



Family First Prevention Services Act Overview and Update

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Prior to Passage of the Family First Act

- Federal Title IV-E of the Social Security Act provides federal matching reimbursement for children who are in out of home placement due to abuse or neglect.
- These matching funds cover foster care, adoption assistance and kinship assistance in Minnesota.
- Federal reimbursement continues as long as a child entered foster care through a voluntary placement or judicial determination, was considered “needy” according to the former Aid to Families with Dependent Children (AFDC) program standards before removal, and resides in licensed or approved foster care, or is in the adoption assistance or kinship assistance programs.

Family First Prevention Services Act

The Act became law in February of 2018, and modified many sections of federal child welfare laws, including Title IV-E.

Most significantly, it:

- I. Creates new optional **prevention funding reimbursement** to keep children with their families as long as approved evidence-based services that are necessary to prevent the entry of the child into foster care are provided.
- II. Strictly limits federal reimbursement for children's placements in **group foster care** by creating higher standards for those types of care.

Timing

There are several deadlines in the act and some are already in effect.

- States may request to delay the effective date of particular provisions, such as the stricter group foster care standards, but if they do so, it will delay state access to the new optional prevention services reimbursement.
- MN has indicated a non-binding intent to delay implementation until July 1, 2021 to better analyze, implement and adjust to the new requirements. The latest the statute can be implemented is October 1, 2021.

Other FFPSA Requirements Already in Place

- Requires criminal record/registry checks for any adult working in child care institutions
- Allows IV-E foster care maintenance payments for children co-located with their parents in a licensed residential family-based treatment facility for substance abuse
- Modifies Chafee Foster Care Independence Program
 - Extends support to age 23 (previously 21)
 - Extends eligibility for educational training vouchers to age 26

I. PREVENTION: The Act creates new optional **prevention funding reimbursement**

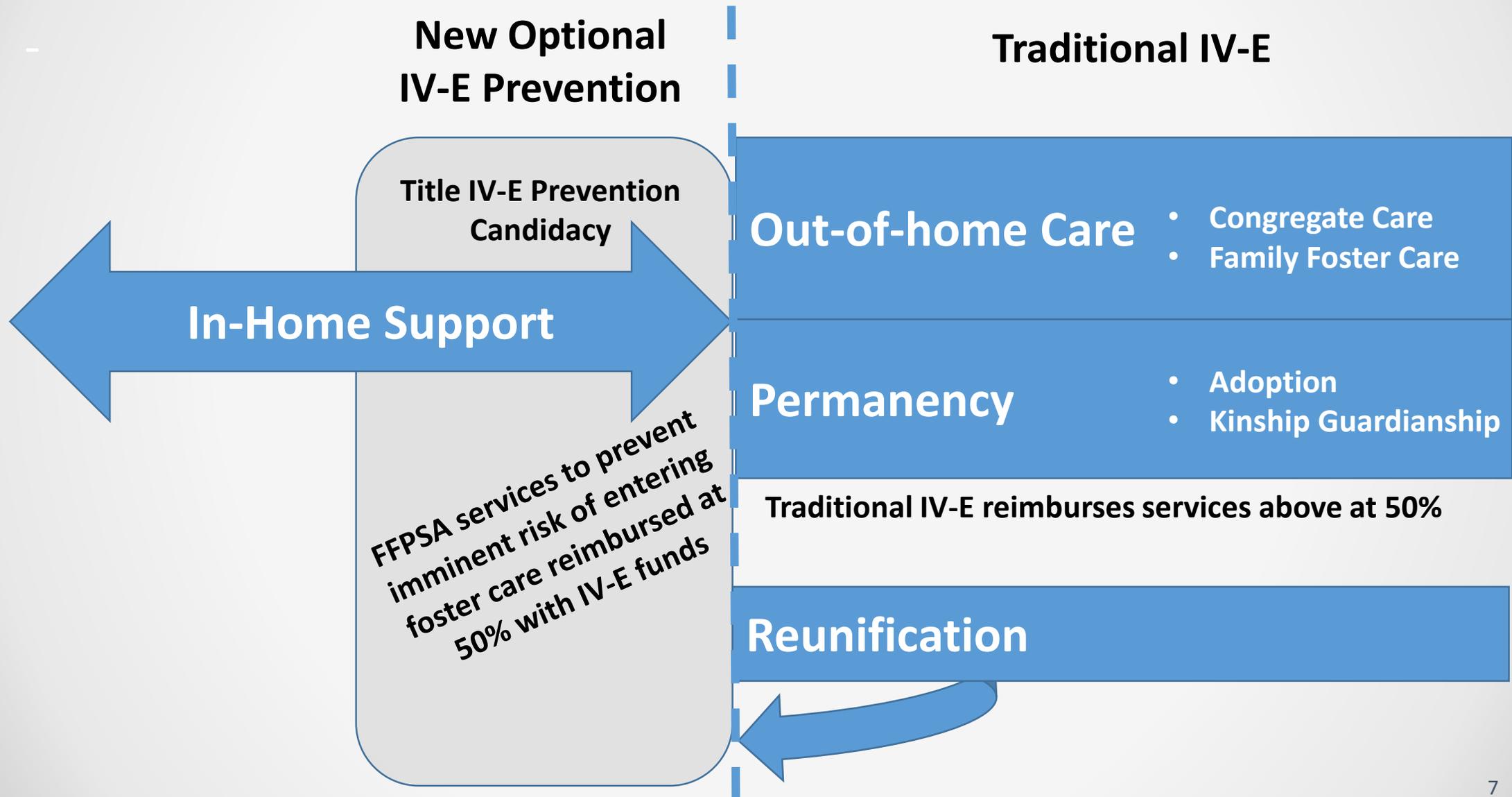
To prevent out-of-home placements, provides 50% IV-E reimbursement for time-limited (one year) prevention services for:

