IE VIBRANT HEALTH FORUM



State of Early Child Health in the Inland Empire



Marcella De Santis
Pediatric Preventive Care Strategist
Inland Empire Health Plan (IEHP)



IE THP

IEHP Foundation: State of Children's Health

Marcella De Santis
Pediatric Preventive Care Strategist
September 5, 2024



Agenda

- Overview of children's health measures
- Individual measure review
 - Health Plan Performance
 - Identified barriers
 - Existing Health Plan Initiatives
 - Measure heat map



Measure	Measure Description	MY 2023 MPL	MPL Status
Well-Child Visits in the First 15 months of life	Children who turned 15 months old during the measurement year: Six or more well-child visits	58.38%	MET
Well-Child Visits 15-30 months	Children who turned 30 months old during the measurement year: Two or more well-child visits	66.76%	MET
Child & Adolescent Well- Care Visits	The percentage of members 3–21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year.	48.07%	MET
Topical Fluoride in Children	Members ages 1 to less than 21 years of age who received at least two fluoride applications as dental or oral health services during the reporting year — at least two unique dates of service when topical fluoride was provided	19.30%	MET
Lead Screening in Children	The percentage of children 2 years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday	62.79%	NOT MET
Childhood Immunization Status – Combo 10	The percentage of children 2 years of age who received all combination-10 recommended vaccines by their second birthday (24 total doses)	30.90%	NOT MET

MPL: Minimum Performance Level for Medi-Cal managed care plans as defined by DHCS Managed Care Accountability Set (MCAS). MY = measurement year

Well-Child Visits in the First 30 Months

Well-Child Visits in the First 15 months of life

- Children who turned 15 months old during the measurement year and received 6+ well-child visits
- IEHP MY 2023 59.95%
- DHCS MCAS MPL 58.38% Met
- Identified Disparities
 - Black/African American Members

Well-Child Visits for Age 15-30 months

- Children who turned 30 months old during the measurement year: Two or more well-child visits
- IEHP MY 2023 67.15%
- DHCS MCAS MPL 66.76% Met
- Identified Disparities
 - Black/African American Members
 - High Desert and Corona/Temecula/Hemet regions







Well-Child Visits in the First 30 Months

Existing Health Plan Initiatives

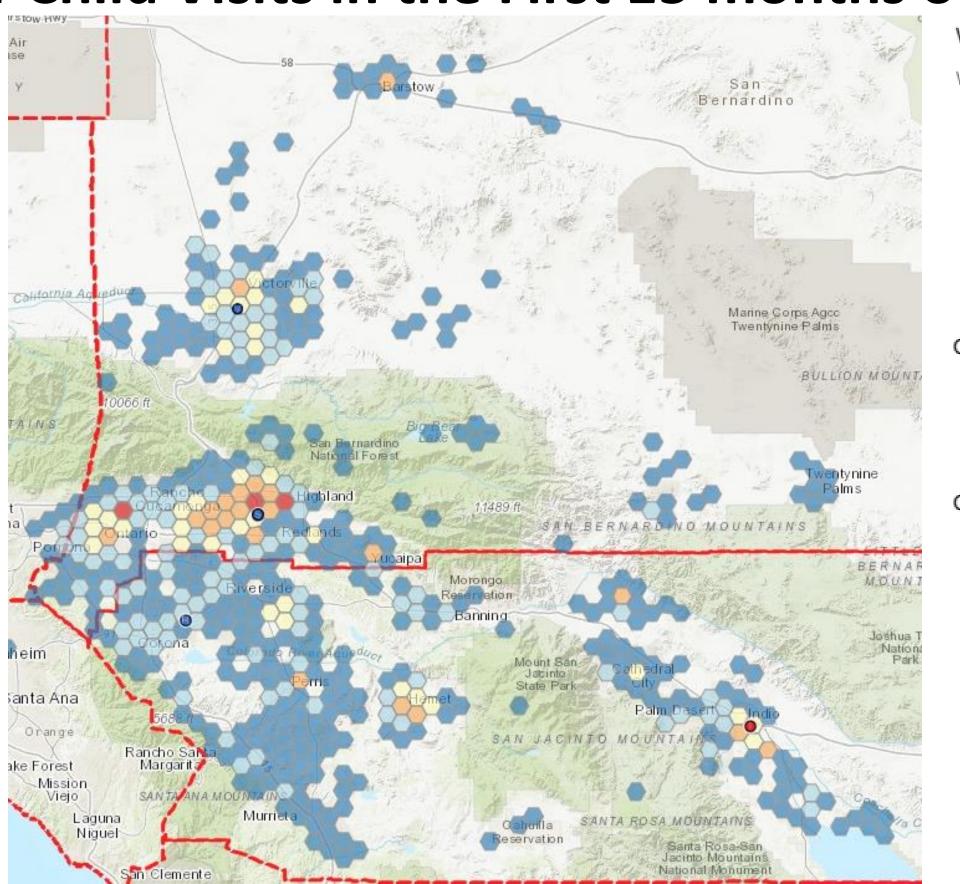
- Provider Incentive programs
- Member Incentive programs
- Member Outreach campaigns

Barriers to Care

- Eight visits needed in the first 30 months of life
- Difficulty aligning family and Provider schedules for appointments
 - Transportation, childcare, work schedules
- Gap in coverage for newborn if not enrolled timely
- Unclear value of well-child visits if child seems healthy



Well-Child Visits in the First 15 months of life – 6+ visits



Well Child Visits (W30-6+) - 2023

W30 6 15 Not Completed

51 - 71

26 - 50

16 - 25

6 - 15

4 5

CWC - IEHP

) Riverside

San Bernardino

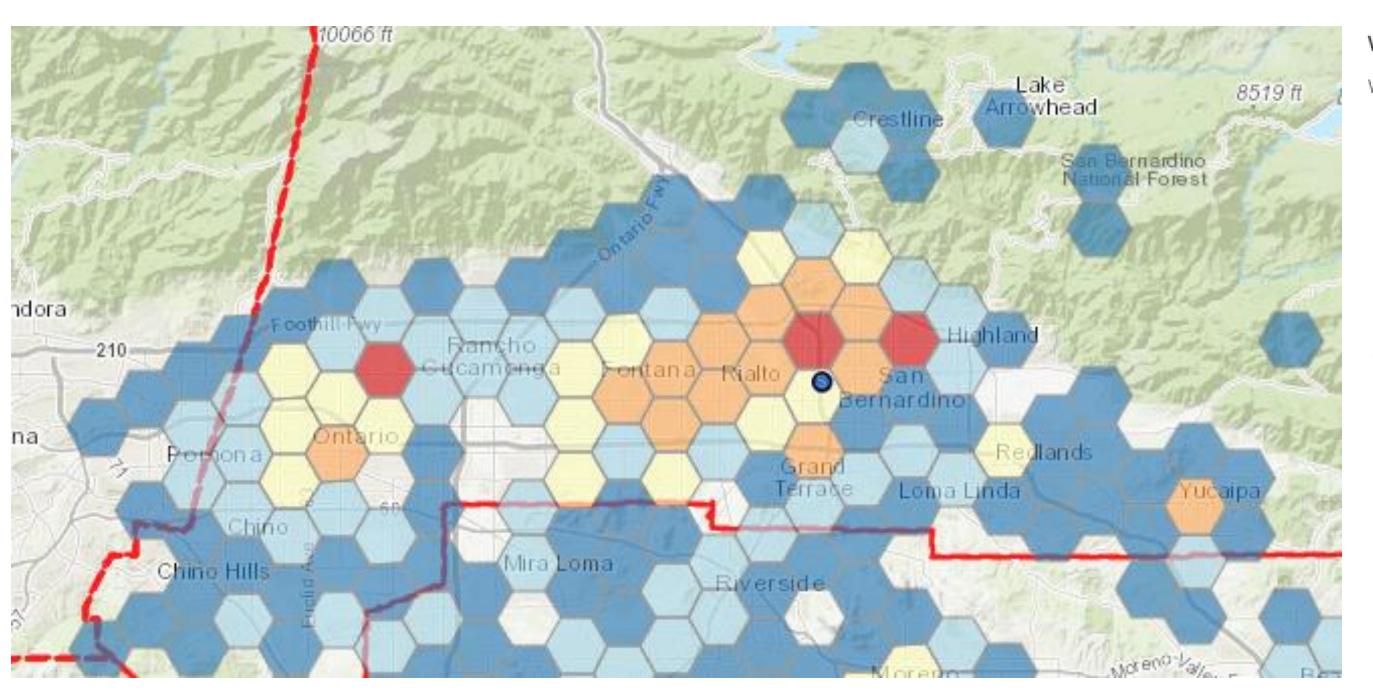
Victorville

CWC - Indio

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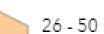
Well-Child Visits in the First 15 months of life – 6+ visits



