Sunshine Health
Child Welfare Specialty Plan


Caregiver Orientation

COMMUNITY BASED CARE
INTEGRATED HEALTH
Contents

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Overview

• Studies over the years have shown that children who have been abused and neglected have much greater health and behavioral health needs.

• Children in the child welfare system require efficient and effective services delivered by providers who understand their unique needs.

• A single statewide child welfare managed care plan reduces the possibility of health and behavioral health services being discontinued during a placement change.
Child Welfare Specialty Plan

• In early 2013, Sunshine Health, Cenpatico and Community Based Care Integrated Health, LLC (CBCIH) agreed to compete for the Medicaid contract to implement a specialty plan (CWSP) for children in the child welfare system.

• In September 2013, Sunshine Health won the statewide contract to manage services for children in child welfare.

• In May 2014, the CWSP began to roll out and was fully implemented by August 1\textsuperscript{st}.
Companies Involved

• **Sunshine Health** (contracted entity) – operates health system

• **Cenpatico** – operates behavioral health system

• **Community Based Care Integrated Health (CBC-IH)**
  - Provides care coordination and linkages to Sunshine’s Integrated Care Team (ICT), and acts as primary contact with the dependency system
Sunshine Health

Serves as Medicaid primary health insurance plan:

- Holds contract with AHCA
- Develops/maintains provider/physician networks
- Authorizes treatment and pays claims
- Provides case management support
- Provides medication/Rx management
- Provides reports to CBCIH
- Operates call centers and help line
- Performs quality assurance
- A subsidiary of Centene Corporation
Cenpatico

Serves as the behavioral health insurance plan:

– Develops/Maintains BH provider/practitioner networks
– Authorizes BH treatment and pays BH claims
– Authorizes access to SIPP/BHOS/STFC etc.
– Provides case management support
– Performs psychiatric medication management review
– Performs BH quality assurance
– Subsidiary of Centene Corporation
CBC-IH

Serves as the integrator of medical, behavioral and social services for child welfare system:

- Performs statewide coordination between Community Based Care agencies (CBC) and Sunshine/Cenpatico
- Provides care coordination between Sunshine, Cenpatico and CBCs
- Provides member demographic information to Sunshine and data analysis and reporting functions to CBC
- Conducts integrated plan quality assurance
CBC-IH

• CBC-IH is an innovative partnership designed to ensure that all behavioral or physical healthcare related services are coordinated with the CBC agencies.

• CBC-IH is responsible for gathering information for the new CW members’ Health Risk Screenings (HRS). It includes questions regarding physical health, behavioral health, dental and pharmacy authorizations or appointments during the **90 day CW continuity of care period**.

• CBC-IH will identify a PCP for each child in the Sunshine Health CW Plan. This will greatly reduce the need for auto-assignment and ensure uninterrupted transition of care.
Sunshine Health/CBC Model of Integrated Health

Sunshine Health Medical Case Management
- Primary Care/Medical Home
- Behavioral Services
- Pharmacy and Psychotropic
- Disease Management
- Hospital Care
- All Covered Medicaid Services

CBC Care Coordination
- Contractual Agreements
- Joint Staffing
- Secure Provider Portal
- Collaborative Governance
- Shared Risk

SH Case Management
- DOH CMS network
- Residential Facilities
- Birth or Foster families
- School System
- Law Enforcement
- Placement Agencies

Dependency Case Managers

(Developed using recommendations and input from advocacy organizations - FAP, AAP, FLS, U of FL, U of Miami, CMS physicians)
Benefits of CW Specialty Plan

• Sunshine and Cenpatico case managers coordinate with the CBC, parents, and foster parents to ensure they are actively involved in health care, provider and service decisions for the child.

• Improvement of quality and timeliness of service delivery.

• Lead Agencies will have input into provider network and service delivery system.
Benefits of CW Specialty Plan

• Data sharing allows more efficient and accurate Medicaid information.

• Access to services throughout the state.

• Integrated services with CW increases timely reunification or adoption.

• Dedicated staff at Sunshine Health for case management and enrollee help line.
How CBCs are Involved
## Community Based Care Lead Agency Map

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CBC Nurse Care Coordinators and Sunshine Case Managers

• Each CBC has a Physical Health Nurse Care Coordinator to work with Sunshine case managers and the child’s providers.

• The Nurse Care Coordinator works with Sunshine case managers to identify and assist in monitoring children with serious medical problems or at risk for serious medical problems.

• The Nurse Care Coordinator is responsible for monitoring and coordinating well child checkups, immunizations and medical/dental appointments.
CBC BH Care Coordinators and Cenpatico Service Managers

• Each CBC has a Behavioral Health Care Coordinator to work with Cenpatico Service Managers.

• Behavioral Health Care Coordinators lead the multi-disciplinary team (MDT) in determining the best services needed. Cenpatico Services Managers attend these meetings as subject matter experts on clinical treatment and identification of appropriate services.

