

KENTUCKY SKY USE CASE 3

Shakira, 16 years, entered foster care two months ago after her primary caregiver, her grandmother, Mrs. Miller, passed away. Shakira was nine years old when she went to live with her grandmother in Lexington after her mother was incarcerated twice for shoplifting and drug possession with intent to sell.

Before the death of her grandmother, Shakira was an excellent student, a member of the swim team, played the clarinet in the school band, and hoped to go to the University of Kentucky (UK) to fulfill her dream of becoming a veterinarian. She had a boyfriend, Mike, who was the star player on the school's baseball team. Mrs. Miller had a full-time job with a modest income and was supportive of her granddaughter's studies and extracurricular activities. Shakira and her grandmother had discussed UK scholarship opportunities with the high school counselor.

Three months ago, Shakira's PCP confirmed that she was pregnant in her first trimester. Shakira and her grandmother discussed options: keep the baby, adoption, and abortion. Eventually, they decided to keep the baby to raise in their home. Mike and his parents strongly recommended adoption and refused to be involved in the baby's support or upbringing. Within a week of the final discussion with Mike, Mrs. Miller died from a myocardial infarction. She was found in her home by Shakira when she came home from band practice.

Shakira stayed with school friends for two weeks but the school counselor contacted DCBS and Shakira was placed in foster care. After two weeks in a Lexington group home, Shakira was placed in a private foster home in Bowling Green. Shakira began seeing an OB/GYN and made plans to keep her baby. She was also diagnosed with depression resulting from the death of her grandmother and transition to a foster home in Bowling Green. Shakira stopped talking about her dream to become a veterinarian. Shakira's foster parents wanted both Shakira and her baby to stay with them as a teen mother and baby in foster care.

The foster parents expressed concerns to the DCBS Social Service Worker, however, about Shakira's depression, poor school performance, and development of her skills to care for a baby.

Describe how the Vendor would address Shakira's situation and coordination with the DCBS Social Service Worker, the foster family, physical and behavioral health providers, transition from the family to the community, and community resources. At a minimum, address the following programs and services:

- a. Care management;
- b. Access to and coordination between physical health providers (e.g., OB/GYN, pediatrician) and behavioral health providers;
- c. Access to network providers;
- d. Discharge planning for all levels of care;
- e. Coordination of school based services and an Individualized Education Plan
- f. Community services for parenting skills;
- g. Applicable evidence based practices;
- h. Coordination of transportation, if needed;
- i. Options for aging out of foster care and risk management;
- j. Social determinants of health;
- k. Provider education and support;
- l. Access to and sharing of medical records; and
- m. Maintenance of the Care Plan.

Introduction

Passport's approach to managing the care of Kentucky SKY members is to work in partnership with the Department for Community Based Services (DCBS) and identify critical factors needed for long-term success. Passport services support the goals of permanency, safety and well-being. For Shakira, the overriding goals are to provide access to health care and support systems that will allow this remarkably accomplished young woman to regain her momentum toward finishing high school and transitioning to college as well as achieving a healthy and safe outcome with her pregnancy.

Understanding the Member

Upon enrollment in Kentucky SKY, Susan, a care coordinator with Passport, telephones Shakira's foster parents, Mr. and Mrs. Lewis, to begin to connect and build a relationship with them and Shakira. Susan arranges to meet Shakira and her foster parents. She tells them she will bring Nicole, a Passport Mommy Steps Maternity and Newborn Nurse Care Advisor with her. At the first meeting, Susan and Nicole complete the Health Risk Assessment (HRA) and the SKY Pediatric Assessment (Enrollee Needs Assessment), but their main focus is establishing a supportive relationship with Shakira and Mr. and Mrs. Lewis. Because she works from a strengths-based, youth-driven model of care, Nicole uses the interview to highlight Shakira's accomplishments, to normalize her depression in light of the circumstances, and to begin to convey support for Shakira's goals. Shakira says that she had hoped to be a veterinarian, but she is not sure that will be possible. Nicole tells her that she will make a note of this important goal and keep it in mind as they work together. She places the goal on Shakira's care plan as a first step to person-centered planning.