Well Child Visits (W30-6+) - 2023

W30 6 15 Not Completed









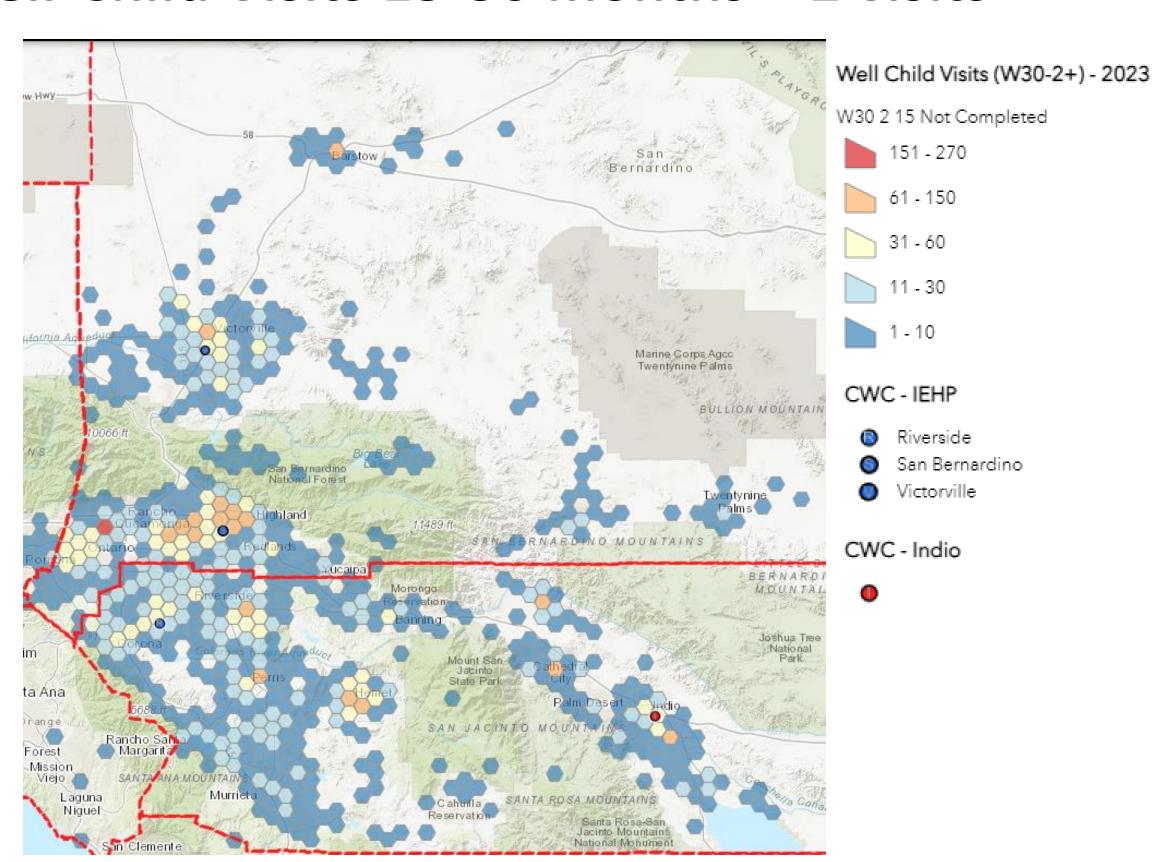


CWC - IEHP

- Riverside
- San Bernardino
- Victorville

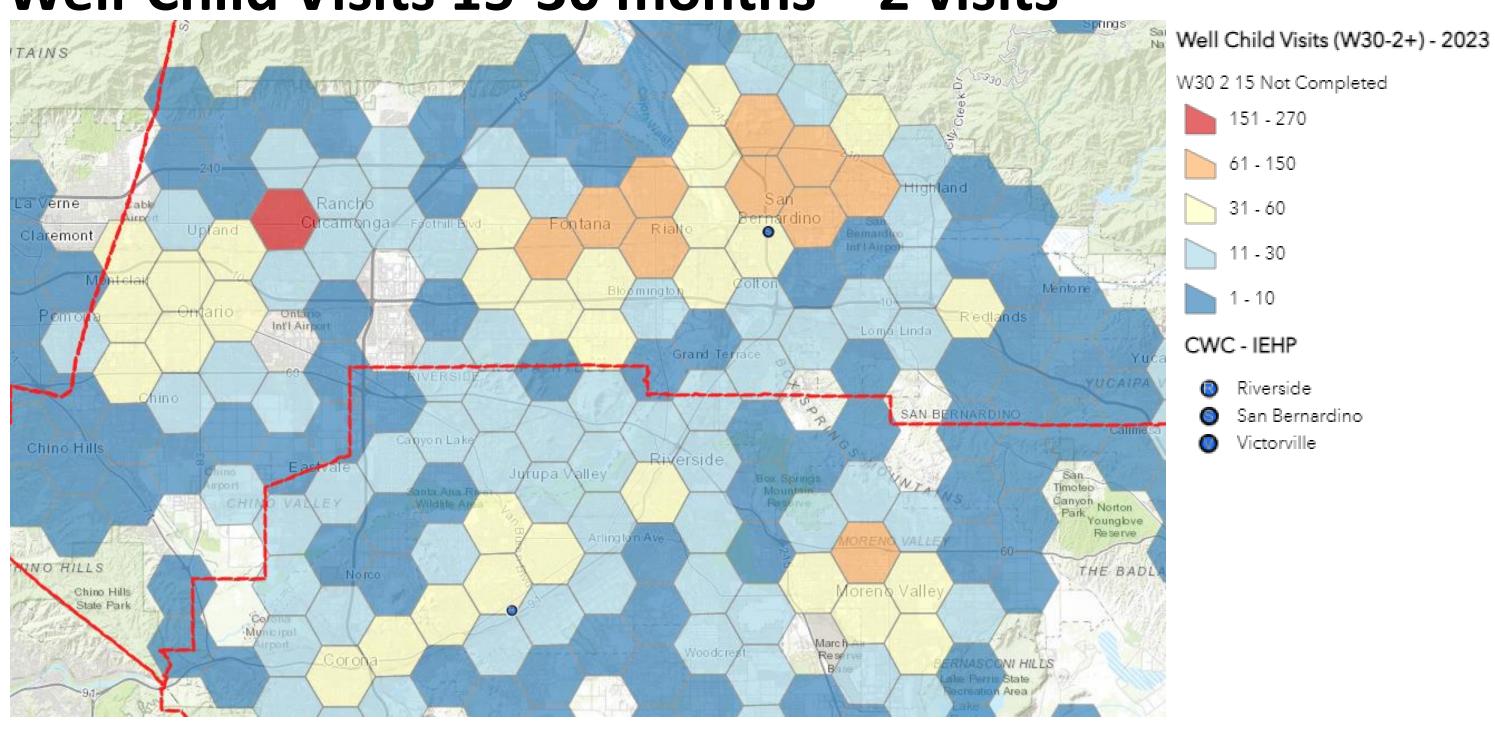


Well-Child Visits 15-30 months – 2 visits





Well-Child Visits 15-30 months – 2 visits



The percentage of children 2 years of age who had the following vaccines **by their second birthday**:

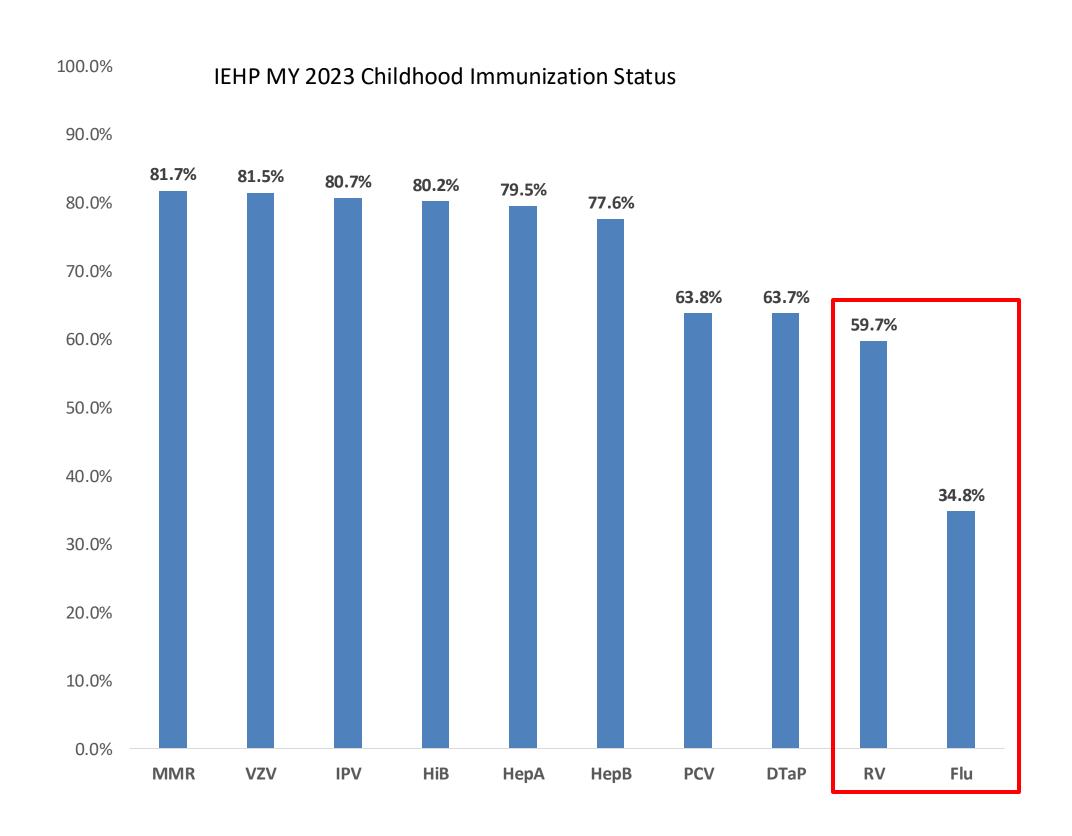
Four (4) DTaP	One (1) Varicella	
Three (3) Polio	Four (4) PCV	
One (1) MMR	One (1) HepA	
Three (3) Hib	Two or Three (2-3) Rotavirus	
Three (3) HepB	Two (2) Influenza	







- IEHP MY 2023 CIS Combo 10 rate 22.99%
- DHCS MCAS MPL 30.90% Not Met
- Flu and Rotavirus are consistently lowest performing antigens
- Identified disparities
 - Black/African American Members
 - White Members



Existing Health Plan Initiatives

- -Member Incentive
 - Flu & Rotavirus (0-12 months) \$200
 - Flu Only (13-24 months) \$100
- -Member Outreach
 - Quarterly campaign to outreach to Members prior to 2nd birthday who only need flu shot

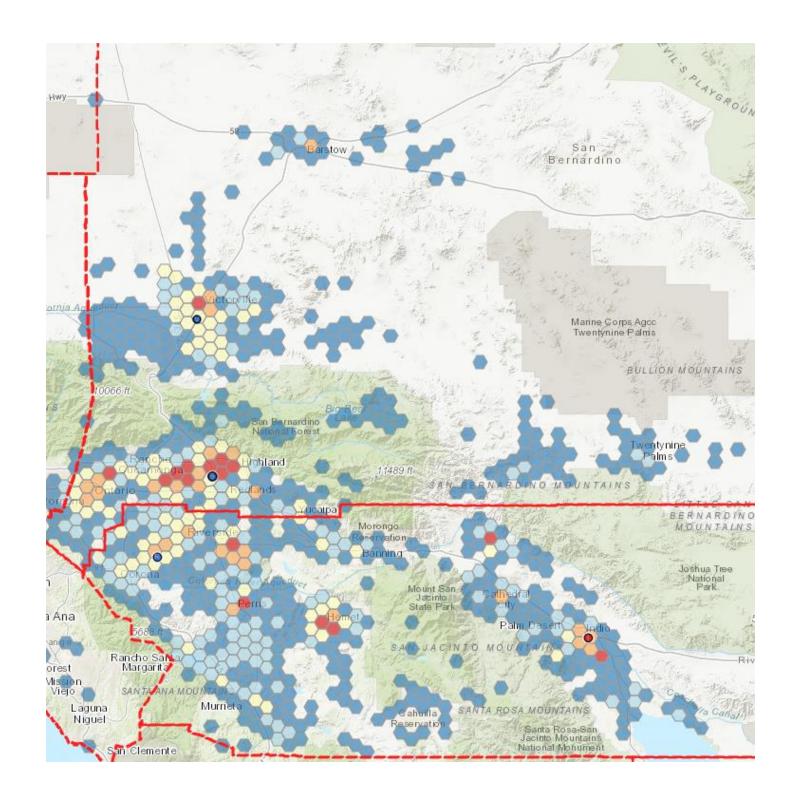
Barriers to Care

- Vaccine misinformation
- Caregivers opting to delay immunizations rather than adhering to schedule
- -Flu
 - Flu vaccine perceived as "optional"
 - Low flu vaccine confidence
- Rotavirus
 - No makeup schedule









Childhood Immunization (CIS-10) - 2023

CIS Combo 10 Not Completed

151 - 395

101 - 150

46 - 100

16 - 45

1 - 15

CWC - IEHP

Riverside

San Bernardino

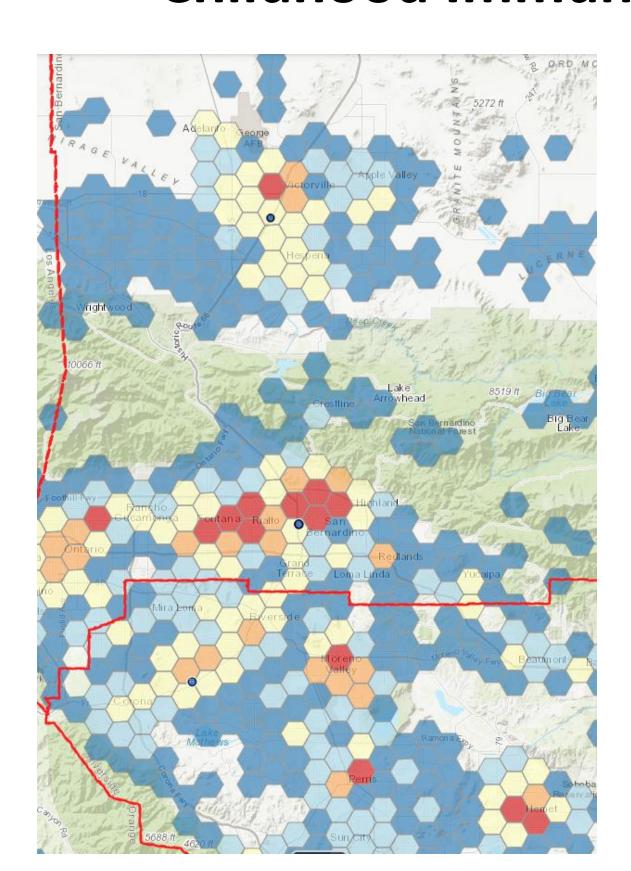
Victorville

CWC - Indio

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Childhood Immunization Status



Childhood Immunization (CIS-10) - 2023

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151 - 395

101 - 150

46 - 100

16 - 45

1 - 15

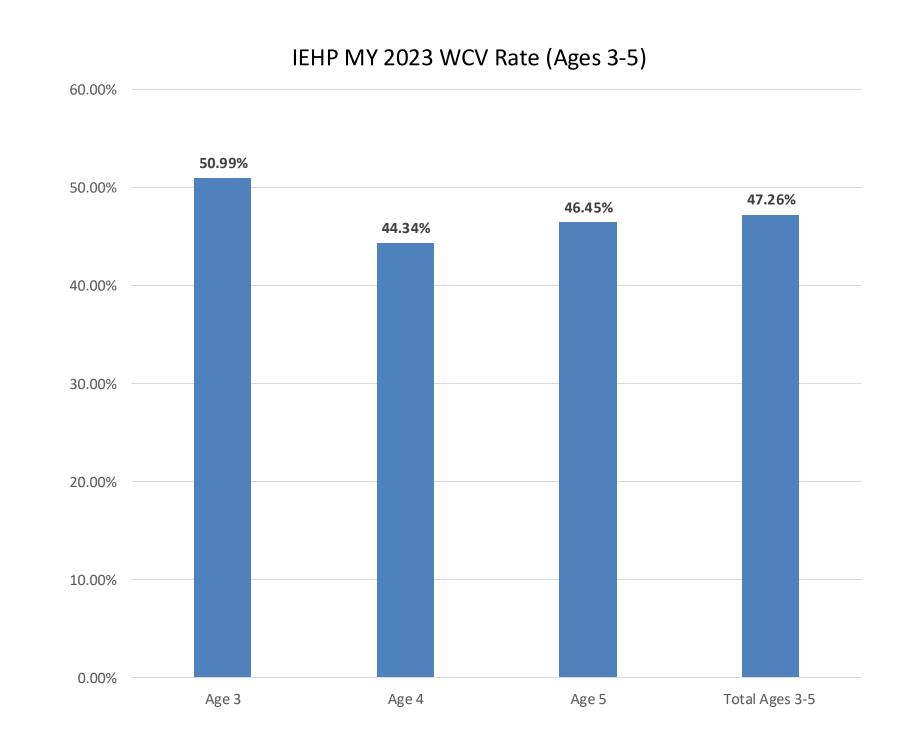
CWC - IEHP

- Riverside
- San Bernardino
- Victorville



Child & Adolescent Well-Care Visit

- The percentage of members 3–21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year.
- DHCS MCAS MPL 48.07% Met
- Identified Disparities
 - American Indian/Alaska Native Members
 - Black/African American Members
 - White Members
 - Vietnamese language
 - Mohave Valley, Palo Verde Valley, and West
 San Bernardino regions





