



Read the <u>brief</u>, developed by the National Academy for State Health Policy in partnership with the Catalyst Center.

Strategies for State Title V and Medicaid Programs to Promote Health Equity for Children and Youth with Special Health Care Needs (CYSHCN) of Color



Partner with families of CYSHCN of color in policy development, program design and implementation, and Medicaid Managed Care (MMC) contracting.

State Title V and Medicaid programs each have mechanisms to engage families of CYSHCN in the decision-making process for program development and improvement activities. States can consider options to ensure that the families of CYSHCN of color are included in both Title V family partnership efforts and Medicaid Member Advisory Committees (MACs) as an opportunity to advance health equity. These efforts can help to center the voices of communities of color, which can be vital to combat interpersonal and systemic racism often experienced in health care delivery.



Embed health equity initiatives specific to CYSHCN in MMC programs.

While states are highlighting health equity initiatives in MMC programs, they can also consider designing specific strategies or initiatives that consider the unique impact racism has on care access for CYSHCN of color. These activities can be incorporated into the MMC contracting process and require Managed Care Organizations (MCOs) to pursue certain strategies to advance health equity for CYSHCN of color. State Title V programs can also work with Medicaid agencies and their MCO partners to further ensure access to specialty care, programs, and services that consider the unique needs of CYSHCN of color.



Ensure quality and performance measurement efforts include data on CYSHCN of color.

As states evolve quality strategies for both Title V and Medicaid programs, data derived from performance measure reporting can be a powerful tool to develop a more comprehensive picture of health inequities experienced by CYSHCN of color. Capturing and sharing performance measurement data related to racial disparities between Title V and Medicaid programs can also enable states to identify and address persistent inequities through diverse data sources.

Opportunities to share data and quality metrics can also assist in aligned state priorities for CYSHCN along with improved identification of potential gaps in services for CYSHCN of color.



Leverage cross-sector collaborations to advance support for CYSHCN of color.

As states navigate partnerships across child serving systems to advance health equity, they can consider opportunities to ensure close collaboration between Title V programs and Medicaid agencies. States can also consider activities that include diverse, community-focused stakeholder partners with vital insight into the needs of CYSHCN of color and their families. Creating a unified, holistic state approach to health equity for CYSHCN can assist states in advancing mutual program goals and priorities.