

Hawaii

Children with Special Health Needs Branch (CSHNB)

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MISSION STATEMENT

(Note: The following describes briefly the context of the Children with Special Health Needs program.)

The Children with Special Health Needs Program is one of several programs administered by the Children with Special Health Needs Branch. The Branch promotes integrated systems of care that assure that the population of children with special health care needs and their families receive appropriate services to optimize their quality of life. The Branch provides direct, enabling, population-based, and infrastructure-building services for children with special health care needs.

I. DIRECT HEALTH CARE SERVICES

Direct health care services are defined as services generally delivered between a health professional and a patient in an office, clinic or emergency room. For example, well child care visit; visit to doctor for an acute health care condition (e.g. earache); follow-up visit to a specialist for a chronic condition (e.g. asthma, diabetes, sickle cell disease), physical therapy, occupational therapy, respiratory therapy, inpatient and outpatient medical services, allied health services, lab, etc.

ELIGIBILITY CRITERIA FOR DIRECT CARE SERVICES (Note: The following applies only to the Children with Special Health Needs Program.)

Age:

Birth to 21 years of age.

Residency:

Eligibility limited to Hawaii residents and those persons who intend to live within the state.

Medical:

The child has or is suspected of having a congenital or acquired physical condition that: (1) has lasted or is expected to last one year or more; and (2) is in need of surgical, medical, or therapeutic intervention and coordination of services beyond the level of care provided by the primary care physician.

Eligible Conditions:

None listed. Contact the Program directly for more information.

Excluded Conditions:

None listed. Contact the Program directly for more information.

Financial:

General Financial Eligibility:

Financial assistance with medical specialty and other services is limited to families whose income is at or below 300% of federal poverty guidelines, and limited to services which are not covered by the family's health insurance.

Financial Eligibility for Initial Screening:

Same as "General Financial Eligibility".

Family Co-Payment or Financial Participation Requirements:

None. Contact the Program directly for more information.

DIRECT CARE SERVICES (PROVIDED OR PAID FOR):

The following services are provided or paid for by the Children with Special Health Needs Program:

Medical specialty services

Medical specialty clinics on Neighbor Islands
Medical nutrition therapy
Medications
X-Ray
Laboratory services
Hearing aid and related services

Excluded Direct Care Services:

Examples of excluded services for which financial assistance is not provided: hospitalization, surgery/anesthesia, organ transplantation, kidney dialysis, and out-of-state services.

HOW/WHERE DIRECT CARE SERVICES ARE PROVIDED:

Services are provided through program staff (nurses, social workers, nutritionists, speech pathologists, and audiologists), public health nurses, medical specialists, and other providers.

Specialty Clinics/Programs:

Cardiac Clinics
Neurology Clinics

Coordination of Financial Benefits:

All third-party benefits such as health insurance must be applied to the cost of the child's care.

SPECIALIZED OR UNIQUE DIRECT CARE SERVICES, SPECIAL GRANTS, WORKSHOPS, ETC.:

Early Intervention Section assures that children, age birth to 3 years who have developmental delays or are at biological or environmental risk for developmental delays, receive early identification and intervention services, as specified under Part C of Individuals with Disabilities Education Act. Services include: care coordination, family counseling, social work services, special instruction, psychological services, audiological services, physical and occupational therapy, vision services, and assistive technology. Special projects include: respite services for infants and toddlers with developmental delays and children with serious or chronic illness, Inclusion Project and Keiki Care to increase capacity of community preschools and family child care providers to serve children with special needs, and Newborn Hearing Screening Program for early identification of newborns who are hearing impaired.

II. ENABLING SERVICES

Enabling services are defined as services that allow or provide for access to and the derivation of benefits from the array of basic health care services and includes such things as transportation, translation services, outreach, respite care, health education, family support services, purchase of health insurance, case management, coordination of Medicaid, WIC and education.

ELIGIBILITY CRITERIA FOR ENABLING SERVICES

Age:

Same as “Direct Health Care Services” above.

Residency:

Same as “Direct Health Care Services” above.

Medical:

Same as “Direct Health Care Services” above.

Financial:

Same as “Direct Health Care Services” above.

ENABLING SERVICES (PROVIDED OR PAID FOR):

The following enabling services are provided through the Children with Special Health Needs Program:

Care coordination

Social work

Transportation and lodging when children/families travel to another island to obtain medical specialty services

Coordination of Services:

Program care coordinators and public health nurses assist children/families with the coordination of services.

