G.8. Covered Services

a. Describe the Contractor’s approach for ensuring the successful completion of required assessments and screenings. Please include a description of the following:

   i. How the Contractor will coordinate with Kentucky SKY Members, the Department, DCBS, DJJ, and families. Address the involvement of any other sister agencies in the description.

   ii. How the Contractor will ensure assessments are initiated immediately upon a Kentucky SKY Member’s Enrollment in the Kentucky SKY program.

   iii. How the Contractor will meet standards for Early and Periodic Screening, Diagnostic and Treatment (EPSDT) screening.

   iv. Any challenges that the Contractor anticipates in completing required assessments and how it will mitigate these challenges.

   v. Provide examples of how the Contractor has succeeded in providing assessments to individuals similar to those required for the Kentucky SKY Members.

   vi. Include examples of Trauma assessment or screening tools the Contractor would recommend the Department consider for the use in identifying Trauma in Kentucky SKY Members.

b. Submit the proposed screening tool the Contractor will use to develop the Kentucky SKY Care Plan. Include a description of how the Contractor will use the results of assessments that sister agencies have conducted in developing the Care Plan.

   Provide examples of prior tools the Contractor has used for other similar programs and detail how these tools have contributed to the Contractor achieving program goals.

c. Describe its comprehensive approach to providing Crisis Services, including in home services, to Kentucky SKY Members.

d. Describe the Contractor’s experience in providing services through a holistic, person-centered approach, utilizing a High Fidelity Wraparound approach.

e. Describe how the Contractor will develop and provide interventions that will help develop resiliency in Kentucky SKY Members who have been exposed to Trauma and ACEs.

f. Describe the role of non-medical factors (e.g., placement changes) that may drive inappropriate utilization of medical resources and how the Contractor will account for those factors in the delivery approach. As part of the response, include how the Contractor will identify and leverage non-Medicaid resources that may be available in a community environment, including how it will assist such community based resources that may serve an important role in the Kentucky SKY Members’ overall physical and Behavioral Health care needs and goals even if they are not traditional Medicaid services. Provide examples of any community organizations that the Contractor anticipates involving to provide services to support Kentucky SKY Member’ needs and goals.
Introduction

Passport understands that the Kentucky SKY population has complex needs and requires specialized care. We approach each child as a whole person. Our High Fidelity Wraparound approach achieves long-term, sustained positive outcomes while meeting the immediate medical and behavioral needs of the member. Furthermore, we use an assessment process and resources that include social determinants of health (SDoH). Serving this population also requires strong collaboration with a variety of state partners. Passport offers our members and their caregivers the support and resources needed to thrive. With Passport’s dedicated team and full scope of programs and services, we provide our members with comprehensive care using an integrated member-centric approach.

G.8.a. Describe the Contractor’s approach for ensuring the successful completion of required assessments and screenings. Please include a description of the following:

G.8.a.i. How the Contractor will coordinate with Kentucky SKY Members, the Department, DCBS, DJJ, and families. Address the involvement of any other sister agencies in the description.

Coordination with the Kentucky SKY Members, Their Families, the Department, DCBS and DJJ

The comprehensive assessment and screening of all members is the cornerstone for the development of effective care plans for children, particularly those in the Kentucky SKY program. Passport’s approach involves early engagement and participation of multiple sources of information to complete assessments. In this process, we engage Kentucky SKY members, their caregivers, Department for Community-Based Services (DCBS) or Department of Juvenile Justice (DJJ) workers, health care providers and others.

Working with the Department, DCBS, DJJ, Department for Aging and Independent Living (DAIL), other sister agencies and families is not new to us. Currently, our Specialty Populations team is local and has seven staff members devoted to Kentucky SKY populations, plus their manager. Our team is comprised of individuals who previously worked in therapeutic foster care programs, community mental health centers, residential treatment facilities, the Department of Corrections, the Health Access Nurturing Development Services (HANDS) program, state and private psychiatric hospitals, Norton Children’s Hospital, refugee resettlement programs, House of Ruth, and Department for Behavioral Health, Developmental and Intellectual Disabilities (DBHID)-contracted programs. One of our team members is a former foster parent and adoptive parent; one is certified in trauma-focused cognitive behavioral therapy; and another has completed the train-the-trainer certification for trauma-informed care instruction. Through their work prior to coming to Passport and their ongoing efforts via our existing Specialty Populations team, Passport has established strong working relationships with Kentucky agencies and providers. Due to our experience, our team understands the populations, the agencies responsible for their care, and the professionals who work with these individuals on a daily basis — our team has walked in many of their shoes. We also understand the pressures
that exist within systems and the need to minimize any negative impacts and tensions they could have on the members we collectively serve.

Due to our existing relationships, Passport aligns with DCBS and DJJ to implement assessment processes with the goal of providing personalized service to each Kentucky SKY member. In addition to tailoring care plans, we complete a comprehensive assessment using information from various sources including Identifi, the Health Risk Assessment and other assessments completed by DCBS, DJJ and providers. This comprehensive assessment helps the Kentucky SKY Care team determine how to approach each member’s specific needs.

The Kentucky SKY Care Coordinator holds collaborative meetings with DCBS, DJJ, providers, schools and others to obtain agency case plans and other existing assessments and documentation. These materials are beneficial in completing a full assessment of the Kentucky SKY member’s strengths and needs and aid the member’s Care Team in developing a comprehensive care plan. As needed, Passport coordinates efforts with DBHDID, DAIL, Public Health and other agencies, as for example, with referrals to the Supports for Community Living (SCL) waiver or working with state guardians.

G.8.a.ii. How the Contractor will ensure assessments are initiated immediately upon a Kentucky SKY Enrollee’s Enrollment in the Kentucky SKY program.

**Immediately Initiating Member Screenings**

Passport understands the importance of expeditiously providing care to Kentucky SKY members. For this reason, the assessment period begins at the time of enrollment. Within one business day of notification of a new Kentucky SKY member, a Care Coordination team is assigned. The Kentucky SKY Care Coordination team consists of, at a minimum, the Care Coordinator, the member, the caregiver (when applicable), and a DCBS social service worker or DJJ worker (when applicable). Depending on the needs of the member (as determined via assessment), additional team members are added. These additional team members include providers, once identified.

