Bright Futures and Managed Care

On December 9, 1997, NIHCM sponsored a forum in Washington, D.C., focusing on “Managed Care and Child Health: Opportunities and Challenges.” More than 70 participants representing key stakeholders in children’s health issues—federal and state officials, child health experts and managed care executives—discussed two topics: the new State Children’s Health Insurance Program, and the development and implementation of Bright Futures. The morning session focused on children’s health insurance (see companion Action Brief No. 1B). This Brief summarizes the afternoon discussion on Bright Futures.

The Bright Futures project began as a partnership between the Health Resources and Services Administration and the Health Care Financing Administration to fund development of comprehensive health supervision guidelines that would meet the changing needs of children in today’s world. The Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents provides in one compendium comprehensive guidelines based on a contextual approach to health promotion and disease prevention for children.

Building Bright Futures represents the implementation phase of the Bright Futures project. It is a multi-year project aimed at fostering partnerships among families, communities and health professionals. The main goals of Building Bright Futures are to develop appropriate materials and tools, to disseminate those Bright Futures materials broadly, to train health professionals in the Bright Futures approach, and to provide families and communities with information on Bright Futures.

Under a cooperative agreement with the Maternal and Child Health Bureau, NIHCM is using a variety of methods to share information about Bright Futures and managed care. Our primary effort is sponsoring a series of forums at which interested parties can discuss key issues in promoting children’s health. This Brief provides a summary of the first session discussing Bright Futures with managed care organizations and other interested parties.

Bright Futures Speakers at the Dec. 1997 Forum

Keynote Presentation

Dr. Judith Palfrey, T. Berry Brazelton
Professor of Pediatrics at Harvard Medical School, Chair of Building Bright Futures

Panelists

Dr. Dawn Wood, Medical Director, Medi-Cal Programs, Blue Cross of California
Ms. Robin Foust, Health Management Corporation
Mr. Dave O’Brien, CEO, Gateway Health Plan
Dr. Kelly Kelleher, Staunton Professor of Pediatrics, Psychiatry and Health Services Administration, University of Pittsburgh, and Children’s Hospital of Pittsburgh
Dr. Robert Needelman, Assistant Professor of Pediatrics, Case Western Reserve University School of Medicine and the Rainbow Babies and Children’s Hospital of the University Hospitals of Cleveland

Bright Futures Overview

Dr. Judith Palfrey, Chair of Building Bright Futures, began her overview of Bright Futures by presenting statistics that clearly illustrate the need to do better in promoting children’s health.

The United States ranks a dismal 13th in the world in infant mortality. As Dr. Palfrey pointedly reminded us, “[the U.S.] shouldn’t be 13th in anything.” And the disparities in health outcomes among poor and non-poor are growing wider.

Our children also suffer the effects of violence and other fall-out of mental health problems and substance abuse. A poignant example came from Boston: a six-year-old asked to write words that begin with “cr” drew a picture representing crowns, crack (cocaine), crying, and crime. Bright Futures seeks to brighten children’s view of the
world through a comprehensive attitude change in our approach to children’s health. We must reorient our thinking from treatment to disease prevention and health promotion.

“The three key attitudes of Bright Futures,” said Dr. Palfrey, are: “prevention works,” “families matter,” and “health promotion is everybody’s business.”

Dr. Palfrey pointed out that disease prevention is “one of the basic premises of managed care.” By addressing health issues before a serious problem develops, “we can make a huge difference in the lives of children and families.” One of the keys to promoting preventive care is to get the information to health care providers. And managed care organizations can help in this effort by promoting Bright Futures within the plans.

The second element is that families matter. “I think,” said Dr. Palfrey, “that people in managed care understand [this] much better than anybody else does.” The concept here goes beyond simply having parents tell a care provider what a child’s physical problem is. “We really are talking about seeing families, particularly for children, as being the place where health promotion happens.” Doing so requires respect, understanding and a real partnership with families.

Third, health promotion is everybody’s business. Health care has progressed to a point where we can begin to think not just about preventing disease, but also about promoting healthy families. This must be done at the community level. Many communities involve the police, schools, physicians and parents to “spread the word” and assure that action is taken. Bright Futures believes that “a healthy child comes from a healthy family comes from a healthy community.”

Put simply, Bright Futures provides the necessary tools. The Bright Futures compendium presents in one place what is known about disease prevention and health promotion from before the child is born to adulthood. Everything is in one place for physicians, nurses, child care workers, teachers and families. Bright Futures is “sort of like the Encyclopedia Britannica of disease prevention and health promotion,” said Dr. Palfrey.

