Iowa REACH Initiative

Responsive and Excellent Care for Healthy Youth Initiative



Intensive Care Coordination February 2025



Relevant Services Definition

Intensive Care Coordination (ICC) includes facilitating assessment, care planning, coordination of services, authorization of services, and monitoring of services and supports to address children's health conditions by a single, consistent care coordinator.



Assessment: Iowa HHS will implement its care planning team process, which includes

• Completing a strengths-based, needs driven, comprehensive assessment to organize and guide the development of a Care Plan and a risk management/safety plan;

• An assessment process that determines the needs of the child for medical, educational, social, behavioral health, or other services;

• An ICC that may also include the planning and coordination of urgent needs before the comprehensive assessment is completed;

• Further assessments that are provided as medically necessary and in accordance with best practice protocols.



Planning and Development of a Family-Driven, Child-Guided, Person-Centered Plan (PCP): Iowa HHS will maintain a familydriven, child-guided, person-centered planning process, which includes:

• Having the care coordinator use the information collected through an assessment, to convene and facilitate the CPT meetings;

• Having the CPT develop a child-guided and family-driven PCP that specifies the goals and actions to address the medical, educational, social, mental health, and other services needed by the child and family; and

• Ensuring that the care coordinator works directly with the child, the family, and others significant to the child to identify strengths and needs of the child and family, and to develop a plan for meeting those needs and goals.

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Crisis Planning. The Care Coordinator will provide crisis planning that, based on the child's history and needs,

(a) anticipates the types of crises that may occur,

(b) identifies potential precipitants and creates a crisis plan to reduce or eliminate them, and

(c) establishes responsive strategies by caregivers and members of the child's team to minimize crises and ensure safety;



Referral, monitoring, and related activities: Iowa HHS will require that the care coordinator:

 works directly with the child and family to implement elements of the PCP;

• prepares, monitors, and modifies the PCP in concert with the CPT and determines whether services are being provided in accordance with the PCP; whether services in the PCP are adequate; and whether there are changes in the needs or status of the child and, if so, adjusts the PCP as necessary, in concert with the CPT; and

 actively assists the child and family to obtain and monitor the delivery of available services, including medical, behavioral health, social, therapeutic, and other services.

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Transition: Iowa HHS will require the care coordinator to:

- develop a transition plan with the CPT, and implement such plan when the child has achieved the goals of the PCP; and
- collaborate with the other service providers and agencies on behalf of the child and family



Settings

- ICC may be provided to children living and receiving services at home and in the community, including foster care placements, as well as to children who are currently in a hospital, group home, or other congregate or institutional placement as part of discharge or transition planning.
- Notwithstanding the foregoing, ICC will not be provided to children in juvenile detention centers.



Discussion

- What is important to consider as Iowa works to build the Intensive Care Coordination services?
- What additional information would this group need to help keep the conversation going about developing these services?



Public Comment

