

# PTI Nebraska

## The Family-to-Family Health Information Center (F2F) in Nebraska

PTI Nebraska, the Family-to-Family Health Information center, is a state-wide resource for families of children with disabilities and special health care needs. We provide one-to-one assistance to parents and professionals on services and disability specific information; conduct relevant, no cost workshops statewide; disseminate printed and electronic resources; and encourage and support parents in leadership roles.

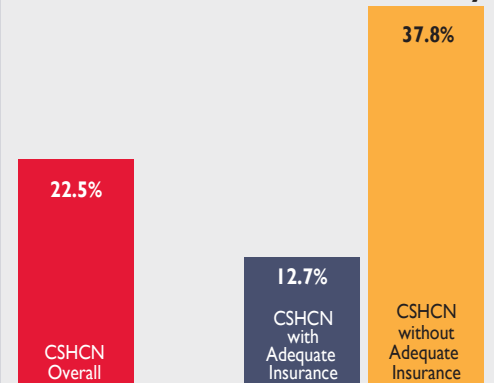
### HIGHLIGHT: PTI Webinars

The F2F through PTI Nebraska offers webinars twice a month to families and professionals across the state on topics of interest. Many topics are chosen based on input suggested on the webinar evaluations. The webinars are presented twice during the day, during lunch hour and in the evening. This provides families options to participate at times that are convenient. Webinars are enhanced with a teleconference connection. Initially, we were concerned that not all families would know how to connect to a webinar. However, the teleconference support provided through a voice link assists with the computer connection as well as providing an easy way to voice questions in a manner that everyone understands. The webinars are well attended and have reached both urban and rural families better than any other method of sharing information. In the past year 126 parents and professionals have participated from all regions of the state. Topics have included the Individual Healthcare Plan, Teaching Teens about Health Care, Disaster Preparedness, Transition, and Seizures and Children.

### CSHCN in NE<sup>1</sup>

- 61,071 children (13.7%)
- 20,068 children have inadequate insurance
- 11,936 children have conditions that consistently affect their activities
- 19,225 do not receive family-centered care

### CSHCN Whose Conditions Cause Financial Problems for the Family:



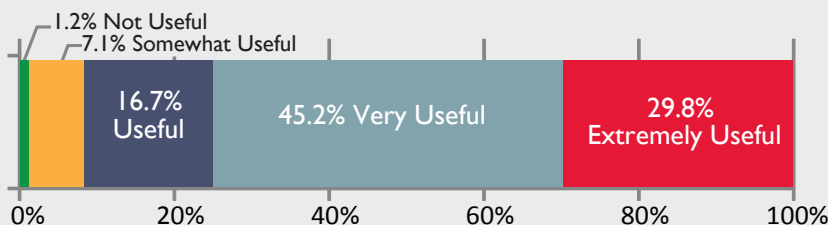
### IMPACT on a Family:

A family sought the support of the F2F at PTI Nebraska several times over many months while trying to get ACA insurance coverage for their children. Both parents are insured through the Veterans Administration, but their coverage as veterans didn't cover their 2 children. They ran into problems on the ACA enrollment website when seeking coverage for their children. The ACA website kept sending the family to Nebraska Medicaid. Knowing they were over income for Medicaid in Nebraska because Nebraska has not expanded Medicaid, the family filed the application anyway. The ACA website stated that the children would be eligible for Medicaid. After many attempts of re-entering enrollment information, they were told that because the parents had coverage, there would be no tax credit for the children's coverage. Because the youngest child has autism, the site kept sending the family to Nebraska Medicaid for which the child wasn't eligible. We helped by providing information on the ACA 800 number, the Medicaid application process, issues with denial that were part of the ACA enrollment process, and talked through the parents' resulting frustration. Finally on the last day for sign up, the family was able to get through the enrollment process, choose a plan for the children and pay the initial premium.

### IMPACT:

#### Family Confidence

Families rate the usefulness of the support/information/resources they received from the NE F2F in helping them feel more confident about getting their child the health care and services that s/he needs.<sup>2</sup>



### FY2013 F2F OUTREACH:<sup>2</sup>

Total Families Served: 2,122  
 Total Professionals Served: 424  
 Web Visits: 7,554  
 Materials Disseminated: 1,089,902

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<sup>1</sup>National Survey of Children with Special Health Care Needs. NS-CSHCN 2009/10. Data query from the Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health website. Retrieved 04/03/2014 from [www.childhealthdata.org](http://www.childhealthdata.org).  
<sup>2</sup>FY2013 F2F data represents families and professionals served through one-to-one contact, training, and broader outreach from June 1, 2012 through May 31, 2014.