

NPM 18: MEDICAL HOME CYSHCN

GOAL

To increase the percent of children with special health care needs who have a medical home.

SIGNIFICANCE

The American Academy of Pediatrics (AAP) specifies seven qualities essential to medical home care, which include accessible, family-centered, continuous, comprehensive, coordinated, compassionate and culturally effective. Providing comprehensive and coordinated care to children in a medical home is the standard of pediatric practice. Research indicates that children with a stable and continuous source of health care are more likely to receive appropriate preventive care, are less likely to be hospitalized for preventable conditions, and are more likely to be diagnosed early for chronic or disabling conditions.¹

DEFINITION

Numerators:

- Number of children with special health care needs, ages 0 through 17, who are reported by a parent to meet the criteria for having a medical home (personal doctor or nurse, usual source for care, family-centered care, referrals if needed, and care coordination if needed).
- Number of children with special health care needs, ages 0 through 17, who have a personal doctor or nurse.
- Number of children with special health care needs, ages 0 through 17, who are reported by a parent to have a place they usually go when the child is sick or needs advice about their health (excluding the hospital emergency room).
- Number of children with special health care needs, ages 0 through 17, who are reported by a parent that the child's doctor or other health care provider always/usually 1) spent enough time with the child, 2) listened carefully to the child, 3) showed sensitivity to family values, 4) provided the specific information needed concerning the child, and 5) helped the family feel like a partner in the child's care.
- Number of children with special health care needs, ages 0 through 17, who are reported by a parent to have no problem getting needed referrals.
- Number of children with special health care needs, ages 0 through 17, who are reported by a parent to have received all needed help with care coordination.

Denominators:

- Number of children with special health care needs, ages 0 through 17.
- Number of children with special health care needs, ages 0 through 17.
- Number of children with special health care needs, ages 0 through 17.
- Number of children with special health care needs, ages 0 through 17, who are reported by a parent to have had a visit with a health care professional in the past 12 months.
- Number of children with special health care needs, ages 0 through 17, who are reported by a parent to have needed a referral to see any doctors or receive any services in the past 12 months.

¹ American Academy of Pediatrics. National Resource Center for Patient/Family-Centered Medical Home.

- Number of children with special health care needs, ages 0 through 17, who are reported by a parent to have needed care coordination in the past 12 months.

HEALTHY PEOPLE 2030 OBJECTIVE

Related to Maternal, Infant, and Child Health (MICH) Objective 19: Increase the proportion of children and adolescents who receive care in a medical home. (Baseline: 48.6 percent in 2016-17, Target: 53.6 percent).

STATUS

Generally speaking, across all categories assessed (i.e., personal doctor or nurse; usual source of sick care; family centered care, referrals, care coordination, and medical home), the Delaware percentages and national percentages were fairly comparable. In Delaware, note that the percentage of Hispanic CYSHCN who have a medical home is disproportionately lower than both Black non-Hispanic and White non-Hispanic CYSHCN (Figure F1).

Figure A1. Percentage of CYSHCN Ages 0-17 Years Who Have a Personal Doctor or Nurse, by Selected Race/Ethnicities, NSCH 2021-2022.

