

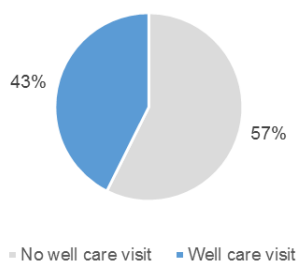
Adolescent Well Visit: Kansas

Adolescence is an important period of physical, psychological, and social development. As adolescents move from childhood to adulthood, they assume individual responsibility for their health habits. Receiving health care services, including annual adolescent preventive well visits, helps adolescents adopt or maintain healthy habits and behaviors, avoid health-damaging behaviors, manage chronic conditions, and prevent disease.



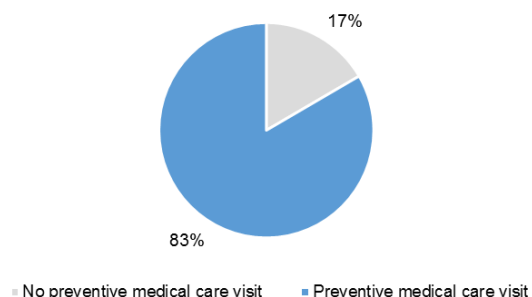
Medicaid* Measure	Title V** MCH Measure
The percentage of enrolled members 12 to 21 years of age who had at least one comprehensive well-care visit with a primary care practitioner or an OB/GYN practitioner during the measurement year.	Percent of adolescents, ages 12 through 17, with a preventive medical visit in the past year.

In 2014, less than half of Kansas adolescents (ages 12 to 21) insured by Medicaid received a comprehensive well care visit.



Source: KanCare Annual Report to CMS—Year Ending 12.31.15

Between 2011-2012, approximately 1 in 6 Kansas adolescents (12-17 years) did not have a preventive medical visit in the previous 12 months.



Source: National Survey of Children's Health, 2011-2012

Policy & Service Notes

Kansas Medicaid has adopted the *Bright Futures/AAP Periodicity Schedule* as a standard for pediatric preventive services through Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) programs. The schedule recommends adolescents receive yearly physical examination, depression screening as well as anticipatory guidance.

*The Medicaid measure is part of the Child Core Set for the Centers for Medicare & Medicaid Services. The data represent administrative claims for a comprehensive well-care visit which included a preventive care visit in the past year with a primary physician or OB/GYN that had evidence of a health and developmental history (physical and mental), a physical exam and health education/anticipatory guidance.

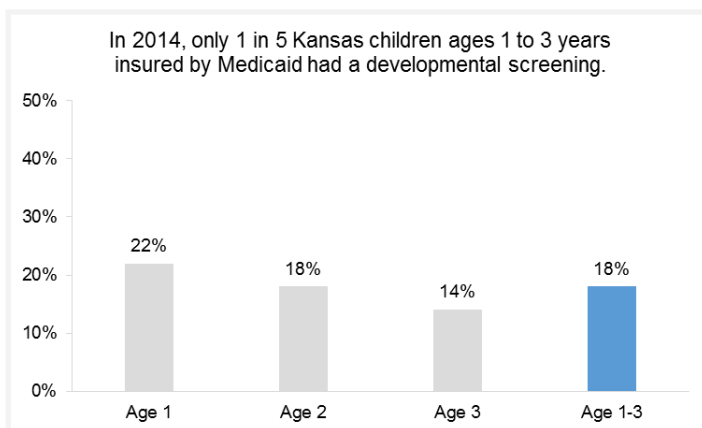
**The Title V measure is a national performance measure. The data are from a parent-completed survey, where preventive medical visit is defined as a visit with a primary physician or OB/GYN in the past 12 months.

Developmental Screening: Kansas

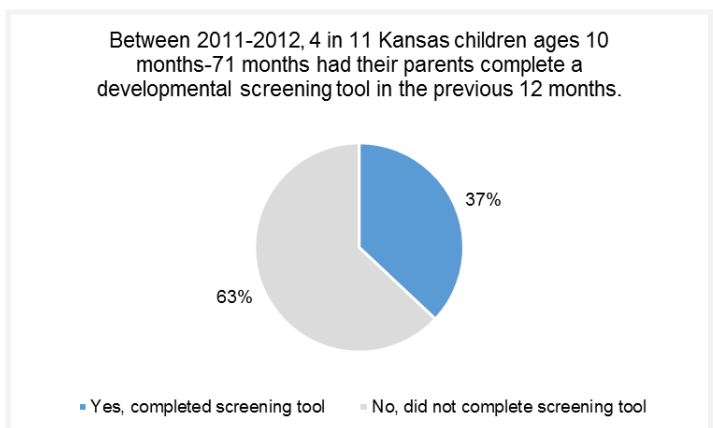


Early identification of developmental disorders is critical to the well-being of children and their families. It is an integral function of the primary care medical home. The percent of children with a developmental disorder has been increasing, yet overall screening rates have remained low. The American Academy of Pediatrics recommends developmental screening starting at nine months.

Medicaid* Measure	Title V** MCH Measure
The percentage of children screened for the risk of developmental, behavioral, and social delays using a standardized tool in the 12 months preceding their first, second, or third birthday.	The percentage of children, ages 10 through 71 months, receiving a developmental screening using a parent-completed screening tool.



Source: Medicaid Data Analytic Interface (DAI), 2014



Source: National Survey of Children's Health, 2011-2012

Policy and Service Notes

Kansas Medicaid has adopted the *Bright Futures/AAP Periodicity Schedule* as a standard for pediatric preventive services through Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) programs. The schedule recommends developmental screening at 9, 18 and 30 months.

*The Medicaid measure is part of the Child Core Set for the Centers for Medicare & Medicaid Services. Medicaid data represents the percentage of children who turned 1 to 3 years old in 2014 who had a claim submitted for developmental screening.

**The Title V measure is a national performance measure. Title V data represents the percentage of children aged 10 months through 71 months who had a visit with a healthcare provider and their parent reported completing a developmental screening in the past year.



This fact sheet, created by the Kansas Department of Health and Environment Bureau of Epidemiology and Public Health Informatics and Bureau of Family Health demonstrates the alignment of the Title V Maternal & Child Health (MCH) and Medicaid measures. The Title V Block Grant was authorized in 1935 as part of the Social Security Act. Title V's mission is to improve the health and well-being of the nation's mothers, infants, children and youth, including children and youth with special health care needs and their families.

