MICHIGAN



A State Child Health Policy Agenda 2021 and Beyond

Priorities and recommendations to foster child health and well-being, achieve health equity, eliminate health disparities, optimize lifespan outcomes, strengthen families, support our communities, and enhance the position of Michigan as a leading state for children.





Michigan Chapter

To Our Partners:

The Michigan Chapter of the American Academy of Pediatrics (MIAAP), in collaboration with the American Academy of Pediatrics (AAP), has produced the **2021 Michigan Blueprint for Children** to put forward a vision for what Governor Whitmer's administration and the Michigan Legislature can do to improve the lives of children.

The MIAAP is a non-profit, professional medical organization with a membership of over 1,400 Michigan pediatricians who care for Michigan's children. MIAAP members are dedicated to the attainment of optimal physical, mental, and social health for all infants, children, adolescents, and young adults.

Pediatricians - in partnership with parents, educators, and advocates - play an important role in promoting the health and well-being of all children and in addressing the challenges that many children and families face. Regardless of practice setting - whether rural or urban, in universities, hospitals or clinics - providers see first-hand the potential that is present in every child. Achieving this potential requires a new commitment to addressing the needs of children, families, and communities.

Because the health of our society depends upon the strength and well-being of children, this document outlines a comprehensive vision for how state government should be aligned to give children a solid foundation. Recommendations set forth are based on the science of optimal child development, especially the increasing evidence of the critical role of early childhood influences on health, education, and economic lifespan outcomes. While the realities of the political process will necessitate choices and prioritization, we believe that children deserve no less than a bold agenda for improving their lives.

A thoughtful approach to optimum child development is the single best investment in the future that our great state can make. To this end, concerted action by all levels of state government is required to promote **healthy children**, support **secure families**, build **strong communities**, and ensure the Michigan is a **leading state** for children.

At any time, MIAAP experts are happy to provide additional consultation and/or share the scientific research and evidence behind the Blueprint for Children recommendations. We look forward to working with you to build Michigan's healthy future!

Sincerely,

Matthew Hornik, DO, FAAP

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President, Michigan Chapter of American Academy of Pediatrics

Blueprint for Children Priorities

PROMOTE HEALTHY CHILDREN

- Improve access to care for all Michigan children and particularly, children who qualify for Medicaid health insurance. This encompasses access to a medical home, dental home and pediatric subspecialist care.
- Expand mental health services and capacity in both inpatient and outpatient settings and include both traumainformed care and evidence-based suicide prevention standards.
- Support measures that strengthen immunization practices and rates in the state.
- Promote parity between Medicaid and Medicare payments and promote sustained telehealth reimbursement on par with in-person visits.

SUPPORT SECURE FAMILIES

- Increase support for programs that identify family stressors, including racism, implicit bias, and other forms of discrimination, and provide family support that encompasses promotion of positive parenting and resilience.
- Support measures that protect basic needs during and in the aftermath of the pandemic, including eviction moratorium and enhanced support for families experiencing food insecurity.
- Support paid family leave policies, including pre- and post-partum maternal leave.
- Support reliable technology and internet access to all families.

BUILD STRONG COMMUNITIES

- Promote assessment of educational status of Michigan children with emphasis on children who have had little or no access during the pandemic. Support funding to enhance education support for children most at risk and support evidence-based strategies that help school districts move towards safe in-person learning.
- Support measures to deter youth access to and use of tobacco, electronic nicotine delivery systems, and marijuana.
- Promote measures that improve firearm safety, raise awareness about firearm related risk in youth, and reduce firearm-related injury, suicide, and homicide.
- Support funding of universal preschool for 3- and 4-year-old children.

ENSURE OUR STATE IS A LEADER FOR CHILDREN

- Fund and support public health and health services, including immunizations and pandemic response capabilities.
- Create a cabinet level "Secretary of Children" and "Children's Cabinet" with dedicated staff to ensure children's unique perspective and vulnerabilities are considered.

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"Children are our most valuable resource." - President Herbert Hoover

PROMOTE HEALTHY CHILDREN

All children must have access to the highest-quality pediatric-specific health care, so they can thrive throughout their lifespan. A healthy child is better able to attend school, learn, and become a productive adult. In addition to optimizing physical health, we need to ensure children have access to high quality pediatric mental health services.

