Family First Prevention Services Act: Orientation & Briefing

DECEMBER 17th 2019
Our Mission

American Public Human Services Association advances the well-being of all people by influencing modern approaches to sound policy, building the capacity of public agencies to enable healthy families and communities, and connecting leaders to accelerate learning and generate practical solutions together.

... Because we build well-being from the ground up.
Introductions

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Agenda

- What is the Family First Prevention Services Act?
- What are the big problems the Act tries to solve?
- How does it propose tackling them?
- Timeline
- Technology implications
- Current landscape
- Family First Transition Act
- Key takeaways
- Q&A
- Additional resources
What is the Act?

- The Family First Prevention Services Act of 2018 (FFPSA or the Act) is historic and landmark legislation.

- The US Congress passed the Act in February 2018 as part of the bi-partisan spending bill.

- The two major changes in the act are:
  - Allowing Title IV-E to pay for prevention services for pregnant/parenting youth and children at imminent risk of foster care.
  - Restricting Title IV-E funding for congregate care claiming to 14 days unless the youth is in one of four specific types of residential placements.
    - One of the placements is the newly created Qualified Residential Treatment Program (QRTP).
WHAT ARE THE BIG PROBLEMS THE ACT TRIES TO RESOLVE?
Too Many Kids are in Foster Care

US Children in Foster Care

Source: AFCARS- US Children in Foster Care
Too Many Kids are Ending Up in Congregate Care

Children in Congregate Care as a Percentage of Total US Foster Care Population

Source: AFCARS - Children in Congregate Care as a Percentage of Total US Foster Care Population
HOW DOES THE ACT SEEK TO IMPROVE OUTCOMES FOR CHILDREN AND FAMILIES?
What Does the Act Do to Support Better Outcomes for Children and their Families?

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<tbody>
<tr>
<td>1</td>
<td>Increases <strong>prevention</strong> services to decrease entries into foster care.</td>
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<td>2</td>
<td>Encourages placements in foster family homes and <strong>boosts congregate care requirements</strong>.</td>
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<td>3</td>
<td>Provides more support for families struggling with <strong>substance use disorders</strong>.</td>
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<td>Builds <strong>family capacity</strong> for safety and stability so kids can go home quicker.</td>
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<td>5</td>
<td>Enhances <strong>kinship caregiver</strong> capacity and standards.</td>
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<td>6</td>
<td>Improves supports for <strong>youth transitioning to adulthood</strong>.</td>
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<td>7</td>
<td>Extends <strong>adoption and guardianship</strong> programs.</td>
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<td>8</td>
<td>Enhances other <strong>critical components</strong> of a successful child welfare system.</td>
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Increases Preservation and Prevention Services to Decrease Entries into Foster Care

Expands federal funding for prevention services through Title IV-E.

- Who is eligible under the Act?
  - A child who has been identified as a candidate for foster care.
  - A child in foster care who is pregnant or parenting.
  - Covered services can be provided to the parents or kinship caregivers of the children described above.

- What services are covered?
  - Mental health prevention and treatment.
  - Substance Use Disorder prevention and treatment provided by a qualified clinician.
  - In-home parent skill-based programs, including parenting skills training, parent education, and individual or family counseling.
Increases Preservation and Prevention Services to Decrease Entries into Foster Care

- What other requirements for prevention programming must be met? (All of these!)
  - The prevention services are listed on the Title IV-E Prevention Services Clearinghouse (https://preventionservices.abtsies.com/program)
  - At least 50% of state expenditures must be spent on well-supported evidence-based practices (EBPs).
  - EBPs are provided for a maximum of 12 months.
  - EBPs are provided under a trauma informed framework.
  - EBPs are evaluated and practiced with fidelity.
  - The state meets a maintenance of effort requirement.
  - There is coordination with other relevant agencies.
Encourages Placements in Foster Family Homes and Boosts Congregate Care Requirements

Restricts funding for congregate care and introduces Qualified Residential Treatment Programs (QRTP).

- How are Title IV-E foster care maintenance payments restricted for non-foster family home settings (i.e., congregate care)?
  - Payments are only eligible **up to two weeks unless one** of these criteria is met:
    - The placement is a QRTP.
    - The placement specializes in providing prenatal, post-partum, or parenting supports for the youth.
    - The child is over 18 and placed in a supervised independent living setting.
    - The placement provides high quality residential care and support services to youth who have been found to be, or are at risk of becoming, sex trafficking victims.
Encourages Placements in Foster Family Homes and Boosts Congregate Care Requirements

QRTP is a newly defined placement setting with strict requirements for federal funding.

