

Fairfax-Falls Church Children's Services Act Community Policy & Management Team (CPMT)

FAIRFAX-FALLS CHURCH CHILDREN'S SERVICES for AT-RISK CHILDREN, YOUTH & FAMILIES



June 28, 2024 Community Policy and Management Team (CPMT)

Agenda

1:00 p.m. -- Convene meeting ~

- 1. MINUTES: Approve minutes of May 17, 2024 meeting
- 2. ITEMS: Administrative Items
 - Item A − 1: Parental Contribution Scale RevisionItem A − 2: Establish Audit Steering Committee
- CSA Contract Items

Item C - 1: Monthly Out of State Placement Report

- CSA Information Items
 - Item I 1: Public Comment OCS policies
 - Item I 2: Implementation of IMS, the new information system for CSA
 - Item I 3: Budget Report
 - Item I 4: CSA Coordinator Report
- NOVACO Private Provider Items
- CPMT Parent Representative Items
- Cities of Fairfax and Falls Church Items
- Public Comment

3:00 p.m. - Adjourn



FAIRFAX-FALLS CHURCH CHILDREN'S SERVICES for AT-RISK CHILDREN, YOUTH & FAMILIES

May 31, 2024 Community Policy and Management Team (CPMT) Location

Meeting Minutes

<u>Attendees</u>: Lesley Abashian (office), Michael Axler (home), Michael Becketts (office), Dana Jones (home), Joe Klemmer (home), Chris Leonard (office), Dawn Schaefer (home), Rebecca Sharp (home), Matt Thompson (home), Lloyd Tucker (office), Daryl Washington (home)

Absent: Annie Henderson, Richard Leichtweis, Gloria Addo-Ayensu, Terri Edmunds-Heard,

HMF Attendees: Peter Steinberg,

<u>CSA Management Team Attendees:</u> Amy Vyas, Jessica Jackson, Kamonya Omatete, Kelly Conn-Reda, Patti Conway, LaVurne Williams,

<u>Stakeholders and CSA Program Staff Present:</u> Janet Bessmer, Jamie Mysorewala, Jeanne Veraska, Sarah Young, Laura Haggerty-Lacalle, Samira Hotochin, Lisa Morton,

FOIA Related Motions:

I move that each member's voice may be adequately heard by each other member of this CPMT. Motion made by Michael Becketts; second by Lesley Abashian; all members agree, motion carries.

Second, having established that each member's voice may be heard by every other member, we must next establish the nature of the emergency that compels these emergency procedures, the fact that we are meeting electronically, what type of electronic communication is being used, and how we have arranged for public access to this meeting.

State of Emergency caused by the COVID-19 pandemic makes it unsafe for this CPMT to physically assemble and unsafe for the public to physically attend any such meeting, and that as such, FOIA's usual procedures, which require the physical assembly of this CPMT and the physical presence of the public, cannot be implemented safely or practically. I further move that this CPMT may conduct this meeting electronically through a dedicated auto conferencing line, and that the public may access this meeting by calling: 571-429-5982; participant access code: 383 428 43#. It is so moved. *Motion made by Michael Becketts; seconded by Rebecca Sharp; all members agree, motion carries*.

Finally, it is next required that all the matters addressed on today's are statutorily required or necessary to continue operations and the discharge of the CPMT's lawful purposes, duties, and responsibilities. *Motion made by Michael Becketts; Rebecca Sharp; all members agree, motion carries.*

1. **MINUTES:** Approve minutes of April 26, 2024. Motion to approve made by Joe Klemmer; seconded by Daryl Washington; all members agree, motion carries.

2. **ITEMS**:

Administrative Items:

Item A – 1: Approve Revised All-Virtual and Remote Participation Policies – Presented by Janet Bessmer. CPMT members were asked to approved changes to CPMT public meeting policy to reflect the General Assembly changes to the VFOIA. Effective July 1, 2024 half of the CPMT meetings may be held virtually, however virtual meetings cannot be held consecutively. Members must be on camera to count towards the quorum. Remote participation is acceptable for members that meet specific criteria, and their participation will be counted towards the quorum. Joe Klemmer asked if a member steps away from the camera for a moment would they be counted towards the vote? Chris Leonard responded it would be similar to being in person and stepping out for a moment; while you are not present, you are not counted in the quorum. Motion to approve made by Daryl Washington; seconded by Michael Becketts; all members agree, motion carries.

