



Care4Kids Update

Wisconsin's Foster Care Medical Home Program for Children Placed in Out of Home Care

BMCW Partnership Council Health and Education
Committee

June 10, 2015

What is Care4Kids

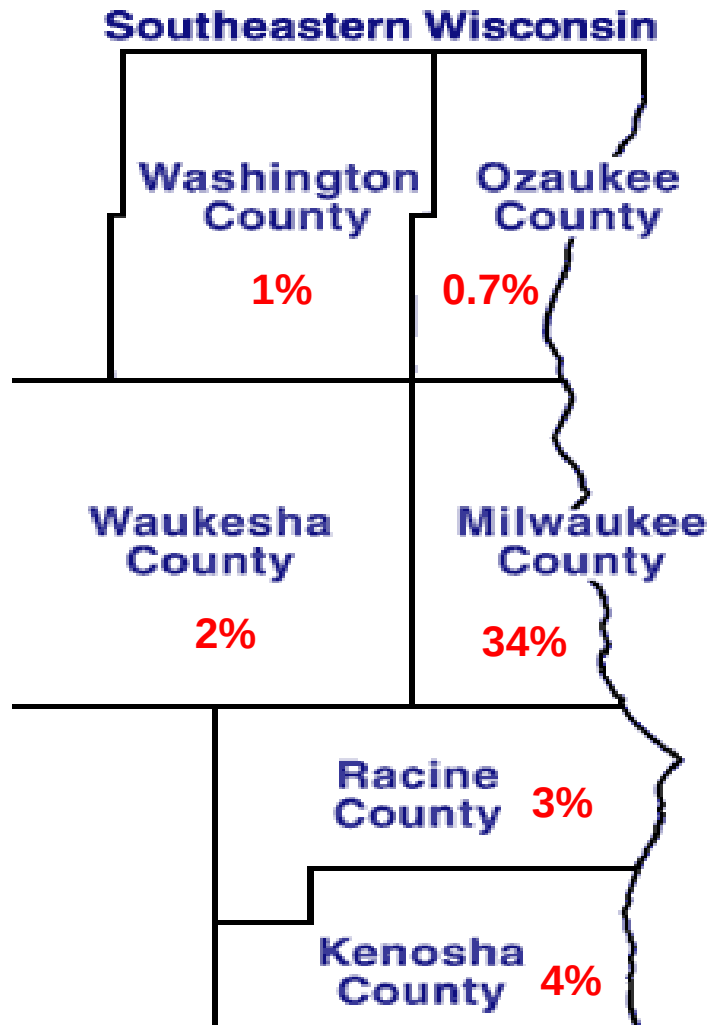
- Recognizes unique needs of children in Out of Home Care through Trauma Informed Service delivery via providers
- **Voluntary program** – parent/guardian of a child in Out of Home Care is the decision maker for enrollment
- Builds relationships between children and their healthcare providers

Care4Kids Program

Enrollment into C4K Medical Home Program Began in January of 2014 in 6 SE Wisconsin Counties

Upon enrollment:

- CCHP C4K becomes the managed care plan for youth in Out of Home Care
- CCHP C4K also provides Health Care Coordination services to enrollees coordinating care delivery and information sharing amongst stakeholders to ensure prompt and efficient service delivery based upon the child's healthcare needs



Nearly % of Foster
Care Youth in WI live
in these 6 counties



Benefits

Improves Quality

- Healthcare is provided by professionals trained in the unique needs of children in OHC
- **Healthcare is managed**
 - Organized and coordinated by Health Care Coordinator Team (HCC)
 - Comprehensive Health Care Plan (CHCP)

