

RIte Care Health Insurance

A Celebration of Children's Health



10 REASONS RITE CARE MAKES A DIFFERENCE...



Reason #1

RIte Care is a Wise Investment

Reason #2

Rhode Island is a Leader in Providing Health Coverage for Children

Reason #3
RIte Care = Quality

Reason #4

Families Like RIte Care

Reason #5

RIte Care Improves Access to Primary Care

Reason #6

RIte Care Improves Access to Prenatal Care

Reason #7

RIte Care Improves Access to Infant Care

Reason #8

RIte Care Improves Access to Pediatric Care

Reason #9

RIte Care Innovations Improve Access and Control Costs

Reason #10
RIte Care is a Community Partnership

RITE CARE FACTS

What is RIte Care?

RIte Care is Rhode Island's health insurance program for eligible low-income children and families. It provides comprehensive health care, with a focus on primary and preventive care, through participating health plans. RIte Care's

goal is to provide access to quality health care services that are costeffective and that improve the health of the people enrolled.



- · 70% of RIte Care members are children.
- 90% of RIte Care members have incomes below 150% of the federal poverty level (less than \$23,505 per year for a family of three).
- When a family enrolls in RIte Care, they select a health plan of their choice and their own doctor.

RITE CARE IS A WISE INVESTMENT

RIte Care keeps 87,078 Rhode Island kids healthy.

Kids covered by RIte Care receive immunizations on time, get regular check-ups, and are able to get the medicine they need when sick.

Studies of the uninsured have shown that they are more likely to delay needed care, not fill prescriptions, skip recommended medical tests or treatments and not see a specialist because of the cost.

RIte Care saves money by focusing on preventive and primary care.

Studies have shown that hospitalizations and emergency room use have both decreased by more than one-third since RIte Care began. Families are more likely to see their doctor for regular care because they have health insurance coverage.

RIte Care is an economic boost to the state.

More than half of RIte Care is paid for by the federal government, which brings significant resources to Rhode Island. According to a recent study by Families USA, Rhode Island's overall investment in Medicaid creates 16,596 new jobs, \$617 million in total wages from new jobs and generates \$1.7 billion in new business activity.¹

Census numbers show RIte Care is working

"...What's important is that RIte Care is just a tool. What we're interested in is the outcome. Kids are coming to school, they're coming healthy and ready to learn."

Jane Hayward, Managing Director, Office of Health and Human Services, Providence Business News, September 6, 2004

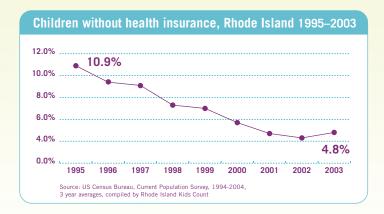


1994

RIte Care implemented; includes families with children on Aid to Families with Dependent Children (AFDC) as well as uninsured pregnant women and children up to age 6 UnitedHealthcare of New England, Blue CHiP, Harvard Community Health Plan, Pilgrim Health Care, and Neighborhood Health Plan of RI begin enrolling RIte Care members

RHODE ISLAND IS A LEADER IN PROVIDING HEALTH COVERAGE FOR CHILDREN

As of 2003, only 4.8% of Rhode Island's children under age 18 were uninsured, compared to 11.6% nationally. The rate of uninsured children in Rhode Island has been reduced by 56% since RIte Care was fully implemented in 1995.²



Rhode Island leads nation in health coverage for children

"From 2000 to 2002, the average percent of children who had health insurance in Rhode Island was 95.75 percent.... Rhode Island has led the nation in insuring children in recent years thanks to the success of RIte Care."

Providence Journal, October 1, 2003



1995

1996

RIte Care program adds children up to age 8

RIte Care's Health Plans

All three of RIte Care's participating health plans are rated "excellent," the highest rating by the National Committee for Quality Assurance (NCQA).

- Blue CHiP
- Neighborhood Health Plan of Rhode Island
- UnitedHealthcare of New England

RIte Care works with participating health plans to achieve the highest standards of care.