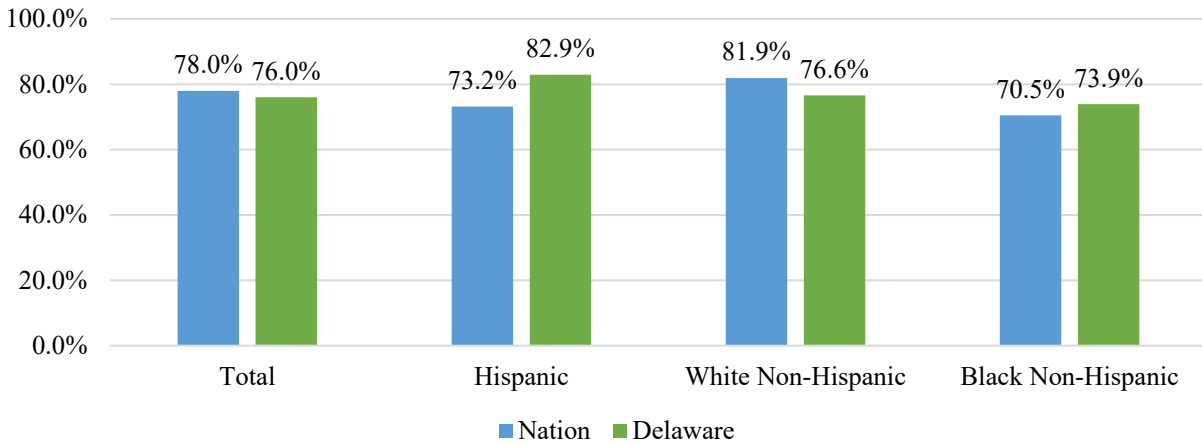


Figure A2. Percentage of CYSHCN Ages 0-17 Years Who Have a Personal Doctor or Nurse, by Health Care Coverage, NSCH 2021-2022.

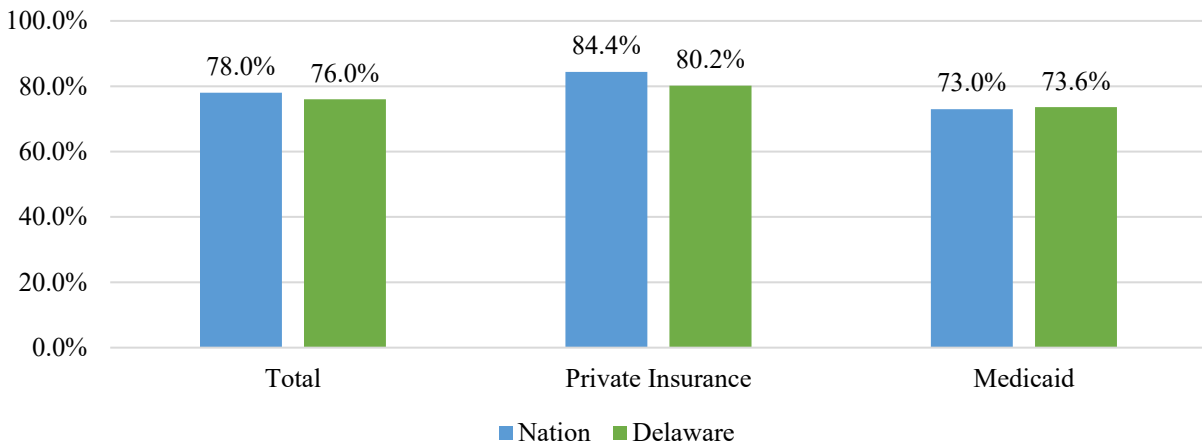


Figure B1. Percentage of CYSHCN Ages 0-17 Years Who Have a Usual Source of Sick Care, by Selected Race/Ethnicities, NSCH 2021-2022.