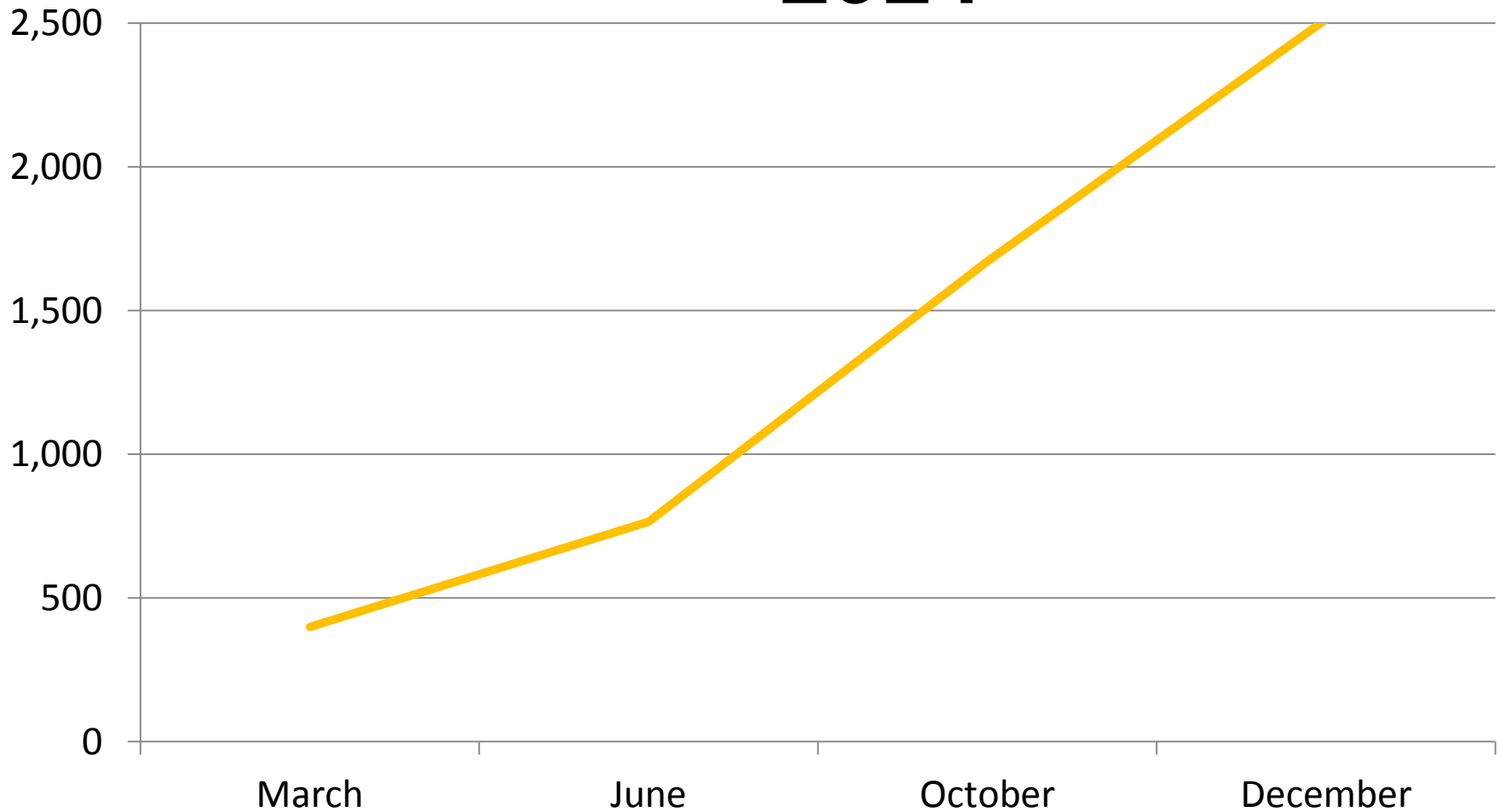
Improves Access

- Healthcare is accessible
 - Providers are available throughout region
 - **Increased frequency of well child checks** based upon national (AAP) standards
- Healthcare is timely – **scheduling priority**

Improves Coordination

- Physical health
- Behavioral health
- **Information is shared** between the family and key stakeholders involved in child's care

Care4Kids Enrollment 2014





Care4Kids Staffing

10 Health Care Coordinators (HCC):

- Registered Nurse (RN) or an Advanced Practice Social Worker (APSW)
 - Experience working with children with special needs or with children in OHC
- Oversees and ensures access to medical services for children in Care4Kids
- Develops and Revises Comprehensive Health Care Plan (CHCP)
- Collects available medical history and distributes to medical providers

▪ 18 Outreach Coordinators:

- Bachelor level professionals that assist Health Care Coordinators with duties related to service coordination
- Assists child welfare workers and OHC providers as needed in finding medical providers and scheduling appointments timely



Care4Kids Quality Measures

- Timely Out of Home Care Health Screen
- Timely Comprehensive Initial Health Assessment
- Timely Behavioral Health and/or Developmental Health Screen
- Timely Developmental Assessment
- Timely Behavioral Health Assessment
- Timely Comprehensive Health Care Plan
- Well Child-“Health Check” periodicity
- Timely Comprehensive Dental Exam
- Blood Lead Testing (BLS, HEDIS 2014)
- Immunization Status (CIS and IMA, HEDIS 2014)
- Outpatient Mental Health Follow Up
- Emergency Department Utilization
- Inpatient Hospital Utilization
- Anti-Psychotic medication utilization
- Polypharmacy Review