- What are the requirements for an eligible QRTP placement?
  - An assessment must be conducted and documented in the treatment plan within 30 days after placement stating the need for this type of placement.
  - The program uses a trauma-informed treatment model.
  - The program must have registered or licensed nursing staff and other licensed clinical staff on-site in accordance with the selected treatment model, and available 24/7.
  - The facility must be licensed in accordance with Title IV-E requirements and accredited.
  - If in the best interest of the child, family members must be involved in the child’s treatment.
  - There must be documentation on outreach to family members and fictive kin, including siblings, how those family members are integrated into the treatment process and involved post-discharge, and how sibling connections are maintained throughout.
  - The program must provide discharge planning and family-based aftercare support for at least 6 months post discharge.
Encourages Placements in Foster Family Homes and Boosts Congregate Care Requirements

Additional QRTP requirements and a few key provisions.

- Assessments and documentation
  - Within 30 days, an assessment must be completed by a third-party.
  - Establishing a family and permanency team.

- Case Planning
  - If placement in a QRTP is recommended, the case plan shall specify why the QRTP is the most effective, least restrictive setting, providing the appropriate level of care, and how the recommended placement is consistent with goals in the child’s permanency plan.
  - Within 60 days of the start of each placement in a QRTP, the court must approve the placement and determine that the placement provides the most effective level of care and meets the goals of the permanency plan.

- Status Reviews and Permanency Hearings
  - If the child is in a QRTP for a length of stay more than 12 consecutive months or 18 nonconsecutive months, or when a child under age 13 has a length of stay of more than 6 consecutive or non-consecutive months, the head of the State Title IV-E agency must sign an approval for continued placement.
Encourages Placements in Foster Family Homes and Boosts Congregate Care Requirements

Protects against increasing the juvenile justice population.

Because of changes to the allowability of maintenance payments for placements that are not a foster family home, the State plan must include a certification that the State will not enact or advance policies or practices that would result in a significant increase in the population of youth in the State’s juvenile justice system.
Implementation of Prevention is Tied to Restrictions on Congregate Care

The State can request a delay of up to 2 years (until October 2021) in implementing the changes to congregate care/rollout of QRTP.

However, this would also automatically delay the State’s ability to claim Title IV-E reimbursement for prevention services until that time.

States can only begin drawing down increased funding for prevention services when they implement the restrictions to congregate care funding (including QRTP).
A TIMELINE OVERVIEW
MAJOR IMPLEMENTATION MILESTONES

- Federal HHS will publish model foster family home licensing standards and guidance on evidence-based prevention practices.
- States can begin claiming for kinship navigator programs.
- Eligibility changes take effect for children placed with parents in residential substance use disorder treatment.
- States are required to have procedures in place for criminal records and child abuse and neglect registry checks for any adult working in a group care setting with foster children.

- States must provide information on whether/how they are meeting the model licensing standards established by HHS.

- Limitations take effect for claiming Title IV-E for congregate care settings.
- States can begin claiming prevention services at 50% federal match.

- The federal funding match for prevention services increases from 50% reimbursement to the federal Medicaid assistance percentage (FMAP) (currently at 64.45%).
SO WHAT DOES THIS MEAN FROM AN IT LENS?
Technology Implications

- SACWIS/CCWIS solutions need to be modified to accommodate the new processes and data collection requirements, BUT, it will take time to change policies and define new processes that may not be aligned with the FFP-SA timelines.

- Extensive data management and reporting requirements.

- Planning for SACWS/CCWIS changes requires coordination between CIOs, program leaders, and fiscal leaders.

- System needs will include modifications to CCWIS automated functions, including Intake, Licensing, Assessment, Case Management, Financials, Mobility, and Reporting.
Technology Implications

- There is no enhanced funding to support the business and technology changes that are required to implement the Act.
- Convergence of CCWIS efforts and FFPSA efforts may have significant financial and timeline implications.
- Exploration of technology solutions that could quickly support the programmatic and practice needs.
- Looking toward the future, for technology and data needs for FFPSA after implementation. Solutions that further support the move toward a preventative model for child welfare programs.
CURRENT LANDSCAPE

Early Adopters
Early Adopters: Experience Thus Far

District of Columbia
Department of Human Services

West Virginia
Department of Health and Human Resources, Bureau for Children and Families
New Documentation requirements for Prevention Services: FACES Updates & Community Portal
FAMILY FIRST TRANISITION ACT

A bill that will provide funds to help states in making the transition a success
Family First Transition Act (H.R. 4980)

FFTA has **three key components** to assist jurisdictions in meeting the goals of FFPWA.

