

ACTIONS AND STRATEGIES

KEY STAKEHOLDERS NEED TO KNOW

Children's brains produce more than a million neural connections every second in the first three years of life,¹ making it the most crucial period for the formation of intelligence, personality, and social behavior. Research shows that positive and responsive interactions—including eye contact or a hug—during this period of rapid development actually build healthy brain architecture, which means children's healthy brain development is largely defined by their relationships with their caregivers.

Given that responsive relationships are both expected and essential for children's healthy brain development, their absence is a serious threat to children's health and well-being.² However, both mental and physical health concerns can make it difficult for caregivers to engage in the responsive relationships children need to thrive. Helping caregivers navigate existing supportive services (e.g., health, education and social services) can improve the health and well-being of caregivers and young children. Additionally, since accessing these key support services often depends on health insurance, it's important for caregivers, health care providers, and community advocates to understand how Medicaid funding can remove barriers to care.



This Brief Identifies:

- **1.** Specific strategies and actions key influencers (families, health care providers, community advocates) can take to better support families affected by caregiver depression
- What each influencer needs to know about Medicaid to increase accessibility to screenings and supports

Instructions for Use

States and communities can share these strategies and information with key influencers who have the potential to drive change in their community. Each page can be printed separately and shared with relevant influencers.

This brief also includes a fact sheet to share with policy makers about the importance of seeking systems that address caregiver depression.

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¹ Brain Architecture. Center on the Developing Child at Harvard University. https://developingchild.harvard.edu/science/key-concepts/brain-architecture/. Accessed October 8, 2019.



² Serve and Return. Center on the Developing Child at Harvard University.

CAREGIVER DEPRESSION FAST FACTS FOR HEALTH CARE PROVIDERS

Key Actions and Strategies

 Encourage caregivers to be screened during their child's routine pediatric visit. The American Academy of Pediatrics (AAP) recommends new mothers to be screened five times for postpartum depression: once during pregnancy, and again at their child's well-visits at 1, 2, 4, and 6 months of age.3 Screening caregivers during one of many scheduled pediatric visits allows for early intervention and access to treatment. This guidance was bolstered in 2019 by the U.S. Preventive Services Task Force (USPSTF) releasing a new recommendation that all pregnant and postpartum individuals at an increased risk for developing perinatal depression should be referred to counseling interventions.4 The USPSTF and AAP recommendations serve as a trusted, evidenced-based platform focused on healthy attachment and caregiver-child relationships.



- Don't let referral be a barrier for treatment. The AAP recommends pediatric practices utilize community resources for the treatment and referral of a depressed caregiver.⁵ Connecting your patient with local community agencies or your county's department of mental health and developing a referral list can help ensure a smooth referral. Warm transfers, where the health care provider calls the agency on behalf of the patient, can also make it easier for caregivers to follow up with treatment.
- Implement an integrated treatment model. Developing a way to incorporate screenings into routine health care visits—such as in obstetric or pediatric practices—can make it easier for caregivers to access treatment. Moreover, integrating mental health services into routine care destigmatizes mental health treatment.6 An integrated treatment model can also support continuity of care by allowing providers to communicate and collaborate.



Medicaid Fast Facts

- The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit under Medicaid recognizes that a caregiver's health contributes to the child's overall health and well-being.⁷ Under EPSDT, caregivers can be screened for depression and receive treatment at no additional cost if the child is covered under Medicaid, regardless of their coverage. In addition, many private insurers cover this benefit.
- The Centers for Medicare & Medicaid Services (CMS) allows pediatric health care providers to cover screening and treatment of caregiver depression for non-Medicaid eligible mothers so long as both the child and caregiver are present, and services focus on the effects of the mother's condition on the child and the child's benefit.8 Effective Jan. 1, 2017, providers can report CPT code 96161 for caregiver-focused, standardized health-risk assessments that can benefit the child.9
- ³ Earls MF. Incorporating Recognition and Management of Perinatal and Postpartum Depression Into Pediatric Practice. Pediatrics. 2010;126(5):1032-1039. doi:10.1542/peds.2010-2348.
- ⁴ Final Recommendation Statement, Perinatal Depression: Preventive Interventions US Preventive Services Task Force, https://www.uspreventiveservicestaskforce. org/Page/Document/RecommendationStatementFinal/perinatal-depression-preventive-interventions. Accessed October 8, 2019.
- Olson, A. L.; Dietrich, A. J.; Prazar, G.; Hurley, J.; Tuddenham, A.; Hedberg, V.; Naspinsky, D. A. 2005. Two Approaches to Maternal Depression Screening During Well Child Visits. J Dev Behav Pediatr 26(3): 169-176.
- Vikki Wachmo, "Maternal Depression Screening and Treatment: A Critical Role for Medicaid in the Care of Mothers and Children" (Informational Bulletin)
- (Baltimore, Md.: Centers for Medicaid and CHIP Services, May 11, 2016), https://www.medicaid.gov/federal-policy-guidance/downloads/cib051116.pdf
 Vikki Wachmo, "Maternal Depression Screening and Treatment: A Critical Role for Medicaid in the Care of Mothers and Children" (Informational Bulletin) (Baltimore,
- Md.: Centers for Medicaid and CHIP Services, May 11, 2016), https://www.medicaid.gov/federal-policy-guidance/downloads/cib051116.pdf 9 AAP Division of Health Care Finance. Update on use of, payment for new health risk assessment codes. AAP Gateway. https://www.aappublications.org/ news/2017/05/24/Coding052317. Published September 18, 2019. Accessed October 8, 2019.



