to receive their unemployment compensation benefits during the training period.
- **Biometric Enrollment and Verification System Pilot Project:** (\$500,000) Funding for this public-private partnership will be used to develop and test a system in southeast Ohio that will allow prescribers of dangerous drugs to use biometric authentication to compare health records from multiple sources to confirm eligibility of a patient to receive a prescription for a dangerous drug. The prescriber will receive real-time patient information. At the end of the pilot project, a report will be submitted to the Administration and the appropriate state agencies on the effectiveness of the pilot project. ([press release](#))
- **Three-Year Quality Improvement Initiative on Anti-Psychotic Medication Use in Medicaid Children:** (\$1,000,000 non-CHIPRA funds) The focus of this initiative will be on prescribing practices of anti-psychotic medication to children receiving Medicaid, with special attention on providers with high volumes of children in foster care and providers with high rates of prescribing atypical antipsychotic medication. This initiative will develop practice guidelines and design strategies to increase data transparency, engage "hot-spot" providers to pilot test and refine the practice guidelines and then expand the practice guidelines and use of data and measures for high-volume Medicaid providers serving children. Objectives will include increasing awareness and engaging

pediatric patients and their family caretakers, and increasing the competency of workers in child welfare, courts, schools and the mental health system. Academic experts and faculty in Ohio's seven COM and children's hospitals will be engaged in the development of the practice guidelines and measures. ([one page summary](#))

- **ICDS Consumer Support:** (\$4,000,000 non-CHIPRA funds) This project will produce tools to support consumers in the Integrated Care Delivery System (ICDS) consumer plan selection process. Tools will include: (1) on-site and telephonic consumer education and supported ICDS consumer plan selection processes; (2) on-site education of local social service delivery systems, consumers and families to assure community awareness of the ICDS program and consumer plan selection processes; and (3) active outreach to consumers who do not select a plan to facilitate completion of the plan selection process. Follow the work on Ohio's ICDS proposal at: <http://healthtransformation.ohio.gov/CurrentInitiatives/IntegrateMedicareMedicaidbenefits.aspx>
- **72-Hour Psychiatric Crisis Stabilization Project:** (\$1,800,000) Funding will be used to create a 72-hour crisis stabilization program in Cleveland to reduce emergency room visits and waiting times and to alleviate stress on inpatient hospital capacity (private and state hospitals). The goals of a 72-hour stabilization program are to: (1) increase appropriate use of the hospital emergency room through reduction of ER visits and reduced time in emergency rooms; (2) increase the appropriate use of inpatient psychiatric beds; (3) improve clinical outcomes by assuring treatment by specialized clinicians; and (4) enhance the linkage to outpatient providers at the time of crisis to improve adherence to treatment (both behavioral and physical health). ([press release](#))
- **Expand "Pathways" for Maternal and Child Health:** (\$350,000) OHT has partnered with Integrated Professionals for Appalachian Children (IPAC) and the Nationwide Children's Hospital's Partners for Kids (PFK) network to replicate the Community Pathways Model in southeast Ohio. The model, which was developed by the Community Health Access Project in Richland County, coordinates care for women and children within targeted medical "pathways" such as medication assessment, smoking cessation and pregnancy and postpartum care. The model pays for performance through financial incentives tied to improved health outcomes and eliminates duplication among health and human services agencies. ([press release](#))
- **Expand Access to Patient-Centered Medical Homes:** (\$1,000,000) The patient-centered medical home (PCMH) model of care promotes partnerships between patients and their primary health-care providers to improve care coordination and bolster individuals' health outcomes. Funds will be used to assist primary health-care practices around the state transition to a PCMH model of care and expand the number of PCMH practice sites in Ohio. ([press release](#))
- **Lifesaving Research at Ohio's Children's Hospitals:** (\$2,000,000) Ohio's children's hospitals will partner with Ohio Medicaid to capture Medicaid costs for two research efforts over the next two years and document improvements in outcomes. The research will be centered on childhood asthma and neonatal abstinence syndrome, also known as drug-addicted babies. ([summary of research projects](#))