Upon assignment of the new member to the Care Coordination team, the Care Coordinator identifies the current or needed primary care provider (PCP), dental, behavioral health (BH) and other specialists, and other providers. Information and input are obtained from each of the providers for assessment and care plan development purposes. The Care Coordinator contacts the member (when applicable), caregiver, and/or DCBS/DJJ worker to complete a health risk assessment (HRA) if a recent HRA is not already on file for the member. The Care Coordinator then begins to assemble available reports, assessments and documentation from DCBS, DJJ and providers and schedules a Care Coordination team meeting to take place within 30 days of enrollment. These efforts are part of the same process that ensures timely assignment of a PCP in two days.
For children/youth in DCBS care, the Passport Kentucky SKY care team partners with the social services worker (SSW) and caregivers to ensure required screenings for members, especially when they are new to DCBS care. This includes the health screening within 48 hours of an order when a child enters the custody of the Cabinet, and treatment for any injury/illness that may be the result of maltreatment within 24 hours of the order. Passport’s Kentucky SKY care team also assists in the coordination of required appointments (including medical, dental and visual exams) within two weeks of a member entering the custody of the Cabinet. In addition, our team aids in the coordination of a mental health screening performed by a qualified mental health professional within 30 days of the child entering out-of-home care. Following these initial exams, the Passport Care Coordinator works with the SSW and caregivers to ensure the child/youth receives care in line with EPSDT recommendations, aiming for medical and visual examinations no less than once per year and dental exams twice per year. We gather information from all providers completing those screenings for incorporation into assessment and care-planning activities with the Care Coordination team to ensure all care is coordinated in such a way as not to cause duplicative or contradicting care. For all Kentucky SKY members Passport will collaborate with PCPs and specialists of prior MCOs to ensure continuity of care, as well as the other MCO care management staff and DCBS staff.

Within thirty 30 days of enrollment, the Passport Kentucky SKY team completes the Pediatric Assessment or the Former Foster Youth Assessment (Member Needs Assessment). Both of these assessments include adverse childhood events (ACEs) screeners. Based on the findings from that assessment and any other available information, the team develops a care plan for the Kentucky SKY member, which will be updated by the team at a frequency determined by the risk level of the member.

Our team enters all care plans into our IdentifiSM platform to allow for proper care management and care coordination for the member. All Passport Care Team members have real-time twenty-four/seven 24/7 access to any documentation (including assessments and care plans) that are completed. IdentifiSM provides real-time feedback on tasks needing completion (e.g., assessments) and generates daily reports to Care Coordinators. These reports ensure timely completion of program requirements. Retrospectively, monthly chart and call audits are conducted for each Care Coordinator and Care Advisor on the team to ensure they are meeting program requirements with the members they are serving. Passport’s Kentucky SKY Care Management team members participate with directors in a monthly performance management meeting, which includes review for each Care Management team member of monthly quality audit results, maintenance of workload and any other feedback received about the employee. During this meeting, the leadership team determines if any corrective actions should be taken for quality assurance purposes. These actions can be at the individual or team level, such as retraining on program requirements, engagement skills, etc.

The recommendations are then reviewed by the Kentucky SKY Executive Director and Medical Director and, as applicable, the information is incorporated into our quality management program as described in our proposal.
G.8.a.iii. How the Contractor will meet standards for Early and Periodic Screening, Diagnostic and Treatment (EPSDT) screening.

**EPSDT Screenings Are an Essential Component of Our Program**

We routinely monitor the member’s health status during the developmental period and prompt the appropriate interventions when issues are identified. This is essential for long-term positive health outcomes. Passport’s EPSDT program addresses these concerns for Kentucky SKY members under the age of 21. The program offers comprehensive preventive physical and mental health care including dental, developmental and specialty services to effect the early diagnosis and treatment of medical conditions which, if undetected, could become serious health care issues. Per federal Medicaid requirements, Passport also covers services deemed to be medically necessary for Kentucky SKY members under the age of 21, whether the benefit is in the state plan or not.

Passport’s EPSDT program is devised with specific goals to increase:

- The percentage of members receiving at least one EPSDT screen during the measurement year and all age-appropriate EPSDT screens, and all childhood and adolescent immunizations.
- The percentage of members receiving an annual dental visit.
- The number of members receiving a lead screening based on the periodicity schedule.
- The number of members receiving a well-child visit in the first fifteen (15) months of life, the third, fourth, fifth, and sixth years of life, and an adolescent visit.
- The number of members committed to receiving the human papillomavirus (HPV) vaccine series as recommended by Bright Futures/American Academy of Pediatrics (AAP) Standard of Care periodicity schedule as adopted by the Centers for Disease Control and Prevention (CDC).
- Clinician adherence to documented evidence of body mass index (BMI) percentile and improving clinician adherence to documented percentile plotted on a BMI growth chart or BMI percentile documented with that includes height and weight.
- Counseling for nutrition and physical activity; risk behavior related to sexual activity, alcohol and substance abuse; and tobacco use; mental health assessment/screening; and follow-up for special services as a result from an EPSDT screening.
- Adherence to documented evidence of a depression screening based on the periodicity schedule and appropriate referral and follow up as a result from an EPSDT screening.

When a Kentucky SKY member does not receive the recommended schedule of health screens, immunizations and annual well visits, our Care Team reaches out to the member, caregiver and/or guardian to discuss the gaps in care and the importance of receiving the recommended services. The Care Team also assists in scheduling appointments for services as needed. To further promote engagement, members may earn rewards for participation in and completion of preventive health services, including some EPSDT services (e.g., immunizations).
Success Story

For several months, Passport Community Health Worker Rhonda Wooten worked with Susie*, a pediatric Passport member. During that time, Rhonda worked closely to build rapport with the mother and locate community resources to provide Susie with clothing, formula, diapers, baby wipes, household supplies and food. The family also had an open case with Child Protective Services (CPS), and the mother was very concerned about Susie being removed from the home. She asked Rhonda to attend the meeting with CPS at her home. Rhonda attended the meeting and Susie was allowed to stay in the home with her mother.

