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### Kentucky SKY

Submittal of a proposal to serve the Kentucky SKY population is optional. Evaluation of proposals received for this Section will be limited to Contractors receiving an award for the main Managed Care contract. (See **Draft Medicaid Managed Care Contract and Appendices** Section 70.2 for more information.)

Section references herein are made to RFP Attachment C “**Draft Medicaid Managed Care Contract and Appendices.**”

12.

### Aging Out Services

Provide the Vendor’s recommendations for enhancing the services and outcomes for FC Enrollees, Former Foster Care Enrollees, and JJ Enrollees aging out of Care and the Kentucky SKY program. Provide examples of services or tools the Vendor has used for other similar programs and detail how these tools have contributed to the Vendor achieving program goals.

Humana supports our foster care Enrollees in gaining needed life skills and providing the necessary resources to help these Enrollees reach their potential in their upcoming years. We recognize that children that are aging out of the foster care or juvenile justice systems are at high risk for poor outcomes such as homelessness, untreated psychiatric or medical concerns and even shortened life-expectancy. This population is one which requires individualized care as well as education and support to start managing their own care. Our care coordination model and systems are designed to support and effectively manage Enrollees with complex care needs such as those within a collaborative, comprehensive team-based approach that incorporates the tenets of the High-Fidelity Wraparound and natural supports as well as internal and external partners. It encourages **Enrollee self-management**, to direct their own physical health, behavioral health (BH) care, assistance navigating the healthcare system and ability to meet their needs related to Social Determinants of Health (SDOH). Our clinical model is supplemented by **strong partnerships with network providers, Commonwealth agencies, and Community Based Organizations (CBOs) specializing in the treatment and support of this high risk population.** Our ultimate goal is to support and guide our Enrollees through each stage of life, providing them the tools and resources to maintain their health and well-being.

Humana currently partners with DMS and DCBS to cover more than 2,000 potential **Kentucky SKY Enrollees Foster Care Children in Kentucky.**

### **PARTNERING WITH THE DEPARTMENT FOR MEDICAID SERVICES (DMS) AND DEPARTMENT FOR COMMUNITY BASED SERVICES (DCBS)**

Humana’s experience serving children in foster care and other high-need, complex populations makes us a strong partner for the Commonwealth in coordinating care for the Kentucky SKY population. We have experience managing youth with complex physical health, BH, and social needs within a face-to-face, localized team-based care coordination model.

- We have managed children in foster care in Kentucky for more than four years, **currently serving more than 2,000 potential Kentucky SKY Enrollees** in this population.
- As of January 1, 2019, we are managing the foster care population within our Florida Statewide Medicaid Managed Care (SMMC) program.
- We have **managed children with complex BH and physical health conditions for more than 15 years** through our Florida SMMC program.
- We have **coordinated and managed highly complex and vulnerable Long-Term Services and Supports (LTSS) populations** across multiple states for almost 10 years. These populations, like the Transition Aged Youth population, often require intense community supports and a local face-to-face collaborative care team model with High Fidelity Wraparound components driving the approach. We have experience with

extremely high-need populations to successfully staff, assign cases, and manage Enrollees in their communities and homes. Our Care Coordination teams have significant experience and training in promoting an individualized, strengths-based approach to care planning. This approach assures the Enrollee and their caregivers voices are incorporated into the care plan and unmet needs are addressed through local community-based resources as well as their natural support system.



**Going the Extra Mile: Humana Enrollee Story**

Humana goes above and beyond to coordinate care for our most vulnerable Enrollees. In our Florida Medicaid program, an infant was born with a rare congenital anomaly that caused the infant’s trachea to be wide open in the back. The doctors in Miami put in a breathing tube to save her life, but without a repair of the trachea, she would not survive. Through research, we found that the only center in the country that could perform the repair was Cincinnati Children’s Hospital Medical Center (CCHMC). Our Florida Medicaid Medical Director spoke to a colleague at CCHMC, and we arranged to transfer the child to CCHMC by air, all covered by Humana. Even though the costs associated with the transfer and procedure were significant, we made the decision based on need and the best interests of the child.

She underwent surgery and remained at CCHMC for several months. We transferred her back to Miami to be with her family, but she suffered a setback, so we arranged for her transfer back to CCHMC, where she remained for several more months. We worked collaboratively with hospitals in Miami and Cincinnati, in addition to providing family support. Eventually, the family relocated to Cincinnati due to her need for careful follow-up care. We helped the family enroll in Ohio Medicaid, and the child finally went home at about one year of age. If Humana did not orchestrate these transfers based on the child’s needs, she would not have survived. The Humana team, including neonatal Case Managers, Provider representatives, Medical Directors, and administrators, contributed to her success by focusing on the infant’s needs and going to whatever lengths necessary to provide the opportunity for survival.

**SUPPORTING DCBS TRANSITION ACTIVITIES**

To build upon existing supports and resources in place for our Transition Aged Youth Kentucky SKY Enrollees who will be aging out of the DCBS or DJJ system, Humana will supplement DCBS and CBO activities with our own processes to facilitate a smooth transition. Table I.G.1-1 below outlines how Humana will support existing and ongoing DCBS aging out transition activities with additional supportive and educational resources.

