NC InCK:
Kindergarten Readiness & Pediatric Primary Care

NC InCK
NC INTEGRATED CARE FOR KIDS

Duke UNIVERSITY

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
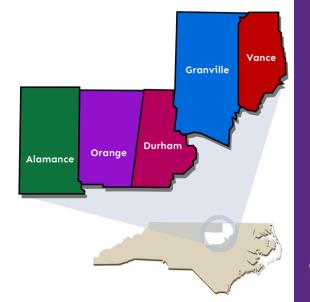
THE UNIVERSITY of NORTH CAROLINA at CHAPEL HILL

NC InCK: A General Overview

- North Carolina Integrated Care for Kids (NC InCK) is a model serving children:
  - ✓ Medicaid or CHIP for insurance
  - ✓ Receive Medicaid in one of our 5 NC counties
  - ✓ Ages: Birth through 20 years

- NC InCK services are provided based on where the child goes for their Primary Care.

- Lead organizations: Duke, UNC, NCDHHS

- Services launched in 2022 and will go through 2026

- Funder: Centers for Medicare & Medicaid Innovation Office

![NC InCK Logo] NC InCK — NC INTEGRATED CARE FOR KIDS

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InCK Core Child Services

- Physical and Behavioral Health
- Early care & education
- Housing
- Food
- Schools
- Title V- Maternal and Child Health
- Child welfare
- Mobile Crisis Response Services
- Juvenile Justice
- Legal Services

Map labels: Alamance, Orange, Durham, Granville, Vance

Supporting Whole Child & Family Health

1 UNDERSTAND NEEDS

More holistically understand the needs of a child and their family

2 SUPPORT AND BRIDGE SERVICES

Wrapping systems around children and their families, rather than asking people to wrap around systems

3 FOCUS HEALTH CARE INVESTMENTS

Innovate how we invest resources into what matters most for children and their families

InCK's Early Thinking on Kindergarten Readiness

Primary Care + Kindergarten Readiness:

- Using performance payments to incentivize key activities in a primary care setting that improve children's well-being

- Broadening health care sector's understanding of the link between education outcomes and long-term health and well-being

- Can actions taken in a primary care setting with 0-5 year olds positively influence a child's readiness for Kindergarten?

- Does rewarding these K-Readiness activities in primary care through performance payments lead to increased implementation and coding of these actions?

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Investing in what matters to children and families

NC InCK Alternative Payment Model (APM) Invests in Health and Well-Being

- NC InCK worked with Medicaid, MCOs and health systems to design a payment model that **links incentive payments to more meaningful measures of child well-being**

- **Goal**: Increase resourcing and flexibility for practices to support more whole child care approaches

NC InCK APM Performance Measures
Kindergarten Readiness Promotion Bundle
Screening for Food Security and Housing Instability
Completion of Shared Action Plan
Screening for Clinical Depression & Follow-Up
Rate of Emergency Dept Visits
Equity: Reduction in disparity in infant well child visits
Total Cost of Care

Cross-sector child well-being metrics

Health care utilization metrics

Performance Payment Thresholds for InCK

	Tier 1 (50% quality payment)	Tier 2 (75% quality payment)	Tier 3 (100% quality payment)
K Readiness Bundle	Documented on 20% panel	Documented on 40% panel	Documented on at least 60% panel
Food Insecurity and Housing Stability Screening	Screened 20% panel	Screened 40% panel	Screened at least 60% panel
Shared Action Plan for children in SIL-2 and SIL-3	Plan documented for 5% SIL 2 and 10% SIL3	Plan documented for 10% SIL 2 and 20% SIL3	Plan documented for 10% SIL 2 and 30% SIL3
Screening for Clinical Depression & Follow-Up Plan	Documented on 20% panel	Documented on 40% panel	Documented on at least 60% panel
Ambulatory Care: ED visits	Stable compared to 2-yr historical baseline	2.5% lower than 2-yr historical baseline	5% lower than 2-yr historical baseline
Well-Child Visits in First 30 Months (Disparity Measure)	Increase Black/African American rate by 5% x 1 year and overall rate is stable (+/- 1%) or improving	Increase Black/African American rate by 10% x 1 year and overall rate is stable (+/- 1%) or improving	Increase Black/African American rate by 15% x 1 year and overall rate is stable (+/- 1%) or improving

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Intervention: Kindergarten Readiness Promotion Bundle

Primary Care Practices in InCK's Payment Model will conduct the following activities and submit non-billable codes to NC Medicaid for performance payments

Well visit

Office-Based Literacy Promotion

Developmental screening

Social emotional screening

PreK referral

Parenting support programs

Early intervention referral

Early childhood mental health services

Community-based literacy programs

- **Goal**: Encourage and give providers credit for taking these actions
- **Incentive**: Documentation via a new Medicaid administrative code linked to an incentive payment in NC InCK payment model

Outcome of Interest: Early Learning Inventory

- **Source:** NC Department of Public Instruction

- **Measure:** Kindergarten readiness through a national assessment called the Early Learning Inventory (ELI).

- **How the ELI works:** Assessment is completed by teachers within the first 60 days of kindergarten.

- **14 Progressions of Kindergarten Readiness**:

  - Manages feelings, follows limits and expectations, responds to emotional cues, interacts with peers, solves social problems, uses fingers and hands, follows directions, tells about another time or place, attends and engages, notices and discriminates rhyme, notices and discriminates alliteration, counts, quantifies, connects numerals with quantities.

Research Question: Assessing Impact of Kindergarten Readiness Promotion Bundle on Kindergarten Readiness

Aims	Hypotheses
Aim 1: To examine the effect of receipt of the K-Readiness Bundle on a binary indicator of school readiness as measured by the NC Early Learning Inventory (ELI).	Hypothesis 1: Receipt of the K-Readiness Bundle will be positively associated with scoring as school ready on the ELI.
Aim 2: To examine the effect of receipt of the K-Readiness Bundle on binary indicators of meeting or exceeding expectations in the 14 ELI progressions as measured by the NC Early Learning Inventory (ELI).	Hypothesis 2: Receipt of the K-Readiness Bundle will be positively associated with scoring as meeting or exceeding expectation in at least 7 of the 14 ELI progressions.

Research Team

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