Care4Kids Quality Measures

Out of Home Care Initial Health Screens

- Majority (99%) are completed at a Children's Hospital of Wisconsin Child Advocacy Center
 - Provider completing the exam has expertise in caring for children entering OHC
- Caseworker and Out-of-Home Care Provider must coordinate to ensure the screen occurs.
- Goal is to have all youth entering OHC seen **within 2 business days**

OHC Initial Health Screening Exams

- ▣ Goals of Initial Screening Exam
 - Identify acute health concerns
 - Check for injuries indicating abuse or neglect
 - Screen for communicable diseases
 - Ensure child has necessary medication and/or medical equipment

- ▣ Youth with high risk conditions are identified thru **Triage Tool** performed at Initial Screening Exam

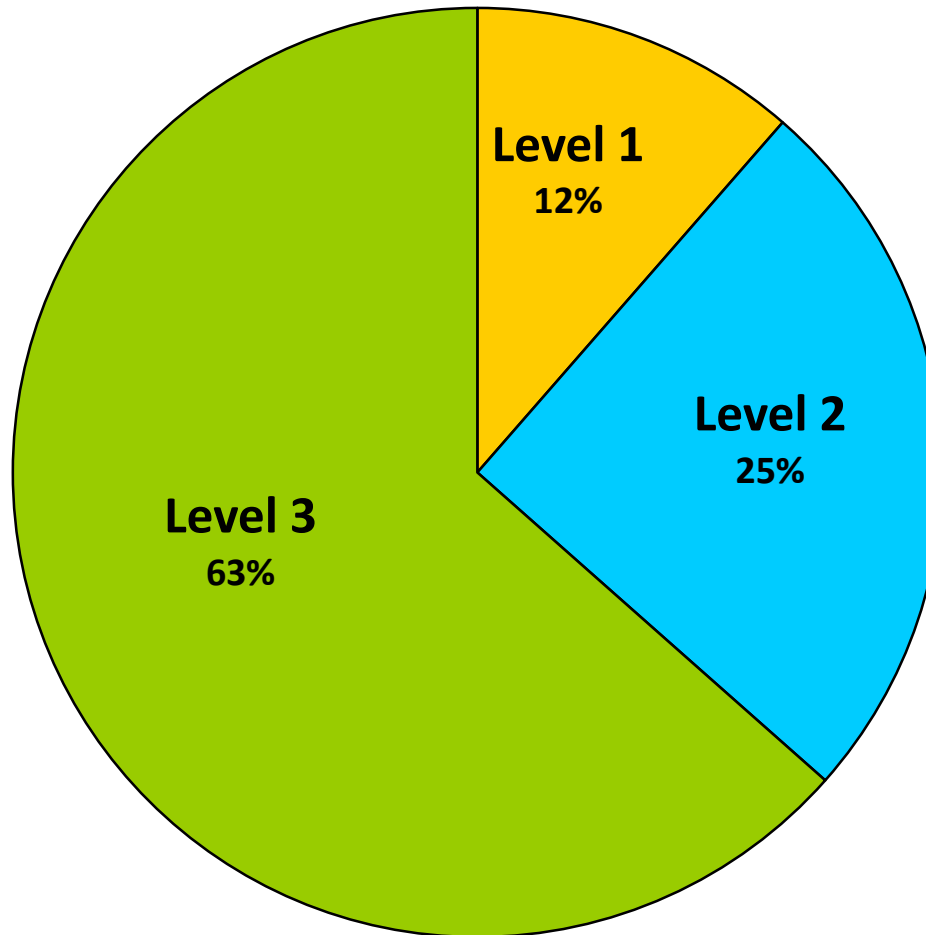
- ▣ Needs are communicated to Care4Kids Health Care Coordination (HCC) team for rapid review and action

