

What is the Saratoga County CYSHCN?

Saratoga County Department of Health facilitates the New York State CYSHCN Program for Saratoga County residents. The program's mission is to ensure all children and youth with special healthcare needs have adequate health insurance, services, and community resources and to empower families and youth to navigate community systems of care.



The program provides families with assistance accessing community resources and care, eliminates gaps and barriers to accessing care and resources, and assists youth with transitioning from pediatric to adult health care systems.

Where do I learn more?

Visit the Saratoga County website



Visit the New York State website



How do I get help?

Email us:
CYSHCN@saratogacountyny.gov

Contact us:

**Saratoga County
Department of Health**
518.584.7460
6012 County Farm Rd.
Ballston Spa, NY 12020
Monday - Friday
8am - 4pm

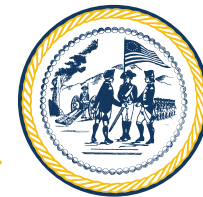


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Help is here.



Saratoga County Children & Youth with Special Health Care Needs Program



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SARATOGA COUNTY

NEW YORK

Department of Health

Are you struggling to find resources to help your child thrive?

Help is here.

The Saratoga County Children and Youth with Special Health Care Needs (CYSHCN) Program can help you find quality care for your child with special health care needs. The program provides information, guidance, and referrals to families including support services for healthcare and other resources your child may need.



Who are Children and Youth with Special Health Care Needs?

CYSHCN are generally defined as those who have or are at risk for chronic physical, developmental, behavioral, or emotional conditions and who require health and related services beyond regular well care and preventative measures generally required for children.

What services are available?

Services include information and guidance, referrals, and care coordination.

Who is eligible for the CYSHCN Program?

A child or youth who:

- has or might have a disability or chronic health condition;
- is a Saratoga County resident;
- is age birth to 21 years of age.



CYSHCN conditions include:

- | | |
|------------------------------------|--------------------------------|
| ADD or ADHD | Developmental Delay |
| Allergies | Genetic or Inherited Condition |
| Anxiety | Head Injury |
| Arthritis/Joint Problems | Hearing Problem |
| Asthma | Heart Problem |
| Autism or Autism Spectrum Disorder | Intellectual Disability |
| Behavioral/Conduct Problem | Learning Difficulty |
| Blood Disorder | Migraines |
| Cerebral Palsy | Mental Health Condition |
| Cystic Fibrosis | Muscular Dystrophy |
| Depression | Sickle Cell Anemia |
| Diabetes | Speech or Language Disorder |
| Down Syndrome | Substance Use Disorder |
| Epilepsy/Seizure Disorder | Tourette Syndrome |
| | Vision Problems |

*The program is not limited to these conditions