Shakira is already enrolled in school and had been connected to an OB/GYN provider, but Mr. and Mrs. Lewis ask Susan and Nicole about resources for counseling and education around parenting. Susan offers several options for behavioral health (BH) treatment in Bowling Green, including one that specializes in addressing grief. She also makes a referral to the local Health Access Nurturing Development Services (HANDS) program. Susan describes Passport's care coordination process and solicits the family's permission to convene an assessment team meeting. She also asks Shakira if she can have Passport's Kentucky SKY youth peer support specialist contact her. The peer support specialist has experience being a foster child, and Susan thinks her perspective might be helpful to Shakira, who agrees. Susan also informs Shakira of incentives she can earn from Passport for obtaining appropriate prenatal care.

Nicole asks Shakira about her mother. Shakira says she heard from a cousin that her mom was released about six months ago, but Shakira has not been able to reach her. Shakira says she would like to reestablish a relationship with her mother. However, Shakira does not want to get her hopes up and wonders how her mother will respond to her pregnancy.

Creating a Care Plan

Prior to the assessment team meeting, Susan gathers health and education records, follows up to make sure that Shakira has been connected to a BH provider and reviews the completed assessment, which includes a trauma assessment. Shakira has had several adverse childhood experiences that until recently were offset by the loving and stable presence of her grandmother. However, the trauma assessment reveals that Shakira

had felt pressured into a sexual relationship with her boyfriend. Her boyfriend said if she loved him, having sex would “prove” it to him. Now she feels confused about romantic relationships. Susan also follows up with the Social Service Worker (SSW) about Shakira’s mother. The SSW says she has been trying to establish contact with the mother but has been unsuccessful in finding a good contact number; however, she will continue to try.

The assessment team meeting, facilitated by Susan, is held at Shakira’s school, allowing Shakira, the school counselor, the Youth Service Center coordinator (who has experience working with teenage moms), and Mrs. Lewis to attend in person. Because the DCBS worker is located in Lexington, the DCBS worker attends by phone. The youth peer support specialist is also present and has discussed with Shakira her rights as a foster child and strategies for being a good advocate for herself. Neither the BH therapist nor someone from the OB/GYN’s office are able to attend, but in preparing for the meeting Susan has contacted them to allow them to make recommendations. Based on her past academic performance, Shakira has been placed in advanced classes in which she is currently struggling. She asserts herself, however, by rejecting an offer to move to regular classes, saying, “I know I can do this. I just need some help.” The school lets her know about after-school tutoring resources, and Mrs. Lewis promises to support Shakira’s access to these services. If Shakira needs it, she can use homebound schooling during the last month of pregnancy and the initial postpartum period, but Shakira wants to remain in “regular” school as much as possible. The primary focus of the care plan initially is on supporting Shakira’s adjustment to her foster home, her success at school and the healthy delivery of her baby. When the subject of Shakira’s mom comes up, Shakira says she wants to know that her mother is okay. Susan suggests that the SSW reach out to the mother’s managed care organization (MCO) to see if they have a current contact phone number and ask them to obtain the mother’s consent for it to be released to the SSW.

Facilitating Care

In the coming months, the care coordination team meets monthly, reviews Shakira’s progress and adjusts her care plan as her needs change. Shakira needs help with coping with her foster parent’s expectations, planning for her baby and developing new peer relationships. With permission, Passport’s care team communicates with the BH therapist around Shakira’s specific issues related to intimate relationships.

After Shakira delivers, care coordination will be provided for her newborn. In the meantime, the team addresses childcare options for when the baby arrives. The Youth Service Center coordinator is instrumental in locating affordable childcare options for when Shakira is in school. Susan identifies charitable organizations that supply car seats for free.