Triage Levels

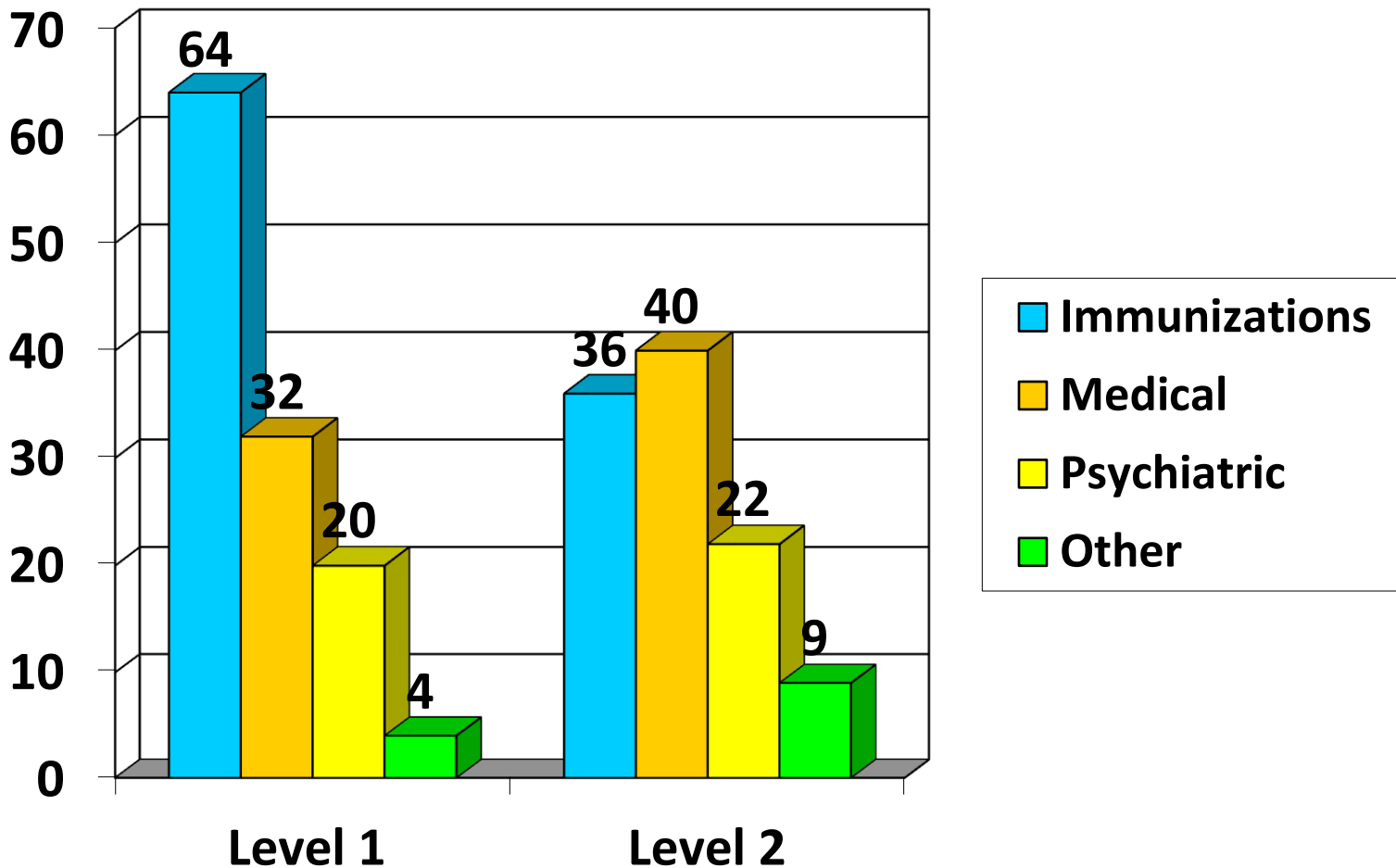
- ▣ Medical provider assigns triage level to each child to communicate urgency of follow up needed
 - **Level 1** Urgent review needed (next day)
 - **Level 2** Expedited review (next week)
 - **Level 3** Routine review (30 days)

- ▣ For Levels 1 and 2 provider also documents reason
 - Medical
 - Psychiatric
 - Immunization
 - Other