**Table I.G.1-1: Supports Humana Offers Enrollees to Age Out Successfully**

	DCBS Activities	Humana Supplemental Activities
Age 12-13	None listed in Standards of Practice Manual	<ul style="list-style-type: none"> <li>The Care Coordinators (CCs) will arrange for soft skills training provided by DCBS and/or the youth’s placement</li> <li>The CCs will assist the case worker or representative in <b>identifying available programs and classes</b> to support developing a strong understanding of these topics</li> <li>The CCs will <b>continue to assess Enrollee progress</b> to ensure the most successful outcome</li> <li>Using a High Fidelity Wraparound approach our CCs will work with teachers, counselors, and other community supports as appropriate to identify strengths to build upon related to independence</li> </ul>

**Table I.G.1-1: Supports Humana Offers Enrollees to Age Out Successfully**

	DCBS Activities	Humana Supplemental Activities
Age 14	<ul style="list-style-type: none"> <li>Soft skills training</li> <li>Start educational planning, including Individual Graduation Plan, and attend Admissions and Release Committee meetings</li> </ul>	<ul style="list-style-type: none"> <li>The CC will continue the conversations and interventions that began at age 12 and continue to support DCBS and placement, and independent living training</li> <li>The CC will begin conversations with the Enrollee and the representative about <b>interests and skills to identify educational and vocational goals</b></li> <li>The CC will also begin conversations with the Enrollee about <b>general health and wellness activities, such as exercise, healthy food choices, hygiene, healthcare needs, and making and attending doctors' appointments</b> and developing goals on the care plan to begin building skills in these areas</li> </ul>
Age 15	<ul style="list-style-type: none"> <li>Independent living initial discussion and referral to formal life skills courses</li> <li>Ensure youth completes Aptitude tests and job/interest surveys</li> </ul>	<ul style="list-style-type: none"> <li>The CC will continue previous interventions and <b>begin to assist in education and graduation goal-setting</b>, including coordinating and assessing outcomes that are in the best interest of the Enrollee, such as GED and vocational training</li> <li>The CC will <b>assess the need for tutoring and coordinate with DCBS</b>, the Enrollee, and the representative to identify resources for educational assistance</li> <li>The CC will engage the Enrollee and representative about independent living planning</li> <li>The CC will also begin discussions with the Enrollee and representative about <b>employment opportunities</b></li> <li>If feasible, the CC will assist the Enrollee with acquiring vocational training, such as through in-school services through the <b>Kentucky Career Centers Workforce Innovation and Opportunity Act program (WIOA)</b></li> </ul>
Age 16	<ul style="list-style-type: none"> <li>Begin formal life skills courses, including transportation needs</li> <li>Begin aging out discussion</li> </ul>	<ul style="list-style-type: none"> <li>The CC will continue previous interventions as needed and support DCBS and the representative in the provision of independent living skills courses</li> <li>The CC will <b>review the Casey Life Skills (CLS) Assessment</b> when it is completed and identify needs and gaps</li> <li>The CC will <b>begin discussing aging out planning</b> with the Enrollee and representative</li> <li>The CC will <b>offer to refer the Enrollee to either Workforce Development or Vocational Rehabilitation</b> for a strengths and skills assessment to determine the Enrollee's vocational readiness on the independent living spectrum</li> <li>The CC will also <b>refer the Enrollee to Humana's Family and Youth Peer Support Specialist</b> to assist the Enrollee in coping mechanisms and how to handle stress</li> </ul>

**Table I.G.1-1: Supports Humana Offers Enrollees to Age Out Successfully**

	DCBS Activities	Humana Supplemental Activities
Age 17	<ul style="list-style-type: none"> <li>Review educational planning</li> <li>Continue life skills courses</li> <li>Develop the Transition Plan for aging out, including plans for extending or terminating commitment</li> <li>Identify needed supports/services including the Chaffee Independent Living Plan, adult guardianship, or BH services</li> <li>Develop care plan around these discussions</li> </ul>	<ul style="list-style-type: none"> <li>The CC will continue previous interventions, as needed; ensure Enrollee is connected with additional services for which they are eligible, such as vocational rehabilitation</li> <li>The engagement with these children will be Enrollee-specific and guided by needs identified in the <b>CLS Assessment – as completed through placement</b> – and through conversations with the Enrollee, representative, and DCBS</li> <li>The CC <b>will engage Family and Youth Peer Support Specialist and Community Health Workers (CHW)</b> to connect Enrollee to community supports and resources identified in Humana’s Community Resource Directory (CRD) or through partnerships with CBOs</li> <li>The CC <b>will collaborate with DCBS’ formal transition planning</b> to ensure that the Enrollee has the information they need to navigate decisions on their own future</li> <li>The CC <b>will engage Humana Housing Specialist</b> to discuss post-transition housing options</li> <li>The CC will provide education around understanding the healthcare system including preventive care, how to choose care providers, understanding Medicaid and other forms of insurance</li> </ul>
Age 18-21	<ul style="list-style-type: none"> <li>Apply Transition Plan (exit care, extend commitment, etc.), including addressing food, housing, and transportation needs</li> <li>Provide educational and vocational support if commitment is extended</li> <li>Independent living arrangements if commitment is extended</li> </ul>	<ul style="list-style-type: none"> <li>The CC will assist Enrollee with <b>application for tuition waiver and/or educational assistance</b> if requested</li> <li>The CC will connect Enrollee with <b>WIOA youth program</b> to explore skills training and mentorships</li> <li>The CC will support the execution of the Transition Plan and <b>coordinate with DCBS, the Enrollee, representative, and current physical health and BH providers</b> in order to ensure the success of the Enrollee</li> <li>The CC will connect the Enrollee to our <b>Housing Specialist</b> to explore housing options if choosing to leave care</li> <li>The CC and <b>Family and Youth Peer Support Specialist</b> will continue to engage the Enrollee regarding educational success and vocational training and development</li> <li>The CC and CHW will <b>identify and engage community resources, such as Mentor Kids Kentucky and Dress for Success</b>, as needed</li> <li>The CC and Family and Youth Peer Support Specialist will continue to advise and educate the Enrollee on how to cope with stress, anxiety, and navigating adulthood</li> <li>The CC will assist Enrollee with joining Humana’s Workforce Development Program, which will provide <b>up to 12 months of assistance to support each participant in planning for the future</b> (e.g., education, training, financial counseling) and engaging in and maintaining meaningful work (e.g., job support and retention coaching)</li> </ul>