Building Quality into RIte Care: How Rhode Island is Improving Health Care for Its Low-Income Populations

"Rhode Island is a leader in incorporating quality improvement into its public insurance programs. By making quality improvement a central feature of RIte Care... Rhode Island officials believed they could achieve better health for residents as well as lower health costs in the long run..."

The Commonwealth Fund, January 2003



"A few states have revamped their organizational and management systems to ensure better access to medical care while keeping costs under control. Rhode Island stands out in this respect."

Governing Magazine, February 2004.

1997

RIte Care program adds children up to age 18

1998

RIte Care program adds parents of RIte Care eligible children The Department of Human Services builds on the Department of Health's Family Resource Counselor program, doubling its capacity to provide RIte Care application assistance in the community

RIte Care members say:

- 94% have their own doctor
- 97% are very satisfied or satisfied with their doctor
- 88% usually talk to their doctor when sick or seeking medical advice
- 98% are very satisfied or satisfied with the RIte Care Program

RIte Care Member Satisfaction Survey, 2002

"I'm very happy with RIte Care. My doctors are great. I've had no problems at all getting medical care for my family."

Maria B., mother of 2 children – Wilmarie 5 and Emmanuel 13.





"For me, RIte Care is the best.

I have doctors that participate in RIte Care and they are very good. I've had excellent care for my three boys."

Niurka N., mother of 3 boys - Victor 13, David 12 and Diego 4.

1999

RIte Care program adds children up to age 19

The Robert Wood Johnson Foundation funds Covering Kids initiatives in all 50 states

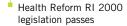
RITE CARE IMPROVES ACCESS TO PRIMARY CARE



During the 1990s, expansions in publicly-funded insurance, first with RIte Start in 1988 and then RIte Care in 1994, improved the delivery of health care for low-income and uninsured Rhode Island families. Evaluations of the RIte Care program have shown that enrolling a family in a health plan and providing access to a primary care doctor has improved access to prenatal and pediatric care and has resulted in improved health for kids and families.

- Over 900 primary care physicians participate in RIte Care, up from 350 prior to the program's implementation.³
- 92% of children enrolled in RIte Care have an annual check-up with their doctor.4
- 85% of parents enrolled in RIte Care have an annual check-up with their doctor.5
- Emergency room visits and hospital utilization each decreased by more than one-third since RIte Care was implemented.⁶

2000



The Rhode Island Foundation helps NHPRI to become a RI non-profit organization

Rhode Island achieves the lowest uninsurance rate in the nation

Reason #6 RITE CARE IMPROVES ACCESS TO PRENATAL CARE

Studies show that women who get regular care during pregnancy, who don't smoke while they are pregnant, or who have children at least 18 months apart are less likely to have babies with health problems.

- The adequacy of prenatal care, defined as beginning prenatal care in the 4th month and completing at least 80% of the recommended visits, has increased from 56% in 1993 to 72% in 2002 for pregnant women enrolled in RIte Care.⁷
- The percentage of pregnant women on RIte Care who smoke decreased from 32% in 1993 to 21% in 2002.8
- The percentage of women on RIte Care who had a short interval between births (less than 18 months) decreased in the past 10 years, from 41% in 1993 to 31% in 2002, thereby closing the gap between women on RIte Care and women with private insurance.9



New Study Finds Rhode Island Leads in Prenatal Care

"Rhode Island had the highest percentage of women who received timely prenatal care in 1999, according to a new ranking of states based on conditions that affect newborns."

Providence Journal, February 5, 2002

2001

RIte Share Premium Assistance Program begins

Children in foster care transition from Medicaid fee-for-service to RIte Care. Care is coordinated through Neighborhood Health Plan of RI.



Reason #7 RITE CARE IMPROVES ACCESS TO INFANT CARE

- In the 1990s, the Rhode Island infant mortality rate for publicly-insured infants dropped 36%, from 10.7 to 6.8 deaths per 1,000 births. During the same time period, the infant mortality rate for infants with private insurance decreased by only 17%.¹⁰
- In the 1990s, the Rhode Island postneonatal mortality for publicly-insured infants dropped 58%, a significant decline, from 4.5 to 1.9 deaths per 1,000 births. Postneonatal deaths due to preventable causes such as SIDS, infection and injury all decreased as infants gained better access to routine, preventive pediatric care.¹¹