*Member’s name changed for privacy.

In addition to these personal attempts by the care team to reach the members/families, Passport has other targeted methods of reminding about needed services. The outreach efforts inform and stress the importance of EPSDT through various means, including:

- Postcard notifications are mailed to caregivers of all newborn members advising of EPSDT screenings.
- An auto-dialer system is used to contact members regarding the availability of preventive dental care, the recommended schedule for EPSDT screens and immunizations, and the importance of follow up when referred for special services. For convenience, members have the option of speaking directly to a Care Connector if they require additional information.
- Home visits are provided to members who are unavailable by phone.
- Outreach and education are provided at community events (i.e., back to school events and community health fairs).
- The Passport HealthPlus program and HealthPlus care conferences are used to educate and influence provider practice in EPSDT Healthcare Effectiveness Data and Information Set (HEDIS) goal movement, proper coding and ESPST education for providers within the HealthPlus program.
- The Member handbook offers information on our EPSDT program, member-eligibility criteria and an early periodic screening and diagnostic testing schedule.
- Information on our member website for EPSDT program and offerings.
- The member newsletter, MyHealthMyLife, offers informational articles on the importance of EPSDT screenings and immunizations, as illustrated in Exhibit C.8-1.
Exhibit C.8-1: Member Newsletter Articles on the Importance of EPSDT for Children

The EPSDT program tracks member’s adherence to all components of the health screen and follow-up related to an EPSDT screen, according to the periodicity schedule based on the AAP/Bright Futures Standards of Care and the Commonwealth’s DMS.

Provider engagement and education are essential elements to the success of our EPSDT program. Passport offers orientation sessions for EPSDT clinicians on a regular basis and provides ongoing support to them regarding the administration of EPSDT preventive care, billing and claims processes, the required components of a complete EPSDT screening and the importance of outreach and education to EPSDT eligible members and their families. As a part of our educational efforts, we also provide provider outreach visits, workshops and roundtable meetings, as well as offer educational materials, such as the Quick Reference Guide, Provider Orientation Kit, EPSDT Orientation Kit, Passport Provider Manual, Provider EPSDT Education Toolkit and Passport’s Provider Portal Website to support efforts to increase EPSDT participation, compliance rates and identified health outcomes. Furthermore, we conduct EPSDT provider audits to monitor compliance around EPSDT services, and care gap reports are made available to our providers, which help them identify members that need to be contacted and have services provided.
G.8.a.iv. Any challenges that the Contractor anticipates in completing required assessments and how it will mitigate these challenges.

**Addressing Any Screening Challenges and Plans for Mitigation**

Foster children may experience frequent moves. Former foster youth are at risk for homelessness and may also change addresses frequently. Adjusting to new placements may also be tumultuous. All these situations can be challenging in making or maintaining contact with the member and, as appropriate, the adults in the member’s life. Without access to full medical history and coordination of care, the health and quality of life of the Kentucky SKY member suffers. Passport understands the importance of obtaining information and completing a comprehensive assessment for the Care Coordination team to create a meaningful care plan for members and their families.

Passport has experience with overcoming challenges that can make the initial assessment process more difficult. The Care Coordinator’s ability to reach the member or foster parents and other caregivers may be the first hurdle. We overcome this challenge by working collaboratively with our DCBS/DJJ partners, as well as our providers, to obtain current contact information for the member or the caregiver. If a foster parent is reluctant to engage with the Passport Kentucky SKY team, we use our relationships with DCBS and/or therapeutic foster care agency staff to assist us in building a bridge with the foster parent.

Another barrier is the ability to obtain existing assessments/documentation/reports from various sources within the initial assessment period. Passport’s Kentucky SKY team utilizes relationships with DCBS and DJJ workers, the Children’s Review Program, private child-caring agency staff and private child-placing agency staff, providers and others to help facilitate acquisition of this information. If the information is not obtained within the assessment period but comes available to us at a later time, the new information is shared with the Care Coordination team so that updates to the care plan can be made.

We also recognize the challenge that arise when a child is new to DCBS care and there is a dearth of knowledge about the child’s health status or history. In those instances, everyone on the Care Coordination team, with the exception of natural parents, are learning about the child’s history, strengths and needs together. If the member was with another managed care organization (MCO) prior entering the Kentucky SKY program, we work with the SSW to contact the other MCO to obtain the needed information. As permitted by DCBS, the Care Coordinator also works with the natural parents to obtain as much information as possible.

In any case, the assessment is completed within 30 days of the Kentucky SKY enrollment with the information available at the time. The assessment process is a fluid and ongoing. As other information is obtained, the Care Coordination team updates the care plan and makes it available to others involved in the care management process of our member.
G.8.a.v. Provide examples of how the Contractor has succeeded in providing assessments to individuals similar to those required for the Kentucky SKY Members.

Our Experience with Assessments and Screenings

Passport has been serving Kentucky SKY members for 22 years, including engaging children in DCBS custody in care management as a part of our population health initiatives.

When a member is identified for participation in a population health management program, Passport reaches out to conduct appropriate assessments, including the HRA and needs assessment. These needs assessments are specific to the program for which the member is identified, but include, at a minimum, the following:

- Member’s immediate, current and past health care, and mental health and substance use disorder (SUD) needs.
- Psychosocial, functional and cognitive needs.
- SDoH, including employment and housing status.
- Ongoing conditions or needs that require treatment or care monitoring.
- Current care being received, including health care services or other care management.
- Current medications prescribed and taken.
- Support network, including caregivers and other social supports.
- Other areas as identified by the contractor or Department.

Passport’s assessments and care management tools are fully integrated into our suite of medical care management programs. All Passport Care Team members work together as members of a single care management team, sharing cases and cross-consulting with each other as a member’s needs require.

