









MCH 2020: Children & Youth with Special Health Care Needs

Definition

Those who have, or are at risk for, a chronic physical, developmental, behavioral, or emotional condition and also require health and related services of a type or amount beyond that required by children generally.

State Priority

Services are comprehensive and coordinated across systems and providers

Performance Measures

- Percent of children with or without special health care needs having a medical home
- Percent of families who experienced an improved independent ability to navigate the systems of care

Kansas Data & Program Highlights

- In 2016-2017, one in five (20.7%) children (0-17 years) have a special health care need.¹
- Half (50.6%) of children have a medical home. There
 is no significant difference between children with a
 special health care need (46.1%) and children without
 a special health care need (51.8%).¹
- Every quarter, the Kansas Special Health Care Needs Program provides free care coordination trainings for families with a special needs child.
- Opportunity for improvement: Disparities persist for children with special health care needs to access medical care based on adequacy of insurance and geographic factors.

The Medical Home

A medical home is not a physical location but rather an approach to comprehensive primary care that is seen as the ideal model of care for all children.



Image Source: www.oregon.gov/oha/pcpch/Pages/standards.aspx

CYSHCN* with a Medical Home by Insurance Adequacy Kansas, 2016-2017 56.4% 50 140 27.8%

Source: National Survey of Children's Health, 2016-2017 *Children and Youth with Special Health Care Needs

Insurance is adequate

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Next Steps

- Increase family satisfaction about the communication among their child's doctors and other health providers.
- Increase the number of families who receive care coordination supports through cross-system collaboration.
- Develop an outreach plan to engage partners, providers, and families in the utilization of a shared resource to empower, equip, and assist families to navigate systems for optimal health outcomes.



This fact sheet, created by the Kansas Department of Health & Environment Bureaus of Epidemiology and Public Health Informatics and Family Health highlights the priorities and measures identified as part of the Title V MCH Services Block Grant Program five year needs assessment (*MCH 2020*). The Title V Block Grant was authorized in 1935 as part of the Social Security Act. Title V's mission is to improve the health and well-being of the nation's mothers, infants, children and youth, including children and youth with special health care needs and their families.



Insurance is NOT adequate