

Child and Caregiver Outcomes Using Linked Data

2019-2022

Project Overview

In 2019, one in three children in foster care entered due to parental drug use¹, but what is known about the combination of parental and children's needs is limited. Child welfare data alone does not provide a holistic picture of the services and supports needed by and provided to families in crisis. Linking data sources can help ensure that agencies are leveraging data to best meet the assessment, treatment and service needs of parents and caregivers with substance use disorders and their children.



Integrating child welfare data with Medicaid data can allow for a more robust analysis of the impact of interventions on child and parent outcomes. With the passage of the 2018 Family First Prevention Services Act, states have new incentives to evaluate the effectiveness of services provided by the child welfare system and/or Medicaid to families at risk of entering or re-entering the child welfare system. Bolstering state-level data infrastructure is a critical first step to: 1) establishing the ongoing linkage and utility of these data, and 2) providing the broader research community with the data needed to better understand the complex relationship between services and outcomes.

The [Child and Caregiver Outcomes Using Linked Data](#) (CCOULD) project provides technical assistance to states to develop state-specific datasets linking the Medicaid administrative claims of parents with the records of their children from the child welfare system. The data will be combined into a multi-state, deidentified data set for secondary data analysis. These data will be made available to researchers to enhance their understanding of parental substance use disorders and child and family outcomes.

This project is a partnership between the HHS Office of the Assistant Secretary for Planning and Evaluation (ASPE) and the Administration for Children and Families, Office of Planning, Research, and Evaluation (ACF OPRE). It is funded by the Patient Centered Outcomes Trust Fund. Two states – Florida and Kentucky – are currently participating in COULD.

Sample Site Selection Criteria

- State interest and buy-in from state leadership
- Existing data infrastructure
- Staff capacity
- Policies governing data sharing
- Experience linking any data sources
- Existing research partnerships

¹ U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2019). The AFCARS Report No. 26. Washington, DC: U.S. Department of Health & Human Services. Retrieved from <https://www.acf.hhs.gov/sites/default/files/documents/cb/afcarsreport26.pdf>.

Participating States

The initial two states selected for CCOULD are taking unique approaches to the preparation of integrated data sets.

- Agencies within the **Kentucky Cabinet for Health and Family Services**, including the Department for Community Based Services, Department for Medicaid Services, and Office of Health Data and Analytics, are collaborating internally to share data and leverage internal linkage and substantive expertise.
- The **Florida Department of Children and Families and the Florida Agency for Health Care Administration** are partnering with researchers at the University of Florida's Department of Health Outcomes and Biomedical Informatics to share data and expand an existing research partnership.

In collaboration with the project team and each other, states and research partners have identified a common data model that will guide the selection of variables for CCOULD. States and research partners will utilize deterministic and probabilistic methodologies to integrate Medicaid and child welfare data. The project will produce a research-use dataset combining data from both states, which will further harmonize variables from the states. Records in the combined dataset will be deidentified using an expert determination method.

Project Resources

The project will produce several publicly available products, including:



Data documentation and a deidentified **research use dataset** to be archived at the National Data Archive on Child Abuse and Neglect (NDACAN).



Derived variables to assist interested researchers who may be more familiar with only either child welfare or Medicaid data. Derived variables may include specific Medicaid diagnosis and prescription medication flags, as well as summary variables for foster care episodes and evidence-based services receipt and costs.



A **roadmap** detailing the lessons learned and experiences of participating states and research partners as they completed the work of the CCOULD project.



A **toolkit** containing useful resources such as sample data sharing agreements, programming code used for linkage, deduplication, and quality control, and funding opportunities to provide support for sustainable, ongoing data linkage.

To learn more about CCOULD, please visit: <https://www.acf.hhs.gov/opre/project/child-and-caregiver-outcomes-using-linked-data-2019-2021>.

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