Humana will also augment and support DCBS and the Department of Juvenile Justice’s (DJJ) well-defined transition planning processes. We will work with DCBS and DJJ through Joint Operating Committee (JOC) meetings to identify how to streamline the Casey Life Skills (CLS) assessment tool to improve efficiencies. We propose that our Kentucky SKY CCs participate in DCBS and DJJ transition planning meetings to support care goals pertinent to healthcare and SDOH barriers where appropriate. We will collaborate with DCBS and DJJ to identify needed resources and services and facilitate referrals where appropriate. We will convene working groups where there are gaps with foster care agencies and organizations and engage with the existing foster care agencies to inform how all parties can work together to improve the aging out experience.

To enhance care coordination and reduce duplication of efforts, Humana is committing to a **Co-located Complex Care Coordinator model with DCBS** at key DCBS locations.

**RECOMMENDED STRATEGIES FOR ENHANCING SERVICES & OUTCOMES FOR ENROLLEES AGING OUT**

As a Managed Care Organization **currently serving more than 2,000 potential Kentucky SKY Enrollees in the Commonwealth** in conjunction with DCBS and DJJ, our approach to facilitating Kentucky SKY Enrollees’ successful transition into adulthood supports them in maintaining their optimal level of health, pursuing their educational endeavors, and locating internship opportunities that assist them in resume-building and vocational experience. From the moment a Kentucky SKY Enrollee comes to Humana, whether at a young age or closer to age 18, we are working to **set our Enrollees on a path to healthy independence**. Our comprehensive array of integrated supports and resources provided within our CCT creates a **safety net for our Enrollees** through which they can navigate the healthcare delivery system. We recommend the following strategies to prepare, engage, and assist foster care and DJJ Enrollees in transitioning out of the Kentucky SKY program.

**Engaging Enrollees Early**

Humana will begin to address soft skills within our care planning process for Enrollees 12 years of age and older, supplementing and complementing the DCBS soft skills training. Starting this conversation at a young age gives Enrollees time to adjust, so we can equip them early on with resources to support a successful transition. Our **CCT works in conjunction with the Enrollee, DCBS/DJJ, and foster parents or other identified caregivers and natural supports** to create a comprehensive Enrollee care plan, which includes an ongoing Transition Plan for moving toward adulthood.

Through our experience serving foster care children in Kentucky and Florida, we have found that empowering our transition age youth and providing them with a voice in their path to adulthood helps them to engage in their own decision-making and plan for a successful transition. We will partner with organizations like **Voices of the Commonwealth (VOC)** and actively participate in their annual Independent Living Teen Conference, as well as partnering with the **Kentucky Organization for Foster Youth (KOFFY)** and other youth organizations. We will also employ our **certified Family and Youth Peer**

Figure I.G.12-1 Aging Out: Supplemental Activities



**Support Specialists** to help engage and connect with these youth. Family and Youth Peer Support Specialists, who often connect with Enrollees in a more meaningful way, are an integral part of our CCTs.

We will coordinate with DCBS and the Enrollee to bring the results of the CLS assessment tool used by DCBS to care coordination meetings to help drive transition planning. The assessment is designed for use with youth aged 14 to 21 to self-evaluate skills critical to long-term success. We will follow the areas covered in the CLS assessment to deliver educational packets to the youth, who can then work on them on their own. Education materials will address topics such as:

- Daily living (e.g., food preparation, safe Internet use, laundry)
- Self-management and health promotion (e.g., making doctors’ appointments, health benefits, sexual health)
- Relationships and communication
- Housing
- Money management
- Job placement and skills
- Education planning
- Permanency
- Goal-setting
- Identity documents (e.g., Social Security card, birth certificate, etc.)

**Training Sessions on Transition Planning**

To support our Enrollees in the aging out transition process, Humana will hire a dedicated Kentucky **SKY Community Engagement team** consisting of a Kentucky SKY Community Engagement Director and four Kentucky SKY Community Engagement coordinators. These coordinators are co-located in communities across the Commonwealth. This allows the team to better understand the dynamics and needs of our Enrollees and potential Enrollees specific to their geographic areas, access to care, knowledge of healthcare and health literacy. This Kentucky SKY Community Engagement team will provide **training sessions across the Commonwealth for Kentucky SKY Enrollees, foster parents, adoptive parents, and fictive kin on transition planning**. Through partnering with the VOC, we will ensure consistent messaging and provide supplemental educational topics.