RI POSTNEONATAL MORTALITY BY TYPE OF INSURANCE 6.0 9.0 3.0 3.0 1.9 1.9 1.9 1.9 Medicaid Private Source: RI Medicaid Research and Evaluation Project



2002

Cost sharing for RIte Care and RIte Share is implemented Covering Kids Rhode Island expands to include outreach to families; now called Covering Kids and Families

Childhood Immunizations

- In 2003, Rhode Island ranked among the top six states on childhood immunization rates.¹²
- Children enrolled in RIte Care have comparable immunization rates to other children in Rhode Island: 81% of two-year-old children enrolled in RIte Care in 1997 were up-to-date for childhood immunizations, the same rate as all Rhode Island children in this age group.^{13, 14}



Lead Screening

- Lead screening rates for two-year-old children enrolled in RIte Care have increased from 80% in 1997 to 88% in 2001.^{15, 16}
- RIte Care enrolled children have similar lead screening rates as children with private insurance. A recent study showed 88% screening rates for children enrolled in RIte Care vs. 87% for RI children enrolled in private insurance.¹⁷
- In 2001, 17% of two-year-olds enrolled in RIte Care were found to have elevated blood lead levels compared with 7% of children with private insurance.¹⁸

Lead screening, identification and treatment have led to a 41% decrease in lead poisoning for RIte Care two-year-olds, from 29% in 1997 to 17% in 2001. 19,20

2003

Children with special health care needs transition from Medicaid fee-for-service to RIte Care. Care is coordinated through Neighborhood Health Plan of RI.

2004

All of RIte Care's publications, research and reports can be found at www.ritecareresearch.org



"Rhode Island has become a recognized leader in health coverage expansion...

The RIte Share program—one of only a handful of premium assistance programs in operation in the country—vividly illustrates the potential of the public-private partnership."

National Health Policy Forum, George Washington University, May 2003

RIte Share judged success

"RIte Share, the state's new program that subsidizes health insurance for low-income workers, has achieved its goal..."

Providence Journal, July 18, 2002.

RIte Care has demonstrated that it's a wise investment for Rhode Island and has received support from the Governor and the RI General Assembly through the years.

RIte Share

Rhode Island implemented the RIte Share Premium Assistance Program to maximize use of employer-sponsored health insurance for working families instead of enrolling them in RIte Care. For every 1,000 members enrolled in RIte Share per year, Rhode Island saves \$1 million in state and federal dollars.

Children with Special Needs Enroll in RIte Care

Rhode Island has transitioned 2,000 children in foster care and over 3,000 children with special health care needs from Medicaid fee-for-service into RIte Care. Each enrollee now has a "medical home" through Neighborhood Health Plan of RI that provides primary care, management of chronic disease and care coordination. This has improved access to both medical and behavioral health care while reducing hospital use and overall cost trends in this group.

Cost Sharing

Rhode Island implemented cost sharing for RIte Care and RIte Share members whose income is over 150% of the federal poverty level (more than \$23,505 per year for a family of three). About 5,000 Rhode Island families pay a monthly premium for their health insurance coverage.



Rhode Island Department of Human Services

DHS is the designated lead agency for Medicaid, including RIte Care, and works closely with the Governor and the General Assembly to assure quality and control costs.

Covering Kids and Families Rhode Island

Covering Kids and Families (CKF) is a partnership of public and private organizations dedicated to ensuring that all children have access to health care. The goals of Covering Kids and Families are to:

- Reduce the number of uninsured children and parents in Rhode Island
- Enroll and retain eligible children and adults in RIte Care/RIte Share
- Simplify enrollment and renewal processes

Health Plans

RIte Care's Health Plans provide coordinated health care benefits to RIte Care members and assure access to quality care. As of October 2004, 57% of RIte Care members were enrolled in Neighborhood Health Plan of RI,

32% were enrolled in UnitedHealthcare of NE and 11% were enrolled in Blue Cross & Blue Shield of RI, formerly called Blue CHiP.

RIte Care's Consumer Advisory Committee

Started in 1993, the Consumer Advisory Committee (CAC) has met monthly over the last 10 years to ensure that RIte Care families' needs are at the center of program decision-



making. The partnership between the CAC and the Department of Human Services has resulted in improvements in RIte Care's delivery system, quality of care and access to care.