Item A – 2: - Approve FY 25 Calendar of CPMT Meetings – Presented by Janet Bessmer. Request that CPMT members approve the FY25 schedule of meetings. Daryl Washington asked if we need to assign staff authority to approve certain items if we are having less meetings throughout the year? Janet Bessmer and Michael Becketts responded that the new schedule should not impact any time sensitive items. Motion to approve made by Daryl Washington; seconded by Matt Thompson; all members agree, motion carries.

Item A – 3: Nomination of New Private Provider Representative – NOVACO has nominated Kelley Willis, Executive Director of For Children's Sake, to be appointed as a private provider representative on the CPMT. Request that CPMT approve this nomination to the Board of Supervisors. *Motion to approve made by Michael Becketts; seconded* by Joe Klemmer; *all members agree, motion carries.*

• CSA CONTRACT ITEMS:

Item C – 1: Out of State Residential Child Specific Contract Activity – Presented by Amy Vyas. Since the last meeting one new Child Specific Contract was approved by CSA Management Team. To date, there are a total of six Child Specific Contracts for youth in out of state facilities.

CSA INFORMATION ITEMS:

Item I – 1: Review OCS Annual Risk Assessment – Presented by Janet Bessmer. A Summary of CSA Management Team Responses to the Annual Risk Survey were shared with members.

Item I – 2: Budget Report – Presented by Patti Conway. Summary of March expenditures and budget were reviewed as well as a status update on FY24 budge to date. Lesley Abashian commented that some of the increase is due to non-Medicaid out of state facilities. Are we doing anything to acknowledge this? Michael Becketts responded that this is a known issue throughout the state/country. How should we advocate for change and who should we report this issue to? Lesley Abashian stated it may be beneficial to officially report the data. Michael Becketts commented that the new law pertaining to foster care could impact the

budget.

Item I – 3: CSA Coordinator's Report – Presented by Janet Bessmer. Review of changes to OCS policy of fiscal responsibility for transfer of IEP services. Updates on the new program information system (IMS) and OCS annual reports were shared. Review of current tasks for year-end such as contract renewals/rated increases, case management capacity, UR hiring.

- NOVACO Private Provider Items none
- **CPMT Parent Representative Items –** none
- Cities of Fairfax and Falls Church Items none
- Public Comment none
- Staff Comment Daryl Washington shared information regarding upcoming CSB events.

Next Meeting: June 28, 2024, 1:00 – 3:00pm (Pennino Room 200/206)

Adjourn 2:00pm: Motion to adjourn made by Dawn Schaefer; seconded by Joe Klemmer; all members agree, motion carries.

MEMO TO THE CPMT

6/28/2024

Administrative Item A - 1: Revised Parental Co-Pay Scale – Follow up from February 23, 2024

ISSUE:

The CSA parental contribution (co-pay) scale was last updated in 2017. Due to changes in the economic conditions in the County, CSA program staff developed a new co-payment scale. The new scale increases the income at which a family must pay a co-pay and minimizes the percentage increases or "jumps" between tiers. In February 2024, CPMT members provided additional guidance to compare the scale to the current SACC schedule and determine if a 12-tier co-pay scale may be less burdensome for parents while assessing impact on revenue. On average, the CSA program collects about \$200,00 in co-payments annually. Of this, 46% remains locally as on offset credit while the remaining money goes to the state.

BACKGROUND:

Update from February 2024

CSA staff analyzed additional co-pay scales and research to identify approaches that consider equity for families, revenue, and administrative burden. Scales reviewed were: (1) SACC scale and (2) a modified scale based on the initial proposal, but with fewer tiers than the original proposal, (3) United for ALICE, and (4) a scale that includes no parental co-pay for community-based services and a parental co-pay assessed for residential services.