Nicole maintains regular contact with Shakira’s OB/GYN. When Shakira transitions to a more permanent primary care provider (PCP) (see information below regarding access to network providers), Susan assists in scheduling appointments and arranging for records sharing between the two practices. With appropriate permission, Nicole alerts Shakira’s OB/GYN and later her PCP about Shakira’s depressive symptoms. Shakira’s therapist diagnosed her with an Adjustment Disorder with depressed mood, and recommended a trial of Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). Shakira was opposed to starting

antidepressant medication, and after consultation with the Kentucky SKY psychiatrist, her DCBS worker supported this decision. Shakira also expressed to Nicole that she was unwilling to take over-the-counter (OTC) medicines for fear that they would harm the baby. Nicole contacts the Passport clinical pharmacist, Carrie, for information on which OTC medicines should be avoided during pregnancy and which are safe. Carrie also makes sure Shakira is aware that Passport covers prenatal vitamins and understands the importance of taking them during her pregnancy.

Susan continues to monitor what additional providers are needed to help Shakira, and her role is to help in identifying options, scheduling appointments and arranging transportation if needed. Prior authorization is not required for OB/GYN appointments or outpatient BH treatment, so Shakira should not have issues with access to these services. OB/GYNs typically become a member's primary care doctor during pregnancy. When Shakira is ready to transfer back to a PCP, Susan works with her to select one, preferably a pediatrician comfortable seeing both Shakira and the newborn, providing ease of access for Shakira and Mr. and Mrs. Lewis.

Regarding transportation, the Kentucky SKY care team provides information on the Commonwealth-sponsored transportation services and assists with public transportation and voucher programs for OB/GYN or other providers visits. If Shakira has any extended medical or therapy visits, Susan will help the foster family with transportation reimbursement.

Passport trains all provider relations specialists in the unique needs of the SKY population. In this case, we want to ensure Shakira's OB/GYN understands trauma-informed care, and specifically, that the OB/GYN is sensitive with examinations and discussions given the traumatic nature of how Shakira may have been pressured into having sex with her boyfriend, and the underlying traumatic experiences related to her mom.

With an anticipated delivery, the discharge planning begins prior to the maternity admission. Nicole engages Shakira in a care and discharge plan that incorporates decisions and information discussed throughout the care coordination process, including the following:

- A birth plan including expectations around delivery. For any care/treatment that requires SSW signature, the SKY team works with providers and the SSW to obtain these in advance.
- A postpartum plan including discussion of long-acting reversible contraception, pregnancy spacing and other individual postpartum concerns. Passport discharge planners are available if the need arises after delivery to remove barriers to discharge and assist with follow-up care.
- Ongoing risk assessment for potentially avoidable complications during pregnancy and the postpartum period.

Following any inpatient admission (routine or unexpected), the SKY team assists facility care team members in evaluating Shakira for the following:

- Primary and secondary diagnoses
- Pertinent past medical history
- Current cognitive, functional and psychosocial needs
- Discharge needs
- PCP and/or specialist or BH practitioner referral and follow-up appointments
- Medication management
- Post-discharge medical support (home health, durable medical equipment [DME], therapy, rehab)

The care coordination team also provides resources to Shakira, her foster parents, and the SSW related to Shakira's educational rights, understanding of individualized education plans (IEPs), 504 plans and similar issues related to education for children and youth with special needs. Shakira is unlikely to need or qualify for an IEP, given her strong academic and athletic performance in the past. She may require a 504 plan for accommodations related to her pregnancy and emotional disturbance arising from her grief and foster placement. She may benefit from school-based therapy services to help manage the stress of navigating all of the facets of school (including peer relationships and homework) through pregnancy and early motherhood. Susan works with the school to understand the unique package of services offered as part of coordination of Shakira's health care, including Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services and screenings. Passport also ensures that services provided in school do not result in care gaps for Shakira, especially when she is not in school or school is not in session.

