

Adaptive leadership through healthcare reform: Implications for MCH populations in a changing landscape of healthcare policy and systems

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National MCH Workforce Development Center

The National Maternal and Child Health Workforce Development Center (the Center) at The University of North Carolina at Chapel Hill offers state and territorial Title V leaders training, collaborative learning, coaching and consultation in implementing health reform using a variety of learning platforms. The Center uses cutting edge tools and techniques to move the maternal and child health field one step further, leveraging health transformation opportunities to improve the health of women and children.

Building on the central role of Title V programs in ensuring the health of the MCH population, the Center focuses on four key themes of the Affordable Care Act (ACA) and health transformation:



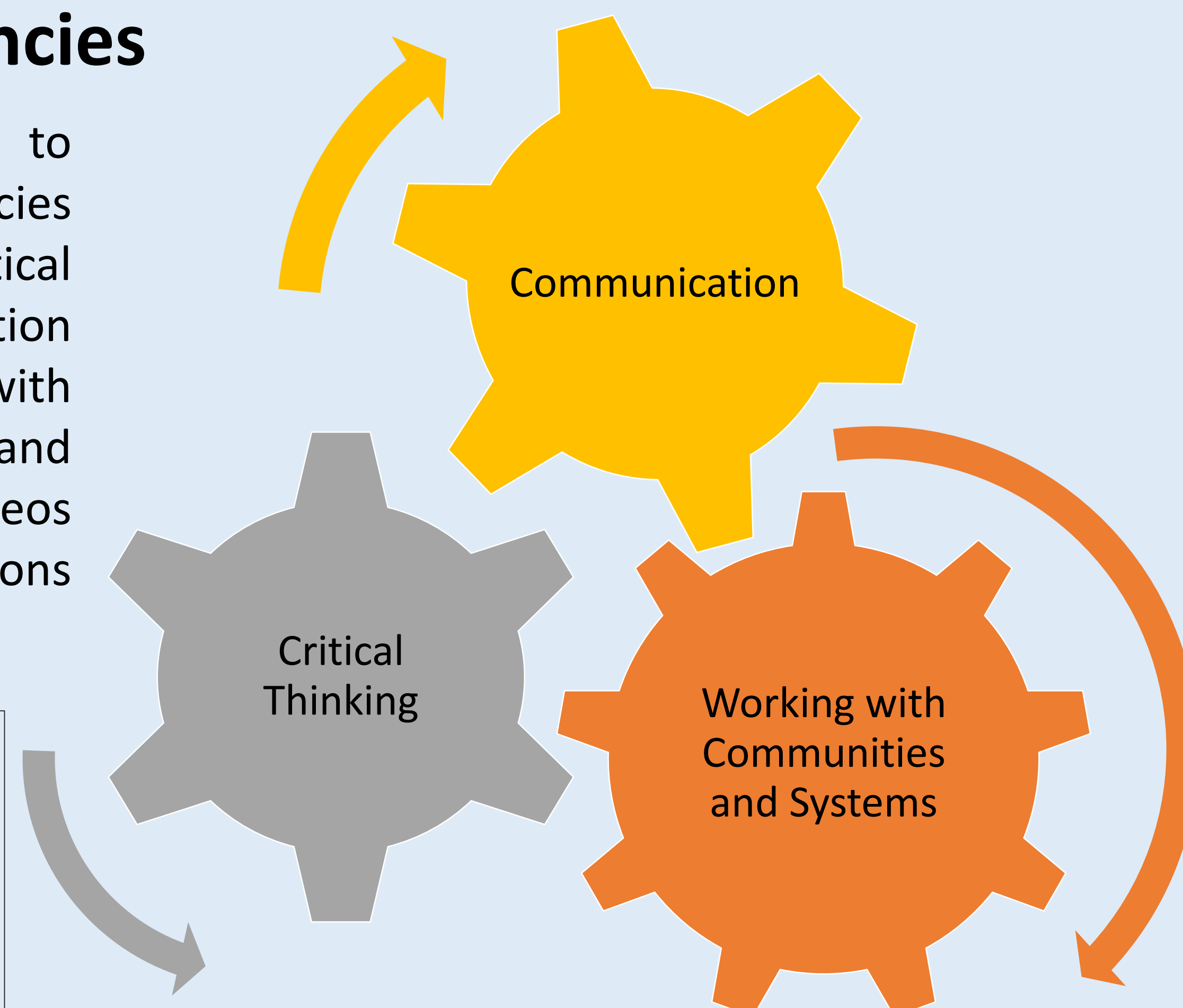
MHCH 890: Applied Methods for Health Transformation Implementation in MCH