Policymakers must ensure that all children, regardless of their immigration status, should:

have affordable and high-quality health care coverage

- expand Healthy Michigan, Medicaid, and Children's Health Insurance Program (CHIP) to find and enroll all eligible children and young adults
- o remove Medicaid work requirements

have insurance with comprehensive, pediatric-appropriate benefits

- o maintain telehealth visit payments beyond the COVID-19 pandemic
- o improve access to pediatric services by increasing payment to physicians, advanced practitioners and institutions for children on Medicaid
- o promote parity between Medicaid and Medicare payments
- maintain Early Periodic Screening, Diagnosis, and Treatment (EPSDT) benefits and Bright Futures guidelines as mandated by the Affordable Care Act (ACA) as the benchmark for pediatric essential health benefits in all plans

have access to needed primary and subspecialty pediatric care and oral health care

- maintain support and promotion of Healthy Kids Dental program in all Michigan counties
- o provide full access to operating rooms and anesthesia services for dental procedures
- o identify and implement best practices to prevent and treat pediatric obesity
- o support full access to all forms of reproductive health services for parents, as well as adolescents
- o support programs to reduce premature birth and infant mortality disparities

receive comprehensive, family-centered care in a medical home and dental home with a trained pediatric workforce

- fund state-wide and county-specific Children's Health Care Access Programs (CHAP)
 - create Medicaid-billable reimbursement for CHAP coordination
- support diversity in pediatric-trained provider workforce recruitment and retention efforts, especially in underserved and rural communities
 - support loan repayment programs that encourage medical school graduates to practice pediatrics in underserved areas of Michigan
 - maintain Graduate Medical Education (GME) support

 promote programs that create or expand a pipeline of underrepresented minorities who choose careers in health

have access to mental health services

- o increase capacity, training and compensation for trauma-informed and socioemotional care providers with emphasis on parent training for children 0-3
- promote integrated behavioral health in primary care pediatric practices with embedded mental health providers by enhancing reimbursement for these services and support to providers through consultation programs such as MC3
- o expand home-based and wrap-around services for all children with serious mental health concerns regardless of payer (currently limited only to Community Mental Health (CMH) eligible children)
- o fully fund CMH centers
- o promote timely seamless access to assessment and comprehensive treatment for Autism Spectrum Disorders that is equitable across payers
- promote statewide suicide prevention standards for evidence-based screening, risk assessment and safety planning for emergency departments, medical inpatient pediatric patients and for pediatric outpatients
- support legislation to allow suicide death review team information sharing mirroring Fetal Infant Mortality Review (FIMR)
- support coverage of substance abuse services for parents and teens struggling with opioid addiction and other substances of abuse, addiction, and dependency
 - support care of infants with neonatal abstinence syndrome
- Support recruitment, training and retention of more child psychiatrists to the state.

receive recommended childhood vaccinations

- o support legislative and administrative actions that strengthen immunization rules and practices, including reduction of barriers to provider use of Vaccines for Children (VFC)
- o fund evidence-based, scientific education and public service announcements regarding vaccine efficacy and safety, such as the I Vaccinate Campaign (ivaccinate.org)
- o support public education regarding vaccine-preventable disease outbreaks and promote transparency regarding vaccination rates in communities/schools/childcare settings
- o support the vaccine decision-making roles of the Immunization Division of the Michigan Department of Health and Human Services (MDHHS)
- o support upgrades to Michigan Care Improvement Registry (MCIR), including a patient portal to access immunization records
- Help fund and organize COVID vaccination programs

have access to equal education

- Promote timely assessment of children who are falling behind through Individualized Educational
 Programs (IEPs) and conferences and support adherence to the accommodations outlined in the IEP
- Support school-based health centers: Ensure that recommendations in health assessment forms are followed including medication administration, chronic illness monitoring and education, immunization monitoring and updates, communication with students' medical home
- Support mental health/social work professionals in school
- Support training to better manage disruptive classroom behavior and reduce disparities in school suspensions and expulsions
- Replace out-of-school suspensions with in-school suspensions