• Cenpatico Service Managers collaborate with the CBCs and providers to ensure treatment needs are met.

• Behavioral Health Care Coordinators and Cenpatico Service Managers are responsible for monitoring children in need of special mental health and substance abuse services such as STFC/TGC/SIPP/BHOS.
Continuity of Care
Continuity of Care

• Sunshine Health provides continuity of care for all new members for the following time periods following the enrollment date.
  – CW members up to 90 calendar days
  – MMA members up to 60 calendar days

• This includes members who have ongoing medical and behavioral health services if they were prior authorized or arranged before enrollment with Sunshine Health:
  – Prior existing orders.
  – Provider appointments, e.g. dental appointments, surgeries, etc.
  – Prescriptions (including those at non-participating pharmacies).
  – Behavioral health services.
Continuity of Care

• Ensures new members who are pregnant and have initiated a course of prenatal care, regardless of the trimester, continue care with their current OB/GYN until delivery and the completion of postpartum care.

• Ensures continuity of care for active orthodontia until the completion of care.

• Ensures for continuing the entire course of treatment with the member’s current provider for:
  – Transplant services (through the first year post-transplant).
  – Radiation and/or chemotherapy services (for the first round of treatment).
Covered Services and Benefits
Member ID Card

- Show this card every time you take your child for any service under the Sunshine Health Child Welfare program.

- If you have not received the Sunshine Health member ID card please call Member Services at 1-855-463-4100 to receive a new card.
Covered Services

- Advanced registered nurse practitioner services
- Ambulatory surgical treatment center services
- Chiropractic services
- Dental services
- Early periodic screening and treatment services
- Emergency services

- Family planning services
- Healthy start services
- Hearing services
- Home health services
- Hospice services
- Hospital inpatient services
- Hospital outpatient services
Covered Services

- Laboratory & imaging services
- Medical equipment and prostheses
- Mental health services
- Nursing care
- Optical services
- Optometrist services
- Physical, occupational, respiratory and speech therapies (including Early Steps)
- Podiatric services
- Physician services, including physician assistant services
- Prescription drugs
- Renal analysis services
- Respiratory equipment & supplies
- Substance abuse treatment
- Transportation to covered services
Transportation

• Non-Emergency Transportation (NET) is covered for appointments with PCPs and healthcare providers and must be arranged beforehand with TMS.

• Contact the transportation vendor, TMS (Transportation Management Services) at 1-866-201-9968 at least 48 hours before your appointment.
  – TMS will arrange the type of transportation needed.
  – Modes of transportation can include bus, vans, taxi or ambulance.
Transportation

• Guidelines:
  – Member must be enrolled in the CWSP on the day of the appointment.
  – No other transportation is available such as volunteer or community.
  – Children under the age of 17 must have an adult ride with them.
  – Only one member and the parent/guardian or attendant may ride; no other children or adults are covered.
Dental and Vision

• **DHW (Dental Health and Wellness) for Dental Benefits**
  – For Ages 20 and under.
  – Covers certain diagnostic, preventive and restorative treatment.
  – Covers certain surgical procedures and extractions and orthodontic treatment.

• **OptiCare for Vision Benefits**
  – Routine eye exam once every 12 consecutive months.
  – One pair of glasses.
  – Additional $150 allowance towards frames, lenses or contacts a year.

A referral from the PCP is not needed for these services. Members should contact member services at 1-855-463-4100 to be linked to these vendors.
Pharmacy

• USScript for prescription medications
  – The member’s ID (Medicaid number) and BIN # 008019 are needed to fill prescriptions at the pharmacy
  – The covered medications follow the AHCA PDL (Preferred Drug List)
    • This includes some OTC (over the counter) medications.
  – Some medications require prior approval before it can be filled.
  – Pharmacies may be able to fill a 72 hour emergency medication supply.

• Members should contact member services at 1-855-463-4100 or USScript at 1-800-460-8988 for assistance.
Enhanced Benefits

• **Over-the-counter/mail order** – A $25 per family benefit to purchase health related items such as vitamins, aspirin and first aid supplies.

• **Medically-related lodging and food** – For family members when a member’s approved specialized hospital stay is 150 miles or more from home up to $100 per day for up to 21 days.

• **Post-discharge meals** – Up to 10 home-delivered meals for members who are discharged from the hospital and participate in Sunshine Health’s transitional care program.
Other Benefits

Sunshine Health provides a number of other programs and benefits to Child Welfare Specialty Plan members. Those benefits include:

• **Care grants** – Up to $150 per year to cover expenses not covered by Medicaid, such as athletic uniforms, athletic equipment, school trips and college application fees or visit expenses.

• **NurseWise** – A 24-hour nurse advice line to answer health care questions in English, Spanish and other languages per request.
NurseWise

• Free Nurse advice line and health information service.

