

What Factors are Associated with State Performance on Provision of Transition Services to CSHCN?

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Introduction

- **Transition services**
 - Definition: "purposeful, planned movement of adolescents and young adults with chronic physical and medical conditions from child-centered to adult-oriented health care systems" (1)
 - 90% of CSHCN survive to adulthood (1-4)
 - CSHCN have ongoing needs compared to other children (6-12)
 - CSHCN with more severe conditions face challenges with transition to adult health care (13-16)
- **Maternal and Child Health Bureau/Health Resources and Services Administration**
 - Title V needs assessment – system indicators
 - "receipt of the services necessary to make transitions to all aspects of adult life" (17)
 - The 2005-2006 National Survey of Children with Special Health Care Needs (NS-CSHCN) provides state and national prevalence estimates to assess progress toward achievement of goals
- **Individual, condition-related and system factors influence health care access and transition access for CSHCN** (7; 19-32)
 - Failure to obtain transition services may contribute to
 - Gaps in insurance coverage
 - Delay in obtaining care

Objective

- To examine whether individual, condition-related, and system-related characteristics are associated with state performance in the provision of transition services to CSHCN

Methods

- Analysis of cross-sectional data from the NS-CSHCN
 - Sample
 - Children, aged 12-17 years (n=16,876)
 - Hispanic, non-Hispanic Black, non-Hispanic White
 - Model variables
 - Dependent: State performance of transition services (high, medium, low)
 - Independent:
 - Individual demographic and family characteristics
 - Condition-related factors
 - MCHB-defined system indicators
 - Statistical analysis
 - Polytomous logistic regression with low performance states serving as the referent group
 - Analyses conducted in SAS-callable SUDAAN to appropriately weight estimates and adjust for complex NS-CSHCN sample design

Selected Results

- 73.3% of CSHCN were encouraged to take responsibility for their health care needs
- 38% of CSHCN received anticipatory guidance
- 41% of CSHCN received transition services
- Characteristics* associated with receipt of transition services included:
 - white, non-Hispanic;
 - household education levels greater than high school;
 - household structures with two parents; and
 - household incomes >400% FPL.

*statistically significant at p<0.05

Selected Results - continued

Table 1 – High-performance states

	Crude OR (95% CI)	Adjusted OR (95% CI)
Race/Ethnicity		
Hispanic	0.34 (0.17, 0.34)	0.25 (0.17, 0.37)
Non-Hispanic black	0.41 (0.30, 0.56)	0.44 (0.30, 0.62)
Non-Hispanic white	Referent	Referent
Family Household Structure		
2-parent biological / adoptive	Referent	Referent
2-parent step-parent	0.74 (0.55, 1.00)	0.80 (0.58, 1.10)
1-parent (mother only)	0.58 (0.46, 0.74)	0.78 (0.60, 1.03)
Other family structures	0.81 (0.50, 1.33)	1.21 (0.71, 2.07)
No Medical Home	0.59 (0.48, 0.74)	0.73 (0.57, 0.95)
Lacks Adequate Insurance Coverage	0.63 (0.51, 0.78)	0.73 (0.58, 0.93)

Note: Table edited to highlight key findings

Table 2 – Medium-performance states

	Crude OR (95% CI)	Adjusted OR (95% CI)
Race/Ethnicity		
Hispanic	0.86 (0.64, 1.14)	0.87 (0.63, 1.18)
Non-Hispanic black	0.66 (0.51, 0.84)	0.67 (0.50, 0.90)
Non-Hispanic white	Referent	Referent
Family Household Structure		
2-parent biological / adoptive	Referent	Referent
2-parent step-parent	0.65 (0.49, 0.86)	0.84 (0.48, 0.87)
1-parent (mother only)	0.73 (0.59, 0.91)	0.83 (0.65, 1.07)
Other family structures	0.88 (0.55, 1.41)	1.08 (0.64, 1.81)
No Medical Home	0.79 (0.65, 0.97)	0.82 (0.65, 1.04)
Lacks Adequate Insurance Coverage	0.76 (0.63, 0.93)	0.83 (0.67, 1.03)

Note: Table edited to highlight key findings

Conclusions

- Key factors important to state performance in providing transition services to CSHCN were:
 - High- versus Low-performance state
 - Race/ethnicity
 - Medical home
 - Adequate insurance coverage
 - Medium- versus Low-performance states
 - Race/ethnicity
 - Medical home
 - Adequate insurance coverage
 - Family household structure

Limitations

- Cross-sectional data
- Responses based on parental report
- Sample size
 - Adjusted for families without landline telephones
 - Some populations too small to include

Provider Recommendations

- Continue to monitor, assess, evaluate, and improve performance on system indicators
- Share promising practices
- Develop a practice-based parent advisory group
- Establish transition services as a standard of care
- Establish meaningful, culturally competent partnerships with families of CSHCN