



**PanhandleHATS Coalition Action Plan**  
Updated September 23, 2013

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### Vision

The PanhandleHATS Regional Coalition's vision is to assure continuity of health care in order to provide a seamless transition from pediatric to adult life in the Florida Panhandle with a primary focus on those with disabilities or special health care needs.

## Strategies and action steps

**Strategic Issue: What is needed to ensure successful health care transition for Y/YA with complex health and medical needs as they move from a pediatric to adult system of care?**

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**Objective 1.1: Identify all potential health care and support service resources related to transition and assets that serve young adults with disabilities or health care needs as a first priority.**

Activity/Action Step	Responsibility	Resources/Partners Needed	Status to Date
1.1.1 Identify existing organizations within the Panhandle region to expand Coalition and when appropriate, to invite them to become Coalition members.	HATs Coordinator and Coalition members.	CMS, Medicaid, Nemours, Faith-based clinics and non-profit agencies.	In Progress. 3 to 6 months.
1.1.2 Identify existing facilities and potential new providers.	HATs Coordinator and Coalition members.	To be determined.	In Progress. 1 to 6 months.
1.1.3 Reevaluate existing facilities and potential new providers in the Bay County region.	HATs Coordinator and create a subcommittee of Coalition members.	Bay County CMS, Bay County Health Department, PanCare FQHC, 2-1-1, and others to be determined.	In Progress. 6 to 12 months.
1.1.4 Reevaluate to maintain a seamless Health Navigation Model for CMS Transition Clients to FQHC(s).	HATs Coordinator, CMS RNs/BSWs and FQHC(s) intake RN/BSW.	2-1-1 and others to be determined.	In Progress. 1 to 3 months.

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**Objective 1.2: Encourage Pediatricians/Adult Providers in-network to adopt health transition policies in their practices.**

Activity/Action Step	Responsibility	Resources/Partners Needed	Status to Date
1.2.1 Identify how to get more adult providers participating in the community of transitioning patients that have complex medical needs.	HATs Coordinator and Coalition members.	Sacred Heart's Children's Leadership Committee, Escambia/Santa Rosa Medical Society, Bay County Medical Society, Physician Grand Rounds.	In Progress. 1 to 12 months.
1.2.2 Create varied education program(s) on transition steps and barriers that affect providers and case managers. Examples of solutions would be brochures, web-based content, AHEC Pediatric Transition online courses, etc.	HATs Coordinator and create an Education subcommittee of Coalition members.	Adult Medicine Physician(s) to serve as Chairman of the Education subcommittee, AHEC, FL HATS Coordinator, regional 2.1.1.	In Progress. 1 to 3 months.

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**Objective 1.3: Identify and affect current policies of payer sources and educate them to recognize the specific issues around health transitions for the Y/YA population.**

Activity/Action Step	Responsibility	Resources/Partners Needed	Status to Date
1.3.1 Review existing information and expand awareness of new public, State, and National funding sources and insurance coverage(s).	HATs Coordinator and create a subcommittee of Coalition members. (Chaired by CMS representative)	Sacred Heart Children's Leadership committee, Nemours and Florida HATS Coordinator.	In Progress. 6 to 12 months.

### Barriers, Challenges and Progress

- June 2013 flood (FQHC and Esc. Health Dept.)
- State funding uncertainty for CMS
- CMS staffing transition process
- April 2014 flood (4 county impact)
  - Presidential Disaster Declaration - May 6, 2014
  - Ongoing recovery and operational displacement
- 2013 Action Plan updated for 2014/2015