• Staffed with experienced Registered Nurses who can help with questions such as:
  – “I went to the doctor, now I have a follow-up question.”
  – “My child has a fever, do I need to go to the ER?”

• Available 24 hours a day, 7 days a week 365 days a year:
  1-866-796-0530
  TDD/TTY 1-800-955-8770
Getting Services Authorized
Service Authorization Process

• Sunshine Health requires prior authorization for specific services.

• Providers must have requested and received approval for specific services prior to providing those services.

• Sunshine Health UM (Utilization Management) staff may contact the CBC coordinator for additional information to support the utilization management process.
Service Authorization Process

- Specific services that require provider prior authorization in order for payment to be made include:
  - All out-of-network non-emergency services
  - Private duty nursing
  - Non-emergency inpatient admissions, including SIPP
  - Selected outpatient behavioral health services
  - Physical therapy, occupational therapy, speech therapy
  - Some outpatient procedures, such as ambulatory surgery
  - High-tech imaging (MRI, CAT scan)
  - High-cost durable medical equipment (ex: motorized wheelchair)
  - Some medications (Following AHCA’s Preferred Drug List)
Service Authorization Process

• Specific behavioral health services that require provider prior authorization in order for payment to be made include:

  – SIPP/Inpatient hospitalization/CSU/Partial Hospitalization
  – Specialized Therapeutic Foster Care/Therapeutic Group Care
  – Comprehensive Behavioral Health Assessment (over 15 hours)
  – Behavioral Health Overlay Services
  – Targeted Case Management
  – Behavioral Health Day Services
  – Therapeutic Behavioral On-Site Services
  – Psychological Rehabilitative Services
  – Psychological Testing
Emergency Room
Go to the ER or call 911 right away if you have any of these problems:

- Miscarriage/pregnancy with vaginal bleeding
- Bleeding that won’t stop
- A broken bone
- Chest pain or other severe pain
- A bad burn
- Poisoning
- Seizures
- Shock (you may sweat, feel thirsty or dizzy or have pale skin)
- Fainting/unconsciousness
- You are in labor
- Gun or knife wounds
- Drug overdose
- Suddenly not able to see, move or speak

Use your judgment when deciding if you should go to the Emergency room.
Emergency Room- ER

Emergency rooms are good places to go if your health problem is serious. You can call your PCP or the NurseWise line for medical advice if you have these problems:

- A sprain or strain
- Diarrhea
- Throwing up
- A cut or scrape
- An ear ache
- A sore throat
- A cough or cold
- Diaper rash
- Refills for medicine
- Mild headache
- Lice, scabies or ringworm

Use your judgment when deciding if you should go to the Emergency room.
Care Coordination
Ongoing Care Coordination

• CBC Nurse Care Coordinators and Behavioral Health Coordinators will work with Sunshine/Cenpatico Child Welfare Specialty Plan staff and foster parents to identify children who may be in need of higher levels of care.

• Sunshine/Cenpatico Child Welfare Specialty Plan staff will monitor data to identify children who may have high needs and share that information with the CBC staff in order to properly coordinate care.
Ongoing Care Coordination

• CBCs and Sunshine/Cenpatico Child Welfare Specialty Plan Case Managers and Service Managers will identify treatment needs and work together to design the best treatment plan for each child who needs a higher level of case management.

• CBC Care coordinators, Sunshine/Cenpatico staff and other involved parties may attend Multi-Disciplinary Team (MDT) and Integrated Care Team (ICT) meetings as needed.
Complaints and Grievances
Complaints

• Complaints are member-specific issues that are “any expression of dissatisfaction” on the part of the member.

• Can be filed by the member, caregiver, providers, CBC staff, CBCIH or Cenpatico by calling the Child Welfare Member Services department at 1-855-463-4100 or via mail. *If CBC staff or CBCIH staff hear of a member complaint or grievance they must notify Sunshine that day.*

• Sunshine Health:
  – Logs and tracks complaints
  – Researches and resolves complaints within 24 hours
  – Shares resolution
  – Reports complaints to AHCA monthly
Grievances

• Complaints that are member related and not resolved within 24 hours become Grievances. *If CBC staff or CBCIH staff hear of a member complaint or grievance they must notify Sunshine that day.*

• Can be filed by calling the Child Welfare Member Services department at 1-855-463-4100, via fax at 1-866-534-5972 or via mail within one year of the event.

• Sunshine Health:
  – Logs and tracks grievances
  – Researches and resolves grievances within 90 days or within 72 hours if it is expedited
  – Shares resolution
  – Reports Grievances to AHCA monthly
Discussion
Contacts

Sunshine Child Welfare Specialty Plan  
1.855.463.4100  
www.sunshinehealth.com

Sunshine Managed Medical Assistance  
1-866-796-0530

NurseWise  
1-866-796-0530  
TDD/TTY 1-800-955-8770

Choice Counseling  1-877-711-3662