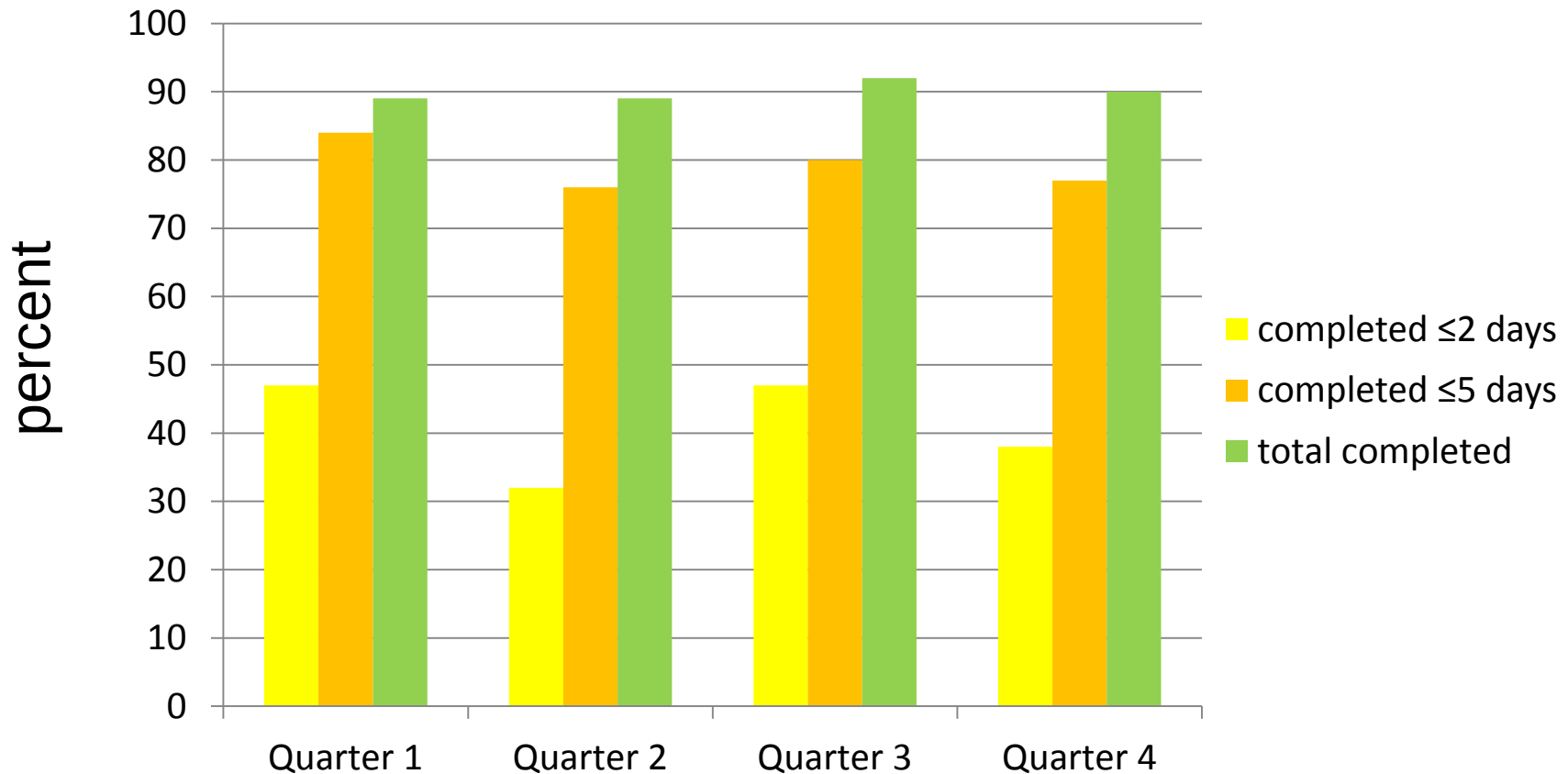
Initial Health Screening Exam Triage Levels



Reason Level Assigned



OHC Initial Health Screening Exams Outcomes



Initial 30 Day Comprehensive Health Exam

- ▣ Preferably performed at a “Center of Excellence” (COE)
 - COE’s are primary care clinics with an expertise & interest in caring for youth in foster care
 - **Not** mandatory - may be seen by any primary care provider in the CCHP network
 - Youth encouraged to stay with the COE as their medical home provider when transitioning placements per medical home model