Child & Adolescent Well-Care Visit

Existing Health Plan Initiatives

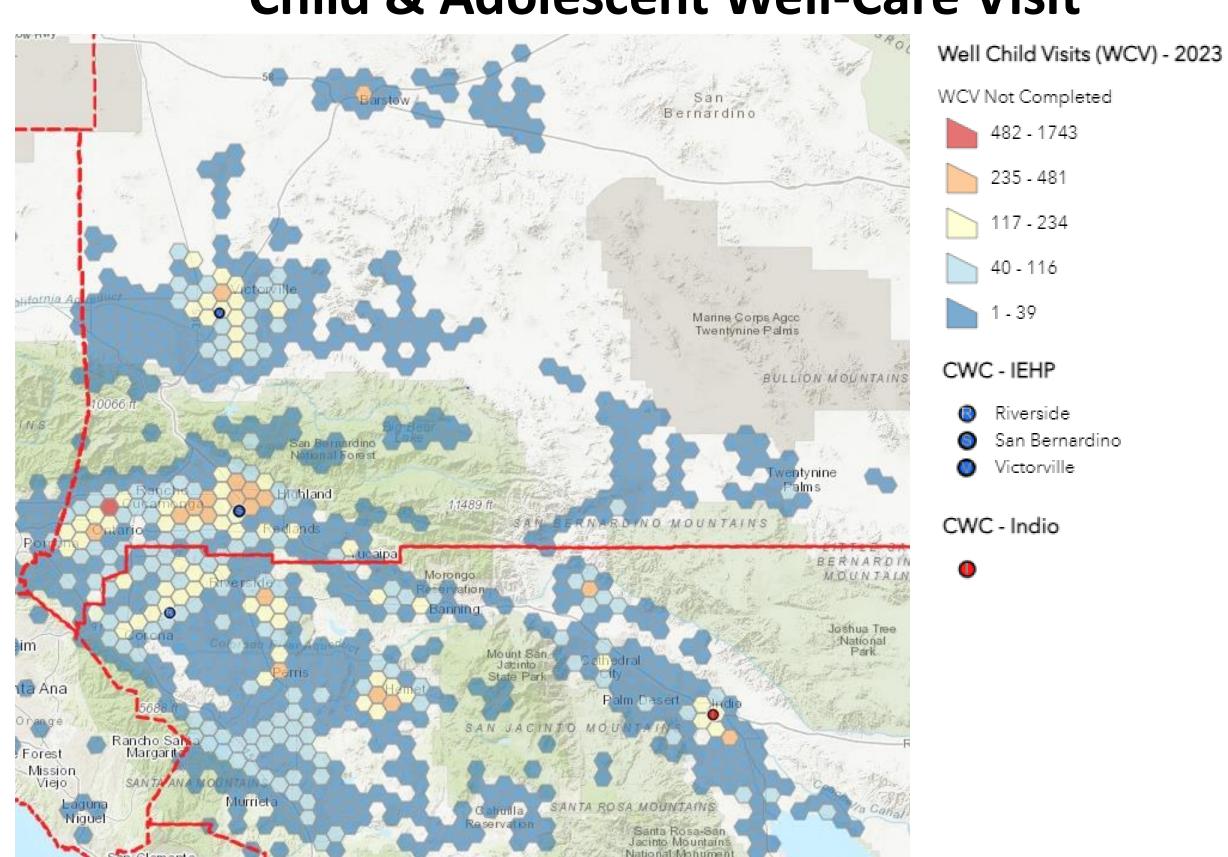
- Provider Incentive programs
- Member Incentive programs
- Member Outreach campaigns

Barriers to Care

- Difficulty aligning family and Provider schedules for appointments
 - Transportation, childcare, work schedules, school schedule
- Unclear value of well-child visits if child seems healthy

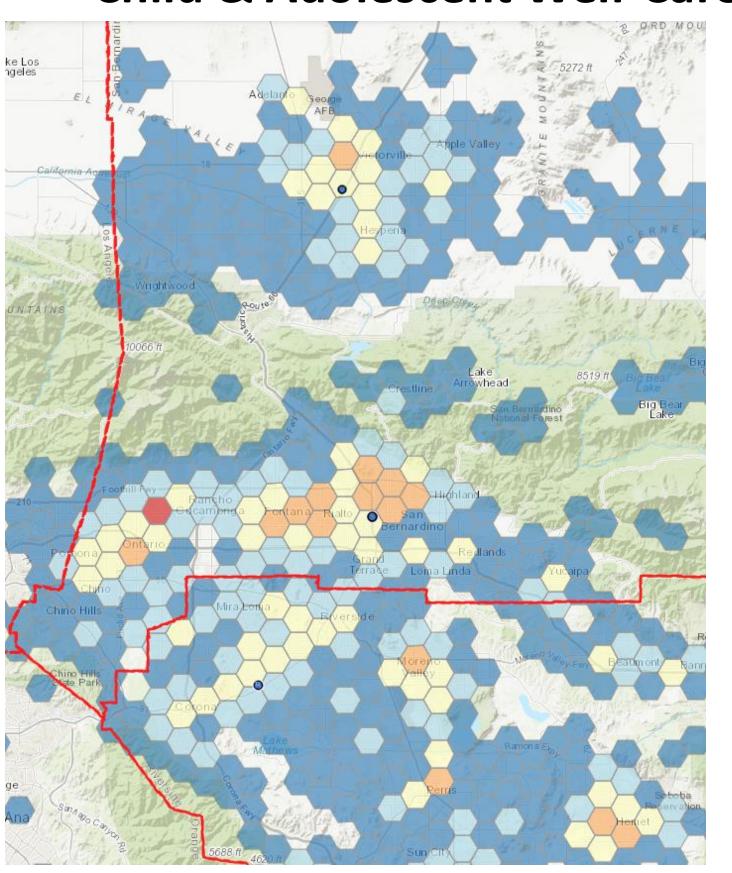


Child & Adolescent Well-Care Visit





Child & Adolescent Well-Care Visit



Well Child Visits (WCV) - 2023

WCV Not Completed

482 - 1743

235 - 481

117 - 234

40 - 116

1 - 39

CWC - IEHP

Riverside

San Bernardino

Victorville



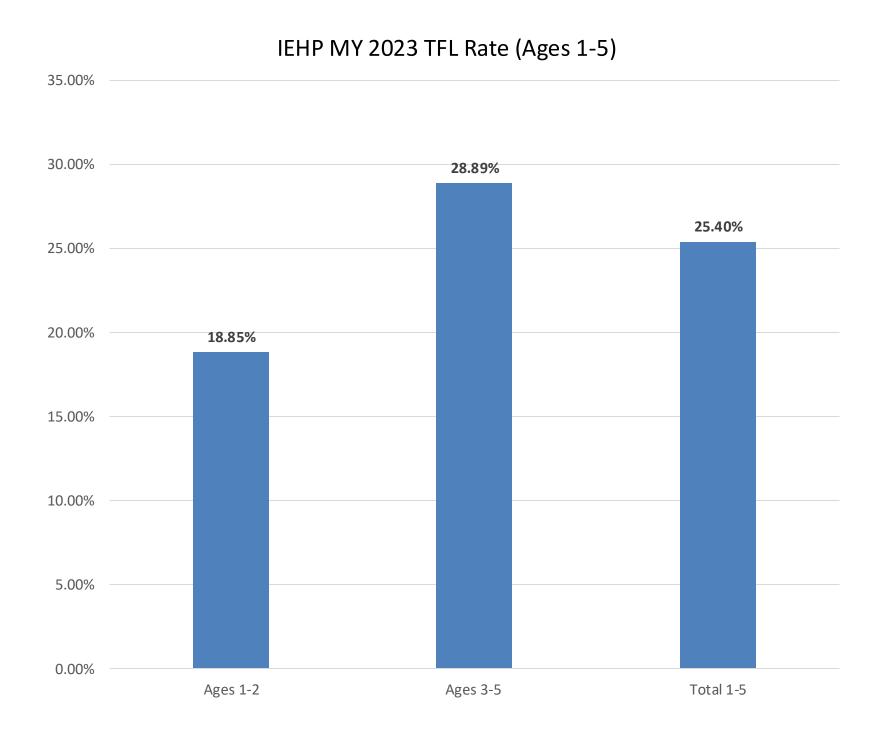
Topical Fluoride in Children

- Members ages 1 to less than 21 years of age who received at least two fluoride applications as dental or oral health services during the reporting year – at least two unique dates of service when topical fluoride was provided
- IEHP MY 2023 (ages 1-5) 25.40%
- DHCS MCAS MPL 19.30% Met
- Identified Disparities
 - American Indian/Alaska Native Members
 - Black Members
 - White Members
 - Low Desert, Mohave Valley, and Palo Verde Valley regions



Topical Fluoride in Children

- Members ages 1 to less than 21
 years of age who received at least
 two fluoride applications as dental
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Topical Fluoride in Children

Existing Health Plan Initiatives

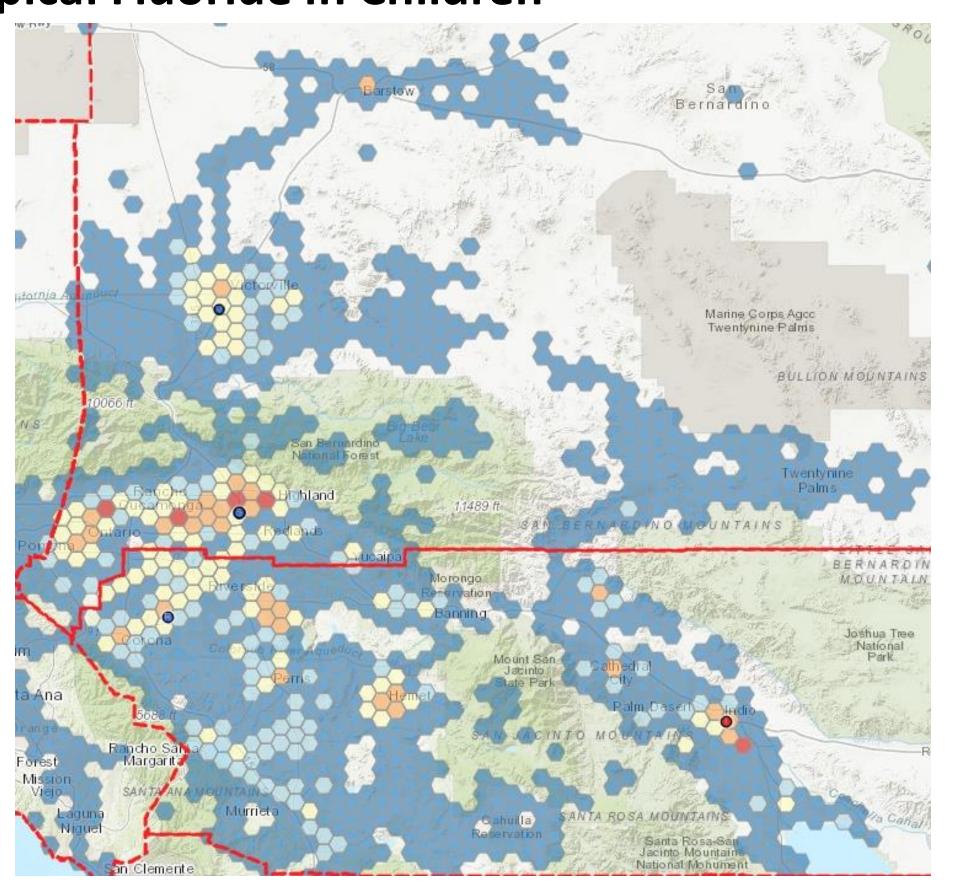
Provider Incentive programs

Barriers to Care

- Members may only receive one fluoride application during the year
- Members are unaware of dental benefit



Topical Fluoride in Children



Topical Fluoride - 2023

TFL Not Completed











CWC - IEHP

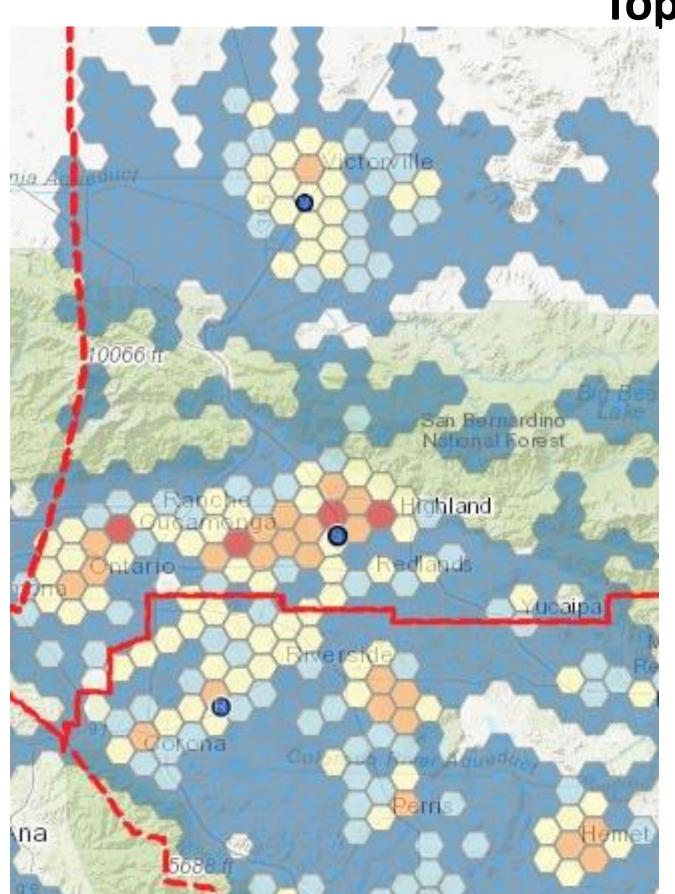
- Riverside
- San Bernardino
- Victorville