Topics we will cover to support across the Commonwealth include, but are not limited to:

- Life skills
- Well-being
- Coping
- Education support
- Identifying available resources

With our current transition-age foster care/DJJ Enrollees, Humana has participated in training programs and arranged supports such as:

- Child care assistance
- Connection to housing supports
- Education on other forms of health coverage available and assistance with applications
- Independent Living Centers
- BH services including substance abuse treatment
- Vocational rehabilitation
- Job Corps

We will draw upon a range of evidence-based content to educate our Kentucky SKY Enrollees, including but not limited to the resources described in **Table I.G.12-2** below.

**Table I.G.12-2: Reference Resources Care Coordinators Use to Engage Enrollees**

Resources	Description
Enrollee Health Promotion	<ul style="list-style-type: none"> <li>• Health and wellness educational materials via Healthwise Database</li> <li>• Digital applications (e.g., MyHumana Enrollee Portal, myStrength)</li> <li>• Online physician-reviewed information on children’s health for parents, kids, and teens (e.g., Kids Health)</li> </ul>

	<ul style="list-style-type: none"> <li>• 24/7 Medical Advice Line</li> <li>• Telemedicine support for medical and BH promotion</li> </ul>
Casey Family Programs	<ul style="list-style-type: none"> <li>• Evidence-based life skills curricula and resource guide geared at youth aging out of foster care</li> </ul>
Healthy Children	<ul style="list-style-type: none"> <li>• American Academy of Pediatrics’ educational website</li> </ul>
Banking on Your Future	<ul style="list-style-type: none"> <li>• Award-winning financial literacy curriculum from Project Hope</li> </ul>
Common Sense Media	<ul style="list-style-type: none"> <li>• Leading non-profit organization providing guidelines for safe and responsible use of technology</li> </ul>

In follow-up care coordination meetings, the Enrollee, their family or caregivers, and CC will **determine person-centered goals, identify barriers, and develop next steps** to move forward. The CC will invite Family and Youth Peer Support Specialists to join the discussions upon approval of the Enrollee and representative.

We will review the CLS Assessment at a minimum bi-annually, until the Enrollee reaches age 21 or exits care, to help develop a care plan with individualized goals to support successful transitions to adulthood. Reviews can be timed to provide information that can be incorporated into DCBS’s Transitional Planning meetings, in which the Humana CC will participate.

**Figure I.G.12-2: Humana’s Age Specific Supports Timeline**



### **HUMANA'S WORKFORCE DEVELOPMENT PROGRAM**

Humana recognizes that the health of our Kentucky SKY Enrollees is dependent upon their well-being and stability. Our voluntary, holistic workforce development program is designed to assist Enrollees find dignified, stable work that affords increased self-sufficiency for themselves and their families.

#### **Program Overview**

The Humana Workforce Development Program will provide up to 12 months of assistance to support each participant in planning for the future (e.g., education, training, financial counseling) and engaging in and maintaining meaningful work (e.g., job support and retention coaching). We will seek to build access to a network of Community-Based Organizations (CBO) with expertise in providing these services by rewarding those organizations who successfully place and stabilize employees. Additionally, we will connect Enrollees to resources across the community to address any unmet needs that present barriers to finding and retaining employment.

- **Identifying Participants:** To identify Enrollees for the Humana Workforce Development Program, Humana will address SDOH needs and barriers through a Health Risk Assessment (HRA) with all new Humana Enrollees. For those who express an interest and ability to work, we will provide detail on our voluntary workforce development program and make an appointment for an initial assessment with an SDOH Coordinator. The SDOH Coordinator will utilize assessment information to better understand the Enrollee's education, skills, goals, and barriers, and refer them to a workforce development CBO.
- **Career Coaching and Job Placement:** Workforce development-focused CBOs offer culturally competent expertise, an understanding of the needs of the people they serve (including Medicaid and related populations), and long-standing relationships with other valuable service agencies to identify and secure support services. For this reason, we envision building a statewide network of CBOs to connect Enrollees with comprehensive career coaching services to identify their strengths and goals, hone the skills needed to succeed in the workplace, and match them to appropriate job openings. Additionally, for those CBOs who have or can establish such services, they will provide job search assistance and job retention coaching.

The Humana Foundation is a strong supporter of community-based initiatives. The following examples are particularly relevant to workforce development and may offer potential future partnerships for Humana's Workforce Development Program.

#### **HEROES, Family Scholar House (FSH)**

The HEROES initiative builds upon FSH's current model of engaging low-income individuals in improving their overall well-being through education, career advancement, and family support services.

