



REGIONAL PLANNING CONSORTIUMS

CHILDREN & FAMILIES SUB COMMITTEE

Western New York Town Hall Meeting

January 25, 2018 – Buffalo Central Library

January 26, 2018 – Arcade Free Public Library



REGIONAL PLANNING CONSORTIUMS

CHILDREN & FAMILIES AGENDA

- **Welcome**
- **Role of the Children & Families Subcommittee**
- **Health Homes 101**
- **Identification & Prioritization of Issues**
- **Development of Workgroups**
- **Report Back**
- **Next Steps**



CHILDREN & FAMILIES COMMITTEE

(PURPOSE & OBJECTIVES)

- **PURPOSE:** TO BRING TOGETHER STAKEHOLDERS ASSOCIATED WITH SERVICES FOR CHILDREN AND YOUTH IN EVERY REGION TO MONITOR THE TRANSFORMATION OF CHILDREN'S SERVICES ACROSS NYS.

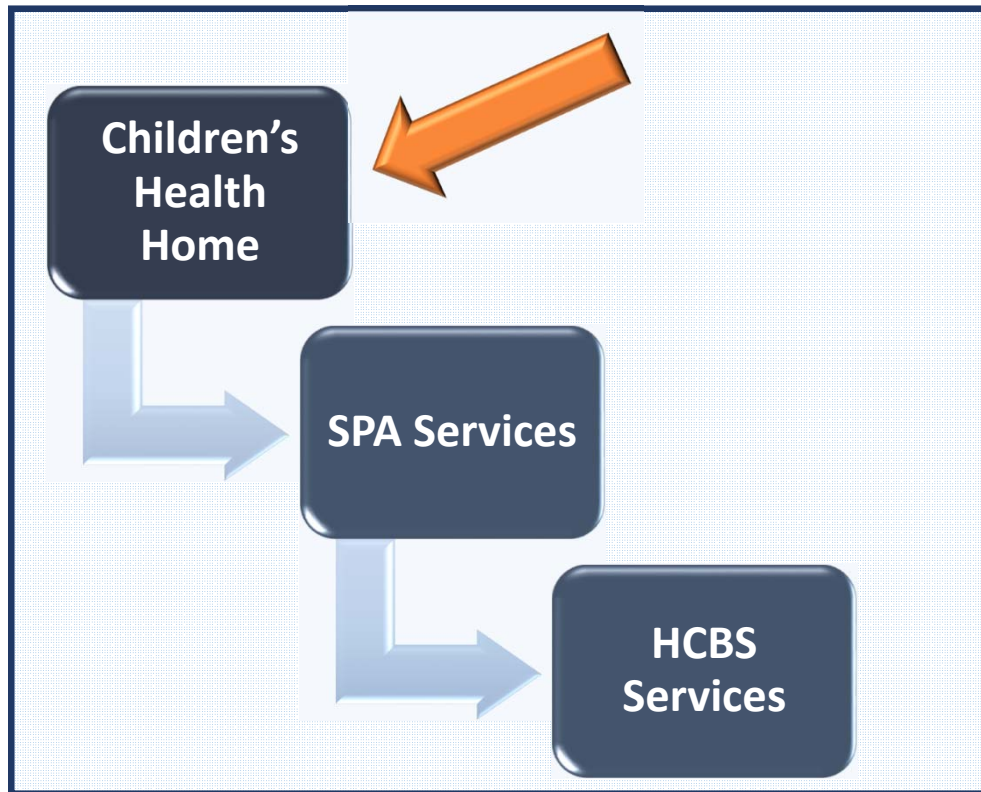
- **OBJECTIVE:** ASSIST IN PROVIDING SOLUTIONS TO IMPROVE NETWORK ADEQUACY, INCREASE ACCESS TO SERVICES & SUPPORT CHILDREN AT-RISK TO THRIVE IN THEIR COMMUNITY.