- Support reliable technology access to all families
- Support targeted resources for those students most affected educationally by the COVID pandemic

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"There is no doubt that it is around the family and the home that all the greatest virtues, the most dominating virtues of humans, are created, strengthened and maintained." -Winston Churchill

SUPPORT SECURE FAMILIES

The percentage of children born into poverty in Michigan has risen steadily over the last 40 years. In Michigan this number is approaching fifty percent. In some Michigan communities, the child poverty rate approaches sixty percent. We need to eliminate child poverty and communities of concentrated poverty. From workplace supports to healthy food access, together we can work to advance efforts to ensure that parents can give their children the best foundation for the future.

Policymakers must ensure that all families, regardless of their immigration status, have:

- work that provides a stable and adequate income and family-friendly benefits
 - o increase minimum wage
 - support paid parental time off during the prenatal and postnatal periods as well as during times of family illness
 - support breastfeeding-at-work policies

safe and secure housing

- o promote green and healthy homes (energy efficient, lead free, asthma friendly)
- create/work with existing programs to improve access to short and long term quality and affordable housing
- consider housing vouchers
- support legislation to hold landlords accountable for sub-standard housing

access to adequate, healthy, nutritious foods

- o increase breastfeeding promotion and support lactation workforce development
- expand the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) eligibility, promotion, and access
- o support reinstitution of lactation peer educators in WIC programs
- expand the Supplemental Nutrition Access Program (SNAP) benefits automatic Double Up Food Bucks and co-enrollment with Medicaid
- support school lunch nutrition improvements including universal school meals, farm to school programs, non-processed foods, summer meal expansions
 - ban school practices of withholding and/or restricting lunch access due to lunch debt

access to affordable and family-friendly transportation

- o promote consistent transportation, with a requirement for appropriate child passenger safety seats, coverage for medical, dental, mental health appointments, including same-day appointments
- o support mass transportation policies

support positive parenting skills training

- o increase support for home visiting maternal-infant support programs
- o implement parent education programs that support mothers and families during the prenatal period
- o support programs that identify family stressors and trauma and refer to appropriate support services
- o support increased funding for Child Protective Services to decrease caseloads and ensure services required for reunification are available
- o support practices that support families, including promotion of positive parenting and resilience

support reform of the criminal justice system

- o support legislation raising the age of juvenile court to 21 years-old
- o support policies to prevent incarcerations and limit loss of parental rights
- o remove cumulative fees and fines that disproportionately affect low-resourced individuals
- o implement trauma-informed positive parenting programs for incarcerated parents
- o decriminalize past marijuana offenders
- o support efforts to "ban the box" to remove criminal history on employment applications

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"I alone cannot change the world, but I can cast a stone across the waters to create many ripples." – Mother Teresa

BUILD STRONG COMMUNITIES

Strong communities are the building blocks for secure families and healthy children. However, striking social determinant of health inequalities place a child's zip code, rather than their genetic code, as the greatest predictor of life outcomes. Children and families must be safe in their communities and have equal access to child-promoting resources and opportunities, regardless of their racial or ethnic background, how much they earn, where they live, or the condition of their environment.

Policymakers must ensure that communities:

include safe places for children to engage in physical activity

- support built environments that include play spaces and safe, designated and well-lit passage for children to walk or bike to and from school
- o support funding of state parks that are safe and accessible to all
- o support community programs that promote physical activity and funding for community centers
- o support investment in summer programs/camps for children through 8th grade

are safe from violence and preventable harm

- promote common sense firearm safety measures to reduce firearm-related injury, suicide, and homicide (promote gun locks, strengthen background checks, ban assault weapons, add wait periods, provide extreme risk protection orders, require safe storage)
- update Michigan child passenger safety laws to align with the AAP's 2018 Policy Statement
- adopt measures that will protect settings where children congregate from harmful substances, including marijuana, tobacco, electronic nicotine delivery systems
- o raise the tobacco age to 21

address environmental health and climate change issues that disproportionately affect children