The program recruits and engages participants, assesses participants for unmet needs, connects individuals and families to appropriate community resources, and provides services through interactive technology and FSH's continuum of care. Outcomes include food security, social connection, and post-secondary success. (\$1,075,000 grant)

#### **School to Work, Big Brothers Big Sisters of Kentuckiana**

School to Work provides high school students with valuable exposure to workplace skills and career opportunities. The collaborative program involves Big Brothers Big Sisters, high schools, and corporate partners. Corporate partners provide volunteer mentors, office meeting space, and expertise on topics covered during workplace visits. Monthly, students visit workplaces to meet one-on-one with mentors and participate in hands-on activities, presentations and training sessions. (\$50,000 grant)



- As an example, Humana has developed a partnership with Volunteers of America (VOA) Kentucky. The VOA approach uses supported employment specialists in working with program participants to provide job discovery, job search, job placement, and on-the-job support services. VOA brings more than five years of experience with this programming and a strong relationship with employers in Kentucky. Additionally, to support our female Enrollees in seeking employment, we are building a referral process with Dress for Success Louisville, serving women through career mentoring, financial education, and providing professional career attire in the greater Louisville area.
- **Removing Barriers and Providing Support Services:** Medicaid Enrollees and related populations cite a lack of transportation and unreliable or unaffordable child care as two common reasons for remaining unemployed. Support services that address life challenges and unmet needs are key to securing and maintaining a job. Our program will provide assistance for the duration of the program to remove these types of barriers to work. Program participants can call on our SDOH Coordinators, who will be trained to identify solutions for these barriers, through direct assistance or referral or can work with their main point of contact at the CBO to identify and address these barriers.

Humana’s approach to population health aims to strengthen existing CBOs who provide services directly to Enrollees and provide them with a sustainable rate for those services. Humana’s Workforce Development Program is one component of our population health strategy, whereby we will decrease barriers to achieving meaningful employment and increase overall self-sufficiency. Humana will work with our CBO partners to design and collect metrics to track the success of our workforce development program and to understand the long term viability. These metrics will allow us to create a pay for performance relationship with organizations who are already in the community completing this valuable work, and reward successful outcomes.

#### Addressing Healthcare Needs Prior to Transition

Identifying Ongoing Service Needs: As a Humana Kentucky SKY Enrollee approaches the age of 18, the CC conducts a review of service usage, a medication review, and a gap in care review to **identify current services that may require an ongoing authorization, any medications that will need to be transferred, and any gaps in preventive services.** We have made significant investments over the past few years to enhance our clinical model and integrated clinical platform, Clinical Guidance eXchange (CGX), to fully integrate BH, physical health, and SDOH needs; facilitate communication across Enrollees of the CCT; and coordinate with external partners. CGX has the following capabilities to help us assist Enrollees with a smooth transition out of Kentucky SKY:

- We automatically push care plans and assessments to our provider portal, Availity, and Enrollee portals to facilitate data-sharing and alignment of services.
- Care plans can be faxed or mailed to the Primary Care Provider (PCP) on file upon request.
- We can fax care plans within the system to additional providers or involved parties upon request. For example, we can capture the DCBS case worker’s fax number and from CGX, we can fax the care plan to that worker to coordinate efforts.

#### GED Support for Humana Enrollees

Humana will offer reimbursement for tools that empower our Kentucky SKY Enrollees to get their GED. Kentucky SKY Enrollees will have access to GEDWorks, a program that includes the assignment of a bilingual advisor, access to guidance and study materials to prep for the tests, unlimited use of practice tests, and a test pass guarantee. The test pass guarantee ensures that Enrollees can take the test multiple times (at no cost to the Enrollee) until they are able to pass. With the exception of the actual GED tests, all other components are offered virtually, allowing maximum flexibility for our Enrollees to meet their goals. Humana will cover the cost of on GED for Kentucky SKY Enrollees to supplement what may be covered by the State Commonwealth for some portions of this population.



- CGX captures alternate contact information such as guardian info, assigned DCBS case worker, as well as other pertinent information (e.g., language and cultural preferences) so all team Enrollees can access this information.
- This platform supports tracking of Care Coordination Team (CCT) meetings and facilitates information-sharing. Internal CCT partners [registered nurse, SDOH Coordinator, licensed medical health professional, Medical Director, BH Medical Director, Utilization Management (UM) Coordinator] all see the same Enrollee record and can assign tasks and enter notes to facilitate team communications and maintain a single Enrollee record.

We will set up prompts in our clinical documentation system to alert the CC to begin the clinical review of the Kentucky SKY Enrollee at one year prior to their 18th, 21st, and 26th birthdays. This review will be initiated within one month of enrollment for any new Kentucky SKY Enrollee who enters Humana after their 17th birthday.

If the CC identifies any ongoing needs (medical, BH, or pharmaceutical), we will help the Enrollee locate a PCP as well as any other pertinent specialists with whom the Enrollee can establish an ongoing, long-term relationship. If the Kentucky SKY Enrollee will continue with Medicaid coverage and has needs for ongoing care coordination and management of conditions, the Humana Kentucky SKY CC will make a referral to the appropriate non-Kentucky SKY CCT and share assessments and other care plan information to facilitate continuity of care. The Humana Kentucky SKY CC is always available to the Enrollee and their new care team if any needs should arise.

Education on Navigating Relationships with Providers: We want to **empower our Kentucky SKY Enrollees to manage their own healthcare.**

Our integrated CCT will help educate the Enrollee on how to make appointments and speak independently with their PCP or specialist. We work with our Enrollees to learn how to prepare for an appointment (i.e., bring a list a medications, health information, and insurance card) and fill out necessary forms. If the Enrollees choose, they may elect to have a youth peer support specialist attend initial appointments with them as they build trust with their providers.

In addition to educating Enrollees on appointment scheduling, our Youth Peer Support Specialists and CCs will conduct “mock” **appointment-scheduling calls and attend appointments with Enrollees** as necessary.

