DHSS Releases Delaware’s Plan for Managing the Health Care Needs of Children with Medical Complexity

NEW CASTLE (May 30, 2018) – As a way to better support the needs of children with medical complexity and their families, the Division of Medicaid and Medical Assistance this week released Delaware’s Plan for Managing the Health Care Needs of Children with Medical Complexity and announced that stakeholders will continue work to develop longer-term strategies for this fast-growing population of children.

The Department of Health and Social Services received special instructions from the General Assembly in the Fiscal Year 2018 budget bill to develop and publish a comprehensive plan for managing the health care needs of Delaware’s children with medical complexity. These children have intensive health conditions, are medically fragile, and require extensive health care services and a coordinated care delivery system.

Nearly 20 percent of all U.S. children up to age 18 have a chronic and/or complex health care need such as asthma, diabetes, autism or spina bifida that requires physical and behavioral health care services and supports. A smaller group – about 4 percent, or 3 million nationwide – are estimated to be children with medical complexity. A child is considered medically complex if she or he falls into two or more of these categories:

- Having one or more chronic health condition associated with significant morbidity or mortality.
- Belonging to high-risk or vulnerable populations with functional limitations impacting their ability to
perform Activities of Daily Living (ADLs).

- Having high health care needs or utilizations patterns, including multiple sub-specialties, therapists and/or surgeries.
- Having a dependence on technology to overcome functional limitations and maintain a basic quality of life.

“I was very impressed at the willingness of all involved to step outside their traditional roles and engage in open and meaningful dialogue in an effort to better understand the needs and challenges we face in effectively serving children with medical complexities,” said Steve Groff, director of DHSS’ Division of Medicaid and Medical Assistance (DMMA).

Groff offered particular thanks to parents who served on Children with Medical Complexity (CMC) Steering Committee and shared their family experiences. “They shared their personal stories and provided a window to their world that was not only educational, but also very impactful,” he said.

The goals of the steering committee, which began its work in November 2017, included identifying the population, assessing access to health care services, evaluating models of care and analyzing the relationships between insurance payers.

Among the recommendations of the steering committee, made up of parents, health care providers, insurance representatives, and state agencies’ officials, are:

- Improve provider capacity by educating primary care providers (PCPs) regarding the depth of care necessary, as well as resources available to both themselves and the child’s parent or caregiver.
- Reduce the wait time to see specialists, especially in Kent and Sussex counties.
- Improve the efficiency of getting specialty lab authorizations approved.
- Increase the flexibility in how home health nursing
agencies assign nurses to cover care shifts.
- Standardize medical necessity documentation and review managed care organization (MCO) authorization processes to reduce redundancy of information.
- Empower parents or caregivers to navigate the appeals process by making it more transparent and less intimidating.
- Encourage parents to identify a medical home for their child so that care can be coordinated more efficiently.
- Plan for the child’s transition to adulthood gradually so the care is effectively and efficiently transferred to an adult medical home and specialists by age 22.
- Keep the steering committee in place to develop longer-term strategies.

The Children with Medical Complexity Steering Committee also delivered its plan to the General Assembly as required in the budget legislation.

To read or download the plan: