



Caregivers as Partners:

What Texas Data Shows About Care for Children With Special Health Care Needs



EXECUTIVE SUMMARY



Texas requires Medicaid managed care organizations to make at least 50% of provider payments through alternative payment models and encourages models that reduce potentially preventable ED visits and address non-medical drivers of health.



Imagine Pediatrics treats caregivers as partners from the first conversation, through 24/7 integrated virtual and in-home care.



In Texas, families rated their care 4.9 out of 5 with a Net Promoter Score of +87, and members saw 20% fewer admissions and 12% fewer ED visits in their first year after enrollment.



Plans can measure family experience alongside quality and cost, and use Safe Days at Home as a shared goal with providers.



Kelli, a Texas mother whose two sons are Imagine Pediatrics patients and Medicaid members, spent years watching both children struggle with their health. Today she describes her family's life differently.

"Right now, we're enjoying recovery, a long stretch of it, after 13 years of both my children not being well. I have a family again. Imagine Pediatrics is now my first call."

Caregivers know their children best, and they are usually the first to notice when a child's health starts to change. They know which cough means a bad night ahead and when a child is not acting like themselves. When a team builds caregiver perspectives into its planning, it can act proactively and personalize care around the family's specific needs.

For Texas health plans, that raises two questions:



How can a plan make caregivers true partners in supporting children with special health care needs?

And what changes when Imagine Pediatrics helps build that partnership?



VALUE-BASED CARE REQUIREMENTS IN TEXAS MEDICAID

STAR Kids is the Texas Health and Human Services Commission's (HHSC) Medicaid managed care program for children and adults "20 and younger who have disabilities."

Texas has also made value-based payment a requirement for its Medicaid managed care organizations (MCOs).

HHSC's most recent [annual report on quality measures and value-based payments](#), published in December 2024, sets out what the state expects of its MCOs.

- ✓ MCOs must make at least 50% of provider payments through alternative payment models (APMs), with at least 25% involving financial risk for providers.
- ✓ Starting with 2024 reporting, HHSC's APM Performance Framework gives MCOs credit for more than payment volume.
- ✓ Under the framework, HHSC encourages models that reduce potentially preventable ED visits and address non-medical drivers of health.
- ✓ The framework also favors models that integrate primary and behavioral health care.
- ✓ Pay-for-Quality, one of the programs HHSC uses to advance value-based care, puts up to 3% of each MCO's capitation at risk based on quality results. For STAR Kids, the measures include follow-up within seven days after hospitalization for mental illness.

CHILDREN WITH SPECIAL HEALTH CARE NEEDS, BY THE NUMBERS



20.6%

of Texas children had a special health care need (Texas DSHS)



9.5%

of Texas children with special health care needs received care in a well-functioning system, compared with 13.1% nationally (Texas DSHS)



1 in 4

U.S. children, over 19 million, has a special health care need (HRSA)



-50%

of children's health care spending goes to children with special health care needs (AHRQ)

WHAT CAREGIVER PARTNERSHIP LOOKS LIKE IN PRACTICE

Children with special health care needs are a vulnerable and heterogeneous population. Two children with the same diagnosis can require very different support, and caregivers see those differences every day. Imagine Pediatrics delivers 24/7 integrated virtual and in-home care built around what caregivers know about their child.



Familiarity and consistency. The Imagine Pediatrics care team can see the child's full history and care plan through bi-directional data from sources like EHR, HIE, ADT, health plan sources, lab and pharmacy sources, and the caregivers themselves. Families don't have to repeat their story.



Acute and longitudinal care. A family calling about a sudden fever reaches a clinician who works alongside the longitudinal team and has access to the child's records and long-term care plan.



Messaging at any hour. Families can reach the care team through the Imagine Pediatrics mobile app, including sharing photos and videos.



One team that communicates. Imagine Pediatrics clinicians and staff across medical, behavioral, and social care work from one shared care plan. They work collaboratively with the child's primary care provider and specialists, and with the health plan, to increase access to care.

PARTNERING WITH CAREGIVERS FROM DAY ONE

Imagine Pediatrics asks for caregiver perspectives in the first conversation.

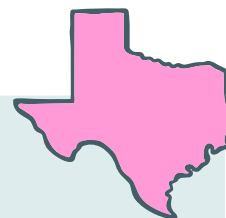
- ✓ The care team begins addressing family needs at enrollment, which is where trust starts to build.
- ✓ Families share their needs and household dynamics in a welcome survey before care planning begins.
- ✓ Clinicians are trained to ask about and understand the caregiver's perspective each time they connect.
- ✓ Each child's care map records clinical and social goals, along with the steps and resources needed to reach them.
- ✓ Caregivers help design and improve the care model through the Imagine Pediatrics Patient and Family Advisory Council.



"These families aren't asking for miracles. They're asking to be heard, trusted, and equipped to care for their children."

