

May 2020

Improving outcomes by coordinating care for members in foster care.



With the number of children and youth in foster care recently on the rise, by almost two percent each year¹, it's time to offer a specialized approach for improving outcomes and reducing costs.

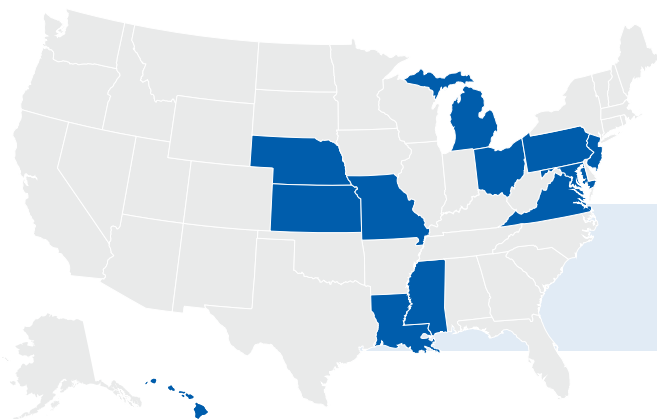
Children placed in foster care typically have more health care needs than other children in the United States. Due to the traumatic nature of the foster care placement itself — the loss of connections to family, school, friends, and familiar lifestyle—many of these children also face behavioral health challenges. They also have higher rates of exposure to trauma compared to most youth.² Children in foster care are four times more likely to be prescribed psychotropic medications than other Medicaid adolescent members, and represent 13 percent of all Medicaid members, of all ages, who receive psychotropic medications.³ While foster care has an impact on behavioral health, it also has an impact on financial health. Only three percent of non-disabled children enrolled in Medicaid are in foster care, but they account for 15 percent of behavioral health services used by all children on Medicaid.⁴

UnitedHealthcare Community & State offers integrated care programs to better serve the unique needs of the foster care population.

By partnering with child welfare systems, Medicaid agencies, caregivers and community stakeholders, we build solutions designed to help children and youth in foster care improve their lives and chances for success. Our programs work to:



- Increase the member's access to health care services
- Improve coordination of medical and behavioral health care
- Better ensure the appropriate use of services and medications
- Boost overall service performance and outcomes



A trusted partner in foster care.

UnitedHealthcare Community & State is one of the nation's largest businesses dedicated to the health and well-being of low- and limited income families and individuals, along with the disabled.

We currently serve 55,000 foster care children in 12 states.

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A comprehensive approach uniquely suited to the foster care population.

We offer a unique model of care that supports an individualized, person-centered plan, rooted in a firm understanding of the complex foster care system.

We recognize that while all foster care youth have needs, some may have greater needs than others. We therefore offer a care management model with a proprietary “identification and stratification” process to better identify the level of need for each foster care member. This process also connects those most likely to benefit from immediate assistance to the most appropriate intervention services available.

Key features:

- **Unique clinical model** for children in foster care, anchored in the principles of trauma-informed care and coordination
- **Dedicated care management team** of clinical experts who specialize in outreach for foster care members
- **Specialized training** in trauma-based care and the foster care system for all stakeholders to enable them to better serve foster children and families (this includes continuing education credits (CEUs) for providers)
- **Integrated medical and behavioral care services** designed to address the whole-person needs of each member
- **Specific identification and stratification** to identify the clinical needs of each foster care member, aimed to promote early intervention and the most appropriate level of support
- **Telehealth services**, especially to help ensure provider continuity for children who have multiple placements moves
- **Pharmacy reviews** to help ensure proper medication use, with particular focus on psychotropic medications
- **Innovative programs** such as “On My Way” that supports transition-aged youth in their journey to independence
- **Foster care key performance indicators (KPIs)** established to measure progress and enable program enhancements, as needed, in real time



Our **nationwide network** encompasses a wide array of provider specialties, including **behavioral health, medical, pharmacy, dental, and vision.** We are continually expanding and refining our network to ensure it can best address the ever-changing needs of the foster care population.



Foster care system training is enabled via our partnership with the **National Foster Parent Association.**

We strive to minimize the fragmentation that may occur in foster care with a seamless coordination of medical, behavioral, and social services.

- Educate stakeholders on evidence-based approaches that work with this population
- Offer Trauma-Informed Care Training for stakeholders (internal and external)
- Assist with transitions and “step-downs” from levels of care
- Measure and monitor medical and behavioral health outcomes
- Contract with and further build our provider network



Expected Results

- Improved access and coordination of all health care services, including increased access to community support services
- Sharpened focus on performance and quality, including focused reports designed to enable providers to achieve better results, and empower members, families, caregivers, and coordinators to make more informed care choices
- Increased HEDIS scores regarding hospitalization follow-up, with a focus on preventable events
- Enhanced focus on the appropriate use of psychotropic medications
- Better care outcomes to improve foster children’s overall health and well-being, as well as increase the chances of stable placement
- Measurable member and provider satisfaction

¹ Based on number of individuals served by the foster care system in FY 2013 to FY2017. U.S. Department of Health and Human Services, Administration for Children and Families, Children’s Bureau. (2018). The AFCARS report: Preliminary FY 2017 estimates as of August 10, 2018 (25).

² Dorsey S, Burns BJ, Southerland DG, Cox JR, Wagner HR, Farmer EM. Prior Trauma Exposure for Youth in Treatment Foster Care. *J Child Fam Stud*. 2012;21(5):816–824. doi:10.1007/s10826-011-9542-4.

³ Allen KD, Hendricks T. *Medicaid and Children in Foster Care: State Policy Advocacy and Reform Center*. Hamilton, NJ: Center for Health Care Strategies, 2013.


⁴ MACPAC Report to Congress on Medicaid and CHIP, June 2015.

 **Working to build healthier communities.**



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