As part of the implementation stage and to explore in depth certain health promotion issues, the Bright Futures project is developing a series of practice guidelines. Bright Futures in Practice: Oral Health, the first in the series, is available for providers and families. Other guides planned for the near future include Bright Futures in Practice: Nutrition; Bright Futures in Practice: Mental Health; and Bright Futures in Practice: Physical Activity. These books present practical advice to parents and providers on various issues in child development.

Bright Futures is a new way of looking at the health care system, but our present inconsistent system creates barriers for families. “We have no sense of an organization, no sense of a system that works together,” said Dr. Palfrey. One problem with employer-based medicine and managed care is that “switching plans means switching providers, means switching the continuity.” “Currently we are in a non-system. We don’t have the community-based goals that will lead to systems development.” But there are components of a system that will work if we focus on families, develop consistent comprehensive care, combine access to other services, and provide adequate financial support for the services.

As Dr. Palfrey pointed out, managed care can provide such a system. “The promise that I see in managed care is that there is a population-based focus, there is an outcomes focus, a sense that I’m not doing a good job if anybody in my cadre is lagging behind. That has never existed before in American medicine.”

Role for Managed Care in Building Bright Futures

Managed care holds great potential to advance the objectives of Bright Futures by providing a medical home for children and families where they can receive continuous care. A panel of managed care executives discussed their efforts to provide preventive services and health promotion, as well as issues affecting the implementation of Bright Futures in a health plan environment.

Dr. Dawn Wood, Medical Director of Medi-Cal programs for Blue Cross of California (BCC), praised Bright Futures as “a health education tool which really is the source of all the appropriate information you would need for preventive health care [and] counseling—all the questions and the information that a provider would need.”

Dr. Wood has been actively addressing preventive care and health promotion for the over 300,000 Medicaid enrollees BCC now serves in 9 counties, and is now evaluating how Bright Futures ideas can be implemented in a managed care plan.

Encouraging members to use preventive care is always difficult, but BCC’s immunization program has won national recognition. The program flags possible missed immunizations and sends notices to both parents and providers. Outreach workers also visit families at home to talk about the importance of immunizations.

Currently, Dr. Wood is developing a member-level health education program which would complement more traditional health education programs that tend to address issues at the community level. One of the best times to address a member’s health prevention needs is when they
visit their physician. But physicians’ time is limited and they sometimes are not as informed about preventive health measures as we would like them to be. So Dr. Wood is exploring an approach that would send trained preventive health care providers into physicians’ offices to do health education for members on a regular schedule. An initial pilot test of this approach will focus on adolescents and will use *Bright Futures* as a training manual for providers.

The community resource centers that BCC maintains in seven of the counties it serves present a particular health education opportunity. BCC could train staff in health promotion using the *Bright Futures* guidelines who would then educate the families that come to the center. Local community leaders would be involved to ensure that the center’s services met community needs.

In Dr. Wood’s view, a managed care plan can incorporate a good preventive health care program, but the program must be relevant and cost-effective. One challenge she faces is that many childhood preventive measures are believed to be cost-effective, but the research literature does not provide hard evidence. “[W]e need to have [numbers],” said Dr. Wood, “so that we can substantiate the development of good preventive health care programs.”

Other health plans also are active in health education and encouraging prevention. Many plans are developing programs both for the individual and for the family as a unit.

**Ms. Robin Foust from Health Management Corporation**, a subsidiary of Trigon Blue Cross Blue Shield, presented some of their prevention and health promotion programs.

Trigon has a maternity risk management program, “Baby Benefits,” that works to coordinate care to prevent or delay premature births. The program identifies pregnant women at high risk for premature delivery and links them to a nurse who works with the doctors to coordinate preventive care.

The challenge for “Baby Benefits” is getting mothers into the program. Recruitment efforts begin with identifying high-risk women and using targeted mailings to provide women with information. These efforts are particularly helpful in reinforcing other health promotion activities in the Medicaid program.

**Trigon** also has introduced the Trigon HealthKeepers Family Health Program, focusing on member outreach for prevention, early detection and health education. The program incorporates preventive reminders for men, women and children and seeks to manage each member’s total health, not just a specific condition. Registered nurse counseling, both proactive and reactive, is also part of the Family Health Program. Nurses triage members into patient management programs appropriate to their needs. Some of the components include maternity, parenting, chronic disease management, and women’s and men’s health.

Both the parenting and maternity programs help to educate parents on all aspects of infant and toddler health management. Increasing awareness and improving parenting skills can significantly improve children’s health and make a difference in overall family health.

Trigon’s system of integrating health promotion and health management services enhances its commitment to longitudinal health care rather than episodic care. Programs like Bright Futures can help plans to develop creative ways to increase participation in preventive and health promotion programs.