MHCH 890 is an interdisciplinary course facilitated by the Center that has a specific focus on healthcare transformation and promoting adaptive

leadership skills in MCH professionals to address the changing landscape of health care systems to respond to the needs of women, children and families in a variety of contexts. The course included participants from LEND programs, participants attending Maternal and Child Health affiliated schools of public health, and participants with current links to state Title V programs. Key topical areas included access to care for Maternal and Child Health populations including Children and Youth with Special Healthcare Needs (CYSHCN); Applied Implementation and Evidence-Based Practice; Adaptive Leadership and Systems Leadership; and System Behavior and System Change.

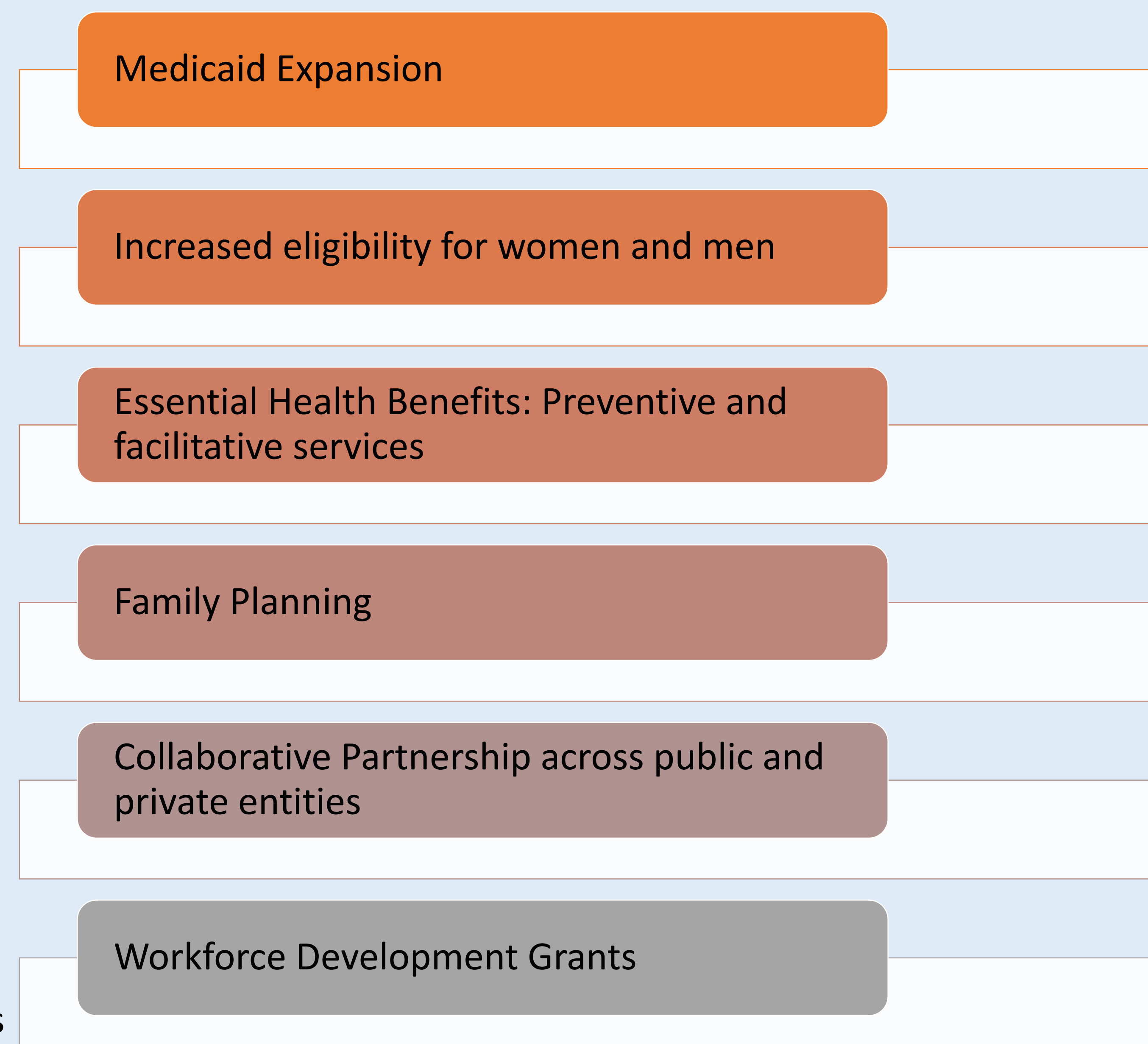
Linkages to MCH Competencies

Course modules were directly relevant to several of the MCH Leadership Competencies including 1) MCH Knowledge Base, 2) Critical Thinking, 3) Communication, 4) Negotiation and Conflict Resolution, 5) Working with Communities and Systems, and 6) Policy and Advocacy. Weekly readings and videos emphasized these competencies and lessons about leadership and systems change.



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Healthcare Transformation for MCH



State Title V Roles in Health Reform: A Title V State Access to Care Assessment Tool

The Affordable Care Act (ACA) and other health reforms in states transform the health system landscape and address population health. However, there have been differences in how states have responded to the new legislation. As some states embraced the ACA and others proceeded with their own reforms to transform the health system, it is important for State Title V MCH and CYSHCN programs to identify and address the implications, challenges, and opportunities that health reforms present to achieve the mission and goals of Title V.

A state assessment tool was designed by the Association of Maternal and Child Health Programs (AMCHP) to help state Title V MCH & CYSHCN programs assess state capacity to influence some key areas affecting their populations and services, to understand where gaps may exist, and to identify places where opportunities may exist to leverage the law.

The tool includes key questions to assess capacity and offers resources in five areas: 1) Eligibility and Enrollment, 2) Coverage and Insurance, Benefits, 3) Provider Networks and Network Adequacy, 4) Continuity of Care, and 5) Partnerships between Title V, Medicaid, CHIP, Marketplaces and other key stakeholders.

Assessment Tool Key Areas	Georgia	MARYLAND
Medicaid Expansion, Eligibility, & Enrollment	No Medicaid expansion at this time. Uses Express Lane Eligibility for Medicaid and CHIP program.	Expanded Medicaid to children with family income up to 322% of poverty level Medicaid eligibility expanded coverage to low-income adults up to 138% poverty level
Insurance Coverage/ Essential Health Benefits	Blue Cross Blue Shield Healthcare Plan of GA as essential health benefit benchmark Federal employee dental and vision plan	State Employee plan as essential health benefit benchmark Federal employee dental and vision plan
Provider Networks and Network Adequacy	No readily available, accessible information exists on Essential Community Providers Receipt of 2013 HRSA State Health Care Workforce Development Grants	Does not have market-wide network adequacy standards HMOs are required to ensure all covered services
Continuity of Care	No automatic/administrative renewal mechanism for Medicaid or CHIP, but 12 month continuous eligibility	Mandated Continuity of Care committee
Partnerships Among Stakeholders	DPH's key partners include hospitals, Medicaid, local health departments, physicians, academic research centers and community based programs	The MCH program works with state and local agencies to ensure coordination for all women and children, particularly those with limited access to care.