Nemours, through support from the Robert Wood Johnson Foundation, developed a Roadmap for state Medicaid agencies. With state and hypothetical examples, the Roadmap illustrates existing federal Medicaid and Children’s Health Insurance Program (CHIP) authority to deliver a range of preventive health services and strategies, including obesity prevention. The Roadmap categorizes states’ prevention activities along a continuum of five main categories, moving from individual level (IL) engagement, with services targeting individual Medicaid enrollees, to population level (PL) engagement, with services and strategies targeting an entire geographic area including non-Medicaid enrollees. The five categories are not mutually exclusive; a state could implement multiple interventions on the continuum. The Roadmap is a companion to three case studies and a white paper, available at: http://movinghealthcareupstream.org/innovations/pathways-through-medicaid-to-prevention.

**Roadmap Framework**

**IL-1**
Physician or other licensed practitioner (OLP) provides individual Medicaid enrollee a preventive service in a medical setting.

**IL-2**
In addition to IL-1, provider refers the individual to a community-based organization for non-medical supportive and upstream services. May also include provision of case management or care coordination.

**IL-3**
Individual Medicaid enrollee receives preventive service in non-traditional way:
A: Physician or OLP provides individual Medicaid enrollee a preventive service outside of a medical setting in the community.
B: Non-traditional provider delivers an individual Medicaid enrollee a preventive service.
C: Individual Medicaid enrollee receives an upstream or non-medical service in the community.

**PL-1**
Population health intervention is provided to entire community or geographic area, not limited to patients in particular practice or MCO. Medicaid pays for the service even though it is provided to non-enrollees.

**PL-2**
Comprehensive population health intervention, with Medicaid and another state agency sharing goals and collaborating.

**Roadmap State Examples**

**IL-1**
Oklahoma reimburses health and behavior services delivered by mental health providers for primarily weight-related diagnoses.

**IL-2**
Missouri’s multi-disciplinary weight management program is based in a hospital and makes referrals to Big Brothers, Big Sisters and parenting programs. Subsequent clinic visits follow up on families’ survival needs.

**IL-3**
In Ohio, Nationwide’s ACO deploys mobile care centers to serve children in schools and communities. Nationwide also devotes resources and staff to support a community housing initiative and other upstream activities.

**PL-1**
Massachusetts uses CHIP funds to cover nine public health programs related to improving the health of all children (e.g., youth violence prevention, young parent support).

**PL-2**
Oregon creates flexible coverage for upstream services addressing wellness, mental health, and housing support. Oregon is breaking down silos between health care and early education, using Race to the Top funding to support developmental screenings.