Supporting Enrollees’ Healthcare Needs after Foster Care: From ages 21 to 26, those Enrollees who transition out of foster care will need enhanced care coordination and management as they age out of many of the resources and programs previously available to them through DCBS. The Humana CCT continues to support these Enrollees’ physical health, BH, and pharmaceutical needs through the **comprehensive Care Plan and engagement with their PCP and specialists.** The CCT also engages CBOs to connect Enrollees to community supports and services. Examples of support include offering individualized education and training around Medicaid eligibility, workforce support and obtaining a GED if needed.

Specialized Supports: Kentucky SKY CCs will work to ensure we identify Enrollees’ physical and BH needs and integrate their needs into the care plan. This could include connections with providers to ensure continuity of care, durable medical equipment (DME), or home healthcare. Some Enrollees may need transportation solutions or BH supports. For example, we might help a Kentucky SKY Enrollee access the Aging and Disability Resource Center to find accessible living options. Our Family and Youth Peer Support Specialists and CHWs cultivate relationships with providers and community support programs that can be leveraged to link our Enrollees with the services necessary to support their transition.

Educating on Kentucky Medicaid: Humana’s aging out foster care Enrollees will receive focused outreach and education on re-enrolling with Medicaid. These Enrollees may not be aware that they have to initiate the Medicaid enrollment process through their local DCBS region or online. Retaining Medicaid coverage promotes

continuity of care and prevents disruptions in treatment. **CCs or CHWs will guide Kentucky SKY Enrollees through the eligibility process** and can make direct referrals to Medicaid care management services.



### Improving the Health of the Communities We Serve

Humana is committed to improving the health of the communities we serve. We will donate 10% percent of Kentucky SKY cumulative pretax profits back to community-based organizations (CBOs) that support foster care children in the Commonwealth. Should our annual financial performance qualify for a disbursement, Humana will quantify the total disbursement and develop a suggested distribution of payments along with our rationale. We will meet informally with DMS to obtain input on our suggested disbursement, then finalize the amount and notify the recipient organizations. We propose to focus our donations on creating local, sustainable solutions to population health problems impacting Kentucky's foster care children, youth, and caregivers with an emphasis on rural and underserved areas. Potential examples include promoting trauma awareness and knowledge in schools and providing support to our Kentucky SKY Enrollees for a successful transition into adult life through tuition support, job training, and internships.

### Addressing SDOH Needs

**Humana's Bold Goal** is our population health strategy to improve the health of the communities we serve by making it easier for people to achieve their best health. We are tracking progress using the Centers for Disease Control and Prevention (CDC) tool, Healthy Days, which measures self-reported mental and physical Unhealthy Days of an individual over a 30-day period. The premise of the Bold Goal is that **health doesn't happen in a doctor's office; events that occur outside of a medical office largely determine a person's health**. SDOH (e.g., financial and health literacy, provider/Enrollee cultural competency, food insecurity, and lack of awareness of resources) are key factors that influence an individual's ability to make healthy choices. Only 20% of the factors that determine the length and quality of an individual's life are attributed to healthcare; far more significant is one's social, behavioral, economic, and physical environment. To truly address Enrollee's needs, a substantial shift was needed to build a coalition of community stakeholders.



The foundation of Bold Goal is at the local level. Our dedicated team works directly with more than **65 non-profit organizations**, government and business leaders, and physicians, clinicians, and hospital systems to convene and co-create solutions to address SDOH-related social needs that are both unique to their community and to Bold Goal. As our work evolves to include additional geographic locations and populations, collaboration with communities and physician practices remains vital to the success of our mission.

While Humana's Bold Gold is targeted to specific communities in the Commonwealth and would not impact all Kentucky SKY Enrollees, based on current data, and estimated 400 Kentucky SKY Enrollees would benefit from this population health strategy. Kentucky SKY Enrollees are often more acutely impacted by systemic barriers that impact their SDOH needs, and have more points of contact with the CBOs that are actively working toward improving the health outcomes of these communities.

At our neighborhood locations in Kentucky, we have hosted events on understanding your finances, healthy cooking demonstrations, housing options, advance care planning, and chronic condition management classes.

In our review of the aging out Enrollee's care plan, the CC will assess any unmet SDOH needs, such as Enrollee housing, transportation, food insecurity, education, and employment. We employ **regionally assigned SDOH Coordinators** who support the CCTs in finding appropriate community resources to meet Enrollee's needs. Humana will also rely upon our **regional CHWs** positioned throughout the Commonwealth to provide a range of supporting functions, such as scheduling and/or going to appointments with Enrollees, accompanying Enrollees to community resources, and providing condition-specific education.

**Family and Youth Peer Support Specialists:** Humana’s Family and Youth Peer Support Specialists are responsible for establishing and cultivating relationships with Enrollees and providers, connecting Enrollees with critical community support programs, providing Enrollee education, finding and connecting with unable-to-contact Enrollees, and helping Enrollees engage in care, including attending appointments with Enrollees as needed and requested. Humana’s Family and Youth Peer Support Specialists are hired from the communities they serve and demonstrate strong sensibilities to locate and engage Enrollees in culturally appropriate supportive care. As they are individuals with shared lived experiences their ability to engage with the Kentucky SKY Enrollees will be of great value as they are tackling the new experiences of an independent adulthood.

