

Project ECHO: Sunflower Health Plan Case Presentation

Presentation Information

Series: Care Coordination
 Session: Case Management Overview
 Name: Doug Wallace
 Date: 10/7/2021



Patient Information

Gender: Male Female

Age: 57

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

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

Current living situation: residing in a transitional housing program
 Employment: not interested in employment
 Level of Education: Unknown
 Relationship status/support system: Prior to moving into the transitional housing program was living with her daughter. The daughter is currently a support and is assisting the member with looking for permanent housing. The member reported that in the past she did not have a good relationship with her daughter.

Medical History (Diagnosis, conditions, etc.)

MAJOR DEPRESSIVE D/O RECURRENT SEV W/PSYCHOSIS
 DYSTHYMIC DISORDER
 UNSPECIFIED MOOD AFFECTIVE DISORDER
 GENERALIZED ANXIETY DISORDER
 POST-TRAUMATIC STRESS DISORDER UNSPECIFIED
 BORDERLINE PERSONALITY DISORDER
 ATTN-DEFICIT HYPERACTIVITY D/O UNSPECIFIED TYPE
 CHRONIC OBSTRUCTIVE PULMONARY DISEASE UNS
 MODERATE PERSISTENT ASTHMA W/ACUTE EXACERBATION
 CHRONIC RESPIRATORY FAIL UNS
 HYPOXIA/HYPERCAPNIA
 SPONDYLOSIS W/O
 MYELOPATH/RADICULOPATHY LUMB RGN
 OTHER CERVICAL DISC DISPLACEMENT AT C4-C5 LEVEL
 TOBACCO USE

Medication Summary (Name, dose, frequency, route)

MEDICATIONS
 albuterol-ipratropium (albuterol-ipratropium 2.5 mg-0.5 mg 3 mL inhalation solution) 3 milliliters NEB inhalation Every 4 hours.
 azithromycin (Zithromax 500 mg oral tablet) 1 tab Oral DAILY for 3 day. Refills: 0.
 Taking For: Bacterial Infection
 cefdinir (cefдинir 300 mg oral capsule) 1 cap Oral Every 12 hours for 6 day. Refills: 0.
 Taking For: Bacterial Infection
 clonazepam (clonazepam 0.5 mg oral tablet) 1 tab Oral 3 TIMES A DAY as needed Agitation Anxiety.
 elderberry 2 gummies Oral DAILY.
 guaifenesin (guaifenesin 1200 mg oral tablet, extended release) 1 tab Oral 2 TIMES A DAY.
 lisdexamfetamine (Vyvanse 50 mg oral capsule) 1 cap Oral EVERY MORNING.
 montelukast (montelukast 10 mg oral tablet) 1 tab Oral AT BEDTIME. Refills: 0.
 Taking For: Breathing Difficulty
 multivitamin with minerals (Calcium, Magnesium and Zinc oral tablet) 1 tab Oral DAILY.
 prednisone (prednisone 10 mg oral tablet) Take 6 tablets x 2 days, 5 tablets x 2 days, 4 tablets x 2 days, 3 tablets x 2 days, 2 tablets x 2 days, then 1 tablet x 2 days. Refills: 0.
 Taking For: Wheezing
 quetiapine (quetiapine 300 mg oral tablet, extended release) 1 tab Oral AT BEDTIME.

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DEPENDENCE ON SUPPLEMENTAL OXYGEN	
Lab Summary (Test, result, date, etc.)	Toxicology Summary (Test, result, date, etc.)
None available	None available
Substance Use History (Substance, age of first use, age where use became problematic, longest period of sobriety, how sobriety was achieved, method of use)	
Click here to insert summary	
Psychiatric History (Age of first mental health contact, past diagnosis, self-harming behavior, suicide attempts, etc.)	
January 2021 - inpatient hospitalization for suicidal ideation with plan	
Treatment Summary (Form of treatment, date entered, voluntary, etc.)	

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Member of Sunflower Health Plan since 2013. The member reports having receive mental health services for several years. The member was referred for Behavioral Health ICM and for housing support services in February 2021. At first, both the BH ICM and Housing Specialist struggled with connecting with the member to start services. This writer was able to connect with the member in April 2021 to discuss housing support. At that time, the member was staying with her daughter and receiving therapy services. The member wanted to return to her "home community" to restart services with the CMHC and to find permanent housing. The member reported that she has COPD and utilizes a ventilator. Since the member was staying in a different county than the CMHC, she was not able to immediately start services at the desired CMHC. She had to be homeless or residing in the same county as the CMHC to begin services. This writer assisted the member with connecting to the CMHC to discuss how to connect with the services. The member moved out of her daughter's place and into a hotel in the desired county so that she could begin services at the CMHC. Shortly after thereafter, the member was assisted by the CMHC with moving into a transitional housing program. The member completed her intake at the CMHC and was assigned a case manager. Almost immediately after moving into the transitional housing unit, the member expressed her concerns that the housing staff were not able to address her physical health needs. Since moving into the transitional housing program, there have been multiple conversations about her concerns. The member has been connected with a BH ICM for help coordinating her behavioral health services. She was already receiving support from a program specialist at the time she was referred for housing support. Since that time, she has been approved for the PD waiver and has been assigned to a RN care manager. The member's Sunflower and community treatment teams must coordinate with each other to meet the member's behavioral and physical health care needs.

Barriers to Treatment

- Dual physical and behavioral health needs
- Limited natural supports
- Lack of permanent housing
- Limited transportation to get basic needs, such as food