REGIONAL PLANNING CONSORTIUMS

CHILDREN & FAMILIES SUBCOMMITTEE

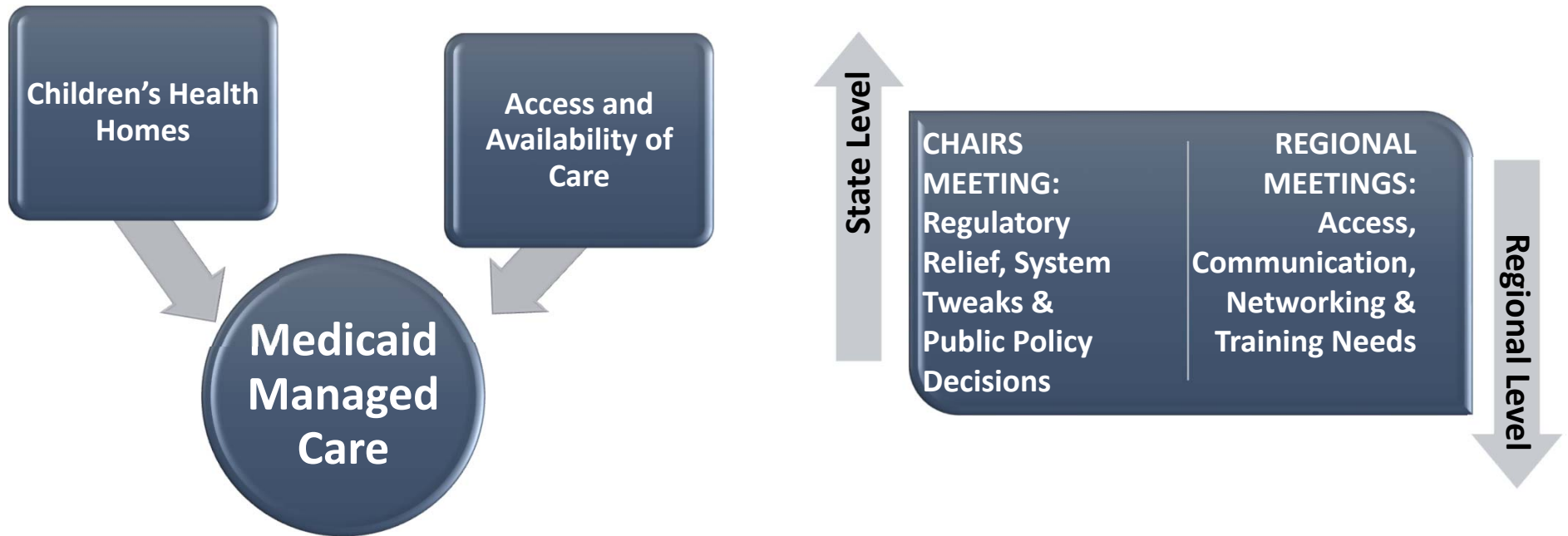
RPC SCOPE



- Please use this scope to shape the C & F discussions in each of the regions. It should be noted that this is not an exclusive list.
- We have encouraged the Children and Family Chair and LGU Lead to keep a tight focus on the issues that are discussed and develop a sense for what is a reasonable issue for the C & F Subcommittees to work on.
- While some discussions may be more relevant to your stakeholder group than others, it is a critical component of the process that all child servings systems are included in the C & F Subcommittee dialogue.

REGIONAL PLANNING CONSORTIUMS

SHAPING DISCUSSIONS – GUIDING DIALOGUE





REGIONAL PLANNING CONSORTIUMS

CHILDREN & FAMILIES SUBCOMMITTEE

GUIDING PRINCIPLES

The Children & Families Subcommittee is founded upon the following principles:

- Families are best engaged in their own communities where they live and are most comfortable, and where they have culturally relevant resources to use in the achievement of their goals;
 - Families are viewed as partners and colleagues in the discussion;
- Child and Family serving systems/agencies must collaborate to create a seamless system;
 - **Every child serving stakeholder must be included in the conversation;**
 - Recommendations must be solution-focused;

*This is not unique to the RPC's, but it is a reiteration of the CASSP values (Child and Adolescent Service System Program) which were developed in 1983.



