

Study shows reduced Illinois Medicaid spending in pediatric population, limited savings from care coordination

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Researchers from the University of Illinois at Chicago are reporting in *JAMA Network Open* that Medicaid expenditures for children and young



adults have decreased in Illinois. However, a care coordination demonstration project did not further reduce the cost of care for kids participating in the program within its first year.

The project, known as CHECK, was established at UIC in 2014 to develop and test a comprehensive care coordination model for Medicaid-covered children and <u>young adults</u> with <u>chronic health conditions</u> living in Chicago, and their families. The trial included 6,259 patients with conditions like <u>sickle cell disease</u>, asthma, diabetes, seizure disorders and prematurity.

For the study, the researchers analyzed paid claims one year prior to participant enrollment in CHECK and one year after enrollment, from May 1, 2014 to April 30, 2017. They compared health care expenditures and utilization, including emergency room visits and hospitalizations, among patients enrolled in CHECK—3,126 individuals—to a control group of a similar size.

They saw a decrease in utilization among CHECK-enrolled patients—inpatient hospitalizations decreased by 30.9% and <u>emergency room visits</u> by 18%—but the reduction was similar in the control group.

The mean cost of care for CHECK patients dropped to \$1,341, from \$1,633. The reduction was nearly identical in the <u>control group</u> patients, for whom the mean cost of care dropped to \$1,413, from \$1,703. The difference was \$292 and \$290, respectively.

"Though the first year of CHECK did not appear to impact Medicaid expenditures, we know that care coordination programs for children have many intangible benefits to participants and family members that may take years to appreciate and fully measure," said Dr. Rachel Caskey, UIC associate professor of medicine and pediatrics at the College of Medicine and first author of the study.



Dr. Benjamin Van Voorhees, CHECK project director and senior author of the study, said that the data likely was affected by overall changes in Illinois' Medicaid program during the study period.

"During the year of this study, newly introduced managed Medicaid plans likely played a role in reductions of <u>health care expenditures</u> in both groups, making the comparison between the two groups more complicated than anticipated," said Van Voorhees, professor and head of pediatrics.

Caskey said it simply may be too soon to see a reduction in expenditures.

"One year is likely not long enough to fully appreciate the impact of CHECK. As we continue analyzing the data, we may find additional cost reductions the longer children are enrolled in the program. Or, we may find that there are other benefits," Caskey said.

In addition to the program's effect on health care cost and utilization, the CHECK program also seeks to reduce school absenteeism and increase family engagement in the health care process. Data on these fronts are forthcoming.

Van Voorhees said the CHECK program will continue to provide care coordination to an increasingly large group of patients —- including adults—covered by Medicaid.

"We set out to demonstrate the feasibility of a large-scale care coordination model for a pediatric population, and by blending use of community health workers and social work professionals with health information technology, we've accomplished that," Van Voorhees said.

"We have a lot to learn from this model, and while this data is not what we expected, it will help us refine the program," he said. "CHECK aims



to address very complex challenges in our <u>health</u> care system by removing the barriers many families experience when it comes to accessing or benefitting fully from care. Cost is an important part of the CHECK story, but it is not its complete story. This study gets us a step closer to understanding where and how care coordination is most effective."

More information: Rachel Caskey et al, Effect of Comprehensive Care Coordination on Medicaid Expenditures Compared With Usual Care Among Children and Youth With Chronic Disease, *JAMA Network Open* (2019). DOI: 10.1001/jamanetworkopen.2019.12604

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