With the influx of members into the Kentucky SKY program upon program initiation, Passport uses its available technology to help target members who need more immediate attention. Identifi™ Care supports population health management and offers a preloaded, National Committee for Quality Assurance (NCQA) compliant clinical program workflow that focuses Care Advisors on the high-risk members and the most effective interventions. The application supports multidisciplinary care teams in triaging members, conducting assessments, developing care plans and managing their lists of prioritized action items in a guided workflow aligning with the clinical model. Evidence-based clinical content drives the creation of robust, structured and understandable care plans.
Our Recommended Assessment Tools for Identifying Trauma

Trauma informed care is important for Kentucky SKY members. We know from research that the prevalence of post-traumatic stress disorder (PTSD) among former foster care members is much higher than that of the general population. In fact, the rate of PTSD for former foster care members is closer to the prevalence among U.S. war veterans.¹ It is estimated that 25 percent of former foster care members are diagnosed with PTSD, versus prevalence in the general population of about eight percent. Kentucky has already taken steps to improve this outcome for former foster care youth by moving toward a more trauma-informed system. However, there is more work we can collectively do in this regard.

For this reason, Passport recommends that the Department consider the use of the following tools for identifying trauma in Kentucky SKY members.

- ACEs screener
- Trauma Symptom Inventory (for former foster youth)
- Trauma Symptom Checklist for Children
- Trauma Symptom Checklist for Young Children
- Child and Adolescent Needs and Strengths—Trauma Comprehensive

As part of our core care management programs, we use our years of experience with standard care management screening tools to administer valid and reliable screening tools (such as the Pediatric Symptom Checklist [PSC], the Patient Health Questionnaire [PHQ], generalized anxiety disorder [GAD], CAGE, etc.) across all of our Kentucky SKY programs. Attachment G.8-1 provides examples of these existing screening tools.

Research has repeatedly demonstrated that children entering foster care have higher exposure to discrete adverse events and complex trauma, that is, the prolonged exposure to interpersonal environments that are unsupportive and harmful to child and youth development. These tools are designed to identify and highlight the role of trauma in children and lead to more trauma-informed decisions. Understanding the specific nature of trauma can assist providers in treatment planning and also help Passport work with providers to respond in a trauma-informed manner.

Passport seeks to establish a collaborative partnership with the important adults in foster youths’ lives, including foster parents and childcare staff. Our trauma-informed approach includes identifying and supporting the strengths that caregivers have. We are aware that these individuals may be affected by

secondary trauma, that is, they may be negatively affected by their empathetic engagement with traumatized youth. Therefore, we remain sensitive to the issues of secondary trauma and, as appropriate, offer assessment and help in accessing services. Among the assessment instruments that might be used are the following:

- Post-Traumatic Stress Disorder Checklist for Civilians
- Trauma History Screen
- Trauma Symptom Inventory-2
- Symptom Checklist 90 Revised (SCL 90-R), which was demonstrated to be culturally competent

G.8.b. Submit the proposed screening tool the Contractor will use to develop the Kentucky SKY Care Plan. Include a description of how the Contractor will use the results of assessments that sister agencies have conducted in developing the Care Plan. Provide examples of prior tools the Contractor has used for other similar programs and detail how these tools have contributed to the Contractor achieving program goals.

Our Kentucky SKY Pediatric Assessment and Kentucky SKY Former Foster Youth Assessment (Member Needs Assessment) cover a variety of critical topics and can be completed with the assistance of the member or a foster parent, guardian or other caregiver.

This assessment poses a series of questions to identify the following information:

- Custody status.
- Date of commitment or adoption (if applicable).
- Primary language spoken by the member.
- What is going well with the member, member’s strengths and what the member enjoys doing for fun. A description of the member’s most common coping strategies.
- Assessment of activities of daily living (ADLs)/independent activities of daily living (IADLs) requiring assistance.
- Description of the member’s medical, dental and/or vision history, screenings and prescriptions.
- Current physical, behavioral or developmental diagnoses and behaviors of concern to the member or caregiver.
- Details of the member’s existing transition plan (if available).
- The child’s record with attendance and/or tardiness (if enrolled).
- Existing supports in the member’s life.
- Whether the member has an individualized education program (IEP) and, if so, what services are provided.
- Whether the member has a disability and, if so, whether there is a 504 plan in place to accommodate the member.
• The topics identified by the ACEs screener.
• A description of the member’s current and historical substance use (if any) and administration of the CAGE-AID.
• Pediatric Symptom Checklist or Patient Health Questionnaire-9 and Generalized Anxiety Disorder-7.
• Barriers to accessing care.
• Familiarity of the member or caregiver with the benefits and community resources available to the member, and whether these resources meet the member’s needs.

Following the Kentucky SKY Pediatric Assessment or Kentucky SKY Former Foster Youth Assessment, if it appears that further information is needed, our Kentucky SKY Care team assists the member or guardian in arranging for needed assessments. Please see Attachment G.8-2 for samples of our Kentucky SKY Pediatric Assessment, Kentucky SKY Former Foster Youth Assessment, and assessments we use in other programs.

In addition, and as relevant to the individual Kentucky SKY member, our screening assessment is supplemented with the tools listed below in Exhibit C.8-2.

Exhibit C.8-2: Assessments for Kentucky SKY

<table>
<thead>
<tr>
<th>Assessment completed by Passport</th>
<th>DCBS/DJJ assessments and documentation (to be requested by Care Coordinator)</th>
<th>Other assessments (to be requested by Care Coordinator if available)</th>
</tr>
</thead>
</table>
| • Averse Childhood Events screener | • Ansell-Casey Life Skills Assessment  
• Health Risk Assessment  
• Member Needs Assessment (e.g., Kentucky SKY Pediatric Assessment and Kentucky SKY Former Foster Youth Assessment)  
• Pediatric Symptom Checklist | • Child and Adolescent Functional Assessment Scale (CAFAS)  
• Comprehensive Assessment and Treatment Services (CATS) assessment  
• Competency Assessments/Court Ordered Assessments  
• Developmental Assessments  
• Daniel Memorial independent living (IL) Skills Assessment (if available)  
• Educational Assessments  
• Neuropsychological Assessment  
• Psychological Assessment  
• Psychosocial Assessments (therapeutic foster care [TFC], residential, other provider)  
• Trauma Assessment (if one has been completed externally) |
| • Documentation of Medically Complex Status  
• DPP-106B – Service Plan  
• DPP-1251A – Child Placement History Log  
• DPP-886 – Private Child Care Interagency Referral  
• DPP-886A – Application for Referral and Needs Assessment  
• Strengths in Families Worksheet | | |
As noted above, utilizing and building upon existing relationships with DCBS, DJJ and other entities, the Kentucky SKY Care Coordinator works with DCBS, DJJ, providers, schools and others to obtain assessments and documentation useful in gaining a full understanding of the member’s history, strengths and needs. This compilation of information and integration with the Kentucky SKY Pediatric Assessment or Kentucky SKY Former Foster Youth Assessment (Member Needs Assessments) aids the member’s Care Team in developing a comprehensive care plan focused on helping the member succeed in all areas—personal health, school, community and home. This team will review any completed assessments and, based on their findings, as well as the team’s knowledge of the member’s strengths and needs, develop a care plan for members in Care Management or Intensive or Complex Care Coordination.