— Dr. Patricia Hayes, Chief Medical Officer, Imagine Pediatrics,
as shared in the Empowered Patient Podcast

WHAT THE TEXAS DATA SHOWS



Imagine Pediatrics Texas Results at a Glance



4.9/5

family satisfaction



+87

Net Promoter Score from patients and caregivers



7%

lower per-member-per-month (PMPM) cost of care in the first year after enrollment



12%

fewer ED visits per thousand in the first year after enrollment



20%

fewer inpatient admissions per thousand members in the first year after enrollment



9.2%

points above target on well-child visits (WCV), based on health plan-reported data



2X

engagement among members with identified non-medical drivers of health needs, compared with members without those needs



20%

points above target on follow-up after hospitalization for mental illness (FUH), based on health plan-reported data

A DEEPER DIVE IN DATA

Family Experience

Texas families rated their care 4.9 out of 5 and gave it a Net Promoter Score of +87. High scores show that families trust their care team, and trust is what brings a family to the care team first when something changes. As Kelli put it, "Imagine Pediatrics is now my first call."

Engagement

Members with identified non-medical drivers of health needs engaged with their care team at more than twice the rate of members without those needs. Needs like housing, food, transportation, or utilities can make care harder to reach. Strong engagement gives the care team the chance to help with those needs before they affect a child's health.

Utilization and Cost

In the first year after enrollment, admissions per thousand fell 20%, ED visits per thousand fell 12%, and per member per month Total Cost of Care fell 7%. For plans, these results suggest that 24/7 integrated virtual and in-home care can help families address concerns before they become ED visits or admissions, with outcomes and cost of care improving together.

Quality

Well-child visit results were 9.2 percentage points above target, and Follow-up after Hospitalization for Mental Illness (FUH) results were 20 percentage points above target. FUH is one of the measures HHSC uses in STAR Kids Pay-for-Quality, where up to 3% of an MCO's capitation depends on quality results, so strong FUH performance contributes to a plan's own quality scores.



“When a family is worried about rent or getting to an appointment, those worries come first. Helping with those needs is often how we earn the trust that makes the rest of the care work.”

— Dr. Ruchi Kaushik, Senior Medical Director, Clinical Innovation and Research, Imagine Pediatrics



About the Data

Family experience and engagement figures are 2025 Texas data from Imagine Pediatrics. Utilization figures are unadjusted averages for Texas Medicaid members with data available for the 12 months before and after enrollment, from Imagine Pediatrics. Quality figures are 2024 plan-reported data, aggregated across contracted plans in Texas.

WHAT THIS MEANS FOR TEXAS HEALTH PLANS

Several of HHSC’s priorities match what the Imagine Pediatrics Texas data shows. ED visits per thousand fell 12% in the first year after enrollment, which speaks to HHSC’s focus on reducing potentially preventable ED visits. The engagement results among families with social needs map to the state’s emphasis on non-medical drivers of health. On the Imagine Pediatrics care team, behavioral health clinicians work from the same care plan as the medical team and partner with the child’s primary care provider and specialists, which supports the integration of primary and behavioral health care that HHSC encourages.

The same care team stays with a child and learns the child’s patterns over time. Plans may get a clearer picture of a partnership’s value by reviewing results across more than one year of a member’s enrollment.

Family experience belongs alongside quality and cost when plans measure a partnership. Satisfaction and Net Promoter Scores tell a plan how families feel about their care, and tracking them next to utilization and quality results gives plans a fuller view of value for their members.

A partnership also needs a goal that plans, providers, and families share. Imagine Pediatrics uses [Safe Days at Home](#) as its North Star measure, a concrete way for plans and the child’s primary care provider to track stability and continuity for families.



“For caregivers, a Safe Day at Home reflects trust in a care team that is truly partnered with them. For health plans, it demonstrates a commitment to both improved member experience and lower total cost of care.”

— George Boghos, CEO, Imagine Pediatrics, [as written in his](#) [byline for Healthcare Business Today](#)



WHAT CHANGES WHEN CAREGIVERS ARE PARTNERS

In Texas, caregiver partnership has coincided with high family satisfaction, strong engagement among families with social needs, fewer admissions and ED visits, and quality results above target. A care team that knows each child and hears early from the family can improve outcomes through proactive, personalized care. For a Texas plan, a practical first step is to review how caregivers take part in care planning today and whether family experience sits alongside quality and cost when it evaluates a care partner.

To learn how a care team built around caregivers can support your plan's members in Texas, connect with Imagine Pediatrics at: <https://www.imaginepediatrics.org/>.

ABOUT IMAGINE PEDIATRICS

Imagine Pediatrics is a tech-enabled pediatric medical group that delivers 24/7 virtual and in-home care to children and youth with special health care needs through value-based care arrangements. Its multidisciplinary care teams provide integrated medical, behavioral, and social care designed to expand access to personalized pediatric care. Imagine Pediatrics partners with health plans through total cost of care and quality performance-based risk arrangements, improving outcomes while lowering the cost of care. The result is fewer hospital stays, more Safe Days at Home, better outcomes and experience for families.



For more information, contact us at (833) 208-7770 or visit www.imaginepediatrics.org

