

Priority 5: Individuals with SHCN, their families, communities, and providers have the knowledge, skills, and comfort to offer coordinated care and support transition.

Transition Initiatives

Objective 5.1: Increase by 5% the proportion of adolescents and young adults (ages 12–21) who actively engage with their medical home provider to assess health care transition needs and develop a documented transition plan to adult health care by the end of 2030.

Health Care Transition (HCT) Planning: Due to staff turnover, in FFY26 the Title V SHCN team will focus on learning the [Got Transition](#) six core elements and other supporting materials. The goal in providing the care coordinators, both at KDHE and the satellite offices, is to develop a deeper, more practical understanding of this nationally recognized framework and to strengthen their ability to support adolescents and families through the health care transition process.

During FFY26, internal learning sessions will be conducted to revisit the Six Core Elements, introduce updated transition planning materials, and assess current staff confidence and knowledge levels. These efforts will help to establish a strong foundation for consistent, informed transition support statewide.

By the end of FFY26, a plan for ongoing training and continuous learning around the Six Core Elements will be developed, ensuring that new staff can be onboarded effectively, and current staff stay engaged with best practices.

The Title V CSHCN Director will continue to explore additional materials, supports, and publications that enhance the work of care coordinators and equip families with the resources they need to navigate transition successfully.

SHCN Program Transition Planning Tracking: As part of the continued exploration of the “Got Transition” resources, the SHCN Program team will revisit discussions on how to develop and implement a standardized workflow that incorporates health care transition planning into routine care coordination. This includes identifying opportunities during care coordination visits to assess transition readiness, initiate transition-related conversations, and utilize planning templates or checklists appropriate to the youth’s age and needs.

Throughout FFY26, the team will explore what tracking mechanisms could be used to monitor implementation and follow-up on transition goals for eligible clients. These discussions will help determine what tools, fields, or documentation processes may be added to existing workflows or data systems.

By the end of FFY26, the goal is to have a draft tracking plan and workflow framework in place that outlines how readiness assessments and transition planning activities will be documented consistently across the program. This framework will serve as the foundation for piloting implementation to the satellite offices.

Transition Educational Materials: In FFY26, the Title V CSHCN Director, with support from the SHCN Program team, will lead an exploratory phase focused on identifying the most helpful types of educational materials to support adolescents, young adults, and their families in the health care transition process. Given the ongoing structural changes within the SHCN Program, this initial phase will prioritize listening and learning to ensure future resources are aligned with both family needs and evolving program capacity.

The Title V CSHCN Director will work to gather input from care coordinators, families, and key partners to better understand common questions, information gaps, and preferred formats (e.g., printed materials, videos, digital messages) for transition-related education. This may include informal surveys, conversations with the Family Advisory Council, and insights from the SHCN team's day-to-day interactions with families.

By the end of FFY26, a prioritized list of potential materials and delivery methods will be developed, shaped by direct feedback from families and aligned with the "Got Transition" framework. This foundational work will inform the development and distribution of high-impact, accessible transition materials in future years.