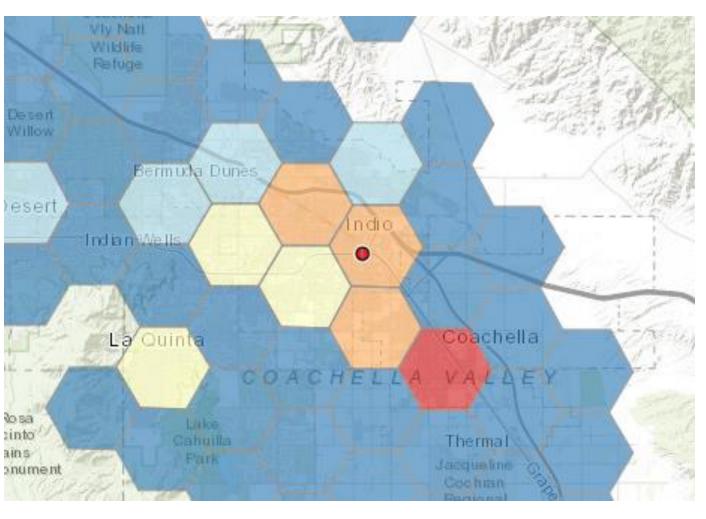
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Topical Fluoride in Children







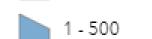












CWC - IEHP

- Riverside
- San Bernardino
- Victorville

CWC - Indio

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Lead Screening in Children

- The percentage of children 2 years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday
- IEHP MY 2023 52.39%
- DHCS MCAS MPL 62.79% Not Met
- Identified Disparities
 - Black Members
 - White Members
 - High Desert, Low Desert, and West San Bernardino regions





Lead Screening in Children

Existing Health Plan Initiatives

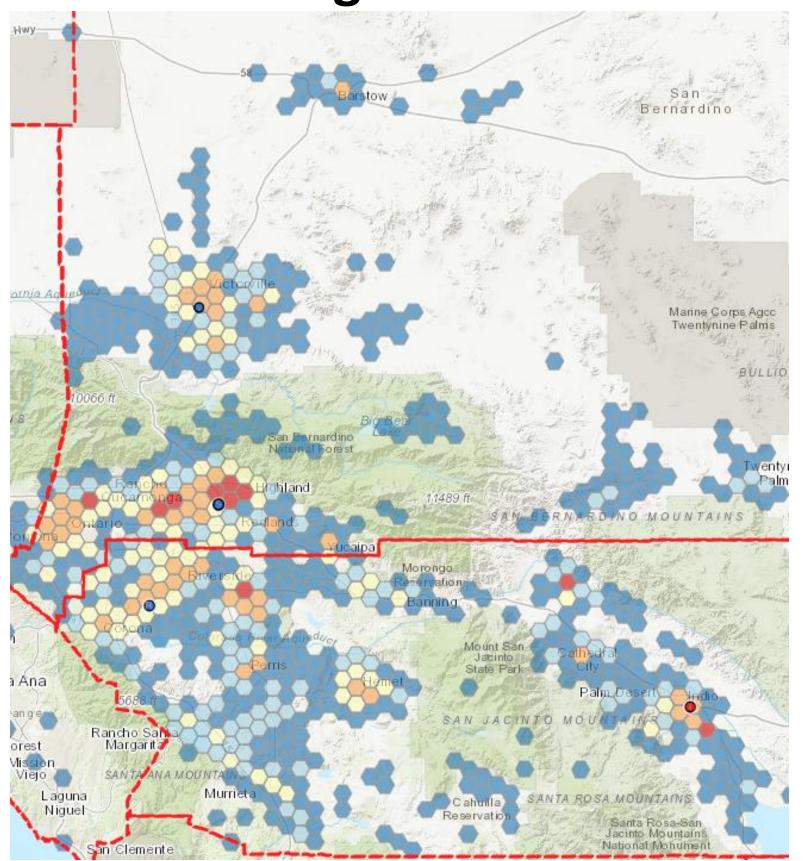
- Provider Incentive programs
- Member Incentive programs

Barriers to Care

- Limited education/awareness on lead exposure risk and effects
- Reluctance due to child discomfort from blood draw procedure
- Visit to lab may present additional barrier



Lead Screening in Children



Lead Screening In Children (LSC) - 2023

LSC Not Completed

101 - 292

51 - 100

26 - 50

11 - 25

1 - 10

CWC - IEHP

Riverside

San Bernardino

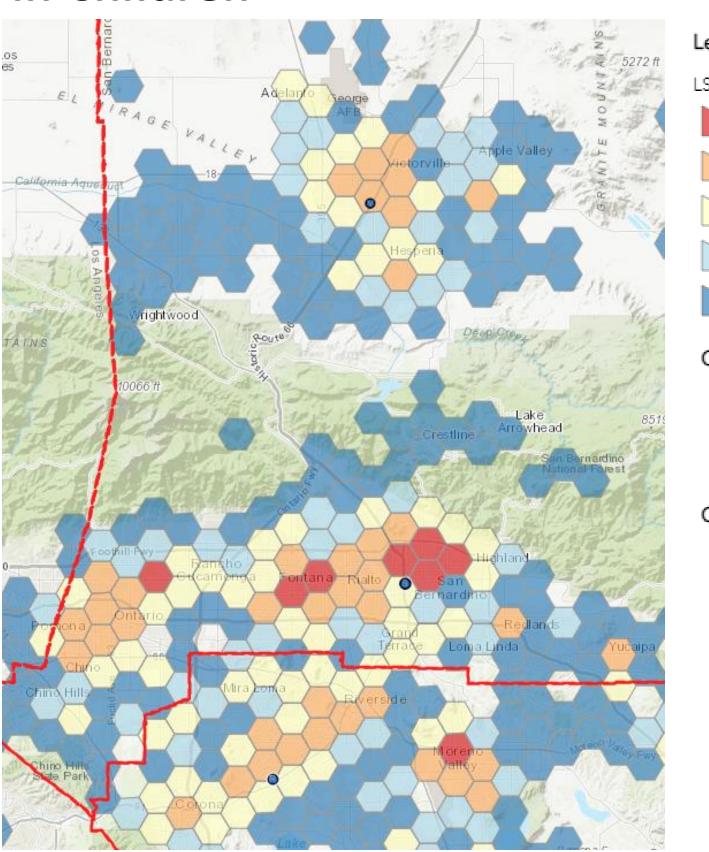
Victorville

CWC - Indio

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Lead Screening in Children



Lead Screening In Children (LSC) - 2023

LSC Not Completed

101 - 292

51 - 100

26 - 50

11 - 25

1 - 10

CWC - IEHP

Riverside

San Bernardino

Victorville

CWC - Indio

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Closing Insights

- Childhood Immunizations demonstrate a large area of opportunity
- West San Bernardino/San Bernardino Proper consistently indicated higher volume of Members not receiving services
- Black/African American and White Members were disparate racial/ethnic group among majority of measures

QUESTIONS?



IE VIBRANT HEALTH FORUM



Empowering Communities:

A Panel Discussion with First 5 San Bernardino & Riverside on Child Wellness Initiatives



Larissa Wills
Regional Manager
First 5 Riverside County



Dr. Wendy Lee
Systems Integration Officer
First 5 San Bernardino County



Sonia Rivas, Manager Health Navigator Community Behavioral Health Inland Empire Health Plan (IEHP)

IE VIBRANT HEALTH FORUM



Help Me Grow Inland Empire:
Connecting families and providers through developmental screening and social resourcing



Megan Daly Director Help Me Grow IE





Help Me Grow Inland Empire

September 2024









Help Me Grow Inland Empire is made possible by a joint investment from First 5 San Bernardino and First 5 Riverside, in partnership with Loma Linda University Children's Hospital.

Our Why



HMGIE Parent ... A mother of children ages 4 and 6 was referred to HMGIE for SDOH needs. The initial referral noted housing as a concern. When the HMGIE Coordinator spoke to the mother during the intake call, the mother shared her health needs were hindering her ability to address the additional SDOH family concerns. The HMGIE Coordinator was able to connect the mom to health services first and then later, after a series of follow-up calls, the Coordinator connected the mom to housing through an IEHP resource referral. The mother told the Coordinator: "I truly appreciate all that you have done to be of assistance and encouragement to me and my children in our process."



A Legal Guardian who is in custody of an 18-month-old from San Bernardino was referred for assistance with developmental needs (Speech, PT, OT). The Guardian was unaware of how to navigate and access the early intervention services. Over a series of 2-3 follow-up calls after initial intake with the Help Me Grow Coordinator, we reviewed the steps, multiple times, the Guardian needed to take n for the child on how to access the services, including the Inland Regional Center. The Guardian told the Coordinator: "Thank you so much for taking the time out of your day to really explain to me, multiple times, what the next steps are and how to do this. It is so overwhelming. You broke this down for me so it is doable, I cannot thank you enough."





San Bernardino County 2.195 Million Riverside County 2.458 Million

Total Population 4.6 Million 11.8% of CA

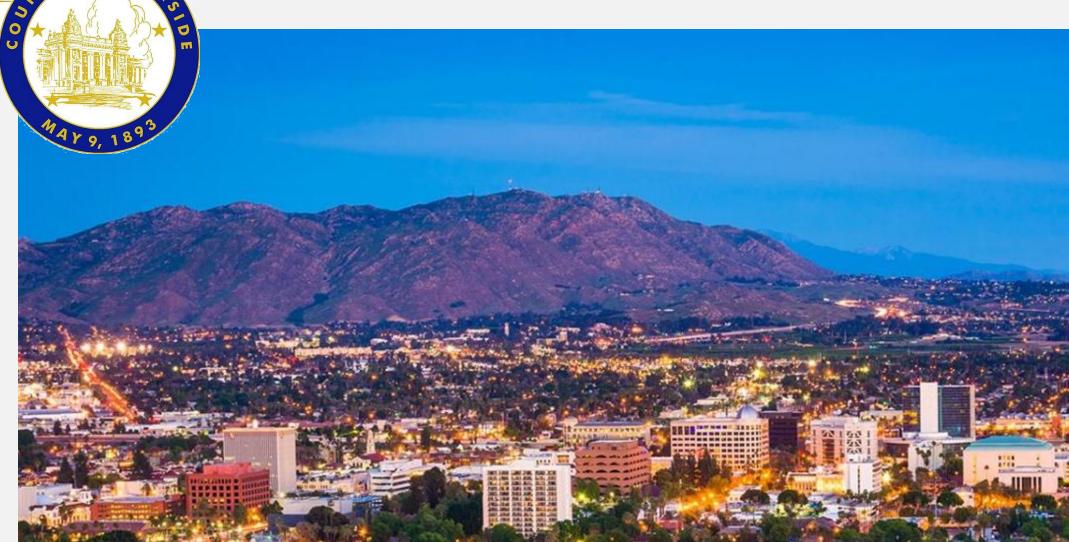
5.7 million by 2060

San Bernardino:

People in Poverty 13.2%

Riverside:

People in Poverty 11.6%



Social Determinants

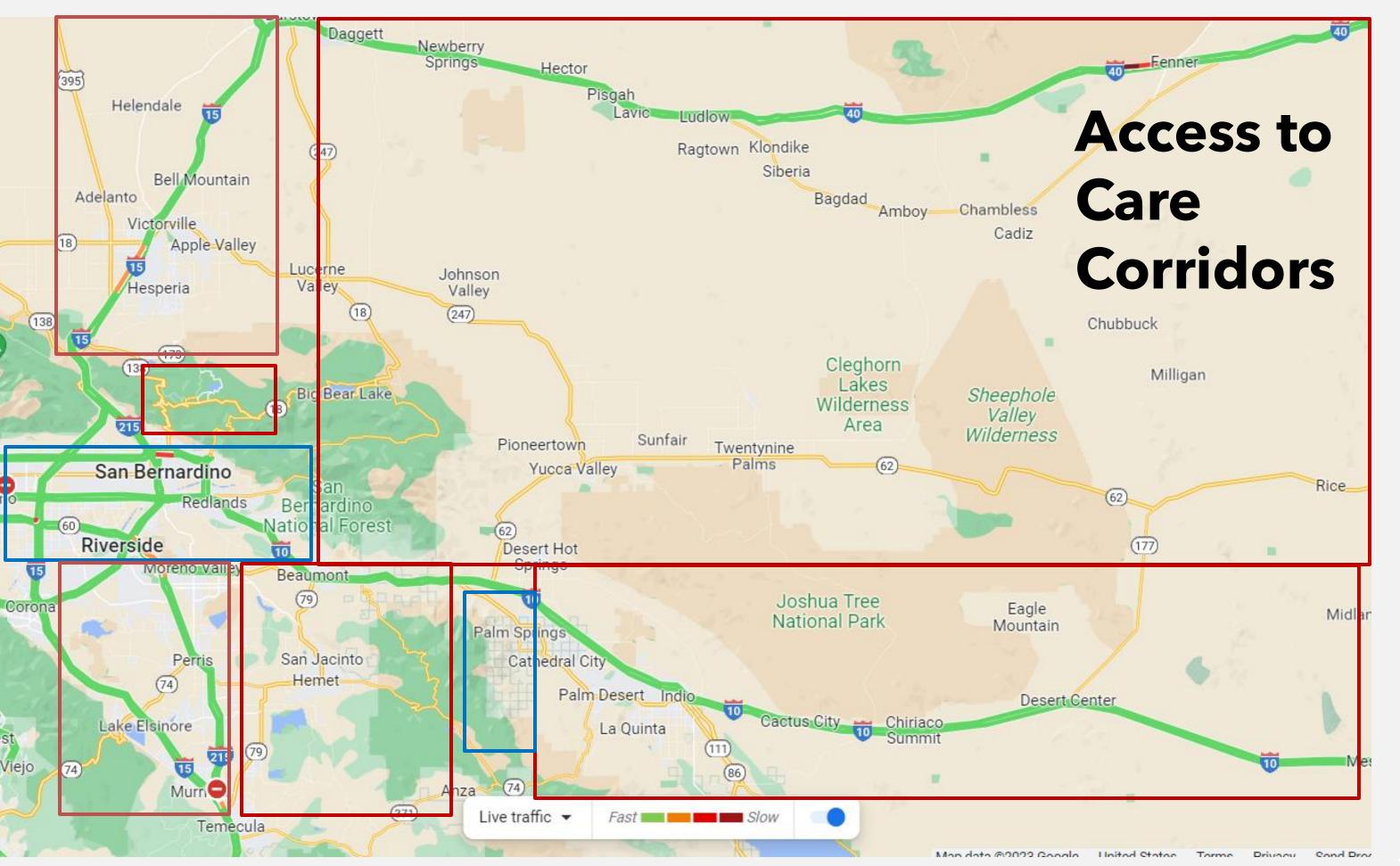
Food Security as a predictor:

13% of Riverside & San Bernardino families are food insecure.

