**KMCHC October 4th Child Domain Meeting Notes**

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| **MCH Topic** | **Related MCH Plan Item(s)** | **Gaps and Challenges Around** **Alignment Opportunities** | **Action Items for Collaboration and/or Improvements** | **Next Step Responsibility:****Who? By when?** |
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| CommunicationCoordination across systems and providers | Priority 7 & Priority 8 | Member MCO Contacts: Determine minimum amount of contacts, clarify care coordinator, better communication, standards consistent?Clarification re: differences among 3 MCOs on services provided and why (e.g. dental care, etc), more details are neededKeep health literacy in mindVarious languagesBetter communication between care coordinators and members – navigatingIssues include: Lack of contacts, change of case managers, unknown case managers | * Decision-making guidance for families that will allow them to easily determine what is covered and what the differences are in value-added services. This may involve broader dissemination of the Value Added Services (VAS) resource that is already available.
* Prior-authorization guidance for providers that includes when prior authorizations are needed, exactly who to contact for each prior authorization, and any other details needed when providers are making referrals and appointments.
* Show uniformity/variation of services across MCOs (such as state employee health plan template)
* Example: KS Hospital Association (prior authorizations)

Include differences in care coordination between the three plans. * Need to identity what is needed by consumers and providers/services, including CYSHCN, waivers, therapies.
 | * Review information already available through MCOs for both providers and families. Assign someone to complete review if this is not completed at the January meeting. Determine additional resources needed.
* Family decision-making guidance/family resource: Give examples of the types of information still needed on resources, or recommend edits/additions to current VAS guidance. In Jan meeting, assign responsibility for communicating with MCOs on resource needs.
* Disseminate/promote resources among families. In Jan meeting, assign responsibility and identify steps.
* Provider prior-authorization guidance: Give specific examples of the types of information still needed by providers, or recommend edits/improvements to current guidance. In Jan meeting, assign responsibility for communicating these needs and/or working with MCOs to collect/compile information and develop guidances.
* Disseminate provider prior-authorization guidances among providers. Assign responsibility and identify steps.
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