**Mr. David O’Brien, CEO of Gateway Health Plan**, characterized Bright Futures as “a great opportunity for health plans.” He also commended Bright Futures for “looking to involve everyone in prevention and health promotion,” an attitude he believes is much more realistic than the traditional approach, which simply looked to physicians to do preventive screenings and give immunizations.

By using multiple people and working with the broader community, as Bright Futures urges, managed care plans can achieve health promotion and prevention goals more effectively. For example, Gateway uses primarily social workers to do case management and has often hired community organizations to do outreach to deal with specific issues for the Medicaid population it serves. Among other things, its EPSDT outreach program has resulted in improved immunization rates for enrolled children.

Mr. O’Brien saw this as an example of what can be accomplished when there is an organization, such as a managed care plan, that is accountable and responsible for achieving health goals and has financial incentives to do so. “I think by having someone accountable and responsible for the health of a certain segment of the population,” he said, “you can begin to use those financial incentives to get more people involved [and] do a better job.”

To be successful, Bright Futures needs to pay attention to incentives, said Mr. O’Brien. Incentives make things happen. “We have to look at ... how we can use incentives to assure that everyone strives to meet [Bright Futures’] goals.” And, if we expect employers and public programs to pay for health promotion, we will have to show measurable results.
Practitioners Perspective

Forum participants heard from pediatricians who use the Bright Futures guidelines in their practices every day. One of the major challenges for Bright Futures is to train practitioners to consider a child’s overall health situation, rather than simply treating a specific problem. Health care providers need to build a relationship with the child and family to encourage prevention and health promotion.

Dr. Kelly Kelleher, Staunton Professor of Pediatrics, Psychiatry and Health Services Administration at the University of Pittsburgh, and Children’s Hospital of Pittsburgh, pointed out that the benefit of Bright Futures is how it helps guide the day-to-day delivery of care and the process of interaction with families and patients. “Bright Futures provides a guide for doctors in dealing with the varied issues in caring for children.” By reinforcing advice over time, providers can have a positive impact on the overall health of a child.

Managed care organizations have a large role in helping health care providers to encourage and promote preventive care, in Dr. Kelleher’s view. He urged managed care organizations to incorporate the notion of “guidelines and practice parameters,” and to educate the medical directors on the benefits of the Bright Futures concepts.

Dr. Kelleher also encouraged managed care plans to address issues that are particularly relevant to care of children. For example, payment systems need to consider the circumstances of high-risk and special needs children. Also, to avoid a breakdown in care for a child, managed care organizations should adopt “continuity clauses” so a child does not have to switch doctors when the child’s health plan changes.

Dr. Robert Needlman, Assistant Professor of Pediatrics at Case Western Reserve University School of Medicine and Rainbow Babies and Children’s Hospital of the University Hospitals of Cleveland, explained practical considerations in meeting children’s health and developmental needs. Physicians are presented with a physical problem to treat, but often there are other social or psychological factors that greatly influence the child’s physical health.

As Dr. Needlman noted, physical, mental and family health are intertwined. Primary care practitioners, including pediatricians, family practitioners, nurse practitioners, and others, he said, “have an opportunity and a responsibility to be front-line managers for children’s physical, developmental and emotional health.”

Both Dr. Needlman and Dr. Kelleher emphasized that training physicians and other health care providers is key to making the Bright Futures approach effective. And Bright Futures provides the tools necessary to follow through on the task.

Next Steps

Bright Futures is unique in that it advocates developing a relationship among providers and families that builds over time to enhance healthy development. One key issue forum participants discussed was ensuring that family practitioners receive training in the Bright Futures approach. Family practitioners often deliver all of the pediatric care in rural communities. Bright Futures is working to assure that the family practitioners receive the information and tools that they need. Managed care plans can assist in fostering this partnership to assure the healthy development of children.

Building Bright Futures continues to explore ways to disseminate information about Bright Futures and to develop tools that make Bright Futures easy to use. Along with the Bright Futures in Practice series, other materials under development for the near future include provider and family health supervision encounter forms that follow the anticipatory guidance of Bright Futures.

For additional information about Bright Futures, see their Web site at www.brightfutures.org, which provides detailed information, downloadable materials and links, including links for families to share information.

Next Forum

Outreach is the next step in meeting the Bright Futures goal of health development for every child. Outreach is necessary both to enroll currently uninsured children for coverage and to ensure that, once enrolled, they receive effective health supervision and care appropriate to their needs. At the next forum in this series, “Outreach: Private and Public Sector Efforts That Work,” practitioners from private sector health plans, public agencies and collaborative community efforts will discuss innovative, practical, and successful outreach initiatives.
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