- candidates for foster care
- children in foster care who are pregnant or parenting
- the parents or kin caregivers of these children

without regard to income eligibility

“Candidate for foster care” is defined as a child identified in a prevention plan as being at imminent risk of entering foster care but who can safely remain in the child’s home or in a kinship placement as long as services or programs that are necessary to prevent the entry of the child into foster care are provided.

Continuum under Family First



What prevention services?

Allowable prevention services fall into four categories:

1. Mental health treatment
2. Substance abuse prevention and treatment services provided by a qualified clinician
3. In-home parent skill-based programs that include parenting skills training, parent education, and individual and family counseling
4. Kinship navigator programs

Services must be

- Rated and approved as evidence-based “promising,” “supported,” or “well-supported” by the federal Title IV-E Prevention Services Clearinghouse
- Identified in the state’s five-year prevention program plan

50 percent of expenditures must meet highest level “well-supported” criteria

Evidence ratings

Promising	At least one qualifying study with a rigorous study design and a favorable effect on at least one “target outcome”
Supported	At least one qualifying study with a rigorous study design and a favorable effect on at least one “target outcome” at least 6 months beyond treatment
Well-supported	At least two qualifying studies with rigorous study design, and at least one of the studies demonstrates a sustained favorable effect at least 12 months beyond treatment , on at least one target outcome.

Source: HHS, Administration on Children and Families, 2018

Note: The Secretary of the Department of Health and Human Services is responsible for creating a clearinghouse of approved services.

Prevention Services

The following services are currently approved by the federal clearinghouse:

Mental Health

- Parent-Child Interaction Therapy
- Trauma Focused-Cognitive Behavioral Therapy
- Functional Family Therapy
- Multisystemic Therapy

Substance Use

- Families Facing the Future
- Multisystemic Therapy

Parent Skills

- Nurse-family partnership
- Parents as Teachers

Kinship Navigator

- [none approved yet]

Note: Multisystemic Therapy for Child Abuse and Neglect did not meet criteria

How do Minnesota's prevention services align with the Act?

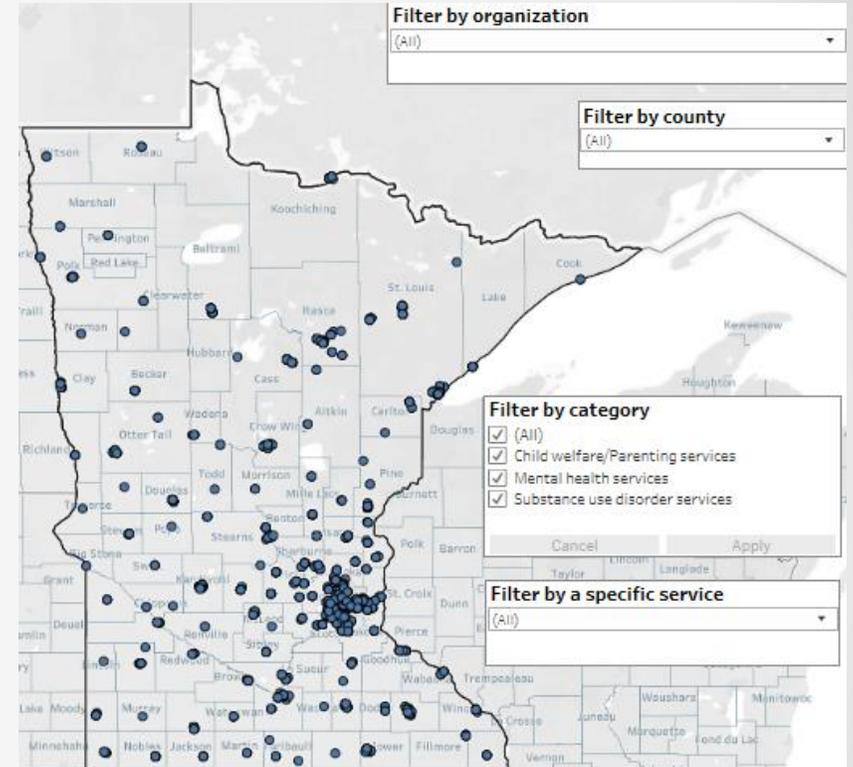
MMB conducted online survey and qualitative interviews of 81 evidence-based practices currently being offered.

