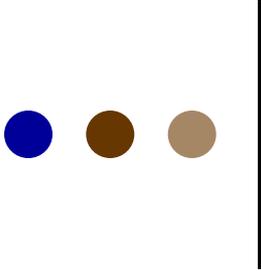




NCIOM Task Force Related Recommendations

Berkeley Yorkery
North Carolina Institute of Medicine
April 29, 2011

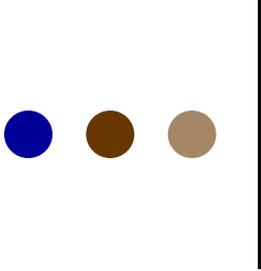


Prevention Task Force (and others)

- **Recommendation:** The Task Force recommended expansion of health insurance coverage

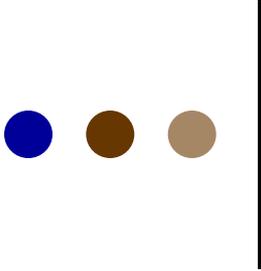
Current Status in North Carolina: Under the Affordable Care Act in 2014

- Adults ages 18-64 with family incomes under 138% of the federal poverty guidelines (FPL) (\$30,360 for a family of four in 2010) will be eligible for Medicaid
- Children with family incomes up to 200% of FPL eligible for Medicaid or Health Choice
- Individuals (adults and children) with family incomes up to 400% FPL (~\$88,000 for a family of four in 2010) will be eligible for health insurance subsidies through the health benefit exchange (if not eligible for public health coverage or affordable employer-based insurance)



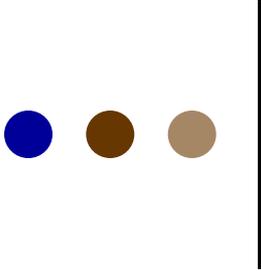
Health Reform: Essential Benefits

- HHS Secretary will recommend an **essential health care benefits package** that includes a comprehensive set of services:* (Sec. 1302)
 - Hospital services; professional services; prescription drugs; rehabilitation and habilitative services; mental health and substance use disorders; and maternity care.
 - Well-baby, well-child care, oral health and vision services for children under age 21. (Sec. 1001, 1302)
 - Recommended preventive services with no cost-sharing and all recommended immunizations. (Sec. 1001, 10406)
- The National Institute of Medicine will make recommendations on other components of the essential health benefits package to the Secretary. The Secretary is expected to issue final guidelines this fall.



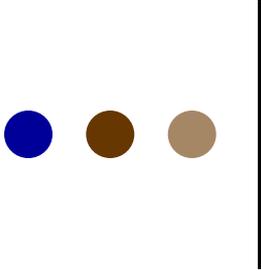
Essential Benefits Package con't

- Items or services that have an 'A' or 'B' rating in the current recommendations of the U.S. Preventive Services Task Force (USPSTF) with respect to the individual involved.
 - Of particular interest to this group: covers tobacco cessation screening, counseling, and interventions for adults; folic acid supplements; depression screening; STI screening and counseling
- Immunizations for routine use in children, adolescents, and adults that have in effect a recommendation from the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC) with respect to the individual involved.
- Evidence-informed preventive care and screenings for infants, children, and adolescents as provided for in the comprehensive guidelines supported by the Health Resources and Services Administration (HRSA).
 - Assumption is this will include Bright Futures Guidelines which include recommendations for developmental/behavioral assessment (autism, psychosocial/behavioral, alcohol/drug use)



Essential Benefits Package con't

- With respect to women, evidence-informed preventive care and screening, as provided for in the comprehensive guidelines supported by the HRSA (not otherwise addressed by the USPSTF recommendations). ***The Department of HHS is developing these guidelines and expects to issue them no later than August 1, 2011.***
 - ***The National Institute of Medicine Preventive Services for Women Task Force:*** The IOM will review what preventive services are necessary for women's health and well-being and should be considered in the development of comprehensive guidelines for preventive services for women. The IOM will also provide guidance on a process for regularly updating the preventive screenings and services to be considered. In conducting its work, the IOM will: conduct a series of meetings to examine existing prevention guidelines, obtain input from stakeholders, identify gaps that may exist in recommended preventive services for USPSTF Grade A and B preventive services guidelines for women and in Bright Futures and USPSTF Grade A and B guidelines for adolescents, and highlight specific services and screenings that could supplement currently recommended preventive services for women.
- Currently it remains unclear which components of preconception and interconception care will be covered
 - Big Questions: family planning counseling and contraceptives
- Federal subsidies cannot be used to purchase a health plan that includes coverage for abortion services