When Passport implemented the Intensive Care Management pilot for children in DCBS care, the Child Placement History Log, the Private Child Interagency Referral, and the CAFAS were used to help assess current functioning of members initially enrolled in the program. The CAFAS was also used longitudinally to measure progress in the child’s functioning. During the six month evaluation period following the pilot, we used the Child Placement History Log and other information from the workers information system (TWIST) to ascertain current placement for former pilot members. DCBS was integral in assisting in obtaining needed information and the collaborative partnership was very successful.

G.8.c. Describe its comprehensive approach to providing Crisis Services, including in home services, to Kentucky SKY Members.

Providing Additional Services for Kentucky SKY Members

Passport’s approach to providing crisis services is rooted in the care-planning process. During our initial assessments, we review the Kentucky SKY members’ history and identify risk factors for crisis events. Using High Fidelity Wraparound principles, we will engage the team in developing a crisis plan that anticipates and provides clear steps for managing crisis events. In addition, we will work with BH providers to help the Kentucky SKY members and their families to develop skills to successfully manage crisis situations. Passport intends to partner with providers who are willing to provide 24-hour, seven days a week crisis intervention, including in-home intervention, for Kentucky SKY members. We have initiated conversations toward developing a preferred network of crisis providers for Kentucky SKY. Our goal is that the preferred providers understand trauma informed care, be accommodating and understanding of the special situations impacting this population and their caregivers and be willing to provide in-home crisis intervention when needed. We anticipate contracting for these services upon contract award.

Implementation of the crisis plan enables the youth and the youth’s family to know immediately where and how to get help. We will offer support to members and their family in adhering to their crisis plan, by educating members (where appropriate) and foster parents or guardians on how to obtain help and to ensure they have the information they need to act upon the plan. Should they need assistance beyond what is anticipated in the crisis plan, their second line of defense should be their Kentucky SKY Care Coordination team. Care Coordination teams have access to the crisis plan. If the Kentucky SKY Care Coordinator or Care
Advisor cannot be directly reached (i.e., during holidays) then members, caregivers or guardians can use our dedicated BH crisis hotline.

**Emergent Mental and Behavioral Health Crises: Twenty-Four/Seven (24/7) Emergency and Crisis Hotline**

We understand that immediate BH help and support is an important resource for our members. Members may call Passport’s Crisis Hotline during a mental health emergency/crisis and be immediately connected with a licensed BH professional. We typically handle crisis calls via our dedicated hotline or through our customer service line. Our crisis line is staffed by trained personnel 24 hours a day, seven (7) days a week, three hundred sixty-five (365) days a year and is available toll-free throughout the Commonwealth.

**Face-to-face emergency services** are also available 24 hour-seven days a week. Our Crisis Hotline is never answered by any automated means. For calls received by our Crisis Hotline:

- Ninety-nine percent (99%) are answered by a licensed clinician by the fourth ring.
- Callers never receive a busy signal.
- Calls have a call abandonment rate of seven percent (7%) or less
- Callers can immediately connect to the local Suicide Hotline’s telephone number and other crisis response systems through our patch capabilities to 911 emergency services.
- We never impose maximum call duration limits and shall allow calls to be of sufficient length to ensure adequate information is provided to the member.
- We meet cultural competency requirements and provide linguistic access to all members, including the interpretive services required for effective communication.
- Our Crisis Hotline BH clinicians are all independently licensed clinicians with the training and experience to identify signs and symptoms of crisis. They will quickly execute a crisis assessment to understand the severity of the situation and intervene with the member. Training topics for Crisis Hotline BH clinicians include:
  - Crisis assessment, including identification of:
    - Safety of member
    - Safety of others
    - Desire to cause harm vs desire and means to cause harm
    - Severity and urgency of crisis situation
    - Need for immediate intervention by law enforcement due to a safety risk
  - Crisis response, including:
    - How to access and deploy emergency response resources for the member’s current location such as: mobile crisis outreach provided through our BH provider network, emergency medical services (EMS) and/or local law enforcement.
    - Process for creating referrals to provider(s) for follow-up care and to the Interdisciplinary Care Team for case review and engagement in Passport’s Care Management program.
• Sharing all information pertaining to the crisis call to Care Management in the clinical system so that the member’s clinical record is up to date and complete.

• If a call is deemed to be non-emergent: discussion of existing treatment details, professional/social supports and positive coping skills.

The Crisis Hotline BH clinicians are responsible for working with the member to de-escalate or stabilize while the appropriate resources are activated to intervene with the member. The clinician remains on the line to assist as needed. After a crisis situation is resolved, follow-up care may be provided by a BH or physical health (PH) team member. The determination of which team assumes primary responsibility is made during joint rounds held by the Care Management team.

Passport has also completed an internal study looking at the effectiveness of local crisis stabilization services in prevention of hospitalization for child and adolescent members. In response to the findings, Passport developed a workgroup with leadership representation from Passport, Beacon Health LLC, and Centerstone Kentucky (Seven Counties Services) staff to explore more effective ways of utilizing the crisis service and promoting adequate follow-up care, with the intent of saving lives.

