

HB 2234: A Solution to Address Costs of Child Maltreatment

HB 2234 requires the Oregon Health Authority and insurers ensure that the cost of child abuse medical assessments and related services such as forensic interviews, performed by child abuse assessment centers are billable and reimbursable through specific, dedicated billing codes or alternative mechanisms. These services are described in ORS 418.792 and are inadequately funded by the Child Abuse Multidisciplinary Intervention Account (CAMI) described in ORS 418.746 and ORS 418.783. This proposal is critical to ensure that community-based Child Abuse Intervention Centers (CAICs) are available for children throughout the State of Oregon. The federal billing codes exist and are currently funded in North Dakota. Now it is time for Oregon to adequately fund these services.

Background: Child Abuse in Oregon

CAICs provide critical assessment and intervention services in furtherance of ORS 418.747 (County Teams for Investigation) and ORS 419B.022-024 (Karly's Law). **The 21 centers across the state serve over 6,000 children annually, meeting a small fraction of the need**. Child maltreatment is pervasive and impacts children of all ages, gender, ethnicity and socioeconomic status. In Oregon, there were more than 64,000 reports of abuse made in 2013, with 10,630 victims of child abuse confirmed ¹. While these numbers are staggering, it's generally accepted that child abuse is underreported; evidence suggests that more than 13% of children are subject to abuse or neglect each year². Furthermore, child victims who don't receive early intervention are at higher risk for chronic health problems and high-risk behaviors resulting in higher long-term health care and social service expenses.³ In fact, the estimated lifetime impact of all social costs and lost earnings associated with non-fatal maltreatment incidence in Oregon in 2014 is \$58 billion dollars.⁴ Providing quality child abuse assessments is critical for preventing long-term health problems for victims.

By working in partnership with child protective services, law enforcement and other medical and mental health providers, CAICs coordinate and provide services based on the need of each child in a neutral, child-focused environment, and act as a resource for that child and their caregivers. The forensic interview and medical assessment are key components of the intervention process.

The Problem

CAICs report being swamped with referrals but unable to provide sufficient services because of critically inadequate funding. CAICs currently request reimbursement from insurance companies for these valuable medical services, however the billing codes that relate to the specialized forensic interview are not funded. And while Oregon has succeeded in providing health insurance to low income residents, the increase in patients insured through Medicaid has created additional challenges for CAICs including:

¹ Oregon Department of Human Services: Children, Family and Adults Divisions: 2013 Child Welfare Data Book

² The Perryman Group (2014) Suffer the Little Children: An assessment of the Economic Cost of Child Maltreatment

³ Felitti, V. J., & Anda, R. F. (1997.) The Adverse Childhood Experiences (ACE) Study. Centers for Disease Control and Prevention.

⁴ The Perryman Group (2014) Suffer the Little Children: An assessment of the Economic Cost of Child Maltreatment

- An increase in Medicaid-covered patients from an average of 63% in 2009-10 to an average of 75% last year. One center reported 84% of their patients were on Medicaid.
- Receiving reimbursements for only 24% of the amount submitted in Medicaid claims, while writing off 76% of those costs.
- A 46% write off rate for amounts submitted to private insurance carriers.
- The inability to bill private or public insurance providers for the costs of providing children with forensic interviews.

Costs for a full assessment (medical checkup, forensic interview, and family support) range between \$1,900 to \$2,500, depending on the location of the center and the length of the appointment. Reimbursement at 24% for the 75% of the patients on Medicaid is not sustainable.

The Solution:

HB 2234 requires the Oregon Health Authority and insurers to fund specific billing codes or create alternative mechanisms to enable CAICs to be reimbursed for critical child abuse assessment services. The bill would establish a value for the medical assessment and forensic interview portion of the assessment and would require that centers be reimbursed for providing this service.

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Center Locations

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