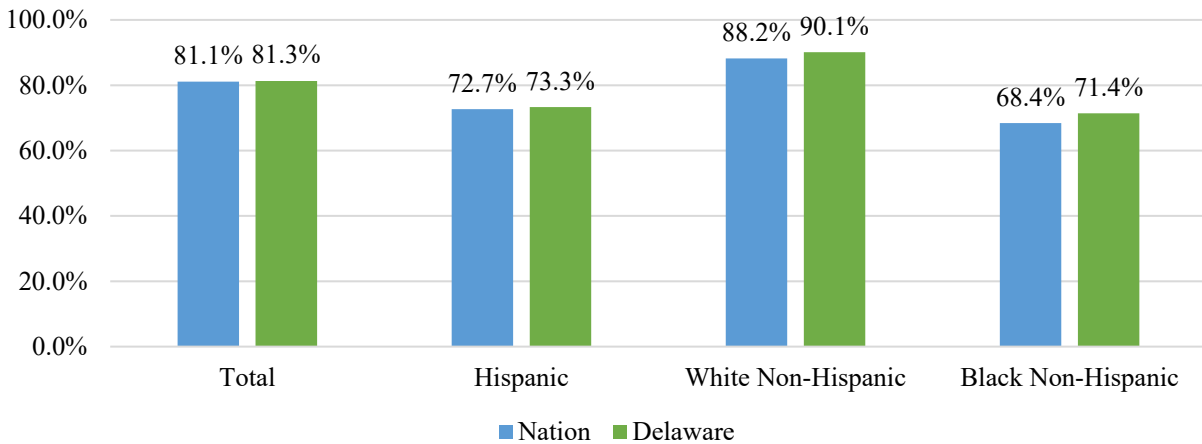


Figure B2. Percentage of CYSHCN Ages 0-17 Years Who Have a Usual Source of Sick Care, by Health Care Coverage, NSCH 2021-2022.

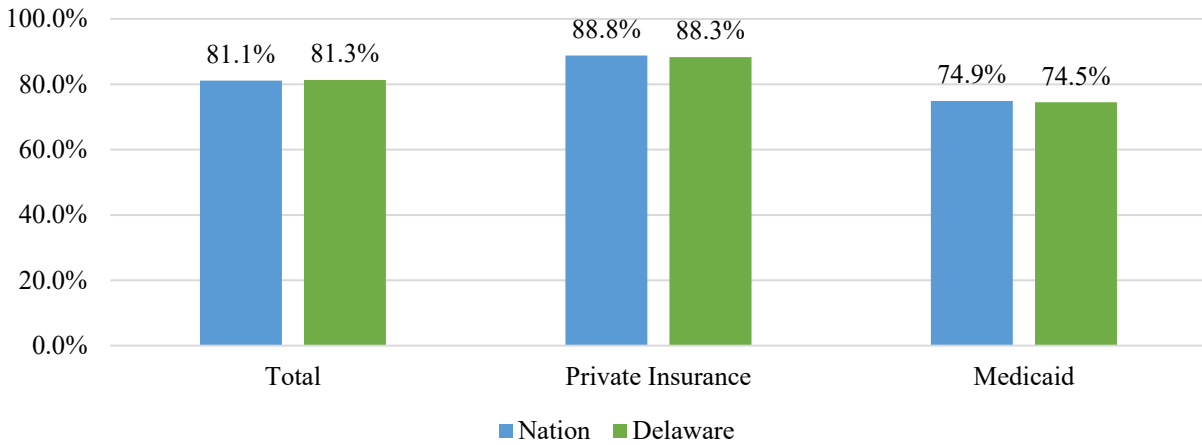


Figure C1. Percentage of CYSHCN Ages 0-17 Years Who Have Family Centered Care, by Selected Race/Ethnicities, NSCH 2021-2022.