24% of children screened at LLUCH are food insecure.







The Inland Empire is:

12th most
populated
metropolitan
area in the United
States

27,000 square miles

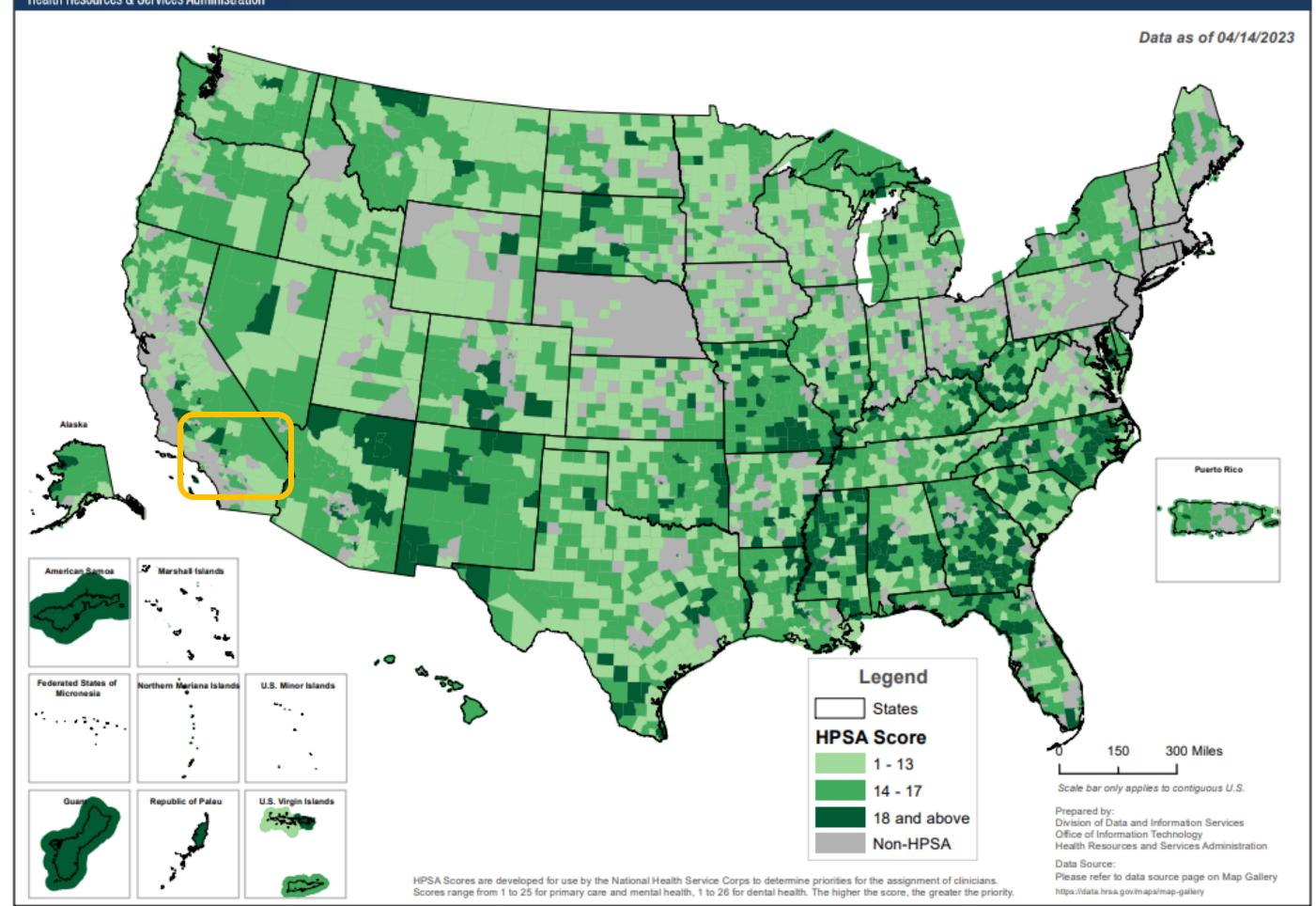
The IE larger than 10 States:

Connecticut,
Delaware, Hawaii,
Maryland,
Massachusetts, New
Hampshire, New
Jersey, Rhode
Island, Vermont,
and West Virginia.





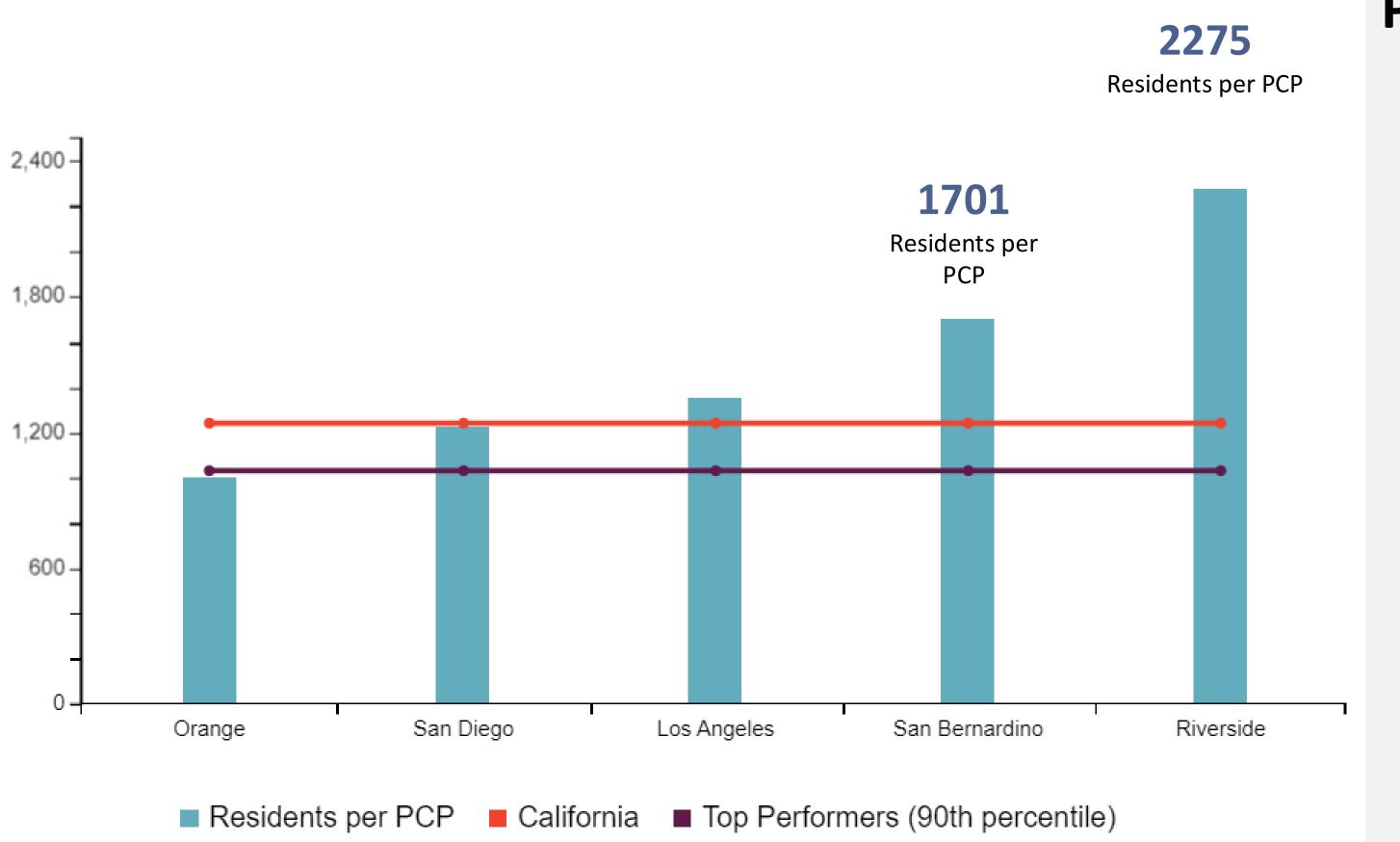
Health Professional Shortage Areas (HPSA) - Primary Care



Access to Care

Source: HRSA Data Warehouse

County Comparison of the Number of Residents per Primary Care Physician, 2022



Access to Primary Care Physician

CA Avg is 1240 Top 90th 1030

Source: SB County – Community Indicators County Health Rankings and Roadmaps

75.74

Pediatricians per 100,000 Children

1320 Children per

Pediatric MD

0 Pediatricians

>0-20 Pediatricians per 100,000 Children

>20-40 Pediatricians per 100,000 Children

>40-50 Pediatricians per 100,000 Children

>50-60 Pediatricians per 100,000 Children

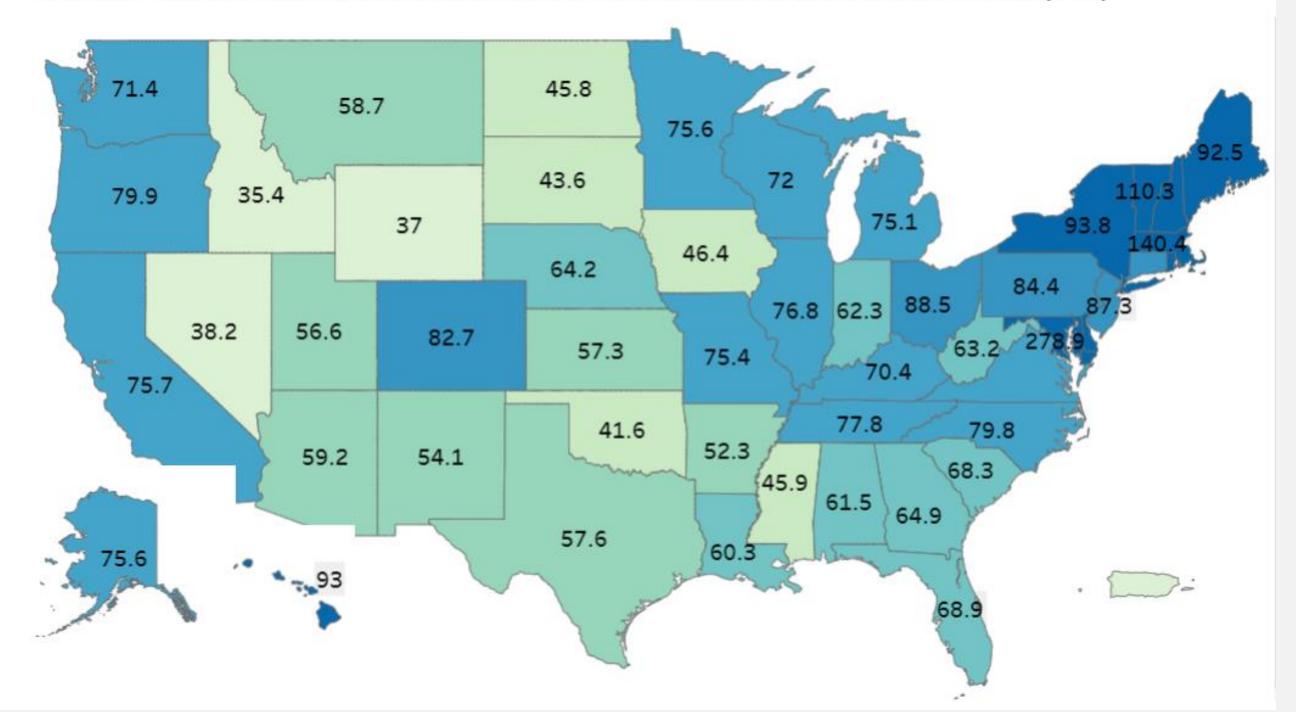
>60-70 Pediatricians per 100,000 Children

>70-80 Pediatricians per 100,000 Children

>80-90 Pediatricians per 100,000 Children

>90 Pediatricians per 100,000 Children

Distribution of the combination of those certified in General Pediatrics (alone) and those certified in both General Pediatrics and in another ABMS specialty by pediatricians per 100,000 Children (0-17)



Source: American Board of Pediatrics – General Pediatricians U.S. State and County Maps

Regional Access to Pediatrician



California | San Bernardino County

Certification Combination: The combination of those certified in General Pediatrics (alone) and those certified in both

General Pediatrics and in another ABMS specialty

Pediatrician Count: 253
Population Total Under 18: 570,561
Per 100,000 Children: 44.30
Children per pediatrician: 2,255

California | Riverside County

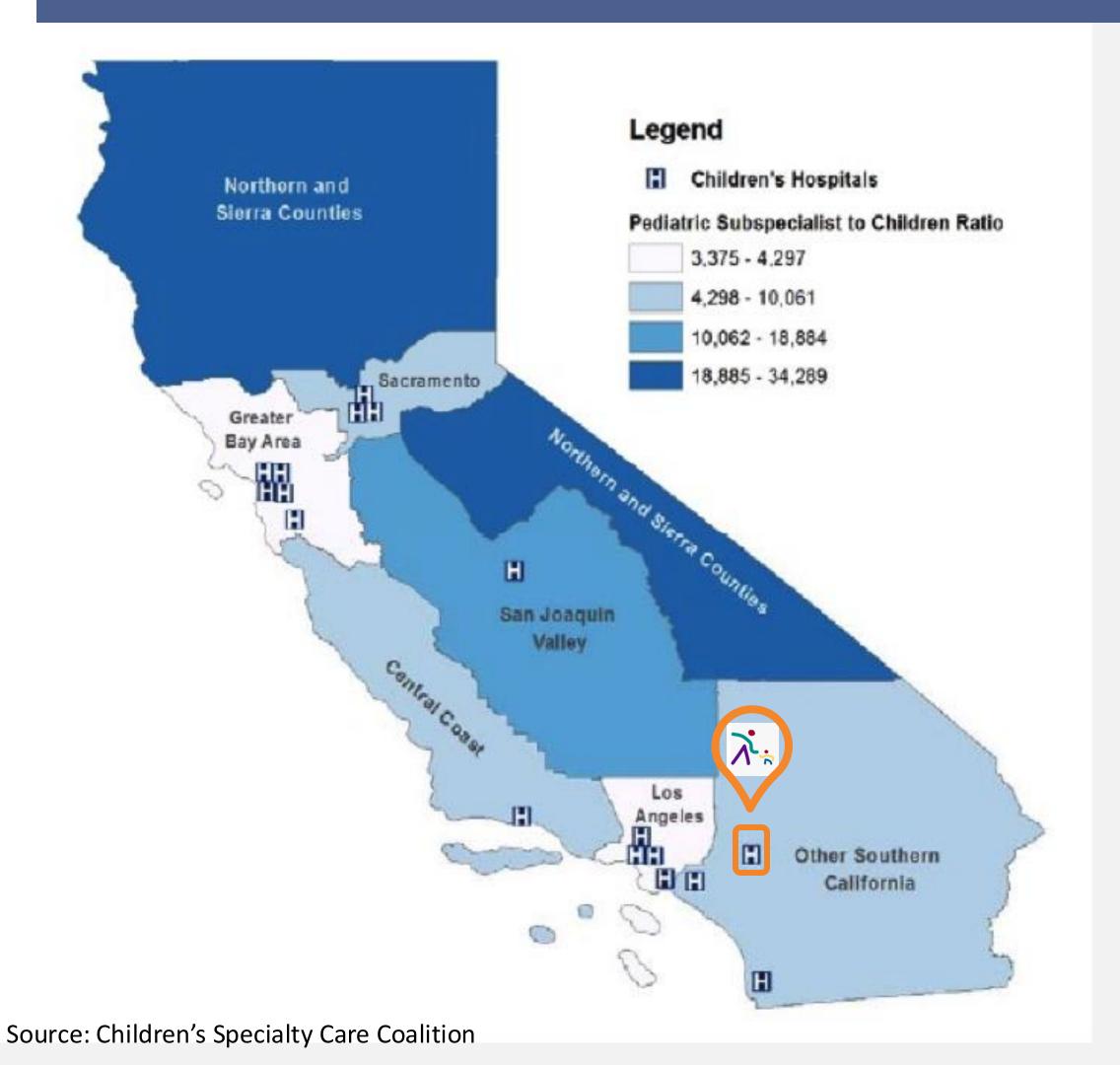
Certification Combination: The combination of those certified in General Pediatrics (alone) and those certified in both

General Pediatrics and in another ABMS specialty

Pediatrician Count: 167
Population Total Under 18: 604,518
Per 100,000 Children: 27.60
Children per pediatrician: 3,620

0 Pediatricians	
>0-20 Pediatricians per 100,000 Children	
>20-40 Pediatricians per 100,000 Children	
>40-50 Pediatricians per 100,000 Children	
>50-60 Pediatricians per 100,000 Children	
>60-70 Pediatricians per 100,000 Children	
>70-80 Pediatricians per 100,000 Children	
>80-90 Pediatricians per 100,000 Children	
>90 Pediatricians per 100,000 Children	

Source: American Board of Pediatrics – General Pediatricians U.S. State and County Maps



Pediatric Specialty



Serving San Bernardino, Riverside, and Northern Sierra Counties: Inyo & Mono



Developmental + SDOH Resourcing Matters

The 2022 American Physician's survey

- 77% of physicians indicate many or all of their patients' health outcomes are affected by SDOH.
- 80% of physicians said we cannot improve US health outcomes or reduce health care costs without addressing SDOH.
- 6 in 10 physicians felt they do not have the resources to address SDOH needs of patients.
 - 6 in 10 also reported feeling burned out by the inability to address social impacts on health.
- Top 2 SDOH impacting patients reported by physicians:
 - Financial Instability & Transportation

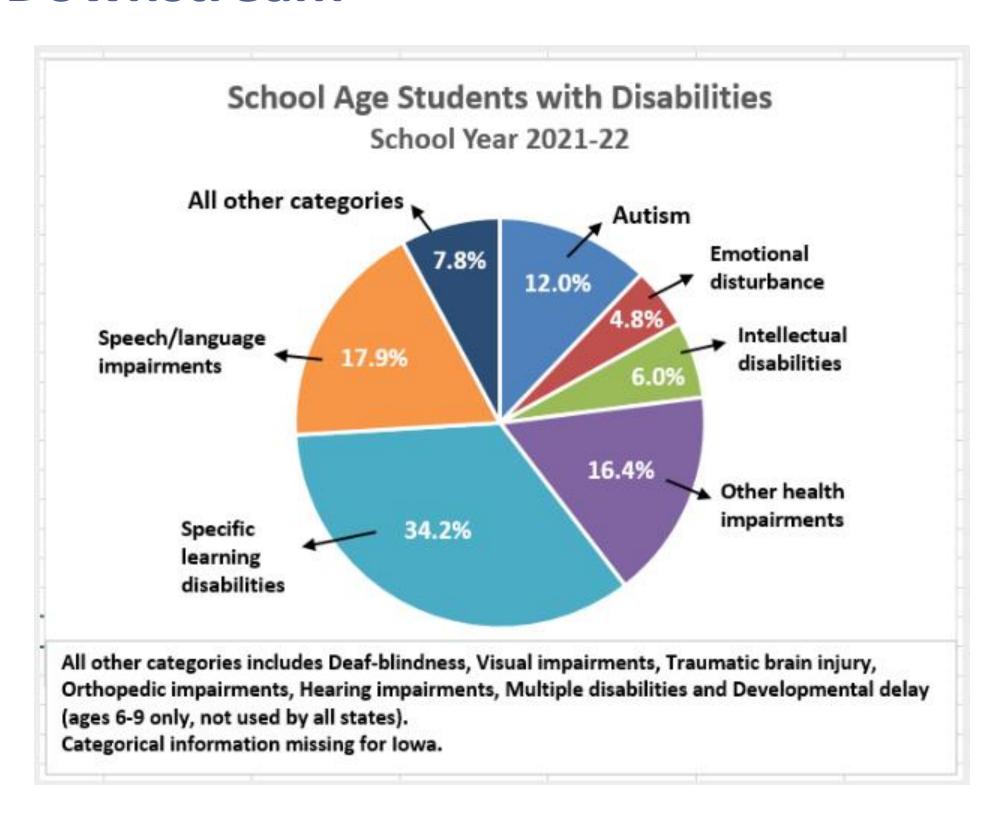


Education Indicators- Downstream

 30% of Children nationwide are estimated to be kindergarten ready (post-pandemic)

7.3 million disabled student in the US

- 15% of national public-school enrollment 21-22 school year.
- -11% of children with disabilities are in CA
- About a third of US students with disability have "specific learning disability."



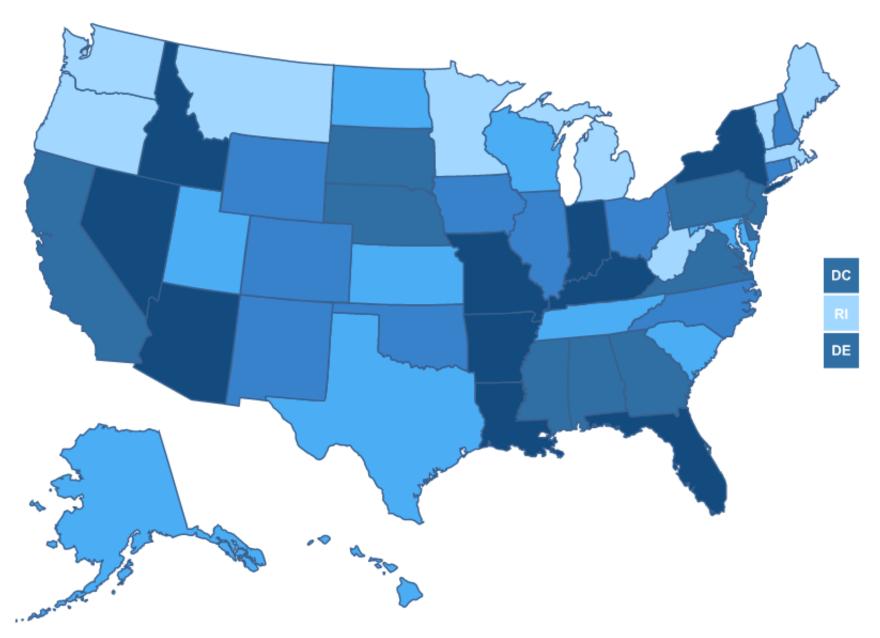
Developmental screening rates at about 25.4% of children in California.

Developmental Screening by State 2021



Percentage of children ages 9-35 months whose parent completed a standardized developmental

screening tool in the past 12 months (2-year estimate)



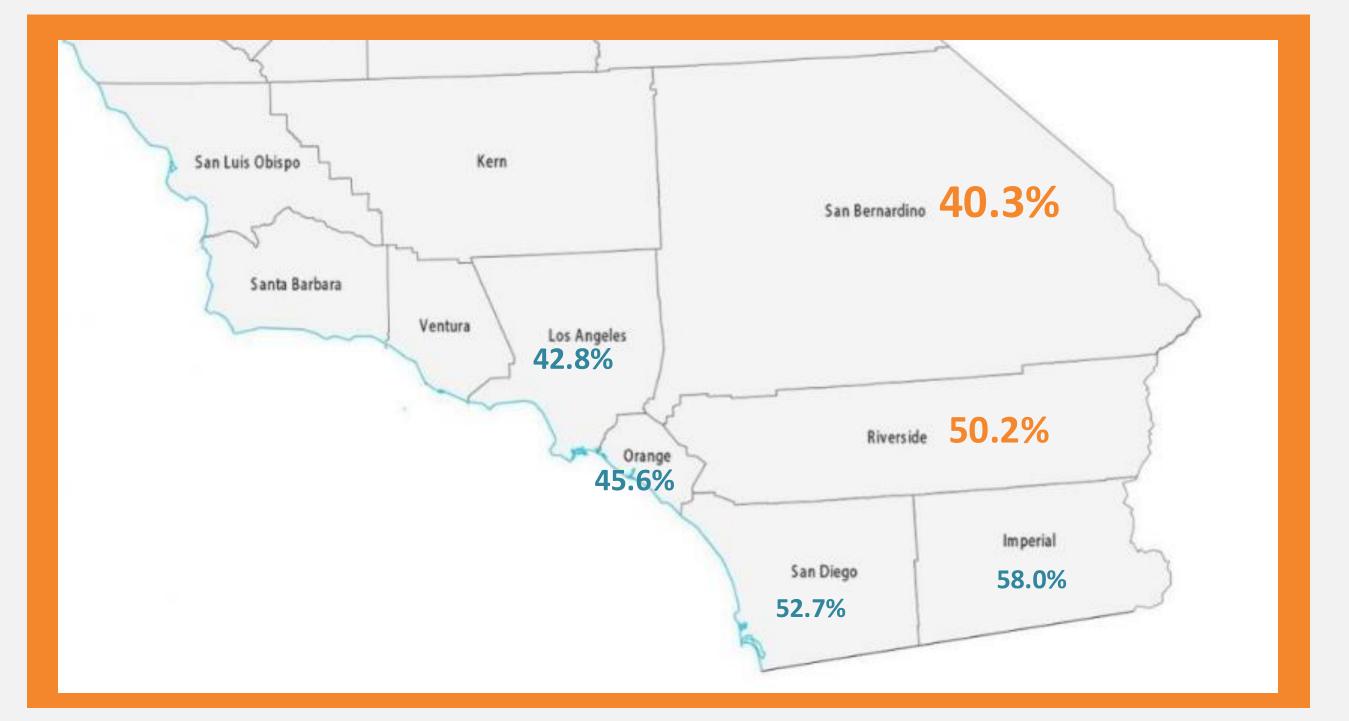
Data from National Survey of Children's Health, U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB), 2020-2021

