

From: NASHP News <Newsletter@nashp.org>
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Subject: NASHP News: Surprise Billing Legislation Chart, Healthy Child Development Resource of the Month

Newsletter

July 26, 2016

[A New Chart Looks at Surprise Billing Legislation Passed](#)

As health care costs and consumer out-of-pocket expenses continue to rise, states are paying increasing attention to strategies that address consumer concerns. One issue of focus is the practice of balance or “surprise billing,” the process by which patients receive higher than expected bills from providers, often the result of receiving care out-of-network. A new NASHP [chart](#) provides an update on an April [brief](#) on the topic and summarizes enacted state legislation.

Healthy Child Development State Resource Center's 'Resource of the Month'!

Each month, NASHP's [Healthy Child Development State Resource Center](#) features a resource highlighting the role of screening, referral and care coordination for healthy child development.

This month's feature is the [Oregon's Health System Transformation: CCO Metrics 2015 Final report](#) that was released in June.

The Oregon Health Authority publishes quality metrics from Coordinated Care Organizations (CCOs)—accountable care entities intended to improve quality of care and lower costs for Medicaid enrollees. The state's CCOs report on and are incentivized to improve the percent of children screened for risks of developmental, behavioral, and social delays using standardized tools within the first 36 months of life. The 2015 final report indicates a 28% increase in screening since 2014 and shows improvement across races and ethnicities between 2014 and 2015. All CCOs met or exceeded the state's improvement benchmark.

If you have a resource you'd like NASHP to post in the Resource Center or feature in the future, please email nmention@nashp.org. The Healthy Child Development State Resource Center is supported by the David and Lucile Packard Foundation.

New At-a-Glance Chart and Pediatric Medical Home Profile: Tennessee

In collaboration with the National Center for Medical Home Implementation (NCMHI), NASHP is creating a series of [state profiles](#) describing state initiatives advancing the pediatric medical home model. The recently released [Tennessee profile](#) highlights the use of the State Innovation Model (SIM) testing grant in partnership with the Tennessee chapter of the Tennessee Chapter of the American Academy of Pediatrics to advance the pediatric medical home model through education and training.

Within this collaboration, NASHP has also recently updated an "at-a-glance" table that provides an overview of pediatric medical home initiatives occurring through Medicaid and CHIP. These [profiles](#) and [at-a-glance table](#) are part of a formal partnership between NASHP and the National Center to exchange information and improve medical home access for children and youth in medically underserved populations.

Open Position: Project Director - Chronic & Vulnerable Populations Team

The National Academy for State Health Policy is seeking an individual to join our growing Chronic and Vulnerable Populations (CVP) policy team as a Project Director. The Project Director will lead day-to-day operations for at least one major initiative for NASHP, and will join additional project teams as a senior team member. The primary focus of this work will be on state healthcare delivery system reforms that improve care delivery for chronically ill and vulnerable populations. [For more information or to see more health policy jobs](#)

National Academy for State Health Policy

The National Academy for State Health Policy (NASHP) is an independent academy of state health policymakers who are dedicated to helping states achieve excellence in health policy and practice. A non-profit and non-partisan organization, NASHP provides a forum for constructive work across branches and agencies of state government on critical health policy issues. For more information visit www.nashp.org.

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