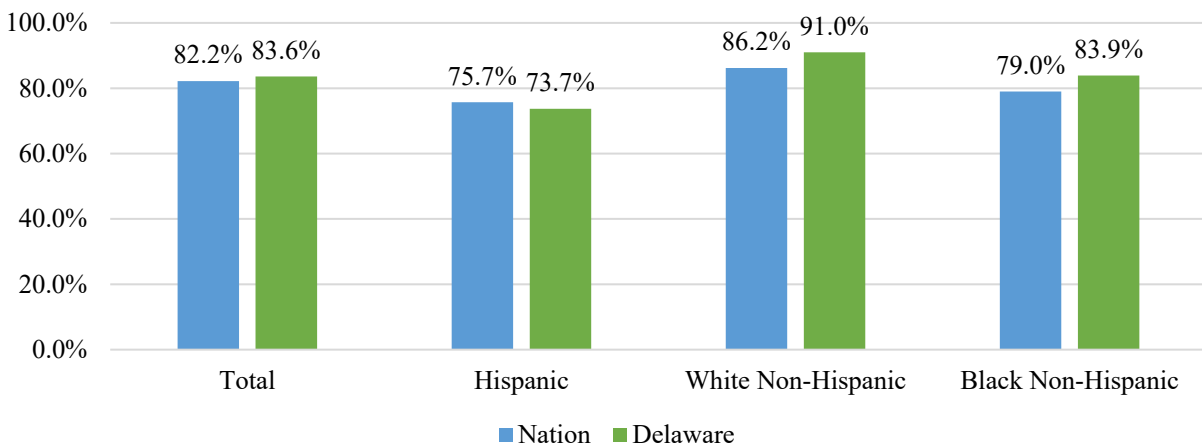


Figure C2. Percentage of CYSHCN Ages 0-17 Years Who Have Family Centered Care, by Health Care Coverage, NSCH 2021-2022.

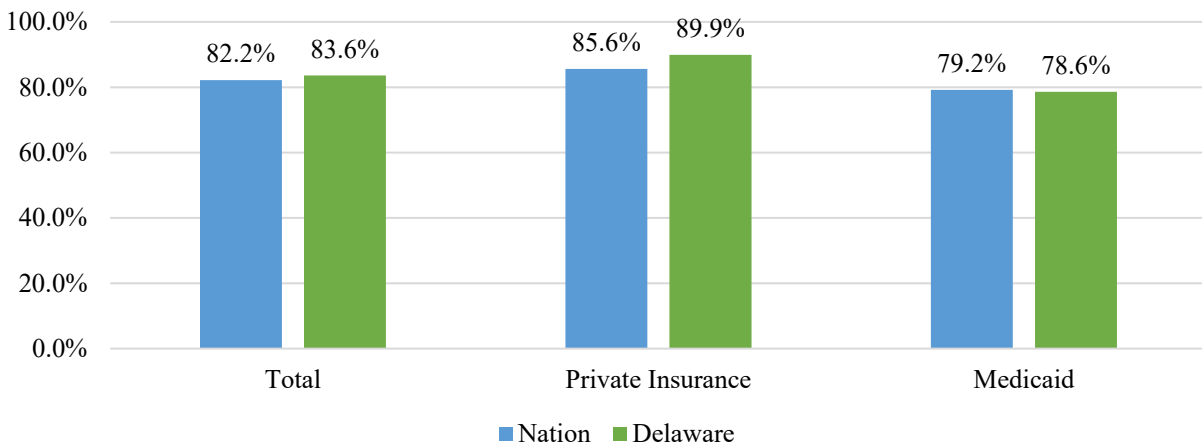


Figure D1. Percentage of CYSHCN Ages 0-17 Years Who Had No Issues Getting Needed Referrals, by Selected Race/Ethnicities, NSCH 2021-2022.

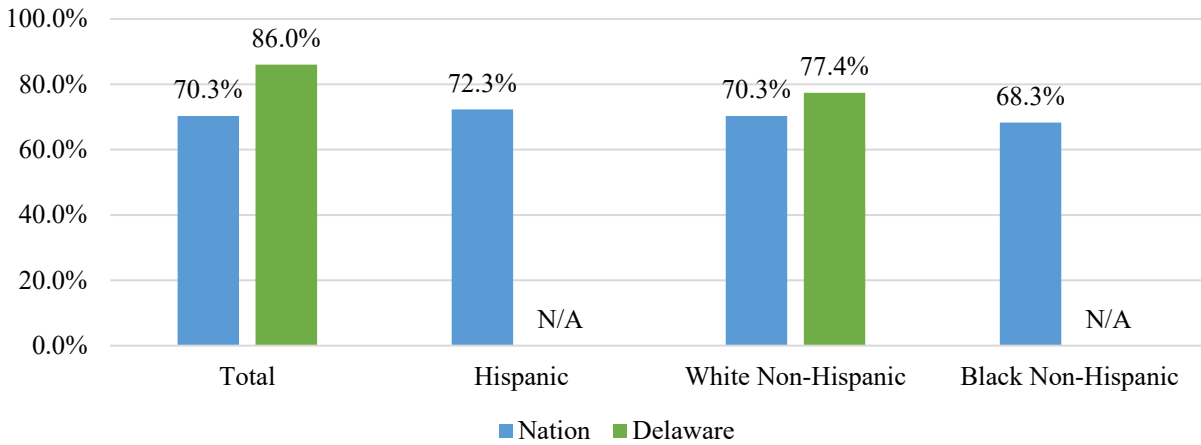


Figure D2. Percentage of CYSHCN Ages 0-17 Years Who Had No Issues Getting Needed Referrals, by Health Care Coverage, NSCH 2021-2022.