30 Day Comprehensive Exam

Core Components of Comprehensive Exam

EPSDT well child exam

Standardized developmental screen for children <4 years

Standardized mental health screen for children ≥ 4 years

Dental screen

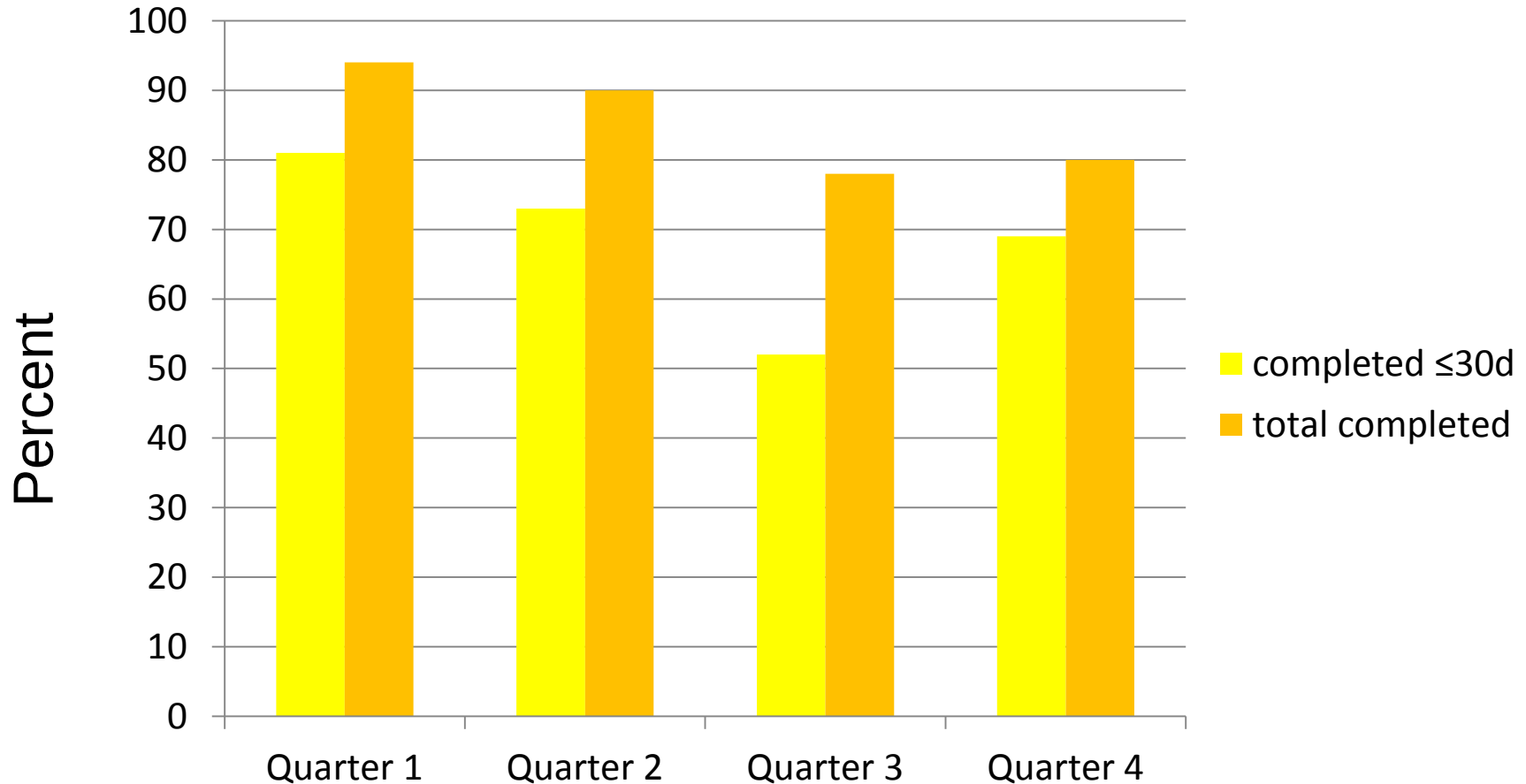
Immunization update

Review of available past medical history

Metabolic screening if indicated for children on psychotropic meds

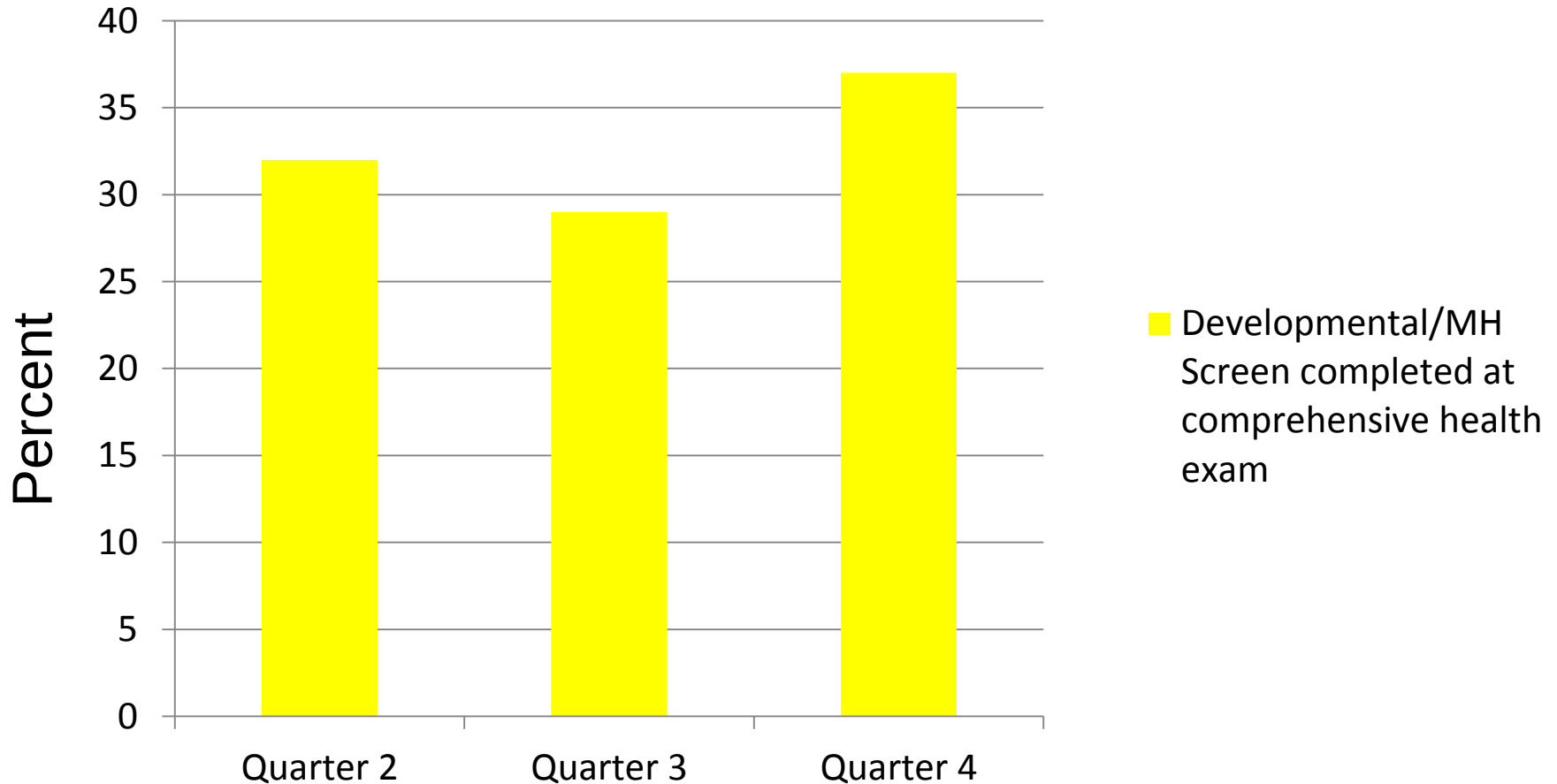
Health record sharing with Care4Kids HCC team

