



**Complex Care Management for  
Children & Youth with Special Health Care Needs (CYSHCN):  
Summary of Stakeholder Meeting Held on  
Thursday, August 11<sup>th</sup>, 2016**

Thank you again for attending our meeting and for your engaged participation. [Appendix A](#) provides an attendee list from the meeting. Below is a brief summary of the discussions held and identified opportunities.

**OPIP Efforts on Care Coordination and Complex Care Management- Colleen Reuland, MS**

Ms. Reuland, the Director of the Oregon Pediatric Improvement Partnership (OPIP), began the meeting providing background and context about work that OPIP has done with health systems and front-line practices focused on identifying and addressing CYSHCN. [Appendix B](#) provides Ms. Reuland's slides. Through these efforts a clear need to convene leaders in Coordinated Care Organizations (CCOs) and state departments was identified in order to share learnings, barriers and identify roles these stakeholders can play in addressing the barriers. A key area of focus for the meeting was related to the need to consider both medical and social complexity when identifying CYSHCN **WHO** should receive complex care management, the **LEVEL** of complex care management needed for that child and family, and **WHAT** team and set of services will best meet the need of the child and their family. Secondly, there was an emphasis on the value of the health care systems using existing state agency data systems that provide system-level information about social complexity.

**Keynote: Development of Innovative Methods to Stratify Children with Complex Needs for Tiered Care:**

**Assessing Both Medical and Social Complexity- Rita Mangione-Smith MD, MPH**

Dr. Mangione-Smith highlighted methods, models and data showing the value and need for using factors related to medical and social complexity when identifying CYSHCN. Her presentation included a description of the development and implementation of the Pediatric Medical Complexity Algorithm (PMCA), which uses administrative data to stratify children as having complex chronic disease, non-complex chronic disease, or children without chronic disease. She then described efforts to understand and utilize social complexity information to further support identification and coordination. She spotlighted methods for using existing state data systems within the Washington Integrated Database and in Minnesota. She concluded with a description of pilot work around using these information sources to develop complex care programs, and gave recommendations.

**Opportunities Identified in the Group-Level Discussion**

A facilitated discussion was then held around how the findings could be leveraged within Oregon. The following is summary of the key opportunities identified by the CCO leader and state agency leads present.

1. Overall, the group **confirmed the value and need for standardization in a) defining CYSHCN, and b) the value of using medical and social complexity factors in identifying CYSHCN.** That said, the approaches presented have not been used in Oregon and **would be valuable for consideration across public and private payors.** By the end of the conversation, all participants were clear on the unique and important factors that need to be considered in identifying CYSHCN and how they are different than for adults.
2. In the **current resource and reform environment, it necessary to leverage the information we currently have to more effectively assign and allocate complex care management resources.**
3. **A majority of the CCO leaders noted the value of information about social complexity** that is in the state's **Integrated Client Service Data Warehouse (ICS) and that they would support pilots around the use of information in this database** to better design complex care programs for children and youth. An important component of this strategy would be operationalizing how this database could be used to **create a social complexity index or score**, there meeting legal data sharing requirements.
4. **Dr. Steiner Hayward noted her support for a focus on the opportunities identified and requested feedback relating to legislative opportunities that could be considered.**

Thank you again for the time and thoughtful participation you contributed to what hopefully ends up being the first in many conversations about this important topic. Please do not hesitate to reach out to Colleen ([reulandc@ohsu.edu](mailto:reulandc@ohsu.edu), (503) 494-0456) with any questions, comments, or suggestions you may have around how OPIP may support next steps.