

Case Manager Job Aide on Evidence-Based Treatments

Funded Through Children's Services Act and the Family First Prevention Services Act

Functional Family Therapy (FFT)

Intensive in-home family therapy for youth with behavioral or emotional problems including substance use

* see footnote

Referral Criteria

- Ages 11-18
- Caregiver must agree to attend all sessions
- Externalizing Adolescent Behavior
 - Conduct Disorder
 - Oppositional Defiant Disorder
 - Drug use/abuse
 - Violence
 - Truancy
 - Anxiety/Depression with externalizing behaviors
- Parent-Child Conflict/Family Issues
- Youth have to be in the community or ready to return to the community
- Youth have to have a family and the family has to be willing to participate

Exclusionary Criteria

- Youth 10 years or below as primary referral
- Youth has identified family with a shared history, sense of future, and some level of cohabitation
- Youth is scheduled to be placed outside of the home (RTC, DJJ foster care, etc.)
- Treatment for sexually offending behavior is primary
- Youth who have severe psychiatric illness
- Youth who are currently experiencing acute psychosis
- Actively suicidal and/or homicidal

Authorizations are for 120 days over 4-6 months.

Multisystemic Therapy (MST)

Intensive community-based treatment for youth with disruptive behavior, mood, and/or substance use that may result in community sanctions

* see footnote

Referral Criteria

- Ages 11-17
- At risk of being removed from home due to disruptive, delinquent, substance-using, and antisocial behavior
- Youth who have significant emotional or behavioral problems and may be at risk of residential placement
- Department of Juvenile Justice populations

Exclusionary Criteria

- Youth living independently or youth for whom a primary caregiver committed to longer-term care of the youth cannot be identified
- Youth whose psychiatric needs are the primary reason leading to referral, or who have severe and serious psychiatric issues
- Actively suicidal and/or homicidal
- Treatment for sexually offending behavior is primary
- Youth with moderate to severe difficulties with social communication, social interaction, and repetitive behaviors, which may be captured by a diagnosis on the autism spectrum
- Youth for whom an intellectual disability is the only influence, or is the most powerful, direct contributor to the youth's referral behaviors

Authorized for 5 months up to 150 days. Unit of service is a daily rate. MST is a stand alone treatment that cannot be combined with other interventions.

Parent-Child Interaction Therapy (PCIT)

Parent training/coaching in a clinic setting for young children with behavioral problems

Referral Criteria

- Ages 2.5-7
- Children experiencing relational problems with caregivers
- Refusal/Defiance of adult requests
- Difficulty in childcare/school settings
- Easy loss of temper
- Frequent aggression/fights
- Destruction of belongings/property
- Difficulty staying seated, playing quietly, or taking turns
- Behavior can be the result of trauma or other mental health concerns
- At least one caregiver willing to attend weekly sessions regularly and with ability to practice at least 3 times weekly with the child

Exclusionary Criteria

- Caregiver IQ <75

Authorizations are for 25 hours over 5 months. Unit of service is hourly.

Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)

Treatment for youth who are impacted by trauma and their families offered in a variety of settings

Referral Criteria

- Ages 3-21
- Youth who have experienced trauma such as:
 - Sexual Abuse
 - Domestic Violence
 - Traumatic Grief
 - Disasters
 - Terrorism
- Multiple or Complex Trauma
- Response to trauma includes symptoms such as:
 - Depression
 - Anxiety
 - Externalizing Behavior Problems
 - Relationship and Attachment
 - Sexually Reactive Behavior
 - School Problems
 - Cognitive Problems
- Participation of a non-offending parent or caregiver

Exclusionary Criteria

- Youth who are acutely suicidal or homicidal

Authorized as an outpatient therapy service; typically, 5X/month for up to 6 months. Unit of service is hourly.

* While FFT and MST serve overlapping populations, FFT may be preferred when the youth's behaviors are believed to be rooted in family issues (high conflict, histories of abuse/neglect) or psychiatric concerns. MST may be preferred when the youth's behaviors are believed to be driven primarily by peer, school, or community influences, and are more chronic or severe in nature.