Shakira is connected to community resources based on her needs and preferences. Resources are made available without overwhelming the family, with optional referrals or appointments. Passport uses the Healthify software application, which identifies social determinants of health (SDoH) and then refers to local community resources. In addition, referrals can also be made for the following:

- Free prenatal/parent classes such as those offered by The Medical Center of Bowling Green Obstetrics, including "Prepared Child Birth," "Breastfeeding Basics," "Newborn Care and Safety," and "Ready, Set, Go!"
- Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- Maternal Health Texting Program for reminders about appropriate prenatal care (<https://www.text4baby.org/>)
- Review of local health department or other incentivized parenting education programs in Shakira's residential area (the health department may offer a free breast pump for new nursing mothers using WIC and returning to school after four to six weeks postpartum.)
<http://www.barrenriverhealth.org/maternal-and-child-health/breastfeeding/>
- Peer support to normalize Shakira's anxieties about caring for a new baby

For Shakira to obtain a sustained positive outcome for her life, she needs to make personal commitments in a dramatically changing environment (e.g., new child, new location, new family). All of Passport's care management team members have received training in the use of motivational interviewing—a collaborative, goal-oriented style of communication designed to strengthen personal motivation and commitment to a specific goal. Passport expects all providers to operate in a trauma-informed and trauma-sensitive manner and provides resources to support this practice. For mental health providers, specific trauma treatments may be appropriate, e.g., TF-CBT (referenced earlier), as well as evidence-based treatments for depression (e.g., The Society of Clinical Child and Adolescent Psychology's Effective Child Therapy resource).

Shakira is an excellent candidate to be a full partner in the transitional plan initiated by the independent living coordinator and the DCBS worker. Shakira's mother has recently reached out to the SSW, and Shakira reports that a recent phone call with her went well. Her mother's reappearance in her life adds another layer to Shakira's decision-making. Whether Shakira decides to remain in foster care and pursue college,

transition to an independent living program that supports mothers and their babies, or pursue some other option, Susan participates in the process by connecting Shakira with resources, attending to social needs (e.g., housing, food), and addressing risks that might compromise a successful transition.

To aid Shakira in making the best decision for herself, the SKY care team facilitates and provides the following:

- Educational sessions between the Passport transitional youth liaison and DCBS independent living specialist
- Connection with Voices of the Commonwealth
- Education on all of Shakira's available options
- Education-related information and services, e.g., concerning colleges and tuition assistance
- Identification of local housing/school support programs such as Scholar House in Bowling Green
- Assistance with college preparation resources if needed
- Connection to childcare assistance resources
- Referrals for housing assistance (Housing and Urban Development, (HUD), etc.)
- Referrals for employment assistance (vocational rehab, KY Career Centers, etc.)

The SKY Pediatric Assessment includes screening of SDoH. Susan continues to monitor social needs and conduct additional SDoH assessments as needed. The care coordination team would also assist with college preparation resources, connection to non-health care related transportation, and, with permission from her guardian, obtaining a cell phone via TracFone.

Internally, the Passport SKY team share access to medical and case management records for members via IdentifiSM, our care and utilization management (UM) and communication IT platform. Information is available 24/7 through IdentifiSM. During care team meetings, Shakira's SSW signs the required release of information forms so that medical records can be shared between providers and any community resources involved with Shakira's care, including those from the previous MCO.

The care plan is regularly updated with the care team. Frequency of updates is based on the intensity of care management being provided. At a minimum, care plans are updated at least every 90 business days, or with any changes to medication, treatment or goals. Monthly, Shakira, her foster parents, the SSW, and any other key team members are invited to participate in meetings to discuss progress and update the person-centered care plan. Between the regularly scheduled team meetings, the Passport care team keeps in touch with Shakira and/or her foster parents weekly. Weekly contact would continue until at least eight weeks postpartum to ensure Shakira and her foster parents are adjusting to caring for the new baby.

Conclusion

Shakira remains with her foster family and delivers a healthy, full-term baby boy. Both are doing well with ongoing check-ins with the Passport SKY team. She has had intermittent contact with her biological mother, but no contact with the father of her baby. Her OB/GYN and new pediatrician perform initial screenings for postpartum depression, but these are negative. Shakira is engaged as a new mom, has returned to school, and her grades have started to bounce back. At home, she has made hopeful comments about rekindling her college plans.