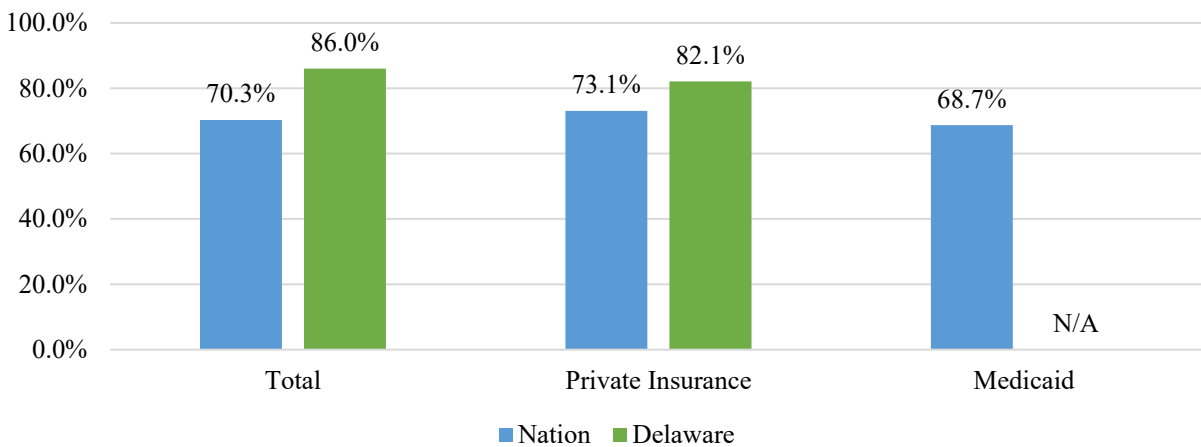


Figure E1. Percentage of CYSHCN Ages 0-17 Years Who Receive Needed Care Coordination, by Selected Race/Ethnicities, NSCH 2021-2022.

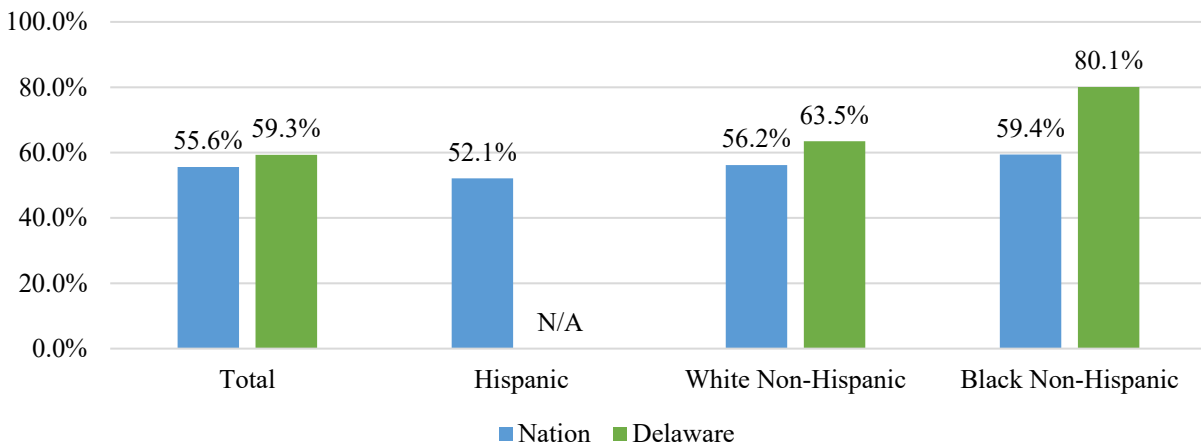


Figure E2. Percentage of CYSHCN Ages 0-17 Years Who Receive Needed Care Coordination, by Health Care Coverage, NSCH 2021-2022.