- o ensure all Michigan children have access to safe and affordable drinking water
 - establish guidelines for safe drinking water in schools, child care facilities, and other locations where children congregate
 - halt water shutoffs in homes with children
 - enact human right to water policies
- fully fund Michigan Child Lead Elimination Commission and adopt recommended policies, including environmental lead testing prior to home transfers
- actively support 2018 Michigan Lead and Copper Rule and fully fund programs to eliminate lead from drinking water
- o adopt Governor's Environmental Justice Workgroup recommendations
- strengthen air quality standards in and around schools and neighborhoods with high rates of childhood asthma; strengthen and follow EPA school siting guidelines

provide cradle-to-college educational support

- high-quality early education programs
 - provide affordable, accessible, high-quality childcare for all children
 - fully fund non-income based universal pre-school starting at age 3 years (ie: "Michigan Pre-Promise")
 - create pipeline programs for early educators
 - increase compensation and benefits for early educators
 - enhance early literacy promotion through statewide support of Reach Out and Read (clinic-based literacy intervention), Imagination Library (monthly home delivery of books age 0-5), and two-generation efforts
 - increase capacity and promotion of Early On, Michigan's home-based early intervention developmental support system
- o support public school systems
 - increase compensation for educators
 - create efficient class sizes
 - invest in school health services, including behavioral health and trauma-informed education
 - increase time for physical education and play (recess)
 - support pipeline programs for underrepresented minorities in healthcare and other fields
 - modify school start times (later start for high school students)
- o support Michigan's public universities and community colleges
 - consider free college tuition for all Michigan children (ie: "Michigan Promise")
- o support cultural awareness programs in schools taught by members of our diverse communities

support marginalized groups within communities

support health, mental health, education, and other tangible needs for individuals who may be victims
of discrimination or bullying, including individuals who are immigrants or children of immigrants, ethnic
and racial minorities, foster children, special needs/disabled children, and those who identify as Lesbian,
Gay, Bisexual, Transgender, or Questioning/Queer (LGBTQ)

respond effectively when disasters and public health emergencies occur

 support efforts to coordinate health providers and public health collaboration, disaster preparedness training and plan development

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"You never change things by fighting the existing reality. To change something, build a new model that makes the existing model obsolete." —R. Buckminster Fuller

ENSURE OUR STATE IS A LEADER FOR CHILDREN

Until the electorate expands to include children, child health and well-being must be elevated and maintained as a priority in our state. With the growing scientific discovery of the role of childhood (especially early childhood) on an individual's entire life course trajectory (from chronic disease to longevity), the needs and vulnerabilities of children demand attention. Additional factors that make some children more vulnerable than others include race, ethnicity, religion, immigration status, sexual orientation or gender identity, and disability.

Policymakers must develop and implement child-centric policy that:

- re-create a "Children's Cabinet" (Michigan previously had a Children's Cabinet in 2004) chaired by the "Secretary of Children" with dedicated staff to ensure children's unique perspectives and vulnerabilities are considered. Children's Cabinet will
 - include leadership of Michigan Department of Health and Human Services (MDHHS), Michigan Department of Environmental Quality (MDEQ), Michigan Department of Education (MDE) and Michigan Department of Agriculture & Rural Development (MDARD)
 - advise governor, state legislators, and state agency and department leaders on policy issues affecting children
 - advocate to ensure access to state programs
 - develop and implement statewide child health, education, and well-being policies and programs
 - evaluate annual child well-being outcomes (State of the State's Kids)
 - review recommendations of legislative studies and state advisory committees and councils
 - recommend improvements to existing services and programs
 - build and maintain relationships with the private and philanthropic sector to support state-private funding for childhood programming
- fund and support public health and health services to help children grow into healthy adults
 - direct state agencies to implement "health in all policies" and "children in all policies" approach to agency decision making, including conducting health and children impact assessments for permits and rulemaking
 - adopt budgets that adequately fund agencies that support children and prevention (MDHHS, MDEQ, MDE, MDARD)
 - fully fund local public health department mandated services (only 50% covered)
 - phase-in full restoration of statutory municipal revenue sharing, prioritizing impoverished communities, to improve capacity of community services such as first responders and emergency services