Top States	Rank	Value
Oregon	1	50.6%
Maine	2	49.0%
Minnesota	3	48.7%
Your State	Rank	Value
Wyoming	30	34.6%
California, Virginia	31	34.4%
Mississippi	33	34.1%
Bottom States	Rank	Value
Florida	48	20.1%
Indiana	49	19.2%
Arizona	50	18.9%

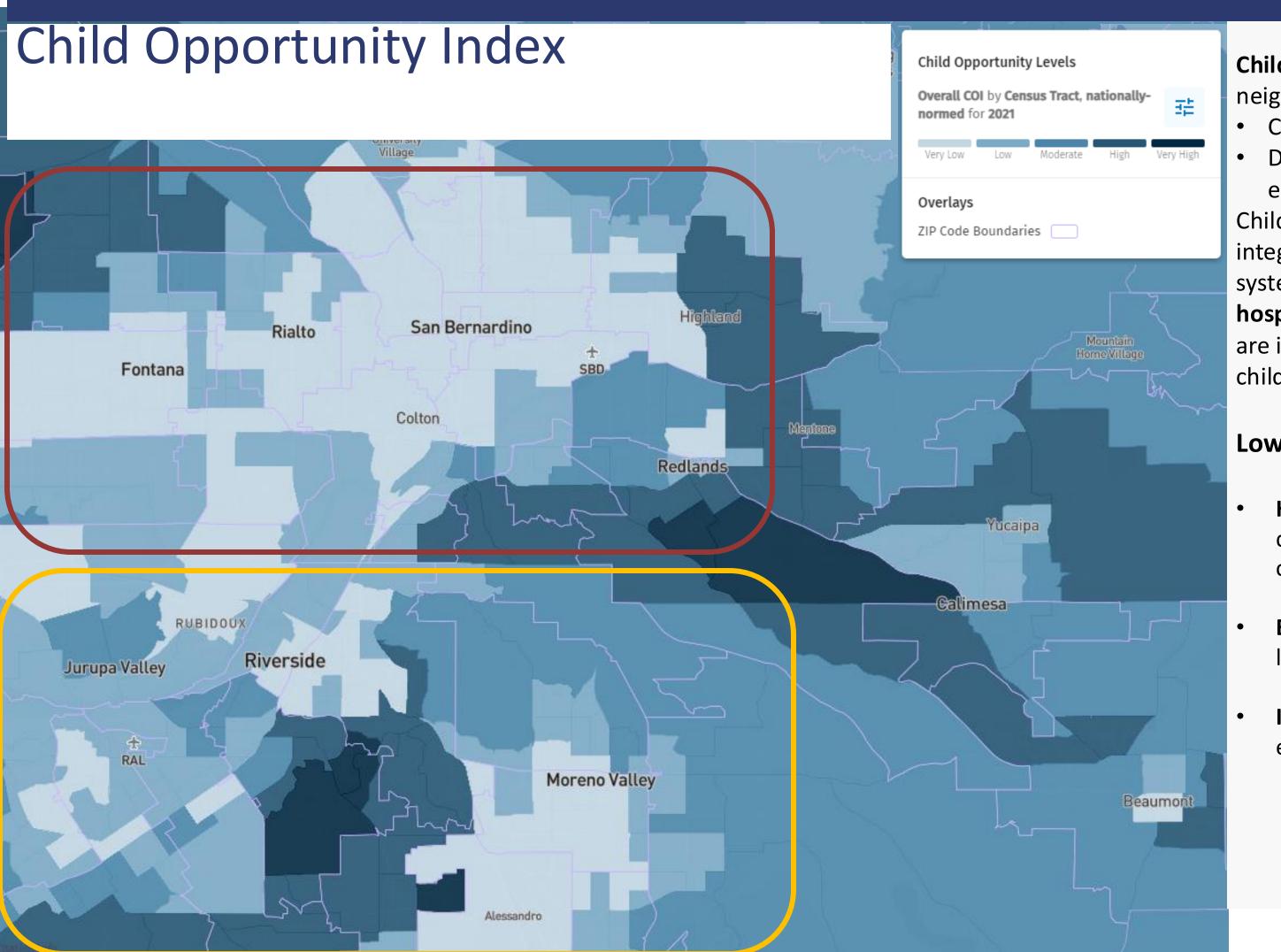




Children Who Have Received a Developmental Screening



All Counties in California 48.1%



Child Opportunity Index (COI) addresses neighborhoods:

- Census Track including 29 identifiers
- Domains of education, health, & environment, social and economic.

Children's Hospital Association has integrated COI into its pediatric health system (PHIS) which is **49 children's** hospital's health research. Neighborhoods are important fact in inequities and children's healthcare utilization.

Low opportunity neighborhood:

- Health: Mortality 60% increase risk for death of a caregiver; 40% higher risk for child mortality
- **Education**: Readiness for Kindergarten & less likely to graduate high school
- Influences adult outcomes: earnings & educational attainment

Making Sense of Regional Differences

San Bernardino County

- Higher rate of poverty
- More healthcare providers & resources
 - Growing at 0.7% per year

Riverside County

- Higher median income & larger population
- Less healthcare providers & resources
 - Fastest growing county in California (2.3%)

Estimated ~200,000 Children 0-5 in the Inland Empire

HMGIE estimates for 0-8 including all children ~400,000





- Increase screening to in meet statewide goals.
- Connect providers in different systems:
 - Screenings should not disconnect children from pediatric providers.
- Parents & Caregivers need a supportive Access Center
 - Screening, navigation, and resourcing.
- Be a longitudinal safety-net for families of children ages 0-8.



National Program – Local Implementation



Developmental screening advocacy & outreach System building & multisector partner integration Children 0-8 – **31 States**



CA is a "statewide system"
First 5 Association organizing entity
Children 0-5 – **31 Counties**



Regional, only dual-county HMG
Children's Hospital Operated
Developmental Screening Platform (EPIC) – coordinated
medical & educational providers

By age 5, all children are kindergarten ready.

National Program Affiliates & Partners

As a system-building model, HMG helps integrate evidence-based programs and promising innovations into state maternal-early childhood sectors to make the best use of existing resources, diffuse best practices, and foster optimal child and family outcomes.





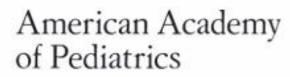














DEDICATED TO THE HEALTH OF ALL CHILDREN®

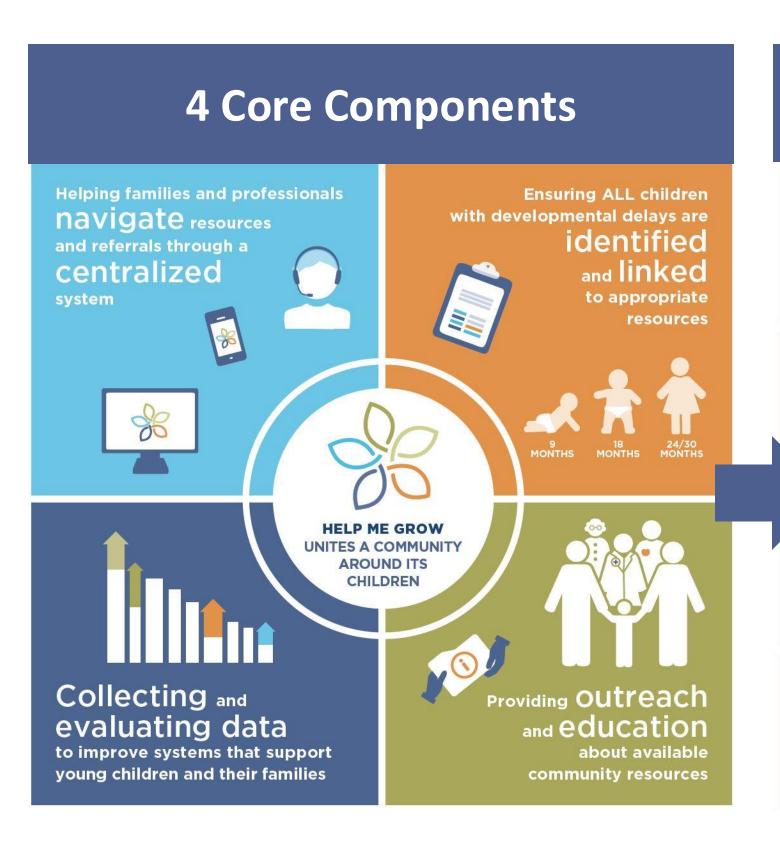








Help Me Grow Model



16 Key Activities

- Specialized child development line
- Linkage and follow-up
- Researching resources
- Real-time directory maintenance
- Engaged community partners
- Networking
- Community events and trainings
- Marketing
- Physician champion
- Training on surveillance and screening
- Training on referral and linkage
- Closing the feedback loop
- Data monitoring
- Sharing data across partners
- Continuous quality improvement
- · Community change through data

Inland Empire First 5 Goals

- Enroll 10,000 new children in community-facing screening platform.
- Sustainability: new income streams for services.

Developmental Delay & Risk

Why Developmental Screening Matters

1-in 4-children, or about 25% of children, are at-risk for moderate-to-severe developmental delay before age 5.



1-in-6 children, or about 15% of children, are at-risk for severe developmental delay before age 5.



Emotional/Social

Communication

Cognitive

Fine Motor

Gross Motor

HMGIE Services

HMGIE Community Platform

Engagement:

Quick Screening Access

Longitudinal Screening:

One-time registration of child Automated screenings Parent Engagement (MyChart) Electronic referral to HMGIE Close-the-loop with providers

Provider Support:

Platform Options
Parent engagement strategies

Children 0-5 & up to 8

Physician Providers

Early Child Education Providers Parents & Guardians

Community:
Outreach &
System
Building

Parent Access Center

Parent Follow-up to Screenings: Developmental (21), Emotional (9), Social determinants of health

Parent Support:

- 30 days/Engagement
- Linkage & Navigation: All systems of care & resourcing
- Information:Developmental Education
- Support: Parent mentoring