SACC Scale - Unlike SACC, CSA is not dependent on parent fees for revenue to operate the program. SACC families with incomes below \$132,500 pay on a sliding fee scale, while all families with incomes above \$132,500 pay the same amount. While SACC is a defined benefit, CSA is varied in terms of the services and costs of a specific-child's individualized services in each month. The SACC scale is helpful in that it contains fewer tiers for families and is easier to administer. However, because there is no differentiation in what families who earn greater than \$132,500 pay, it will not address the needs of families who also have complex needs above that threshold. Therefore, CSA staff do not recommend using the SACC co-pay scale.

12 Tier Scale - An additional co-pay scale with 12 tiers was developed. This scale was developed with similar goals as the initial approach, which is linked to Area Median Income (AMI), while also collapsing the tiers into fewer categories. The household income at which a co-pay would be assessed is \$57,200. This approach can be easier for families to understand and does not significantly change the revenue collection targets. This scale is clear for families, with smoother jumps between tiers, and lower impact on revenue. This is the most similar approach to the current co-pay scale, and the administrative burden is similar to the current level of effort.

United for ALICE – ALICE, which stands for Asset Limited, Income Constrained, Employed, is a national effort, supported by United Way across many states, to highlight and address the needs of



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working families who encounter challenges paying for a household survival budget (HSB). The HSB includes basic costs of housing, childcare, food, transportation, health care, and technology. This approach accounts for states and counties with higher cost of living and recognizes the key role of the workers who keep our community running. A scale was developed using the Virginia ALICE household survival budget. The household income threshold is \$100,000. The proposed CSA copay scale has a total of nine income bands above the starting threshold, which are broader than other models. This scale would have an administrative burden that is like the current scale and could be updated when the ALICE scale is updated.

No Co-Pay for Community Based Interventions, Co-Pay for Residential – This approach prioritizes community-based service delivery for families, while assessing a small portion of the overall cost of care in a residential setting that provides 24/7 care. This model would result in the highest reduction in revenue and would have the lowest administrative burden.

| | Table 1 – Options for CSA Co-Pay Scale | | | | | | | | |
|--------|---|---------------------------------------|--|----------|---------------------|--|--|--|--|
| Option | Type of Scale | Income Level Where Scale Begins | ere Scale Impact on Burden ns \$200K Revenue | | Equity for Families | | | | |
| #1 | 12 Tier – AMI | \$57,200 | Low | Moderate | Neutral | | | | |
| #2 | United for ALICE - \$100K (Fairfax) | \$100,000 | Moderate | Moderate | Positive | | | | |
| #3 | Co-Pay for Residential Only | \$70,000 | High | Low | Positive | | | | |

Historically, the co-pay revenue has about \$200,000, prior to COVID. Post COVID, revenue has been slightly lower.

| Table 2 – Co-pay revenue billed and collected | | | | | | | | |
|---|-----------|-----------|-----------|--|--|--|--|--|
| FY 22 FY 23 FY 24 – July-Feb. | | | | | | | | |
| Total Amount Billed | \$211,892 | \$177,884 | \$92,087 | | | | | |
| Total Amount | \$196,627 | \$162,136 | \$104,560 | | | | | |
| Collected | | | | | | | | |

RECOMMENDATION:

That the CPMT approves the United for ALICE - \$100K Co-Pay scale for future implementation by CSA.

ATTACHMENT:

See attached co-pay scales.

INTERNAL CONTROL IMPACT:

None

FISCAL IMPACT:

Because OCS applies an offset credit of 46% to all co-payment revenue collected, it is anticipated that the overall impact would be a decrease of no more than \$100,000.

STAFF:

Janet E. Bessmer Laura Haggerty-Lacalle

CSA Parental Contribution Scale - ALICE - \$100K

| Tier | Adjusted Household Income | ousehold Income Community-Based Contribution | |
|------|---------------------------|--|---------------|
| Α | \$0 - \$99,999 | \$0 | \$0 |
| В | \$100,000 - \$149,999 | \$75 | \$150 |
| С | \$150,000 - \$199,999 | \$115 | \$230 |
| D | \$200,000 - \$249,999 | \$170 | \$340 |
| E | \$250,000 - \$299,999 | \$250 | \$500 |
| F | \$300,000 - \$349,999 | \$350 | \$700 |
| G | \$350,000 - \$399,000 | \$500 | \$1,000 |
| Н | \$400,000 and above | \$750 | \$1,500 |
| I | \$400,000 - \$449,999 | 2% of AHI/12 | 4% of AHI/12 |
| J | \$450,000 and Above | 3% of AHI/12 | 5% of AHI /12 |