We monitor our Crisis Hotline’s performance against the Behavioral Health Services Hotline standards and submit performance reports summarizing call center performance as indicated.

Our Crisis Hotline BH clinicians are all independently licensed clinicians with the training and experience to identify signs and symptoms of crisis. They quickly execute a crisis assessment to understand the severity of the situation and intervene with the member. Training topics for Crisis Hotline BH clinicians include:

• Crisis assessment, including identification of:
  • Safety of member
  • Safety of others
  • Desire to cause harm vs desire and means to cause harm
  • Severity and urgency of crisis situation
  • Need for immediate intervention by law enforcement due to a safety risk

• Crisis response, including:
  • How to access and deploy emergency response resources for the member’s current location such as: mobile crisis outreach provided through our BH provider network, EMS and/or local law enforcement.
  • Process for creating referrals to provider(s) for follow-up care and to the Interdisciplinary Care Team for case review and engagement in Passport’s Case Management program.
  • Sharing all information pertaining to the crisis call with Case Management in the clinical system so that the member’s clinical record is up to date and complete.
  • If a call is deemed to be non-emergent: discussion of existing treatment details, professional social supports and positive coping skills.
The Crisis Hotline BH clinicians are responsible for working with the member to de-escalate or stabilize while the appropriate resources are activated to intervene with the member. The Representative remains on the line to assist as needed. After a crisis situation is resolved, the Kentucky SKY Care team follow-up with the member no later than the next business day to ensure that the member’s situation has been resolved. Our team also makes certain that the member has no further needs and does not require additional action.

If the Crisis Hotline BH clinician is unable to resolve the issue and the situation needs prolonged support, the Crisis Clinician contacts the on-call Kentucky SKY BH clinician for support.

In addition, Passport’s Nurse Advice Line is a safe place for our members to receive health information. Each member can call our toll-free 24 hours, 7-days a week Nurse Advice Line. The members are able to highly trust our nurses with any health question, because all calls are considered confidential. The team of nurses has more than 15 years of experience and is supported by physicians to provide high quality service to our members. The nurses help our members decide on the best courses of action at the time of the calls. Specifically, they help determine whether the members need to visit their doctor, go to urgent care centers or whether they can take care of their symptoms in their home setting.

G.8.d. Describe the Contractor’s experience in providing services through a holistic, person-centered approach, utilizing a High Fidelity Wraparound approach.

Passport’s High Fidelity Wraparound Approach for Kentucky SKY Members

Passport has extensive experience and expertise in the implementation of holistic, person-centered services using the High Fidelity Wraparound approach. In 2015, Passport proposed a pilot program for foster children utilizing High Fidelity Wraparound to reduce risk of multiple disrupted placements and high service utilization due to BH programs. Passport trained providers, oversaw implementation including monitoring provider fidelity to the model, and evaluated outcomes. We are committed to train and certify all Care Coordinators in High Fidelity Wraparound.

In our pilot program, we partnered with two local provider organizations, Centerstone Kentucky (Seven Counties Services) and ResCare to provide intensive care management services using the High Fidelity Wraparound approach. The pilot program served 57 high-risk foster care children between the ages of four and 17.5 years old who experienced three or more placements within 24 months and were at risk for entering a group home, psychiatric hospital or a 24-hour BH treatment facility. In addition, we created an alternative payment model with a case rate and performance incentives for achieving certain goals.

The program was evaluated using a combination of claims and costs data analysis, interviews and a behavioral inventory, the CAFAS. The CAFAS used information from eight life domains: school, home, community (delinquency), behavior toward others, moods and emotions, self-harm, substance abuse, and cognitive thinking (irrational thoughts). The program participants were scored at intake, every three months during the program, and at discharge.
The pilot program demonstrated that by using an innovative model of interventions based on High Fidelity Wraparound care for children and youth in foster care, we were able to improve outcomes and decrease costs. Specifically, there was a 150 percent increase in children being reconnected with their biological or adoptive family six months post-intervention. For other children, foster care placements increased while the number of children placed in residential care, including psychiatric hospitalization, private childcare residential treatment and detention centers decreased.

In addition, we observed the following trends:

- A thirteen percent reduction in total cost of care
- A twenty-seven percent increase in cost related to BH services
- A thirty-eight percent reduction in nonbehavioral health expenses
- A six percent reduction in pharmacy costs

The children’s health and well-being also increased during the program, with declining CAFAS scores as a positive indicator. Furthermore, the longer the child participated in the program, the greater the scores improved. The cost of care and BH outcomes resulting from the pilot are described in Exhibit C.8-3.

**Exhibit C.8-3:** Results of Passport’s High Fidelity Wraparound Pilot Program
G.8.e. Describe how the Contractor will develop and provide interventions that will help develop resiliency in Kentucky SKY Members who have been exposed to Trauma and ACEs.

**Trauma and ACEs Support for Kentucky SKY Members**

Research has identified that some children are resilient in the face of the negative health and social factors associated with ACEs and the impact of complex trauma. Three strategies have been empirically shown to strengthen resiliency in foster care youth. These strategies are (1) promoting relationship security, (2) building individual mastery and efficacy and (3) developing affect and impulse control mastery. Passport’s proposal intentionally addresses these strategies in the way it engages with the youth, supports DCBS and the child welfare system, and manages Medicaid services.

As noted at the beginning of this section, Passport works with providers to focus on sustained positive outcomes rather than short-term management of behavioral symptoms. Our trauma-informed care management strategy emphasizes positive engagement with Kentucky SKY members that is youth-guided and strengths-based. Our orientation to Kentucky SKY network providers and our ongoing monitoring of provider performance emphasizes the same characteristics.

With an eye to building individual mastery and efficacy, Passport works with providers (including foster care and residential staff) to ensure youth have the opportunity for developmentally appropriate opportunities to develop and build personal competency. This work may involve participation in sports teams, arts activities or similar activities. Boy Scouts of America, Girl Scouts of America and 4-H all have a focus on building resiliencies and all can be accessed in every county of Kentucky. We believe that it is important for trauma-informed and evidence-based treatment strategies to be used in developing affect and impulse control mastery.