HEALTH HOMES SERVING CHILDREN

BACKGROUND

- **BACKGROUND:** Health Homes were approved in NYS by the Centers for Medicare and Medicaid Services (CMS) in 2012. At this time there was not specific consideration made for serving the child and youth population.
- In 2014, the state agencies began creating the health homes serving children model with special consideration for the child and youth population.
- In 2015, the state agencies designated 16 health homes serving children.
- In December, 2016, health homes serving children began enrolling eligible children and youth.

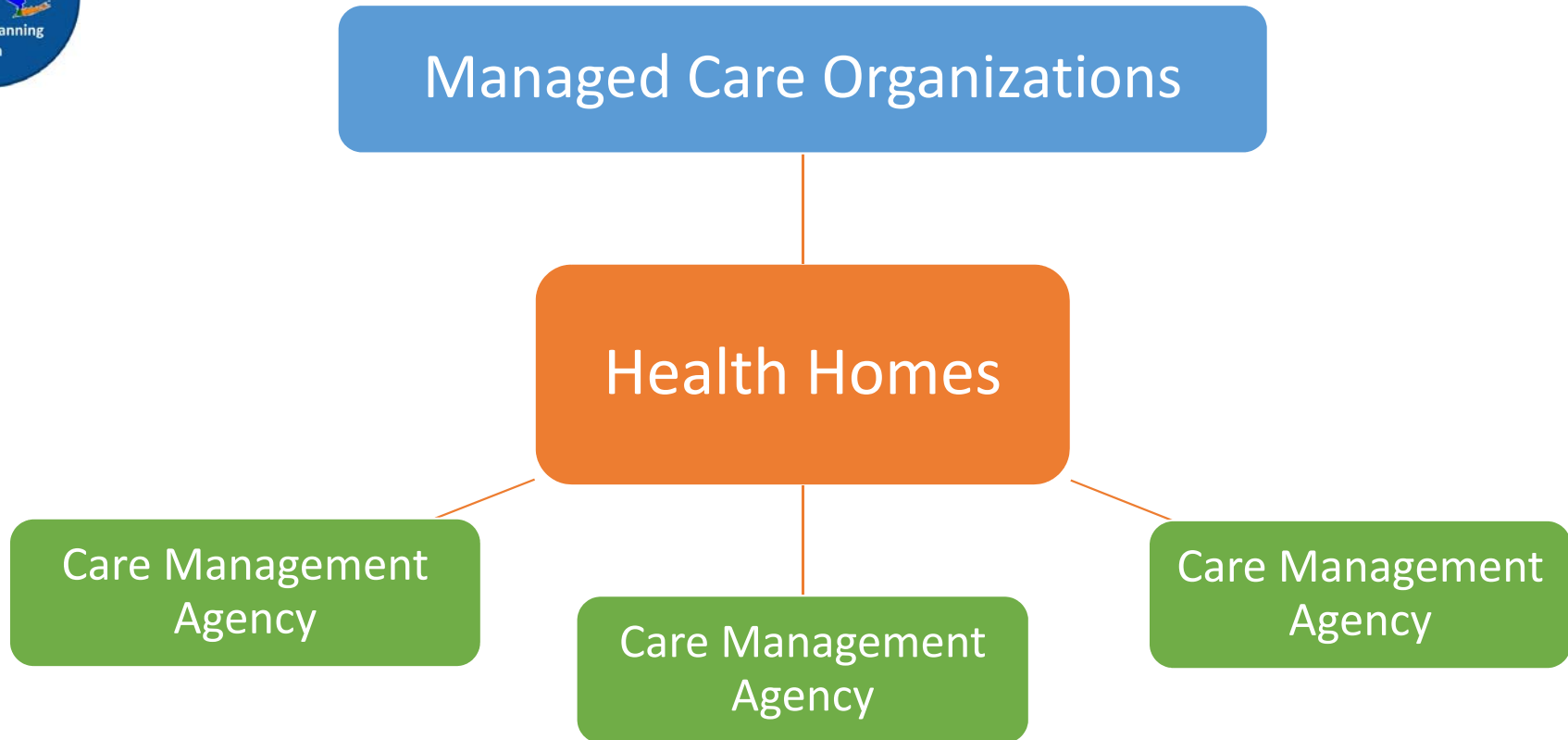


Children's Health Homes in WNY

- Children's Health Homes of Upstate New York, LLC
- Children's Health Homes of Western New York
- Encompass Health Home
- Greater Rochester Health Homes Network LLC
- Niagara Falls Memorial Medical Center