CAREGIVER DEPRESSION FAST FACTS FOR FAMILIES

Key Actions and Strategies

- Understand that a caregiver's mental health impacts the healthy development of a child, especially during the early years of life. Depression disrupts caregiver-child bonding and decreases caregivers' likelihood to engage in responsive, safe, and sensitive interactions—interactions that are critical for a child's developmental health. Remember, your mental and physical well-being are inextricably linked with the health of your child, which means caring for yourself is the same as caring for your child.
- Learn about the signs and symptoms of caregiver depression. Depression doesn't feel the same for everyone.
 Talk to a family member or health care provider if you are experiencing any symptoms, such as:¹⁰
 - > Low moods over a long period of time
 - > Feeling extremely sad, angry, anxious or "empty"
 - > Loss of energy, hope or positivity
 - > Suicidal thoughts or attempts
 - Difficulty concentrating, recalling details and making decisions
 - > Overeating or loss of appetite
 - > Feeling irritable or restless
 - > Trouble falling asleep or sleeping too much
 - > Having aches or pains that do not get better
- ening. Pediatric providers understand how important
- Talk to your child's provider about depression screening. Pediatric providers understand how important caregiver mental health is to child health. The American Academy of Pediatrics (AAP) recommends screening for depression during the well-child visit, so don't feel shy about speaking up. Caregiver depression is highly treatable, and there are many kinds of support and treatment available.
- **Know your resources.** Contact the Postpartum Support International Warmline and a trained helpline volunteer will call/text you back to identify a local coordinator and resources in your area:



- > Call 1-800-944-4773, #1 en Espanol or #2 English
- > Text 503-894-9453

Medicaid Fast Facts

If your child is covered by Medicaid, your state may allow pediatric providers to screen for depression at no additional cost to your family. If needed, follow-up interventions that involve both you and your child can be billed to the child's Medicaid. Currently, 36 state Medicaid programs (AL, CA, CO, CT, DE, GA, HI, IA, ID, IL, IN, KY, MA, MD, ME, MI, MN, MS, MT, NC, ND, NM, NV, NY, OH, PA, RI, SC, SD, TN, TX, VA, VT, WA, WI, WV) and the District of Columbia provide some type of payment for maternal depression screenings during a well child visit.¹¹



¹⁰ Depression During and After Pregnancy. Centers for Disease Control and Prevention. https://www.cdc.gov/reproductivehealth/features/maternal-depression/index.html. Accessed October 8, 2019.

¹¹ State Advocacy. AAP.org. https://www.aap.org/en-us/advocacy-and-policy/state-advocacy/Pages/State-Advocacy.aspx. Accessed October 8, 2019.

CAREGIVER DEPRESSION FAST FACTS FOR COMMUNITY ADVOCATES

Key Actions and Strategies

Establish a coalition of local organizations to lead change in your community. Build a coalition with organizations already invested in family health and well-being, such as those representing health care, mental health, education, child welfare and family services. Once you've identified your key stakeholders, leverage the following strategies:



- > Identify and build a mental health care provider referral list.
- As community advocates, you have unique knowledge of the resources in your community. Help make sure more caregivers can access treatment by developing a referral list of local mental health care providers, services, and resources and share the list with families at local community sites (such as libraries or town halls) and with local pediatric and obstetric providers. Collaboration between obstetrics providers and pediatric providers is encouraged when mental health concerns are identified.¹²
- Map out your communities' mental health landscape, including, 1) whether your state allows caregiver depression screening to be claimed as a service under Medicaid during the well child visit. Currently, 36 state Medicaid programs (AL, CA, CO, CT, DE, GA, HI, IA, ID, IL, IN, KY, MA, MD, ME, MI, MN, MS, MT, NC, ND, NM, NV, NY, OH, PA, RI, SC, SD, TN, TX, VA, VT, WA, WI, WV) and the District of Columbia provide some type of payment for maternal depression screenings during a well child visit;¹³ and 2) whether any of your communities' pediatric practices are incorporating depression screenings in their well-child visits.
- > Integrate caregiver depression screenings into one pediatric practice's work flow. Successfully integrating screenings into one pediatric practice provides a roadmap to support spread and scale to practices across your community. If you identified a practice when mapping your communities' mental health landscape, engage that practice as a partner in your coalition. Map out their process and then share it with other pediatric practices in your community. When partnering with a practice that is new to screenings, remember to encourage buy-in from practice staff. Share the impact of caregiver depression on children's developmental health and refer to the American Academy of Pediatrics (AAP) recommendations that new mothers be screened for postpartum depression at their child's well-visits at 1, 2, 4, and 6 months of age.¹⁴

Medicaid Fast Facts

Talk to your coalition partners and pediatric providers about the central role that Medicaid plays in improving children's health and developmental outcomes and the families who support their healthy development. Under provisions from the Affordable Care Act, Medicaid mandates coverage of preventative services recommended by the U.S. Preventive Services Task Force, such as screening for depression. Medicaid also offers many opportunities for providing access to care for caregiver depression because of its broad coverage of mental health services and expanded eligibility.



Screening for Perinatal Depression. ACOG Committee Opinion No 757. American College of Obstetrics and Gynecologists 2018;132:e208-12
 State Advocacy. AAP.org. https://www.aap.org/en-us/advocacy-and-policy/state-advocacy/Pages/State-Advocacy.aspx. Accessed October 8, 2019.



STRENGTHEN SYSTEMS THAT SUPPORT FAMILIES AFFECTED BY CAREGIVER DEPRESSION



When children's caregivers—parents, grandparents, and other family members—suffer from depression, it adversely affects children's developmental health because:

- 1. Children's rapidly forming brain architecture depends on positive and responsive interactions with their caregivers
- 2. The early years of life are the most crucial period for the formation of intelligence, personality and social behavior¹⁵

What Policy Makers Should Know

 Perinatal depression is the most common and underdiagnosed obstetric complication in the United States. This condition affects 15 to 20 percent of new mothers. The prevalence is nearly doubled for mothers living at low income, and the rate is 40 to 60 percent for low income adolescent mothers.¹⁶

- Caregiver depression not only impacts individuals and families, but also communities and the state. The economic burden of depression impacts individuals through cost of mental health care, medical visits, medications, time away from work and lost wages, and costs of transportation. Burdens to society include loss of life, decreased productivity (through reduced capacity of work and absence from work), and increased costs of mental health and medical care. Policy makers should consider direct and indirect costs on communities and the state when enacting change.
- Medicaid is a critical vehicle for addressing caregiver depression, improving children's health and supporting economic mobility of future generations. Caregivers living in poverty are more than three times as likely to have depression as caregivers who do not. Having a caregiver with untreated depression adversely affects children's development, and therefore influences children's ability to succeed later in life. As a result, these children may struggle through adulthood and end up in poverty, facing the same risks of depression as their caregivers. Medicaid can help improve health outcomes for caregivers and children affected by depression and break this cycle of poverty, depression and poor early childhood development because:
 - Nearly one half of children receive health coverage by Medicaid and Medicaid-CHIP programs
 - > Medicaid can cover caregiver depression screenings during pediatric well-child visits
 - Medicaid covers certain treatment for caregiver depression



¹⁵ Brain Architecture. Center on the Developing Child at Harvard University. https://developingchild.harvard.edu/science/key-concepts/brain-architecture/. Accessed October 8, 2019.

https://www.mhanational.org/maternal-depression-making-difference-through-community-action-planning-guide. Accessed October 8, 2019.

19 Reeves RV. The Power of Love: Why maternal depression is an economic mobility issue. Brookings. https://www.brookings.edu/research/the-power-of-love-why-maternal-depression-is-an-economic-mobility-issue/. Published April 29, 2019. Accessed October 8, 2019.



¹⁶ Earls M. AAP reports: Perinatal depression screening, referral needed. AAP Gateway. https://www.aappublications.org/news/2018/12/17/ perinatal depression 121718. Published September 18, 2019. Accessed October 8, 2019.

¹⁷ Final Recommendation Statement. Depression in Adults: Screening - US Preventive Services Task Force. https://www.uspreventiveser-vicestaskforce.org/Page/Document/RecommendationStatementFinal/depression-in-adults-screening1. Accessed October 8, 2019.

¹⁸ Maternal Depression-Making a Difference Through Community Action: A Planning Guide: Mental Health America. mha.