Related to building resiliency, Passport is fully engaged in and supportive of DCBS’ Building Bridges Initiative (BBI) which emphasizes that, “children grow best in families, within supportive communities and through empowering partnerships.” We are committed to participating in a system of care that is youth-guided and family-driven. Passport believes that it has a unique opportunity to support this effort by emphasizing the BBI principle of achieving “sustained positive outcomes” in its contracting relationships with providers.

We intend to pilot incentives and other value-based arrangements that reward providers for (1) achieving stability in placement; (2) when possible, achieving successful transition to a permanent family and reduction in trauma, specifically in incidents of restraint and seclusion; (3) promotion of participation in developmentally appropriate community engagement and (4) improved care coordination at the provider level. Although the capacity of providers to participate in these arrangements will vary, Passport plans to address the need for youths’ sustained future success in contracts with all child-caring and child-placing agencies. This emphasis is intended to move the focus of our relationship away from day-to-day control of behavior problems and into one where services are designed with long-term success in view.
G.8.f. Describe the role of non-medical factors (e.g., placement changes) that may drive inappropriate utilization of medical resources and how the Contractor will account for those factors in the delivery approach. As part of the response, include how the Contractor will identify and leverage non-Medicaid resources that may be available in a community environment, including how it will assist such community-based resources that may serve an important role in the Kentucky SKY Members’ overall physical and Behavioral Health care needs and goals even if they are not traditional Medicaid services. Provide examples of any community organizations that the Contractor anticipates involving to provide services to support Kentucky SKY Member’s needs and goals.

Community Relationships to Support Nonmedical Needs of Kentucky SKY Members

Placement changes/disruptions of Kentucky SKY members directly contribute to the inappropriate utilization of medical resources through lack of information about medical/BH history and needs, lack of coordination of care, polypharmacy and other problems.

Passport helps to address this ongoing issue by:

- Using the member’s Care Coordination team to identify natural supports and community supports.
- Using the Community Engagement Representatives to collaborate with organizations in the community to support member needs and access resources.
- Using multiple referral tools for addressing nonmedical needs.
- Cultivating a network of community resources to meet Kentucky SKY members’ needs.
- Expanding the Independence Readiness Program.

The first strategy to create more natural/nonmedical supports in a member’s life is to use the knowledge and creativity of the Care Team. Through phone conversations and Care Team meetings, the Care Coordinator identifies existing supports and strengths already in the member’s and family’s life. Wherever possible, the team works to build upon those existing resources. Where there are gaps, the team determines supports within the community to fulfill underlying needs. A fully engaged Care Team is the best resource available for brainstorming and creatively problem solving to address these unmet needs.

In addition, Passport’s Kentucky SKY team helps support the member and caregiver by assisting with transportation and lodging when health services need to be provided remotely in a physical face-to-face encounter. This added benefit offers reimbursement for qualified travel beyond forty miles and reasonable lodging expenses with prior approval, if an overnight stay is required.

Passport’s Multiple Referral Tools for Addressing Nonmedical Needs

Passport’s community health workers, Care Coordinators and social workers use multiple cloud-based resource solutions to assist transitioning Kentucky SKY members with SDoH needs.

They first provide an online questionnaire to the member or caregiver to gain insights into their personal situation. Using the results of the questionnaire, they search for the most appropriate community resources and social services to fit the member’s needs. This information is provided to the member, teaching them to...
become engaged in their health care and take charge of making resource arrangements. We also proactively make the appropriate appointments on behalf of our members, if preferred, so that they can obtained the needed resources with convenience.

These tools offer referral information for the following:

- **Behavioral Health**: Treatment and supportive services for mental health and substance use disorders, including rehabilitation, psychiatry, support groups and therapy.
- **Education**: Services that provide and promote education, including academic scholarships, special education programs, early childhood education programs, tutoring services, English as a second language (ESL) classes, and General Educational Development (GED) programs.
- **Emergency Services**: Immediate and short-term emergency services assistance, including mental health crisis intervention services, emergency shelters, emergency financial assistance, disaster preparedness and response services, and heating and cooling centers.
- **Family & Youth**: Support services to families and youth, including family counseling, adoption and foster care services, childcare programs, infant and child supplies, parenting support, and education and youth empowerment programs.
- **Financial Support**: Assistance with paying for housing, education, food, transportation, medical expenses, etc., or that is aimed at improving financial literacy, such as financial education and tax preparation assistance.
- **Food Services**: Access to adequate and nutritious food, including food delivery, free or low-cost meals, food pantries, food vouchers and farmers’ markets.
- **Goods Services**: Basic goods such as clothing, furniture, medical supplies and toiletries for free or at reduced cost.
- **Health Services**: Resources for navigating, accessing, and paying for health services, including primary and specialist care, medical bill and prescription assistance, wellness programs, health insurance enrollment assistance and harm-reduction services.
- **Housing**: Services aimed at improving access to safe and affordable housing, including housing counseling, emergency shelters, low-income housing, financial assistance, supportive housing and home repair services.
- **Legal**: Legal support and advocacy services, including free or low-cost legal representation, citizenship application assistance, assistance with securing a state identification card, support services for individuals involved in the criminal justice system, and assistance with obtaining and changing identity documents.
- **Social Supports**: General community support services, such as community centers, case management and benefits assistance, as well as services that are population specific, such as lesbian, gay, bisexual, transgender and queer (LGBTQ) services; disability services; senior services; and human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS) services.
- **Transportation**: Services for accessing and paying for transportation, including car repair assistance, free or low-cost transportation, disability-accessible transportation and driver’s education.
- **Employment**: Resources for workers and job-seekers, including job search assistance, career counseling, job training resources, supported employment, retirement and unemployment benefits assistance.
Passport’s staff tracks all referrals and activities in our integrated system for proper care coordination. The technology enables us to better serve this vulnerable population in an expedited manner.

**Network of Community Resources Available to Kentucky SKY Members**

Passport’s strong community engagement team has developed close relationships with health and related community service agencies across Kentucky, including concluding sponsorship agreements with agencies, such as the National Alliance on Mental Illness (NAMI), SUD treatment programs and preventive health programs that support its members.