**Food Insecurity:** Food insecurity is a significant and pressing need among many of our Enrollees. We are pursuing a series of partnerships to strengthen our ability to address food insecurity within our population, including:



- **Cooking Matters Program:** In partnership with Share our Strength, we will work with community partners to **teach families basic cooking skills, how to budget, and how to use Supplemental Nutrition Assistance Program (SNAP) and Women, Infants, and Children (WIC) benefits.**
- **Feeding Kentucky:** Among the partnerships we are considering is a pilot to **distribute medically tailored food boxes via Federally Qualified Health Centers (FQHC)**, working through the Kentucky Health Center Network. Providers would receive training on screening for food insecurity as part of their broader screening efforts. Eligible patients would then receive prescriptions for a food box filled with healthy food items.

**Housing Insecurity:** Recognizing the foundational role that housing plays in an Enrollee’s health and well-being, Humana has designated a position to focus exclusively on helping Enrollees and their care team navigate the process of obtaining safe and affordable housing. Humana will employ two **Housing Specialists** with regional responsibilities. Humana associates in this role will also be responsible for maintaining the Homeless Outreach Plan. Our Housing Specialists will work with our SDOH coordinators and the CC to connect transitioning Kentucky SKY Enrollees with safe, affordable housing options when necessary.



**Education and Employment Assistance:** As outlined previously, we will launch **Humana’s Workforce Development Program** that helps Enrollees train for and secure sustainable employment by leveraging community-based partnerships. **This program will be available to all eligible Kentucky SKY Enrollees.** Examples of services we will offer include:



- **Tutoring Services:** We will connect Kentucky SKY Enrollees seeking additional support in online tutoring programs, such as Kahn Academy.
- **GED Assistance:** Humana will partner with **GEDWorks™** to cover the cost of the GED for Kentucky SKY Enrollees to supplement what may be covered by the Commonwealth for some portions of the population.
- **Scholarship Opportunities:** Humana will also fund training for Kentucky SKY Enrollees who are interested in becoming a certified Family and Youth Peer Support Specialist. **Humana will fund training for 50 specialists for Kentucky Medicaid, including Kentucky SKY.**

To support our female Kentucky SKY Enrollees in seeking employment, we are building a direct referral process with **Dress for Success – Louisville**, which serves job-seeking women through career mentoring, financial education, and professional career attire in the greater Louisville area. As part of our program evaluation, we will track outcomes of our Enrollees to better understand the correlation between job stability and health. These outcomes for the Kentucky SKY population will be used to tailor our approach and supports to remove SDOH barriers for these Enrollees.



Humana has a mission to improve the communities we serve. In 2019 in Kentucky alone, **6,309 associates** in KY tracked **88,717 hours of volunteer time**. Humana associates have volunteered at local high schools to talk to kids about their jobs and career paths. For the Kentucky SKY program, we will create statewide volunteering opportunities for our associates to engage with Kentucky SKY Enrollees on resume building, interview skills, college applications, and more.

### Strong Community Partnerships to Support Transitions

United Way of Kentucky: Humana is committed to working with **United Way of Kentucky** to broaden coverage of 2-1-1 across the Commonwealth. The Kentucky 2-1-1 community resource directory (CRD) is powered by United Way across the Commonwealth, but does not have contact centers and coverage in all counties. Through Humana's new partnership with the United Way of Kentucky, we are helping fund and deliver 2-1-1 services to the entire Commonwealth, with an expectation of addressing efficiency and standardization of user experience as we move forward.

United Community Louisville: A community-wide, community-driven, and agency-linkage technology platform system in which individuals are matched with appropriate community services based on their unique needs across the health, education, and social service sectors and managed to closure. CBOs are connected via the platform, facilitating referrals and information sharing, including "closing the loop" on referrals by sharing information when Enrollees access a community agency service. **Unite Us** (the vendor selected by Metro United Way, Louisville Health Advisory Board, and other community partners for the **United Community Louisville pilot**) has a proven cross-sector health and social care coordination platform in 40 communities nationwide and is currently hiring locally-based staff to support the program. The goals of Humana's investment in the United Community Louisville pilot include:

- **Development of a connected, collaborative, community-wide system to coordinate care and services** across multiple sectors to address SDOH needs, promote education, and offer real-time tracking and reporting
- **Measurably improve health, education, and well-being outcomes** by coordinating the delivery of health and social services among children, individuals, and families with complex needs
- **Creating a "no wrong door" system** whereby individuals are channeled to appropriate services based on their unique needs and preferences across the health, education, and social service sectors, and tracking outcomes after service referrals

Our investment includes licenses that will allow our CHWs and CMs to access the referral platform fed by the Metro United Way 2-1-1 CRD, make community-based referrals, and ensure Enrollee access to DMS services. Refer to **Attachment I.G.12-1** for our Letter of Support from United Way.

TIC Provider Recognition Program: Humana recognizes TIC as a crucial component of provider training. To promote and facilitate access, we will develop a **TIC Provider Recognition Program**, which will recognize successful completion of TIC training. We have secured partnerships with both the University of Louisville's (UofL) Center for Promoting Recovery and Resilience and the University of Kentucky's (UK) Center on Trauma and Children to inform the design of our TIC recognition. Please refer to **Attachment I.G.12-2** and **Attachment I.G.12-3** for Letters of Support from UofL and UK. Providers can achieve this recognition through several modes:

- We will leverage Relias's online evidence-based programs to offer our providers over 20 TIC modules, which can be easily accessed online through our secure provider portal, Availity. A core TIC curriculum will be available to all contracted providers, along with additional educational modules to support caring for the special needs of the Kentucky SKY population.
- We will accept and acknowledge providers who have already completed industry-approved training (such as the University of Buffalo's Trauma-Informed Organization Certificate Program: Basics for All Staff) and have experience serving Kentucky SKY eligible Enrollees.

