

## CARE COORDINATION FOR CHILDREN AND YOUTH WITH SPECIAL HEALTH CARE NEEDS

Care coordination involves an interdisciplinary approach in which a care coordinator supports access to care according to an individual's needs, goals, and preferences.<sup>1</sup>  
Care coordination is crucial for children and youth with special health care needs<sup>2</sup> (CYSHCN).



### CYSHCN

CYSHCN generally require services from a broad range of providers and systems and thus need cross-system care coordination, for example between schools and health care providers. Without care coordination, CYSHCN often experience gaps in services and fragmented care that can have a negative impact on child and family health and well-being.

### PAYERS & POLICYMAKERS

Payers and policymakers need to develop new care coordination models that pool resources and use broad population-based financing and reimbursement models for CYSHCN and other population groups such as adults with chronic illnesses and frail elders.



### FAMILIES

Families strongly agree that care coordination is essential for CYSHCN. However, there are inadequate delivery and financing systems in place to assure this benefit for CYSHCN. Families provide much of the care coordination that CYSHCN need, without effective supports.

### PROVIDERS

Working in a variety of settings, providers can deliver cross-system care coordination in teams that include licensed and non-licensed staff with shared responsibility for clinical and non-clinical coordination tasks. Parents are essential members on these teams in order promote communication with families, and improve care quality.



## CATALYST CENTER RESOURCES



### Care Coordination Conundrum Report

This report discusses why care coordination has been insufficiently financed to date, and what can be done to address these challenges.

<http://cahpp.org/resources/care-coordination-conundrum>



### State Financing Strategies

This page links to examples of the innovative strategies states are using to promote care coordination for CYSHCN.

<http://cahpp.org/project/the-catalyst-center/financing-strategy/care-coordination/>



### Webinar Series on Care Coordination for Children with Complex Health Care Needs

This webinar series focuses on coordinating care for children with "social complexity".

<http://cahpp.org/resources/webinar-series-on-care-coordination/>

**DEFINING CYSHCN:** According to the federal Maternal and Child Health Bureau, CYSHCN are those who have or are at increased risk for chronic physical, developmental, behavioral, or emotional conditions, and who also require health and related services of a type or amount beyond that required by children generally.<sup>2</sup>

## CITATIONS

1. Bachman, S.S., Comeau, M. & Jankovsky, K.\* (2015). *The Care Coordination Conundrum and Children with Special Health Care Needs. What Is Care Coordination? Who Should Receive It? Who Should Provide It? How Should It Be Financed?* Lucile Packard Foundation for Children's Health. Palo Alto, California.

2. McPherson, M., Arango, P., Fox, H., Lauver, C., McManus, M., Newacheck, P., Perrin, J., Shonkoff, J., & Strickland, B. (1998). A new definition of children with special health care needs. *Pediatrics*,102(1):137-140.

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