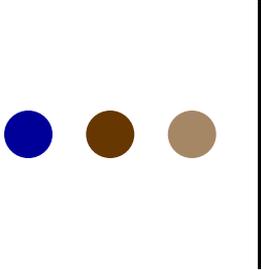
Adolescent Health Task Force

Recommendation: Ensure Comprehensive Reproductive Health and Safety Education for More Young People in North Carolina

Current Status in North Carolina

- Reproductive Health and Safety Education: In 2009 the North Carolina General Assembly enacted HB 88 which requires each school a reproductive health and safety education program starting in the seventh grade that includes, but is not limited:
 - information about abstinence;
 - skills to resist engaging in sexual activity;
 - factually accurate biological and pathological information related to the human reproductive system;
 - information on the effectiveness and safety of all FDA approved methods of birth control and methods to reduce the risk of contracting STDs;
 - information on local resources for testing and treatment of STDs; and
 - awareness of sexual assault, sexual abuse, and risk reduction

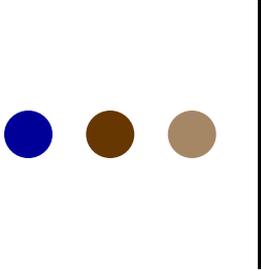
The law further states that information presented in class must be age-appropriate, objective and based upon scientific evidence



Substance Abuse Task Force

Recommendation: The Division of Mental Health, Developmental Disabilities, and Substance Abuse Services; the Division of Public Health; the Division of Social Services; and appropriate provider associations should develop a prevention plan to prevent fetal alcohol spectrum disorders and use of other drugs during pregnancy

Current Status in North Carolina: This is part of the charge of this group

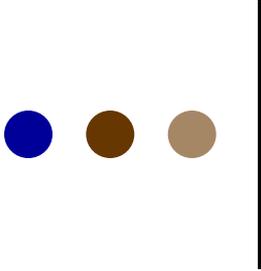


Substance Abuse Task Force

SBIRT is an evidence-based screening and brief intervention or treatment program for individuals who use and are at-risk for substance abuse problems. It was developed by the Substance Abuse and Mental Health Services Agency (SAMHSA)

Recommendations:

1. Expand SBIRT training for primary care providers and other health professionals
2. educate and encourage healthcare professionals to use evidence-based screening tools and offer motivational counseling, brief intervention, medication assisted therapies, and referral to treatment to help patients prevent, reduce, or eliminate the use of or dependency on alcohol, tobacco, and other drugs as outlined in the SBIRT model

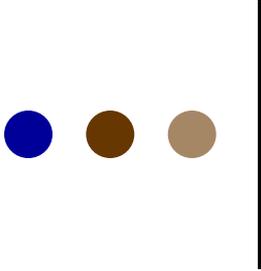


Substance Abuse Task Force

Recommendation: The NCGA should require health insurers offer substance abuse coverage parity

Current Status in North Carolina: Mental health and substance abuse parity are part of federal health insurance laws.

- **Large employer plans (50+) are currently required by federal law to include mental health and substance abuse parity.**
- **Under the Affordable Care Act, all health insurance plans (including small employer and non-group) will be required to offer mental health and substance abuse parity beginning in 2014.**

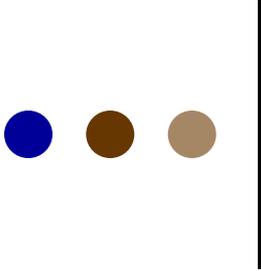


Child Maltreatment Prevention Task Force

- **Recommendation:** ensure there is a coordinated and effective system of prenatal and early childhood home visitation programs across North Carolina that are voluntary, and that services appropriately match families' risks and needs.

Current Status in North Carolina: There are several ongoing projects to increase early childhood home visitation programs. Examples include:

- NC Nurse Family Partnership Initiative
- Durham Connects
- Alliance for Evidence-Based Family Strengthening Programs



Child Maltreatment Prevention Task Force

- **Recommendation:** increase the number of substance abuse treatment programs, with a particular focus on gender specific programs for pregnant women and women with children and increase outreach to identify women in need of these services.
- **Current Status in North Carolina:** In 2007, the NC General Assembly appropriated \$6 million in new recurring funds for regionally purchased, locally-hosted substance abuse programs.