1. Evidence standard: Temporary suspension of the requirement that 50% of evidence-based prevention services be well-supported.

2. Transition funding: $500,000,000 to be allocated among jurisdictions

3. Funding guarantee for states existing Title IV-E waivers
## Estimated State Allocations Under Family First Transition Act

1. State allocations on this table are estimates calculated by the Congressional Research Service based on most recent available data and the formula specified in the legislation. Official allocations would be calculated by the Department of Health and Human Services after enactment.

2. These amounts would be in addition to any funding received under the separate funding certainty provision for jurisdictions whose 1130 waivers are ending September 30.

<table>
<thead>
<tr>
<th>State</th>
<th>Allocation</th>
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<tbody>
<tr>
<td>Alabama</td>
<td>8.3 million</td>
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<tr>
<td>Alaska</td>
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</tr>
<tr>
<td>Arizona</td>
<td>12.4 million</td>
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<tr>
<td>Arkansas</td>
<td>5.4 million</td>
</tr>
<tr>
<td>California</td>
<td>52.8 million</td>
</tr>
<tr>
<td>Colorado</td>
<td>7.7 million</td>
</tr>
<tr>
<td>Connecticut</td>
<td>3.0 million</td>
</tr>
<tr>
<td>Delaware</td>
<td>1.4 million</td>
</tr>
<tr>
<td>District of Columbia</td>
<td>0.6 million</td>
</tr>
<tr>
<td>Florida</td>
<td>28.9 million</td>
</tr>
<tr>
<td>Georgia</td>
<td>18.6 million</td>
</tr>
<tr>
<td>Hawaii</td>
<td>2.0 million</td>
</tr>
<tr>
<td>Idaho</td>
<td>3.4 million</td>
</tr>
<tr>
<td>Illinois</td>
<td>17.9 million</td>
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<tr>
<td>Indiana</td>
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</tr>
<tr>
<td>Iowa</td>
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</tr>
<tr>
<td>Kansas</td>
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<tr>
<td>Maine</td>
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<tr>
<td>Maryland</td>
<td>7.1 million</td>
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<tr>
<td>Massachusetts</td>
<td>6.7 million</td>
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<tr>
<td>Michigan</td>
<td>15.8 million</td>
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<td>Minnesota</td>
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<td>Mississippi</td>
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<td>Montana</td>
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<td>Nevada</td>
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<td>New York</td>
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<td>North Carolina</td>
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<tr>
<td>Ohio</td>
<td>18.2 million</td>
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<td>South Carolina</td>
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<tr>
<td>Tennessee</td>
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<td>Texas</td>
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<td>Utah</td>
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<tr>
<td>Vermont</td>
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<tr>
<td>Virginia</td>
<td>11 million</td>
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<tr>
<td>Washington</td>
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<tr>
<td>West Virginia</td>
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<tr>
<td>Wisconsin</td>
<td>8.7 million</td>
</tr>
<tr>
<td>Wyoming</td>
<td>0.8 million</td>
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Source: Congressional Research Services
KEY TAKEAWAYS
Key Takeaways

- Family First is a major transformation that will drastically change the practice, operations and claiming of services for child welfare organizations nationally.

- In order to leverage the IV-E funding available through Family First, states must implement both prevention services and congregate care restrictions simultaneously.

- Planning for these changes requires the collaboration and contributions of program, policy, fiscal and technology leaders.

- The Family First Transition Act (if passed) will provide funding allocations that will support the variety of activities required to implement Family First, but they must be used within a short two-year timeframe.
QUESTIONS AND ANSWERS
Looking Forward

- This is the first in a series of HSITAG webinars that will cover a variety of topics related to Family First.
- If you have specific topics that you would like us to include in future sessions, please send those requests to Jordan Kroll, CompTIA, at jkroll@comptia.org.
- The next webinar will be in early February. Notifications will be distributed by CompTIA.
ADDITIONAL RESOURCES
Resources

Title IV-E Prevention Services Clearinghouse: https://preventionservices.abtsites.com/
- List of reviewed evidence-based practices.
- Prevention Services Clearinghouse Handbook of Standards and Procedures released.

FamilyFirstAct.org: https://www.familyfirstact.org/

Family First Transition Act: https://www.govtrack.us/congress/bills/116/hr4980/text