

Health Care Oversight and Coordination Plan

Maryland continues to be committed to meeting the comprehensive medical needs of children in out-of-home placement. To enhance health care services that meet the health needs of youth in Out-of-Home Placement, the Department has established the Health Plan Advisory Committee (HPAC) Steering Committee. The HPAC Steering Committee is a multidisciplinary team that will provide ongoing consultation regarding health care services (physical and mental health) for children and youth in out-of-home placement. The membership of the steering committee include representatives from Department of Health and Mental Hygiene-Medicaid, local departments of social services, Maryland Judiciary, Maryland Resource Parents Association, DHR's Office of Licensing and Monitoring (OLM), Health Department, Maryland State Department of Education, DHMH/Behavioral Health Administration, Foster Youth, Maryland Department of Juvenile Services (DJS), American Association of Pediatrics, and DHR's Office of Attorney General. HPAC Steering Committee began meeting March, 2015 and meets the second Thursday of the month. The committee follows a modified Robert Rules of Order in conduct of meetings, motions, discussions, and voting.

The primary function of the Health Plan Advisory Committee (HPAC) Steering Committee is to define the tasks, goals, assignments, and timelines for the Health Plan Advisory Committee workgroups/subcommittees. The workgroups/subcommittees are as follows:

- Regulations, Policy and Practice
- Oversight, Coordination, & Monitoring
- Quality Assurance, Outcome & Evaluation and Training
- Funding and Legislation

The HPAC Steering Committee will also monitor and review the progress of the workgroups/subcommittees as well as provide any technical support as needed.

The Steering Committee will also draft and submit the final proposal for the plan for ongoing oversight and coordination of health care services for children and youth in Maryland's out-of-home placement. This proposal will be submitted to the Executive Director of the Social Services Administration (SSA) by October 2016. The proposed health plan will be a statewide, comprehensive health care plan that will ensure better coordination and enhance access to health care for youth in foster care (i.e. Regionalized Medical Case Management Model similar to MACTH). The components of the proposed health care system will include the following:

- Ensuring a Medical Home for each child, meaning a Primary Care Physician (PCP) or PCP Team to oversee health care and ensure the continuity of health services,
- Speedy enrollment for immediate health care benefits,
- Coordination and Monitoring of physical and behavioral health care, (i.e. ensuring that the medical treatments (initial and follow-up assessments) are in line with the standards that are outlined in the Maryland Healthy Kids Program Periodic Screening, Diagnosis, and Treatment (EPSDT) Program. And that health needs that are identified through screening will be treated, which includes trauma associated with a child's maltreatment and removal from home),
- Access to health care through a network of providers (doctors, nurses, hospitals, clinic, psychiatrist, therapists, and etc),
- Protocols for Oversight and Monitoring of psychotropic and other prescribed medications.

- Electronic Health passport to make health history and health information available to health care providers, (i.e. ensuring that medical information will be updated and appropriately shared)
- 24 hours, 7 days a week Nursing and Behavioral Health help-lines for caseworkers and caregivers.
- Ongoing medical advisory committee to monitor health care provider performance.
- Ensure that the health needs of transitional youth are met (i.e. health insurance, health care proxy, etc.)

The HPAC steering committee is in its' initial stages of planning; however, below is a tentative timeline of work to be performed during 2015-2016.

May, 2015-January, 2016	HPAC workgroups/subcommittees will convene
February, 2016- May, 2016	HPAC workgroups/subcommittees will report out to the HPAC Steering Committee on the work they completed
June, 2016- September, 2016	HPAC Steering Committee will start drafting the proposal of health care system for children in Maryland's out-of- home placement
October, 2016	Summit final proposal to the Executive Director of DHR/SSA

In determining appropriate medical treatment for children in out-of-home placements, standards are outlined and described in Maryland's regulations (COMAR), The Maryland Healthy Kids/Early and Periodic Screening, Diagnosis, and Treatment (EPDST) Program. Standards for the Healthy Kids Program are developed through collaboration with key stakeholders, such as the Maryland Department of Health and Mental Hygiene (DHMH), Family Health Administration, the Maryland Chapter of the American Academy of Pediatrics, the University of Maryland Dental School and the Maryland Department of the Environment. The components of EPDST represent the minimum pediatric health standards. The State of Maryland uses board certified physicians to provide medical services to children in foster care. DHMH is responsible for oversight of all physicians and the collection of medical data on each child and is working closely with the Department for implementation.

DHR and DHMH are committed to ensuring that Section 2004 of the Affordable Care Act (ACA) is implemented within the State of Maryland. Section 2004 creates a new mandatory Medicaid eligibility category for former foster care children. Under the new provision, Medicaid must cover any child under the age of 26 whom:

- was in foster care under the responsibility of the State when he or she turned 18 (or a higher age designated by the State);
- was enrolled in Medicaid under the State plan or a waiver while in foster care; and
- due to income or other criteria, does not qualify for Medicaid under another mandatory eligibility category (except for the category added by ACA to cover formerly ineligible adults under 65 with incomes up to 133% of the Federal Poverty Level (FPL).

Former Maryland foster care children will be eligible to receive comprehensive coverage, i.e. all services covered under the Medicaid State Plan.