

Project ECHO: Sunflower Health Plan Case Presentation

Presentation Information

Series: Closing the Gap - Care Coordination with Community Providers

Session: Care Coordination with FQHC

Name: Trent Frantz

Date: 7/24/2025



Patient Information

Gender: ☒ Male ☐ Female

Age: 16

Race:

☐ American Indian/Alaskan Native Asian

☐ Native Hawaiian/Pacific Islander

☐ Multi-racial Other

☐ Black/African American

☒ White/Caucasian

☒ Prefer not to say

Ethnicity:

☐ Hispanic/ Latino

☒ Not Hispanic/Latino

☐ Prefer not to say

Strengths and Preferences (goals, motivators, preferences, Important to the individual)

He wants to get a job over the summer, he wants to save up to buy a phone, he enjoys playing with legos and videogames.

Relevant Social and Trauma History (Current living situation, employment status, pertinent legal history, level of education, relationship status, children, support system, etc.)

He is in state custody since 4 to 5 y.o. due to physical abuse and neglect (2015). His family often moved to avoid having him removed from the home. He also reported being abused in a foster home. He was adopted in 2020. Adoption disrupted due to behaviors and not getting along with another child in the home. He is currently placed at a YRCL, where he has been at several times for several years combined, and is comfortable here.

Relevant Medical History (Diagnosis, conditions, etc.)

There is a reported allergy to peanuts, penicillin, Benadryl. He has anaphylaxis. He completed his Kan Be Healthy on 06/26/25. He has history of XEROSIS CUTIS. He is reportedly 5'2" and 140 lb. It was reported that Member's birth mother smoked cigarettes while pregnant with him. He was born via c-section at 39 weeks. No other illnesses or injuries reported. He can be a very picky eater and struggle with falling/staying asleep.

Medication Summary (Name, dose, frequency, route)

OLANzapine (Zyprexa) 5 mg by mouth Twice Daily
indication: continue home medication
Melatonin (Melatonin) 5 mg by mouth At Bedtime
Indication: home medication
traZODone HCL (Desyrel) 100 mg by mouth At Bedtime
Indication: home medication
Divalproex Sodium (Depakote ER) 500 mg by mouth At Bedtime
Discharge instructions: DO NOT CRUSH
indication: home medication
hydroXYzine HCL (Atarax) 25 mg by mouth Three Times Daily as needed indication: home medication
cetirizine HCL (Zyrtec) 10 mg by mouth Daily as needed
indication: seasonal allergic rhinitis__

Project ECHO: Sunflower Health Plan Case Presentation

Lab Summary (Test, result, date, etc.)	Toxicology Summary (Test, result, date, etc.)
--	---

Project ECHO: Sunflower Health Plan Case Presentation

DOS 8/3/2024 (for all)	No info available		
9830-1 Cholesterol Total/Cholesterol in HDL, Serum Plasma (9830-1)			
Lipids/Proteins	2.4	Other	
789-8 Erythrocyte Count, Blood (789-8)	Hematology		
4.35 Other			
788-0 Erythrocyte distribution width, RBC (788-0)	Hematology		
14.2 Other			
787-2 Erythrocyte mean corpuscular volume (MCV), RBC (787-2)			
Blood/Hematology	94.9	Other	
786-4 Erythrocyte mean corpuscular hem conc (MCHC), RBC (786-4)			
Blood/Hematology	32.2	Other	
785-6 Erythrocyte mean corpuscular hemoglobin (MCH), RBC (785-6)			
Blood/Hematology	30.6	Other	
777-3 Platelets, Blood (777-3)	Hematology	203	Other
770-8 Neutrophils Per 100 Leukocytes, Blood (770-8)	Hematology		
31.9 Other			
751-8 Neutrophils Count, Blood (751-8)	Hematology		
2169 Other			
742-7 Monocytes Count, Blood (742-7)	Hematology		
388 Other			
736-9 Lymphocytes Per 100 Leukocytes, Blood (736-9)	Hematology		
55.5 Other			
731-0 Lymphocytes Count, Blood (731-0)	Hematology		
3774 Other			
718-7 Hemoglobin, Blood (718-7)	Hematology	13.3	Other
713-8 Eosinophils Per 100 Leukocytes, Blood (713-8)	Hematology		
6.3 Other			
711-2 Eosinophils Count, Blood (711-2)	Hematology		
428 Other			
706-2 Basophils Per 100 Leukocytes, Blood (706-2)	Hematology		
0.6 Other			
704-7 Basophils Count, Blood (704-7)	Hematology	41	
Other			
6768-6 Alkaline Phosphatase, Serum Plasma (6768-6)	Liver Functions		
261 Other			
6690-2 Leukocytes, Blood (6690-2)	Hematology	6.8	
Other			
5905-5 Monocytes Per 100 Leukocytes, Blood (5905-5)	Hematology		
5.7 Other			
4544-3 Hematocrit (Hct), Blood (4544-3)	Hematology		
41.3 Other			
3094-0 Urea Nitrogen (BUN), Serum Plasma (3094-0)	Kidney Functions		
17 Other			
3024-7 Thyroxine (T4) Free, Serum Plasma (3024-7)	Blood	1	
Other			
3016-3 Thyrotropin (TSH), Serum Plasma (3016-3)	Blood	6.05	
Other			
2951-2 Sodium, Serum Plasma (2951-2)	Blood	141	
Other			
2823-3 Potassium (K), Serum Plasma (2823-3)			
Elements/Minerals/Vitamins	3.7	Other	
2756-5 pH, Urine (2756-5)	Urine	7.1	Normal •
2571-8 Triglyceride, Serum Plasma (2571-8)	Lipids/Proteins		
127 Other			
2345-7 Glucose, Serum Plasma (2345-7)	Diabetes Related		
87 Other			
2160-0 Creatinine, Serum Plasma (2160-0)	Kidney Functions		
0.57 Other			
2093-3 Cholesterol, Serum Plasma (2093-3)	Lipids/Proteins		
188 Other			
2085-9 Cholesterol in HDL, Serum Plasma (2085-9)	Lipids/Proteins		
79 Other			
2075-0 Chloride, Serum Plasma (2075-0)			
Elements/Minerals/Vitamins	104	Other	
2028-9 Carbon Dioxide Total (CO2), Serum Plasma (2028-9)	Blood		
27 Other			
1975-2 Bilirubin, Serum Plasma (1975-2)	Liver Functions		
0.3 Other			