Health Homes Serving Children Model



Care management agencies could include OMH TCM providers, Voluntary Foster Care Agencies, Waiver Providers (OMH SED, CAH I, II, B2H), AIDS Institute/COBRA, OASAS/MATS.



HEALTH HOMES SERVING CHILDREN

PRINCIPLES FOR SERVING CHILDREN IN HEALTH HOMES AND MANAGED CARE

- **Ensure managed care and care coordination networks provide comprehensive, integrated physical and behavioral health care that recognizes the unique needs of children and their families**
- **Provide care coordination and planning that is family-and-youth driven, supports a system of care that builds upon the strengths of the child and family**
- **Ensure managed care staff and systems care coordinators are trained in working with families and children with unique, complex health needs**
- **Ensure continuity of care and comprehensive transitional care from service to service (education, foster care, juvenile justice, child to adult)**



HEALTH HOMES SERVING CHILDREN

PRINCIPLES FOR SERVING CHILDREN IN HEALTH HOMES AND MANAGED CARE

- **Incorporate a child/family specific assent/consent process that recognizes the legal right of a child to seek specific care without parental/guardian consent**
- **Track clinical and functional outcomes using standardized pediatric tools that are validated for the screening and assessing of children**
- **Adopt child-specific and nationally recognized measures to monitor quality and outcomes**
- **Ensure a smooth transition from current care management models to health home, including transition plan for care management payments**



Health Homes Serving Children

ELIGIBILITY CRITERIA

ELIGIBILITY:

MEDICAID RECIPIENT

AND

SINGLE QUALIFYING CONDITIONS

- COMPLEX TRAUMA
- SERIOUS EMOTIONAL DISTURBANCE
- HIV/AIDS

OR

- TWO OR MORE QUALIFYING CONDITIONS
- TWO CHRONIC CONDITIONS (MEDICALLY FRAGILE CHILDREN)

AND

- EACH CHILD MUST MEET APPROPRIATENESS CRITERIA



Health Homes Serving Children

DEFINING A CHILD

- **Definition of a child:** the state issued the following definition of a child for purposes of health homes serving children:
- “In the context of the administration of health homes (e.g., children’s rates, health homes primarily serving children) a child is defined as an individual under the age of 21”
- “Note: age is not an eligibility requirement for health homes (e.g., individuals that turn 21 and meet the chronic condition based criteria and are appropriate for health homes care management remain eligible for health homes”