30 Day Comprehensive Health Exam Outcomes



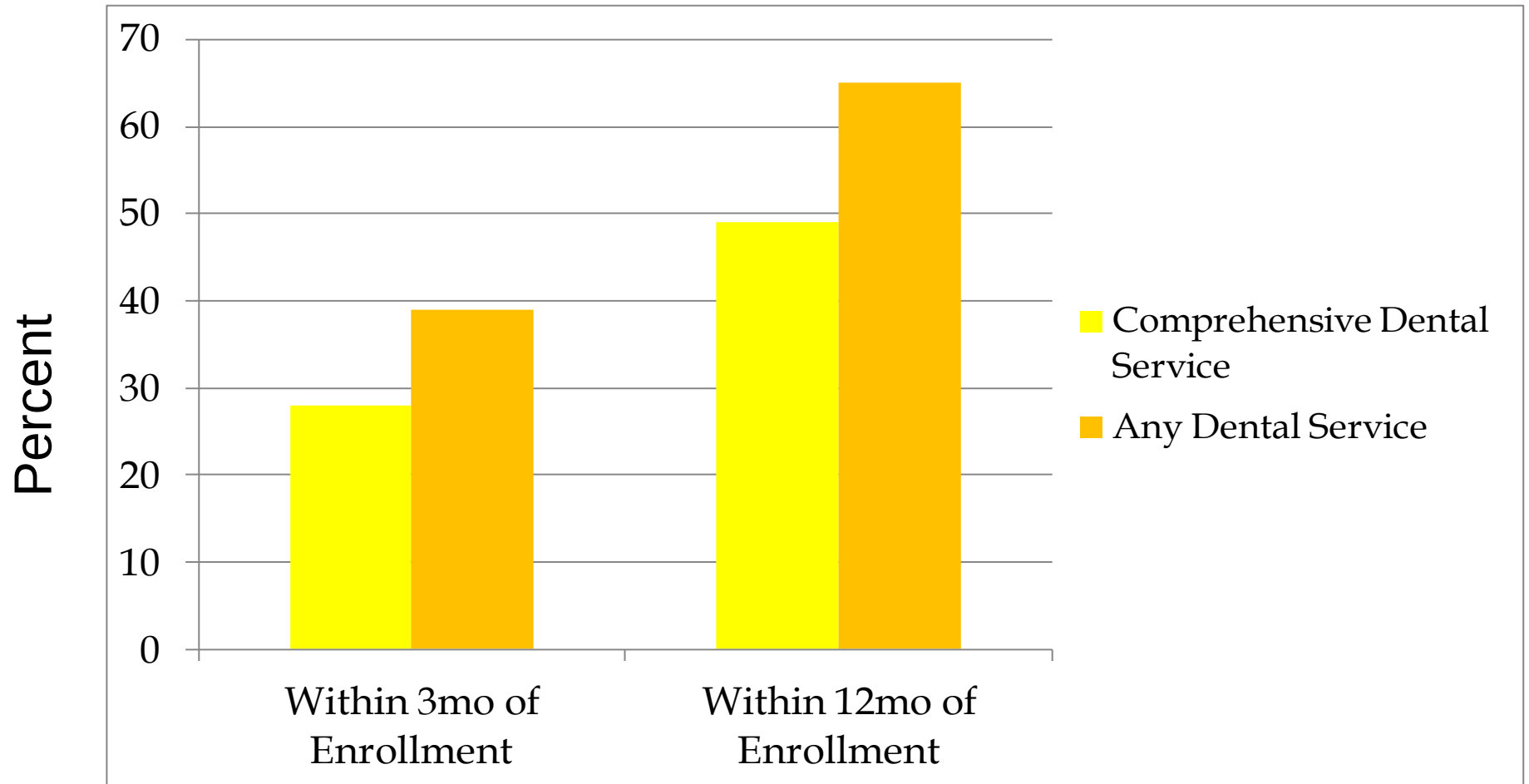
Numbers reflect children newly enrolled in C4K

Developmental/MH Screens



*No data available for Q1

Dental Exams



*January - June 2014



Comprehensive Health Care Plan

■ Comprehensive Health Care Plan

- Developed by Health Care Coordination Team
- Shared and updated with Health Care Team
- Created within 60 days of entering OHC
- Updated every 6mo minimum & with significant life events
- Based on information collected during OHC Health Screen, Comprehensive Initial Health Assessment, other medical history and input from the team



■ Health Care Team

- Child welfare caseworkers
- Health care professionals
- OHC Providers
- Child's family
- Other important adults in the child's life
- Coordinated and facilitated by the Health Care Coordination Team

* 99.7% of Care Plans were completed
 * Nearly 12,000 Care Plans were distributed to stakeholders

Additional Results

- Participating network providers receiving **training in Trauma Informed Care**
- 95% of enrolled children received blood lead screens
- 93% of enrolled children are up to date with immunizations
- 100% of eligible youth received an interdisciplinary **polypharmacy** review

Improvement Opportunities

- Achieving AAP periodicity guidelines
- Provider recruitment in certain specialty areas (e.g. dental)
- Enrollment/disenrollment processes (multiple county and state departments)
- Billing accuracy by providers (e.g. well child check vs. sick child visit) & ongoing provider education (e.g. MH/DH screens)
- Internal and external data systems
- Caregiver engagement, lack of parental/guardian contact via enrollment process, informed parent/guardian consent for treatment
- Straight T19 vs HMO/Managed Care benefit management (pharmacy and transportation services)
- Role clarification with child welfare staff

Lessons Learned

- Complex, multisystemic, program with many stakeholders requires significant investment in collaboration
- Success needs to be connected to shared goals and measures amongst all stakeholder groups
- Implementation has provided a template for integration within and external to CHW system
- Key learning's are transferable to other complex populations

Future Steps

- Current pilot reaches nearly 45% of OHC population
- Expansion opportunities beyond 6 pilot counties under review

CARE⁴KIDS



Additional Resources

CCHP C4K Toll Free Health Care Coordination #:
1-855-371-8104

CCHP C4K Health Care Coordinator General Email:
Care4Kids@chw.org

CCHP Website & Provider Directory:
www.childreuschp.com