Doing it RIte: Exploring a Decade of Health Coverage Innovation

"...Good things happen when the political will is there and everyone with a stake in the outcome participates in the process."

National Health Policy Forum, May 2003.

Primary Care Physicians

Over 900 primary care physicians participate in RIte Care. Every member has their own doctor who provides primary and preventative care.

Family Resource Counselors

The Family Resource Counselors (FRCs) help identify uninsured low-income families and help them apply for RIte Care. Forty-eight (48) Family Resource Counselors are located at 21 community health center sites, nine hospitals, and one community-based agency in Rhode Island. The RI Health Center Association provides training and ongoing technical assistance to the FRCs statewide. The FRC program is jointly funded by the Department of Health and the Department of Human Services.

RITE CARE MATTERS

"As I was leaving for work one morning, I noticed that my son, Gary, who's four, was having difficulty breathing. I called his pediatrician at the health center to get his asthma medicine refilled. The nurse there talked to me about my son's symptoms and told us to bring him right in. Our doctor examined Gary and said it was serious so they called an ambulance and took him right to the hospital. He ended up being in the hospital for five days. The doctors there were great. They stabilized his respiratory condition and took care of his asthma. If he hadn't been treated as quickly as he was the doctor said he could have died.

Now, Gary's asthma is in good control. My husband and I now know what triggers asthma and ways to control it. I'm so glad we have RIte Care health insurance. I can call my doctor at the health center if I have any questions or problems. Thanks to RIte Care and my doctor, we don't have to worry so much anymore."

Tonya S. and Gary B., parents of two children – Gary, 4 and Kenyata, 10. Patients of the Providence Community Health Centers.

Thanks to RIte Care and my doctor, we don't have to worry so much anymore.



1	Medicaid: Good Medicine for State Economies, Families USA, May 2004.
2	US Census Bureau, Current Population Survey, 1994-2004, 3 year averages.
3,6	MMIS data, RI Department of Human Services.
4,5	National Medicaid Performance Measures, RIte Care Health Plans, 2003.
7,8,9	Griffin, J. The Impact of RIte Care on Adequacy of Prenatal Care and the Health of Newborns – Ten Year Profiles and Trends of Births by Insurance Status: 1993-2002, May 2004.
10,11	Griffin, J. Rhode Island's Infant Mortality Rate Drops Significantly in 1990s, Issue Brief, December 2002.
12	Centers for Disease Control and Prevention, National Immunization Survey, 2003.

13	Vivier, P.M. et. al. "An analysis of the immunization status of preschool
	children enrolled in a statewide Medicaid managed care program," The
	Journal of Pediatrics, 139(5), November 2001, 624-629.

14 Centers for Disease Control and Prevention. "National, State, and Urban Area Vaccination Coverage Levels among Children 19–35 Months—United States, 1997," Morbidity and Mortality Weekly Report, 47 (26), 547-554.

15,19 Vivier, P.M. et.al. "A statewide assessment of lead screening histories of preschool children enrolled in a Medicaid managed care program," Pediatrics, 108(2), 2001.

16,17,18,20 O'Haire, C. et.al. "Lead screening and lead poisoning in Medicaid and commercially insured children enrolled in the same managed care organization," American Public Health Association Poster Session, 2004.



Covering Kids & Families Rhode Island Partners

Rhode Island KIDS COUNT

Neighborhood Health Plan of Rhode Island

The Rhode Island Foundation

Progreso Latino

St. Joseph Hospital For Specialty Care

netWORKri

Ocean State Action Fund

RI Health Center Association

The Poverty Institute at RI College School of Social Work

RI Department of Human Services

RI Department of Health

RI Department of Elementary and Secondary Education

Funding for Covering Kids and Families is provided by
the Robert Wood Johnson Foundation, Neighborhood Health Plan of Rhode Island,
Blue Cross & Blue Shield of Rhode Island, The Rhode Island Foundation,
Prince Charitable Trusts, CVS Charitable Trust, The Annie E. Casey Foundation,
Ocean State Charities Trust and UnitedHealthcare of New England.