To support successful transition of Kentucky SKY members from DCBS/DJJ custody, we expand our focus on community partnerships specifically for transition-age youth. In addition to independent living providers, with which we have a long-standing working relationship, we also reach out directly with homeless shelters, including specialized programs for sexual-minority youth, food banks and community nutrition programs, and DCBS Family Support offices across the commonwealth. Some examples of these community providers include:

- **Housing**
  - Prevention (single point of entry) – some case management services to help people prevent homelessness, must screen in as appropriate.
  - Shelter (single point of entry) – help with getting into shelter beds, including some beds that are specifically reserved for young adults.
  - Housing (single point of entry) – links to Common Assessment, if the youth meets the U.S. Department of Housing and Urban Development (HUD) homeless definition, which can place youth in specific spots for rapid rehousing, transitional housing or permanent supportive housing if available.
  - Phoenix Health Care – weekly housing navigation meetings for those who do not meet the HUD homeless definition but need help filling out applications and knowing options.
  - UP for Women and Children – a day shelter for women and children that includes showers, laundry and case management.
  - Coalition for the Homeless – has connections to case managers for young adults (under twenty-five (25) years old) to support housing needs (rent, utilities, beds, etc.).
  - Sweet Evening Breeze – LGBTQ+ shelter for youth.
  - St. Elizabeth’s (Indiana) – shelter/transitional housing for pregnant young adults.
  - Jumpstart KY (jumpstartKY.com) – for 18 to 24 year old adults to find housing, negotiate with landlords, get legal advice and access peer support.
  - Section 8 Subsidized Housing (site-based and scattered site) – Louisville Metropolitan Housing Authority (Jefferson County) and Kentucky Housing Corporation (for the balance of state).
• Programs
  • YMCA Safe Place – provides classes and independent living skills for young adults.
  • TAYLRD (Transition Age Youth Launching Realizing Dreams) – drop-in center for transition age youth providing peer support, recreation, education and employment support, mental health resources and case management, with multiple locations across Kentucky.
  • Youth Advisory Board through the Coalition for the Homeless – a board for young adults with lived experience or passion around homelessness; services.
  • True Up – a support and networking organization for current and former foster care youth.

• Education/Employment
  • Kentucky Career Center.
  • Necole’s Place – includes GED, childcare and skills classes.
  • Office of Resilience and Community Services – workshops around workforce development.
  • Goodwill – includes employment programs for people with troubled histories.
  • St. Vincent de Paul – culinary classes to prepare for employment, usually offered one or two times a year.
  • Metro Louisville Pathways to Success – for people of color ages sixteen to twenty-four (16-24).
  • Youth Build.
  • Family Scholar House – case management for single parents with young children or former foster youth interested in post-secondary education; also has housing, including housing specific to former foster youth.
  • Vocational Rehabilitation – as appropriate, education and employment opportunities for individuals with mental health, intellectual, and developmental disabilities (county-specific).
  • Carl D Perkins Center – for post-secondary vocational training and housing (through Vocational Rehabilitation).

• Legal
  • Legal Aid and UofL Law Clinic – representation in emergency protective order (EPO)/ domestic violence order (DVO) cases.
  • Louisville Urban League – classes on expungement and employers who work with people who have felonies.
  • Center for Women and Families – domestic violence shelter and legal help, including U-visas.
  • Metro Christian Legal Aid.

• Parenting
  • Metro United Way Ages and Stages – free children’s books for parents who complete developmental screenings for their children.
  • Pregnancy Resource Center.
  • Golden Arrow.
  • A Woman’s Choice.
• Other Resources
  • Louie Connect – resources specific to young adults.
  • Street Tips Book (Coalition for the Homeless website)-for shelter, food, clothing and other resources within the city.
  • 211 (through Metro United Way) – resources specific to area of town in Region A, based on zip code.
  • Catholic Charities – housing, therapy and case management for human-trafficking victims.
  • Free 2 Hope – pop-up day shelter/resources for people experiencing human trafficking.
  • Kristy Love – housing for women who have experienced human trafficking.
  • Louisville Youth Group – LGBTQ+ peer support group.
  • The Book Work – pop up book sale that is a social enterprise employing disconnected and homeless youth.

Passport also has a long history of embedding case managers/social workers in social service agencies where our members are frequent consumers. Passport conducts outreach with post-high school educational options (vocational and colleges/universities) to educate on the unique needs of former foster and state committed youth and to promote appropriate supportive services. We draw on advisory assistance from Voices of the Commonwealth in developing and monitoring the success of our transition programs.

The Independence Readiness Program

Passport has been collaborating with the Boys and Girls Haven, along with other community groups, in an innovative initiative called the Independence Readiness Program (IRP). As part of this initiative, the IRP provides job and skills training to Kentucky SKY members and brings in local employers to share entry-level employment opportunities. The Kentucky Community & Technical College System (KCTCS) also provides trade skills training and counsels Kentucky SKY members on affordable ways to get into college. There is also a life skills training component, mentoring program and equine vocational training and career readiness program using a relationship with a horse to resolve trauma and promote healing. A majority of IRP participants have been Passport members. At this point, 82 participants have been served and ninety-one percent have maintained their current placements as a result, or stepped down to a less restrictive placement, thus preventing homelessness.

We are interested in working directly with DCBS to expand the program, channel more Kentucky SKY members into the program, and add new program components that would connect Kentucky SKY members to specialized housing. The effort is designed to help them achieve independence and leverage community support.
Conclusion

Passport is dedicated to offering a holistic person-centered approach. We firmly believe that this approach mitigates the impact of disrupted placements and provides members access to quality care and service, as well as coordinating benefits based on clinical need. We are committed to leveraging our strengths in community partnerships to devise and implement innovative strategies that will best meet the needs of the Commonwealth in improving health outcomes and reducing costs for this important population.

Passport has been honored to serve the Kentucky Medicaid and foster care populations for 22 years and will continue to comply with all provisions of the Medicaid Managed Care Contract and Appendices (including Kentucky SKY) as we continue to serve them in the future.