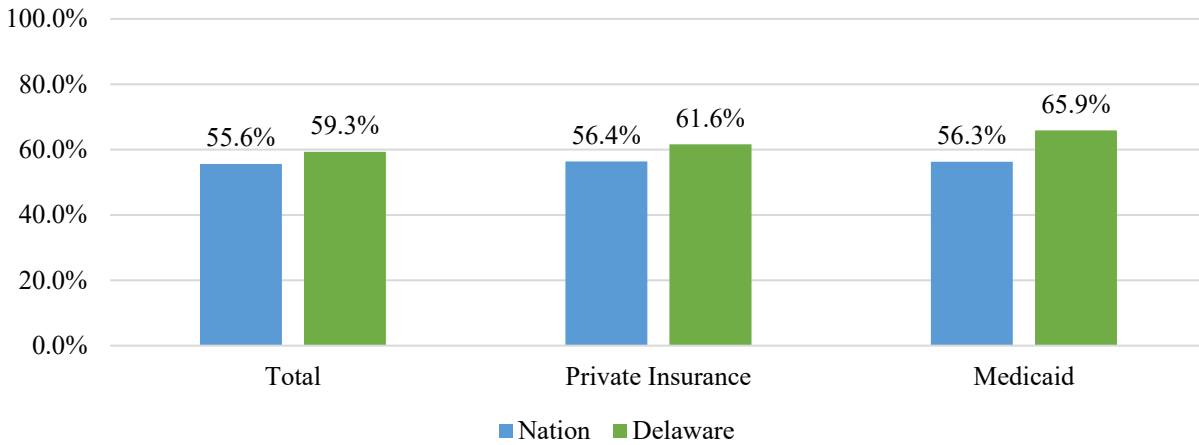


Figure F1. Percentage of CYSHCN Ages 0-17 Years Who Have a Medical Home, by Selected Race/Ethnicities, NSCH 2021-2022.

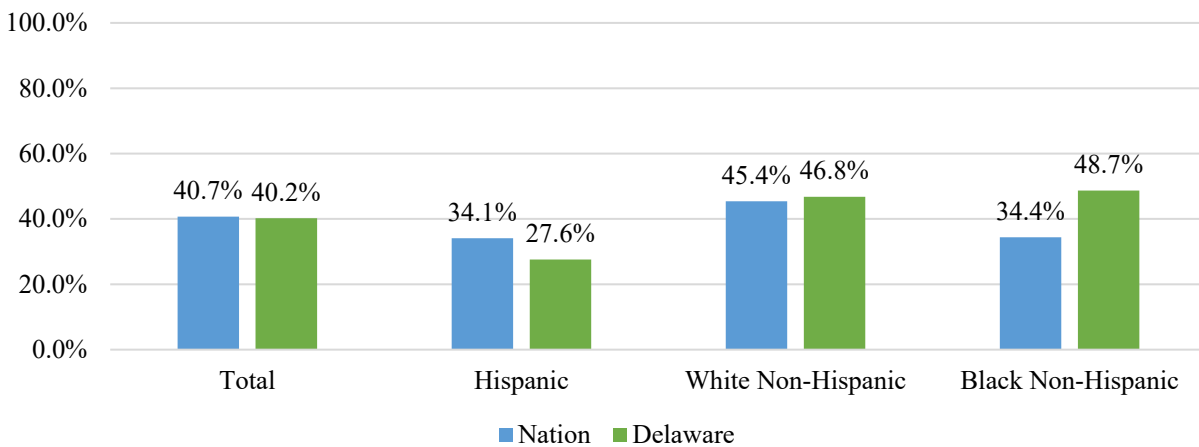


Figure F2. Percentage of CYSHCN Ages 0-17 Years Who Have a Medical Home, by Health Care Coverage, NSCH 2021-2022.

