









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

Data and Program Highlights

- One in five (19.4%) Kansas children (0-17 years) has a special health care need.¹
- Majority (59.1%) of Kansas children have a medical home. There was no statistical difference between children with a special health care need (53.8%) and children without a special health care need (60.4%).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 from www.oregon.gov/oha/pcpch/Pages/standards.aspx

CYSHCN* with a Medical Home by Insurance Adequacy Kansas, 2011-2012 60.7% 37.8%

Source: National Survey of Children's Health, 2011-2012

Insurance is adequate

0%

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 support 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.
- Increase opportunities to empower families and build strong Maternal and Child Health advocates.
- Train and education providers to promote diversity, inclusion, and integrate supports in the provision of services for the Special Health Care Needs (SHCN) population into adulthood.



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