Notes on ALICE - \$100K Scale

Developed in 2024 using 2021 ALICE Household Survival Budget (HSB) HSB rounded to \$100,000 for a family of four

HSB cost per child ~ \$15,000, so that is used for child credit

\$100,000 used for baseline to account for inflation and NOVA costs

MEMO TO THE CPMT

June 28, 2024

Administrative Item A - 2: Establish Audit Steering Committee

ISSUE:

That the CSA program is scheduled for an OCS Triennial Audit in FY 25 and a subcommittee of members is needed to oversee the process.

BACKGROUND:

In past audits, the CPMT has established a subcommittee of members to oversee the audit process and certify the results. The steering committee is responsible for providing input into the planning process for completing the audit, meeting with the auditors for the entry and exit interview and overseeing any corrective action plan in response to findings.

The CPMT can determine the appropriate membership. Members of the steering committee might include a representative from the schools, the Community Services Board, the fiscal agent, Department of Family Services as the administrative agency, a parent representative, a provider representative and representative from one of the Cities. Staff who support the CSA program's administrative functions such as DFS finance and budget as well as DPMM shall work closely with the steering committee and CSA program staff throughout the audit process. The CSA Management Team members also provide significant input regarding the functioning of the program for the Self-Assessment Workbook.

In compliance with the CPMT Bylaws, all meetings of CPMT committees shall comply with the notice and other requirements of the VFOIA. To the extent practicable, any such committee shall be composed of at least four members. Committee meetings may be held at the call of the Chairperson or at the request of two members, with notice to all members. Recent policies permit 50% of meetings to be held virtually. It is unclear how many meetings will be needed. CSA will be requesting that the actual audit period be in Quarter 3 from January to March if OCS can accommodate.

RECOMMENDATION:

That the CPMT establish the FY 25 Audit Steering Committee by identifying appropriate members to serve.

ATTACHMENT:

Example of Steering Committee structuring memo

INTERNAL CONTROL IMPACT:

The steering committee supports internal controls by overseeing the details of program operations and verifying compliance with state and local requirements.

FISCAL IMPACT:

None.

STAFF:

Janet Bessmer, CSA



Fairfax-Falls Church Children's Services Act



Steering Committee Agenda

01/12/2021

Attendees

CPMT Members: Lesley Abashian, Michael Becketts, Chris Leonard, Jane Strong,

CSA Staff: Janet Bessmer, Patricia Arriaza, Samira Hotochin

Agenda

- Role of Steering Committee
- Proposed outline/timeline of the audit process
 - Meeting 1: Planning Self-Assessment, Overview of Audit Requirements, Establishing CPMT expectations for staff/tasks
 - Meeting 2: Interview with Auditors if needed OR update on progress, internal findings Date: TBD (mid-February)
 - Meeting 3: Exit Interview with Auditors, Review of Preliminary Report Date: TBD (March)
- Review of CSA Audit Self-Assessment
 - Governance
 - Risk Management
 - Internal Control
 - Training
 - Compliance (previous findings)
 - Ouality Improvement
 - Certification
- Guidance from steering committee

CPMT Contract Information Item C-1: Out of State Residential Child Specific Contract Activity

<u>ISSUE:</u> That the CPMT receive regular reports on the CSA Management Team approvals of placements in out of state residential facilities. Since the last CPMT meeting, DPMM processed four (4) Child Specific Contract Request for out of state residential Services.

| Date Received by DPMM | Provider | Location | Medicaid Participating/ Single Case Agreement | Requesting Department | Barrier to Contract Pool of Providers | CSA MT Approval Date |
|-----------------------------|---------------------------|---------------------|---|--------------------------|---|----------------------------|
| 5/29/2024 | The Woods | Langhome, PA | No | FCPS | Prader-Willi Syndrome with severe aggression and other complicating medical issues. | 6/6/2024 |
| 6/3/2024 | Huntington Creek | Schickshinny, PA | No | JDRDC | Opiate involved SUD needing detox | 6/4/2024 |
| 6/6/2024 | Huntington Creek | Schickshinny, PA | No | JDRDC | Opiate involved SUD needing detox | 6/6/2024 |
| 6/12/2024 | Sandstone- Crownsville | Crownsville, MD | No | CSB | Opiate involved SUD | 6/13/2024 |