Project ECHO: Sunflower Health Plan Case Presentation

1920-8 Aspartate Aminotransferase (AST), Serum Plasma (1920-8)	Liver Functions	18	Other
17861-6 Calcium, Serum Plasma (17861-6)	Elements/Minerals/Vitamins	9.4	Other
1759-0 Albumin/Globulin, Serum Plasma (1759-0)	Lipids/Proteins		
1.9 Other			
1751-7 Albumin, Serum Plasma (1751-7)	Lipids/Proteins		
4.8 Other			
1742-6 Alanine Aminotransferase (ALT), Blood (1742-6)	Liver Functions		
8 Other			
13457-7 Cholesterol in LDL, Serum Plasma (13457-7)	Lipids/Proteins		
87 Other			
10834-0 Globulin, Serum (10834-0)	Lipids/Proteins		
2.5 Other			

Project ECHO: Sunflower Health Plan Case Presentation

Substance Use History (Substance, age of first use, age where use became problematic, longest period of sobriety, how sobriety was achieved, method of use)

It is noted on his intake paperwork that he has only tried illicit substances, but does not regularly use nor does he have a history of regularly using them. He has history of using tobacco/vaping inconsistently.

Psychiatric History (Age of first mental health contact, past diagnosis, self-harming behavior, suicide attempts, etc.)

Diagnoses (per 2023 Psych eval):

F84.0 Autism Spectrum Disorder, level 2 without intellectual or language limitations

F32.3 Major Depressive Disorder, severe with psychosis

F90.0 Attention Deficit/Hyperactivity Disorder (ADHD), predominantly inattentive type, moderate

R/O Specific Learning Disorder in reading comprehension (further academic testing suggested)

Full Scale IQ of 74

He has history of cruelty to animals, attacking/threatening harm to others, homicidal ideation, thoughts of harming self, suicidal ideation with a plan (undisclosed), seeing/hearing things that others don't, running away, setting fires, refusing medication, impulsivity, rapid mood swings, anger outbursts, property damage, excessive worrying. He has history of difficulty getting along with peers and understanding/conveying emotions. He also previously refused to attend school.

Treatment Summary (Form of treatment, engagement in treatment, date entered, voluntary, etc.)

Member is in foster care. Member currently has the SED waiver. He recently moved to a YRCII placement as of 6/17/25. He was previously living in ER (night to night) placements.

He is to be receiving weekly case management, weekly therapy at placement, and med management every 6 weeks.

He has had 4 BH acute stays below due to SI and aggression within the last year:

6/1-6/5/25.

4/26-5/2/25

3/7-3/13/25

8/1-8/6/24

No ER visits reported.

First reported BH acute stay was in 2015. Per claims he had his first CMHC encounter 6/24/16.

Member had a psychological eval from **August 2023 (on file)**.

Member is reported to be on IDD waiver waitlist, tier 3, approved 5/2019 and has an assigned TCM.

He has an IEP (on file).

Barriers to Treatment

Member is currently placed in a YRCII and is not able to receive SED waiver services due to the placement type (SED waiver will close since member has been here 1 month). However, the member is able to receive therapy, medication, and case management services through the local CMHC and community providers. History of medication refusal, currently compliant.