Survey results showed:

- Barriers to providing evidence-based practices in MN:
 - Difficult to hire/retain qualified staff
 - Difficult to pay for training and certifications
 - Key features of service is logistically challenging

Survey results for Prevention Services

- Some of the prevention services being reviewed by the federal clearinghouse are provided in MN



<https://mn.gov/mmb/results-first/survey.jsp>

Most commonly offered

Evidence-Based Practice	# of Providers	# of Locations
Mental Health		
Cognitive Behavioral Therapy (Youth)	52	143
Cognitive Behavioral Therapy (Adults)	49	146
Trauma Focused-Cognitive Behavioral Therapy (Youth)*	40	85
Substance Abuse		
Cognitive-Behavioral Coping Skills Therapy	69	145
Relapse Prevention Therapy	49	102
Motivational Interviewing for substance use disorder***	48	106
Parent Support		
Healthy Families America***	30	33
Nurse-Family Partnership*	26	43
Motivational Interviewing for child welfare	17	25

* Services approved

***Services currently being reviewed by federal clearinghouse

State's 5-year prevention plan requirements

- **Service description/oversight:** How State will assess children/their parents or kin caregivers to determine eligibility and describe HHS-approved services state will provide, including:
 - whether services are rated as promising, supported, or well-supported by Clearinghouse
 - how implementation of services will be continuously monitored to ensure fidelity to practice model and to determine outcomes achieved
- **Evaluation strategy:** State must include well-designed and rigorous evaluation strategy for each service.
- **Monitoring child safety:** State must describe how it will monitor/oversee safety of children receiving services, including periodic risk assessments throughout 12-month period of prevention services.

II. Congregate Care: The new Act strictly limits federal reimbursement for children's placements in **group foster care**

Federal Title IV-E foster care payments are limited to two weeks for eligible children placed in settings that are not foster family homes,

Except for settings:

- Meeting new **qualified residential treatment programs** (QRTPs) requirements
- Specializing in providing prenatal, postpartum, or parenting supports for youth
- Independent, supervised for youth 18 or older
- Providing high quality residential care/supportive services to children/youth who have been found to be or are at risk of becoming sex trafficking victims
- Licensed as residential family-based treatment facilities for substance abuse where children are placed with their parents

Qualified Residential Treatment Program (QRTP) Standards

Beginning 3rd week for which foster care maintenance payments are made on behalf of a child placed in a child care institution, **no federal payment unless program—**

- Uses trauma-informed treatment model designed to address needs, including clinical needs, of children with serious emotional or behavioral disorders or disturbances
- Has registered or licensed nursing staff/other licensed clinical staff (either employee or contractor) who:
 - Provide care within scope of practice; on-site according to treatment model; available 24/7
- Facilitates participation of family members in treatment program, as appropriate; and outreach to family members

QRTP Standards (cont.)