"No Wrong Door" to HMGIE

Quick Link Access to Screening for Parents

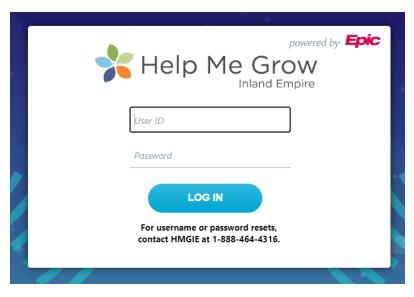




Parents & Caregivers and Providers

1-866-464-4316 Monday — Friday, 8am — 5pm

HMGIE
Screening
Platform for
Community
Partner
Sites





info@HelpMeGrowlE.org



909-558-3935

Direct
Pediatrician
Referral
LLUH, SAC,
RUHS

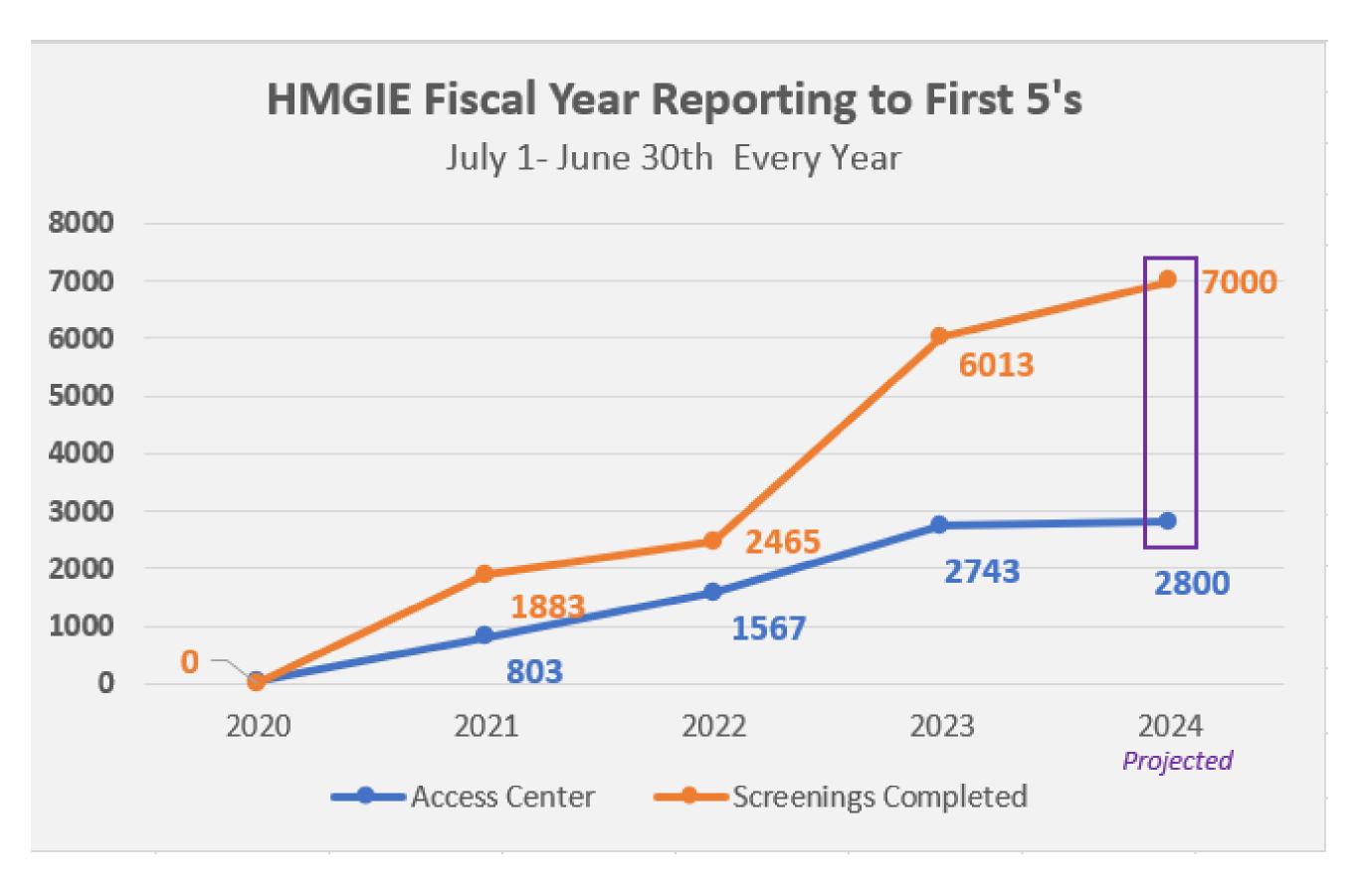






HMGIE is a regional safety-net for families with children 0-5, providing developmental screening & SDOH resourcing in our engagements as well as support for families with children up to age 8.

HMGIE-Service Trends

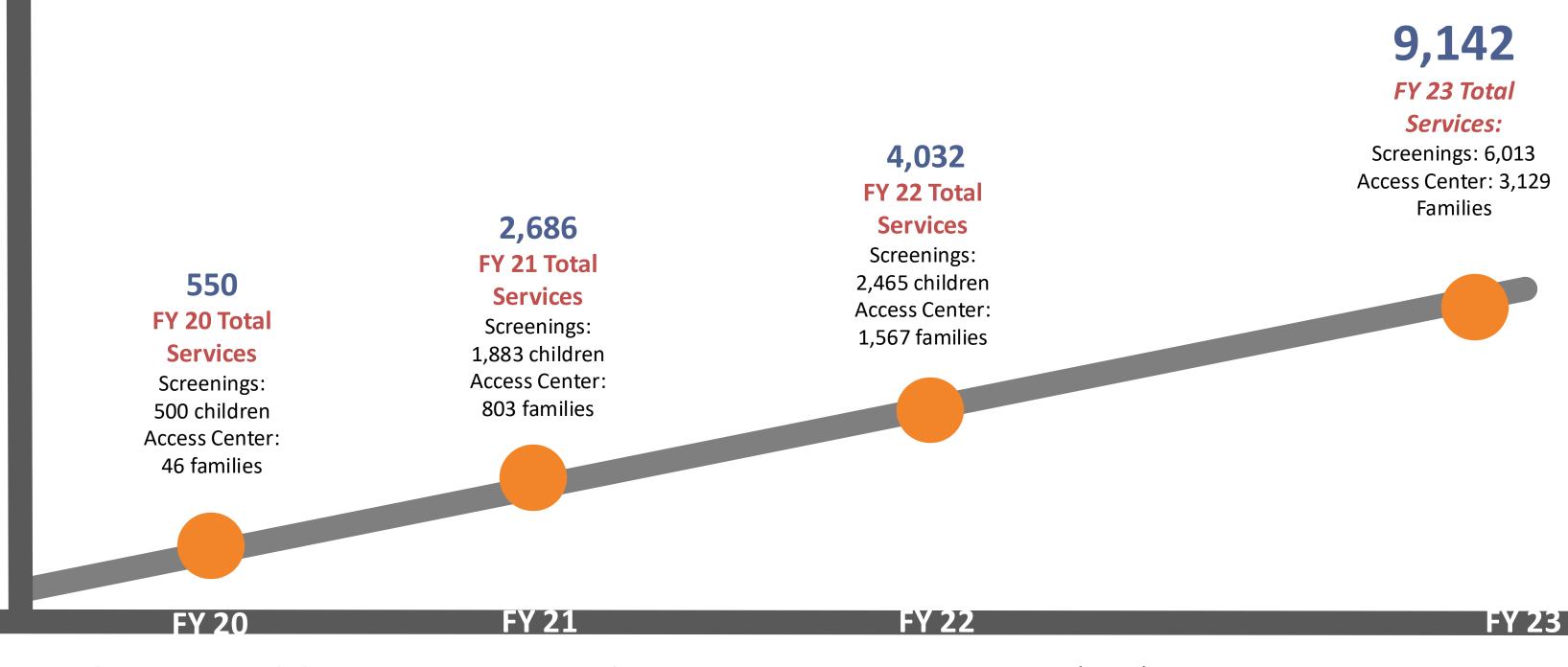


Since 2021

17,500 Children Screened

8,000 Children
(Families) served
by HMGIE
Access Center

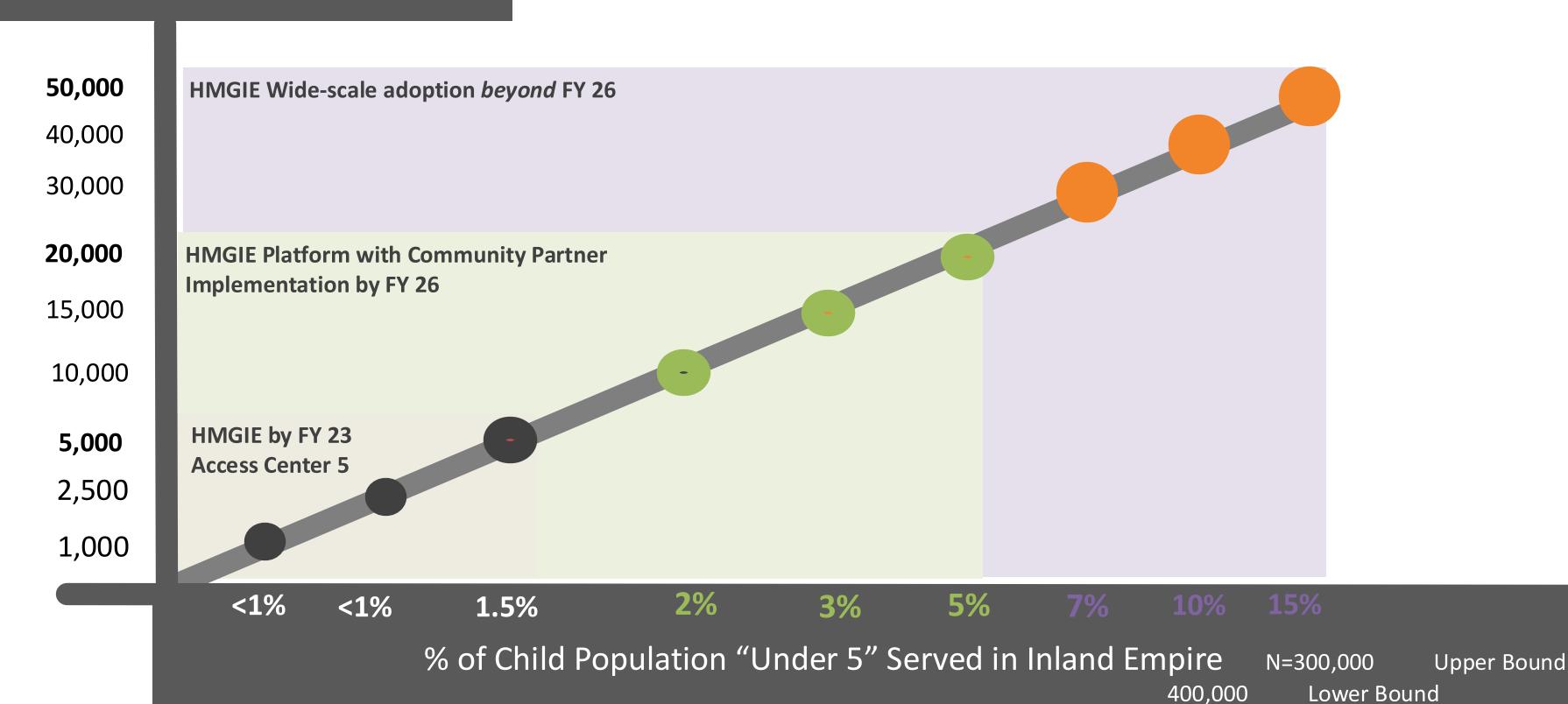
Impact – Service Provision Growth



Total Services = Children Screened + Family engagements in Access Center (CAP)

Opportunity for Inland Empire by Population Impact Rate

Unique Children in HMGIE Platform At Least 1 completed screening/year



State & National Impact

CA represents 21% of <u>National</u> HMG population (2022).

(n=32,283 of 155,000)

HMGIE served 11.6% of the families who contacted a Help Me Grow in California in 2022.

(n=3,773 of 32,630 total)

HMGIE served 10.2% of the children served by

Help Me Grow's in California in 2022.

(n=3,308 of 32,283 total)

Over the next 3-4 years
HMGIE has potential to
significantly impact CA
statewide screening efforts &
national ranking.



FY 25 Strategy

Quick to Screening



Access Center Engagement Follow-up Call



Enroll in Portal Likelihood is 80%



Help Me Grow Inland Empire supports families with children ages 0-8 with access to the following resources:



Developmental Screening



Parenting Resources



Food Resources



Baby & Toddler Essentials



Health Care Resources



Hours of Operation Monday-Friday 8:00 am to 5:00 pm

FREE developmental and community resources





Scan to complete a **FREE** developmental screening for your 0-5 year old child!



Help Me Grow Inland Empire is made possible by a joint investment from First 5 San Bernardino and First 5 Riverside, in partnership with Loma Linda University Children's Health.





Gross Motor

Fine Motor

Emotional/Social

Feelings Fox

Bouncing Bunny

Cognitive





Communication





d m.Development





Social & Emotional

0-2 Months Old

Smile at your baby all day, especially when diapering, bathing, or feeding. Give him little nose kisses. In the first few weeks, your baby's smile is mostly a reflex, but soon he will smile back at you!





Call us at 1-888-464-4316 for FREE developmental screening and support!

"No Wrong Door" to HMGIE

Quick Link Access to Screening for Parents

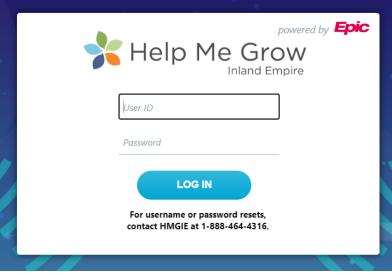




Parents & Caregivers and Providers

1-866-464-4316 Monday – Friday, 8am – 5pm

HMGIE
Screening
Platform for
Community
Partner
Sites



Direct
Pediatrician
Referral
LLUH, SAC,
RUHS







info@HelpMeGrowlE.org



909-558-3935



HMGIE is a regional safety-net for families with children 0-5, providing developmental screening & SDOH resourcing in our engagements as well as support for families with children up to age 8.

2.1.1

Inland SoCal 211+

IE VIBRANT HEALTH FORUM



Trusted Messengers in Action



HOPE through HOUSING



Sandra Bowers
IE Regional Director
Hope through Housing Foundation



Our Mission... Transforming Lives & Communities

Hope Through Housing is dedicated to breaking the cycle of generational poverty by implementing programs that empower individuals and change communities.

PHILOSOPHY

- Hope Through Housing believes that affordable housing can be a platform for transformational change at the individual and neighborhood levels.
- For the children in these households, this economic and social stability secures a haven for them in which they learn and grow and gives them a better chance of succeeding in school and beyond and of breaking the cycle of generational poverty.
- At the neighborhood level, affordable housing sites can be hubs of community revitalization.
- At the community level, providing programs that bring transformation in collaboration with our local partners like you!





4 Resident Focus Service Pillars of HOPE through Housing Foundation

















Helping Children and Teens Achieve Success

Creating Economic Mobility for Families Maintaining Senior Health and Wellness

Promoting Independence and Stability







Some challenges we have experienced:

Lack of attendance from residents.

Local partners who need a specific attendance amount to come to the table. Example: need 15 or more in attendance.

Funding to expand programming.



Planning innovative events for communities as we collaborate with our local Health partners to provide much needed resources and education to our residents. We have found this successful as attendance is high and residents are receptive and overall fun!! We have done: Immunization outreach/exercise classes/nutritional cooking classes/Diabetes awareness/Mental Health classes



THANK YOU

Strong from the Start: Early Childhood Wellness & Connections to Care







In Partnership With:





