



# 2014 PRIORITY PEDIATRIC POLICY, PROGRAM, & PRACTICE ISSUES

NYS American Academy of Pediatrics, District II

WORKING TO SUPPORT AND ENHANCE CHILDREN'S HEALTH AND WELL-BEING

## NYS AAP SUPPORTS: Ensuring Children's Access to High Quality Health Care

### Bright Futures Medical Home for All Children

We support maintaining the core AAP Bright Futures model benefit package for all health insurance available to the children and families of New York. Health insurance products subsidized through Medicaid or Child Health Plus, purchased through the NY Health Exchange, or available as a benefit of employment or employer based ERISA must all provide the Bright Futures benefits for all children. Bright Futures is a comprehensive, culturally sensitive and cost effective model of preventive and primary care for infants, children and adolescents. It is the standard of care for the child's Medical Home. All children across the state deserve access to a Bright Futures Medical Home.

### Early Intervention Program

We support the ongoing reforms to New York State's Early Intervention program with caution. Our position has been and continues to be that implementation of reforms going forward must include assurances that

no child's access to needed early intervention services will be delayed or denied due to reform.

Economically and culturally challenged communities must be assured of continued access to quality services during this time of change.

The reforms to the New York State's Early Intervention Program have the potential to strengthen the program and ensure that covered services are paid for by insurers when appropriate. The reforms also protect children and families, making sure that they have access to needed services no matter who is identified as the payer.

We support all initiatives that will help create a high quality, level playing field so that parents will be assured easy access to the quality services to which they and their children are entitled. We also support the design of a quality assessment and outcomes based process for services to high need at risk infants and toddlers.

The NYS AAP stands ready to work with the State Department of Health,

county health departments, early intervention providers, insurers, and the families and infants and toddlers we all share, to design, implement and support accessible, high quality, family based, early intervention services that are part of the pediatric health and wellness services integral to a child's "Medical Home." We believe that pediatricians have a key role to play in the assessment of the need for and the provision of appropriate developmental services to high risk infants and toddlers.

The NYS AAP is committed to assuring that high quality, accessible and appropriate early intervention services are available to children who need them.

### Integrating Children's Mental Health into Pediatric Primary Care

We have been working for several years with the State Department of Health and the State Department of Mental Health training primary care pediatricians in the assessment,

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## **Integrating Children's Mental Health into Pediatric Primary Care** *(continued)*

treatment and medication management for children with mild to moderate mental health needs. To date we have successfully trained hundreds of pediatricians, but our state and our insurers have not been clear in recognizing the need for these services in the primary care setting, and universally paying for these services. Providing high quality children's mental health services in the pediatric primary care setting can and does go a long way to offering children and families the treatment, medication management, and support they need in a more normalized, more cost effective setting.

We urge NYS to recognize the importance of this vital service in pediatric primary care and find a standardized way for both subsidized and commercial insurers to provide adequate payment to pediatricians who offer these services.

## **Assuring Quality Accessible Pediatric Care, Including Specialty and Sub-Specialty Care, for All Health Insurance Networks**

As health insurers merge and Managed Care expands in both public and private insurance markets it is imperative that the state entities in the Department of Health and Department of Financial Services

responsible for access and quality in health insurance coverage assure that all children have access to pediatric specialty and subspecialty care when needed. To do less would significantly imperil the health outcomes for many of these medically needy children.

## **Maintain and Expand Children's Access to Timely Immunization Reflecting the AAP/ACIP Immunization Schedule Recommendations**

We support all legislation, public policy initiatives and financial investments to support children and teens being immunized in their Medical Home.

# **NYS AAP SUPPORTS: Children's Well-being**

## **Raise the Age to 18**

New York is only one of two states that still allow 16 year olds to be tried in Adult Criminal Courts as adults. The current state legal framework defies the latest science on brain development and the maturation process of social emotional awareness. This is the year for New York to raise the age from 16 to 18, to revise old law to reflect scientific reality.

It is past time that we recognize how irrational it is that we are trying adolescents as adults and yet these are same youngsters we protect against access to tobacco and cigarettes because we believe they

are not mature enough to make an informed decision about smoking and drinking. How can our political leaders believe that these young people, who clearly need special protections limiting their access to harmful substances, are adult enough to be tried as adults for crimes they committed as children. This is the year for New York to join 50 other states and raise the age of adult criminal responsibility to 18.

## **Universal High Quality Infant and Child Care, Pre-K and After School Programs**

All children and families need access

to high quality, safe and accessible care for their children while they are at work. We support the creation and support of Universal Pre-K. The evidence is abundant that Pre-K can and does level the playing field for children entering elementary school. It mitigates the reality that zip code is destiny.

But we also want to see significant investment in building high quality infant and child care. In addition, children need a safe place to learn and play after school, so their parents can be assured that they are safe until the family can be together after work for the evening hours.



## Accelerating Raising Minimum Wage to Better Address Child Poverty

We support accelerating the existing Minimum Wage legislation scale to \$9.00 an hour this year. New York's struggling families deserve to make a decent wage for a day's hard work. Parents need to be able to support their families from the wages they earn from full time work.

## Expanding Access to Nurse Family Partnership Programs Statewide to All Families Who Could Benefit, Using Medicaid Waiver Funds

The Nurse Family Partnership program is an evidence based program that helps new parents become better parents through the provision of parent education, nutritional counseling, child development education and supports

for the parent and the child. The program has demonstrated significantly positive outcomes for children and parents. The health and well-being of children whose families have access to Nurse Family Partnership programs is demonstratively better than the outcomes for similarly situated children whose families have not had access to the program. Nurse Family Partnership programs are a wise investment in children's ongoing health and well-being.

## NYS AAP SUPPORTS: A Healthy Environment for Children

### A Fracking Moratorium

We continue to be concerned about the potential negative impact of fracking on the health of children in areas where fracking may occur. Therefore we remain supportive of the most exhaustive scientific inquiry into the environmental impact of the fracking industry on the air, soil and water in communities across the state. The fracking industry creates pressures not only on the area where they set up drills and wells, but also on all surrounding areas for air, water and soil pollution. There are also concerns about transportation of the gas produced as well as the transportation and storage of hazardous by-products of the drilling process.

### Centers of Excellence in Children's Environmental Health

We support the existing Centers of Excellence in Children's

Environmental Health and encourage the creation and support of 5 more centers to fully serve the needs of children, families and the pediatric community across the state.

We also support the Green Agenda of the Just Green Partnership including legislation and regulation supporting the "greening" of schools and child care centers, the reduction of toxic substances in children's toys, food and clothing and the complete disclosure of all pesticides used in lawn and garden care. We are opposed to any loosening of current environmental protections.

### Interstate Chemicals Clearinghouse (IC2)

To effectively and efficiently implement the Child Products Act, New York contributes funds to and provides leadership in this collaborative effort among ten states to compile and share information about chemical

hazard and use, as well as availability of safer alternatives. The IC2 needs its own line item in the Environmental Protection Fund budget, instead of being included in funding for the New York State Pollution Prevention Institute.

### Fund Lead Poisoning through a Lead Paint Surcharge

Though children's blood-lead levels have dropped overall, many children in specific communities continue to be diagnosed with lead poisoning. At the same time, funding for lead poisoning prevention strategies has dropped off sharply. New York must restore funding to prevent further childhood lead poisoning and help children already affected, by instituting a 25¢ surcharge on paint manufacturers for each gallon of paint sold in the state – as Maine has done.



# NYS AAP OPPOSES

## Pediatric Care in Retail Based Clinics

The NYS AAP strongly opposes the expansion and support of retail-based clinics (RBCs) in New York State. We do not believe that RBC's, or "limited service clinics" as they are called in this year's Article 7 legislation, can be an appropriate source of medical care for infants, children, and adolescents.

We strongly discourage their use by families with children because the AAP is committed to the Medical Home model of care. The Medical Home provides accessible, family-centered, comprehensive, continuous, coordinated, compassionate, and culturally effective care for which the pediatrician and the family share responsibility.

Given that the RBC is not a medical home model; the NYS AAP is particularly concerned with the effects of the following attributes of an RBC on health care for children and adolescents:

- Fragmentation of care
- Possible negative impacts on quality of care
- Provision of episodic care to children with special health care needs and chronic diseases, who may not be readily identifiable
- Lack of access to and maintenance of a complete, accessible, central health record that contains all pertinent patient information
- Use of tests for the purposes of diagnosis without proper follow-up

- Possible public health issues that could occur when patients with contagious diseases are in a commercial, retail environment with little or no isolation (e.g. fevers, rashes, mumps, measles, strep throat, etc.)

Seeing children with "minor" conditions, as will often be the case in an RBC, can be misleading and problematic. Many pediatricians use the opportunity of seeing a child for something minor to address issues in the family, discuss any problems with obesity or mental health issues, catch up on immunizations, identify undetected illness, and continue strengthening the relationship with the child and family. These visits are important and provide an opportunity to work with patients and families to deal with a variety of other issues. They are grouped as "anticipatory guidance." Losing the opportunity for anticipatory guidance weakens the important role of pediatrics in maintaining the health of all children, and working to strengthen the relationships within families and on behalf of the child patient.

Children are not just small adults; their health care needs are unique and the level of parental participation in that care is critically important. Without strict requirements that RBC's become part of a child's medical home network, the details of which are clearly absent from this legislation, we remain firmly opposed to expansion or support of RBC's in New York.

## Anti-Immunization Legislation or Policy

The NYS AAP strongly opposes any legislation or policy which reduces current immunization mandates for child care, school, sports and camp participation. Maintaining a statewide commitment to universal immunization is the only way to protect our children through the concept of herd immunity. The more people who are immunized the more people who are protected.

Epidemic is just a plane ride away as the recent measles outbreak indicates.