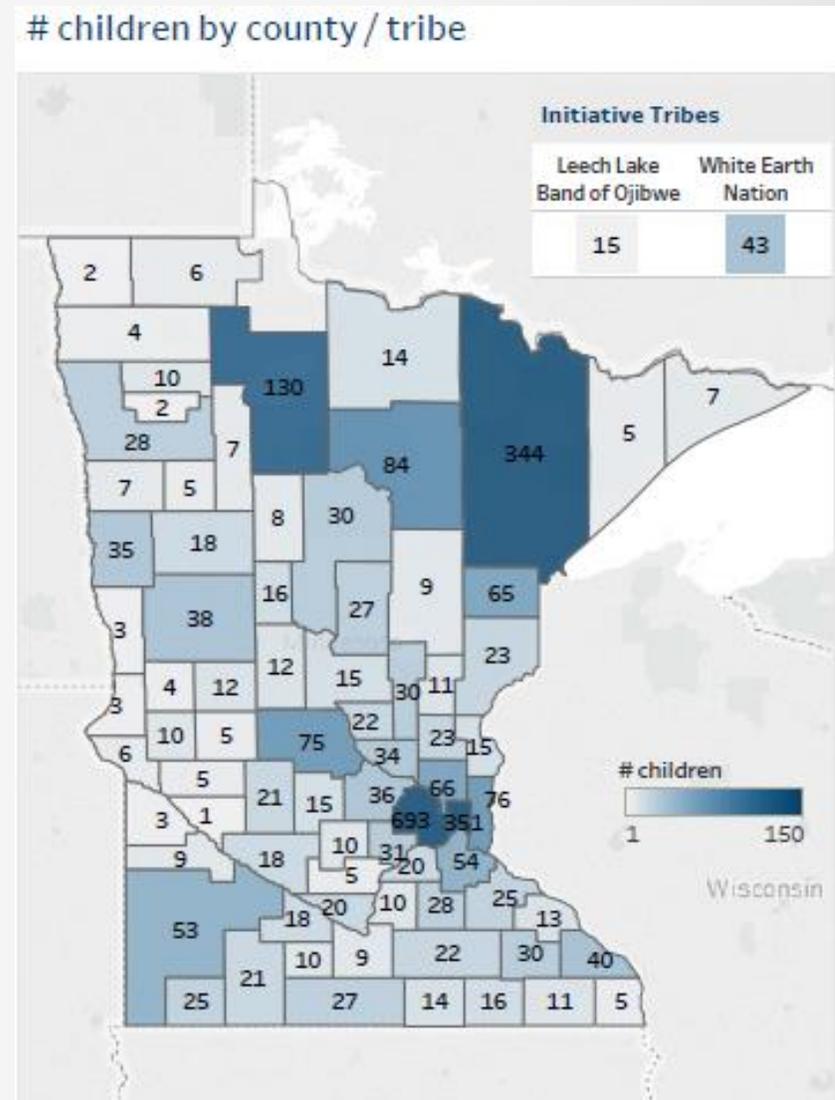
No federal payment unless program—

- Documents how family members are integrated to treatment and post-discharge and sibling connections maintained
- Provides discharge planning and family-based after care for at least 6 months of post-discharge
- Licensed by state and accredited by: Commission on Accreditation of Rehabilitation Facilities (CARF); Joint Commission on Accreditation of Healthcare Organizations (JCAHO); Council on Accreditation (COA) or another body federally-approved

And assessments to determine appropriateness of placement in QRTP must be made within 30 days after placement

Impact of new congregate care restrictions in MN

- Over 3,000 youth experienced out-of-home care sometime during 2017 at residential treatment centers, group homes, and/or corporate shift foster homes
- Over \$7 million of federal reimbursement is at stake if these settings don't meet the new standards
- Most counties are affected by the potential loss of federal revenue.



How do MN's residential placement settings align with the Act?

- Minnesota Management and Budget surveyed licensed children's residential facilities and corporate foster care homes.
- Less than half of those responding felt they met most of the requirements.
- The most difficult requirements were:
 - Accredited by a national accrediting body
 - Ability to provide 6-month post-discharge support
 - Assessments conducted by an independent person
 - Registered or licensed nurse available 24/7 as needed
- Most were willing to come into compliance if financially supported

What are we doing?

- Completed basic development work, surveys and data queries
 - Evidence-based prevention services array and capacity
 - Residential facility requirements/assessment standards
- Received approval from Legislature for staffing and support for planning/implementation phase
- Received approval from Legislature to align MN law with federal requirements
- Working on outreach and coordination with our county, tribal and provider partners

Program implementation steps underway

- Governance
 - Active discussions underway regarding decision-making to guide implementation
- Stakeholder engagement
 - First meeting of Advisory Steering Committee July 29, 2019, at DHS
- Pending decisions and inputs above
 - Computer systems changes in design stage
 - Federal claiming and reporting in design stage
 - State prevention plan development
- Enhanced background checks
- Statewide kinship navigator development
- Strengthening of reunification efforts

Legislative approval for support

- Two positions will focus on culturally appropriate prevention and early intervention services for American Indian families and African American families.
- One will focus on linking to Health Care – Medical Assistance/Managed Care Organization contracts for access and reimbursement to a full array of mental health and substance abuse placement prevention services.
- Two positions to lead development of residential facility requirements and to develop policy regarding assessment standards for residential services in coordination with the Behavioral Health Division.
- One foster care policy position to develop and maintain statewide kinship navigator program information to assist kinship caregivers in learning about finding and using programs and services to meet the needs of children they are raising and to develop reunification policy consistent with FFPSA.
- One fiscal operations position to develop and manage Title IV-E claiming and federal reporting changes for Foster Care, Adoption Assistance, Guardianship Assistance, Prevention Services, and Kinship Navigator Program.
- One Licensing Division position to ensure impact on regulatory part of DHS is fully considered and incorporated into analysis for implementation of significant policy changes.

Questions?

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