Excluded Enabling Services:

None listed. Contact the Program directly for more information.

HOW/WHERE ENABLING SERVICES ARE PROVIDED:

Same as “Direct Health Care Services” above.

Specialty Clinics/Programs:

Same as “Direct Health Care Services” above.

SPECIALIZED OR UNIQUE ENABLING SERVICES, SPECIAL GRANTS, WORKSHOPS, ETC.:

None specifically listed. Contact the Program directly for more information.

III. POPULATION-BASED SERVICES

Population-based services are defined as prevention services and personal health services that are developed and available for the entire MCH/CSHCN population of the state rather than for individuals on a one-on-one situation. Disease prevention, health promotion, and statewide outreach are major components. Common among these services are newborn screening, lead screening, immunizations, SIDS counseling, oral health, injury prevention, nutrition, and outreach/public education.

POPULATION-BASED SERVICES (PROVIDED OR PAID FOR):

Newborn Hearing Screening, Newborn Metabolic Screening, phenylketonuria, congenital hypothyroidism, galactosemia, congenial adrenal hyperplasia, biotinidase deficiency, maple syrup urine disease, hemoglobinopathies, amino acid disorders, fatty acid oxidation disorders, organic acid disorders, and urea cycle disorders.

HOW/WHERE POPULATION-BASED SERVICES ARE PROVIDED:

Newborn screening is done in birthing facilities prior to discharge of the newborn, or arranged by birth attendant. The Newborn Hearing Screening Program and the Newborn Metabolic Screening Program provide tracking and follow-up, set guidelines/standards, and provide education to health care providers and general public.

SPECIALIZED OR UNIQUE POPULATION-BASED SERVICES, SPECIAL GRANTS, WORKSHOPS, ETC.:

None specifically listed. Contact the Program for more information.

IV. INFRASTRUCTURE BUILDING SERVICES

Infrastructure building services are defined as services that address the development and maintenance of comprehensive health services systems. Infrastructure building services include: needs assessment, evaluation, planning, policy development, coordination, quality assurance, standards development, monitoring, training, applied research, development of information systems and systems of care (which are family-centered, community-based, etc.), development and maintenance of health services standards/guidelines, training, data and planning systems, etc.

INFRASTRUCTURE BUILDING SERVICES:

None specifically listed. Contact the Program directly for more information.

HOW/WHERE INFRASTRUCTURE BUILDING SERVICES ARE PROVIDED:

Not applicable.

SPECIALIZED OR UNIQUE INFRASTRUCTURE BUILDING SERVICES, SPECIAL GRANTS, WORKSHOPS, ETC.:

Healthy Child Care Hawaii (funded by the Maternal and Child Health Bureau and the Hawaii Department of Human Services) is a collaborative project with the American Academy of Pediatrics Hawaii Chapter and the University of Hawaii School of Medicine/Department of Pediatrics. The project is promoting the adoption of national health and safety performance standards in child care programs; developing a network of health professionals as health consultants to child care programs; and addressing how child care programs can assist families in accessing health services, medical homes, Medicaid/QUEST resources.

Genetics Program assesses genetic needs in the community and develops policies and programs to meet the needs; develops activities to promote the prevention, detection, and treatment of genetic disorders, and provides genetics education for health care providers, public health professionals, consumers, etc.

Preschool Developmental Screening Program provides training to trainers and community resources in developmental and behavioral screening for children ages 3-5 years in child care settings.

Hawaii Birth Defects Program is a population-based active surveillance system which finds and collects demographic, diagnostic, and health risk information on infants up to one year of age with specific birth defects and pregnancies resulting in adverse reproductive outcomes. It provides data and information on incidence, trends, and clustering, which contribute to the identification of genetic, environmental hazards, and other causes or risk factors.

OUT-OF-STATE SERVICES FUNDED BY THE PROGRAM:

None. Contact the Program directly for more information.

STATUTORY/REGULATORY AUTHORITY OF THE PROGRAM:

HRS § 321-51 to 321-54 (Children with Special Health Needs)

HRS § 321 – 291 (Newborn Metabolic Screening)

HRS § 321-351 to 321-354 (Infants and Toddlers)

HRS § 321-361 to 321-363 (Statewide Newborn Hearing Screening Program)

HRS § 321-421 to 321-426 (Birth Defects Program)