- As our collaborations with both UofL and UK evolve, we will explore including their repository of training resources.

To incentivize providers to pursue this recognition, we will **offer a value-based incentive program for successful completion**. Additionally, Humana will **identify TIC-recognized providers in our Provider Directory** and **move them up the PCP-assignment algorithm** for Kentucky SKY Enrollees.



**School-Based Telehealth with Norton Healthcare:** School-based telehealth programs can be an impactful way to improve health outcomes for children. For the aging out population within Kentucky SKY, these programs can help Enrollees become familiar with telehealth as a delivery model, increasing the chances they will be able to leverage similar services when on their own and in need of healthcare rather than utilize the emergency department (ED) Emergency Room for all health needs. With new telehealth technology, special computer-connected otoscopes and stethoscopes allow doctors to check ears, noses, throats, and heartbeats from remote locations. Students referred to the school nurse can receive a virtual doctor’s visit to diagnose common illnesses, such as inner ear infections, allergies, pinkeye, and upper respiratory infections, among other conditions. These innovative programs improve access to care and perhaps more importantly, offer convenient access to care. Without school-based telehealth programs, children often need their parents to take time off of work for doctor visits. For low-income families, skipping a shift at work to visit a provider can have serious consequences, but delaying treatment leads to preventable ED visits and hospitalizations.

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Through the model Humana is offering, we are very encouraged that the children in foster care and adoption assistance, as well those who are involved with DJJ, will receive the best care and the state will observe positive outcomes, including reduction in the number of children entering the foster care system.  
”

– Mark D. Birdwhistell,  
Vice President for Health  
System Administration and  
Chief of Staff, UK

In an effort to improve access to care for Kentucky’s children, **Humana supports the advancement of Norton Healthcare’s school-based telemedicine program in Jefferson County Public Schools**. Humana will sponsor the telemedicine technology Norton Healthcare uses to remotely examine the student with the assistance of the school nurse. **This support allows expansion of telemedicine technology in public schools located in underserved areas, reducing disparities in access to care while improving the overall health of the community**. Humana and Norton Healthcare see this as an opportunity to keep children in school, healthy and learning.

**The Bounce Coalition:** Humana has entered into a partnership with the Bounce Coalition working with schools to address the root causes of poor health in the most vulnerable children. We will implement a trauma-informed model for using “Whole School, Whole Community, Whole Child Coordinated School Health.” We will collaborate with teachers, parents, and others who interact with children and families to recognize the impact of Adverse Childhood Experiences (ACEs) and **equip children to develop resiliency and coping mechanisms for dealing with trauma**. Through this collaboration, Bounce trains our Kentucky SKY Member Services Representatives (MSRMSR), CCs, and CHWs on ACEs and TIC. Please refer to **Attachment I.G.12-4** for our Letter of Support from Bounce Coalition.

**Kentucky Partnership for Families and Children (KPFC):** KPFC is a statewide organization with a goal of **empowering families and youth affected by BH issues** to initiate personal and system changes. They offer training on topics such as educational advocacy, adolescent issues, parenting, peer support certification training, and leadership. In addition, they support Regional Youth Councils who serve youth with emotional and behavioral disorders through monthly meetings focusing on skills-building. We will explore ways to engage Kentucky SKY Enrollees in these activities, including possibly becoming trained as a peer support specialist themselves.

**Transition Age Youth Launching Realized Dreams (TAYLRD):** TAYLRD is a federally funded initiative aimed at positively impacting the lives of the Commonwealth’s 16- to 25-year-olds who have or are at-risk of developing BH challenges. Their goal is to be a comfortable “living room” space for youth to connect with their peers and

also get connected to services. Some of the drop-in centers offer laundry facilities, snacks, and games. We will work with TAYLRD to ensure we can educate our Kentucky SKY Enrollees on their centers and services.

### **Assessing Risks**

As part of the aging out care plan review, Kentucky SKY CCs will identify potential risks our Enrollees face and collaborate with them and the CCT to develop solutions. For example, a key risk for Kentucky SKY Enrollees is medication adherence and the physical and BH risks of not following a prescribed regimen. If an Enrollee has difficulty remembering to take asthma medications, the CC will educate the Enrollee on how to fill prescriptions and then work together to develop a manageable plan for daily adherence. This could be something as simple as a pillbox or setting up an alert on a cellphone. We educate Enrollees on their health conditions throughout care coordination and as the Enrollee nears transition, this education might evolve into learning about when it is necessary to see a provider, how to get medications filled, or what to do when one is sick and cannot get to scheduled appointments. For an Enrollee who has needed behavioral supports in the past, the CC will ensure they have the number of our **BH Crisis Line**.

### **Explore Waiver Options**

The Kentucky SKY CC will assess the Kentucky SKY Enrollee's health status to see whether they may be able to receive services under a home and community-based waiver, such as Supports for Community Living or the Michelle P. Waiver. If the Enrollee appears to meet the eligibility criteria, the CC will work with the Kentucky SKY Enrollee to begin the application process. In many cases, these waivers have waiting lists. The Humana CCT will work with the Enrollee and their PCP to authorize needed services if they are on a waiting list.