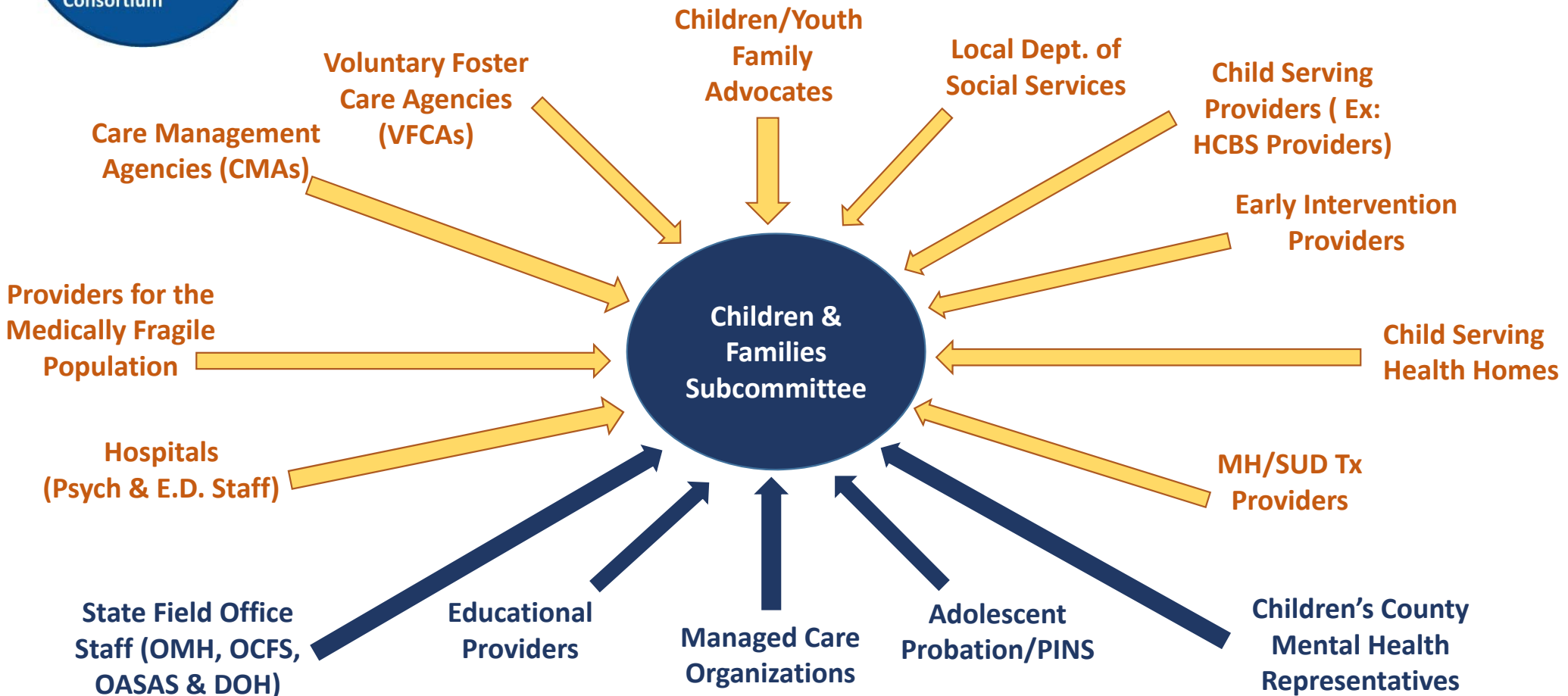
Children's Health Homes in the Western New York Region

- **Children's Health Homes of Upstate New York, LLC (CHHUNY)**
- **Children's Health Homes of Western New York (Oishei Children's Hospital)**
- **Encompass Health Home**
- **Greater Rochester Health Homes Network, LLC**
- **Niagara Falls Memorial Medical Center**



REGIONAL PLANNING CONSORTIUM

CHILDREN & FAMILIES SUBCOMMITTEE COMPOSITION





Issues Identification & Prioritization



Children & Families Committee

Breakout Groups



Reconvene & Report Back



REGIONAL PLANNING CONSORTIUMS

WNY REGION CHILDREN & FAMILIES CHAIR

**Vicki McCarthy, Executive Director
Families' Child Advocacy Network**

WNY REGION CHILDREN & FAMILIES LGU LEAD

**Marie Sly,
Coordinator, Children's and Youth Services Integration
Erie County Department of Mental Health**



Next Steps:

- Margaret, Vicki, and Marie will pull together the information shared at the two (2) town halls and categorize the issues.
- We will be scheduling a follow-up meeting to look at the issues & concerns raised at the two meetings.
- Those interested in working on the sub-committee will prioritize the issues and develop an action plan to address these issues.
- Reports will go back to the WNY RPC Board of Directors; they will consider which issues can be addressed regionally and which may be referred to the state co-chairs meeting.



Regional Planning Consortium

**For more information on the Western New York
Region Children & Families Subcommittee**

Margaret Varga, WNY RPC Coordinator

518-441-8635

Email: mv@clmhd.org

Website: www.clmhd.org/rpc