BACKGROUND:

As of January 29, 2021, the CPMT has delegated authority for the approval of out of state residential placements for youth to the CSA Management Team. For each month in which a contract is approved, a report of the contract activity is required by the CPMT to identify both new child specific contract placements and any existing child specific contracts that remain active. In the consideration of each contract placement request, all clinically appropriate Medicaid providers located in Virginia under Agreement for Purchase of Services (APOS) with the County were considered and were determined not appropriate due to the individual needs of the youth.

CURRENT SITUATION:

Since the last CPMT, there was four (4) new child specific contract approved by the CSA Management Team as noted above. In addition to the newly approved Child Specific Contract, there were a total of seven (7) active Child Specific Contracts for youth with out of state facilities as detailed below:

| Provider | Location | Case Managing Agency | Barrier to Contract Pool of Providers | Date of Approval ¹ |
|--|------------------------------|----------------------------|--|-------------------------------|
| Benedictine School | Maryland | FCPS-MAS | IEP for Residential School Setting | 1/24/2020 (CPMT) |
| Maplebrook School Armenia, New York | | FCPS-MAS | Parental Placement of student with IEP for Private Day School Setting. Contract for Education costs only. | 9/09/2021 |
| Latham Centers | Brewster, Massachusetts | FCPS-MAS | Prader-Willi Syndrome with severe aggression and other complicating medical issues. | 9/20/2021 |
| Millcreek of Pontotoc—Willow Springs Group Home | Blue Springs, Mississippi | DFS-FC&A | Borderline IQ, run risk, self-injurious | 8/7/2023 |
| Stevens Programs | Swansea, MA | JDRDC | Youth with Problematic Sexual Behavior | 10/17/2023 |
| Sandy Pines Residential Treatment Center | Jupiter, FL | DFS-FC&A | Assaultive & runaway behavior; victim of sexual exploitation. | 4/18/2024 |
| Benedictine School | Ridgely, MD | CSB | Parental Placement of student with IEP for Intellectual & developmental disorder, Down Syndrome, Autism and nonverbal with aggression towards self and others. | 5/7/2024 |

ATTACHMENT: None

STAFF:

Barbara Martinez, DPMM

1 Child Specific Contracts approved by the CPMT, prior to the delegation to the CSA Management Team, are noted accordingly.

MEMO TO THE CPMT

June 28, 2024

Information Item I- 1: Public Comment on Proposed OCS Policy Changes

ISSUE:

That OCS has several policies available for public comment. SEC requested additional information from localities.

BACKGROUND:

<u>Policy 1</u>: At its meeting on June 13, 2024, the State Executive Council for Children's Services (SEC) approved the initial step in a proposed intent to develop policy for the following policy:

 SEC Policy 4.3 "Carve Out" of Allocation for Development of New/Expanded Services (Adopted April 30, 2013)

This is the first step (Notice Stage) in the process as described under SEC Policy 2.4. After this initial 45-day period, the SEC will determine whether to move forward with a specific policy proposal and additional public comment will be sought. Details on the Notice Stage and the proposed policy are attached here and can also be found in the Public Policy Comments Forum on the CSA website at www.csa.virginia.gov.

Comments will be received through the Public Policy Comment Form or via email to csa.office@csa.virginia.gov or via US mail or other forms of delivery through 5:00 p.m. on **August 1, 2024**.

Policy 2: At its meeting on June 13, 2024, the SEC also approved the following policy for a 60-day public comment period:

SEC Policy 4.5.2 Time Frames Regarding CSA Pool Fund Reimbursement

Comments will be received through the Public Policy Comment Form or via email to csa.office@csa.virginia.gov or via US mail or other forms of delivery through 5:00 p.m. on **August 16, 2024.**

<u>Analysis from program</u>: Policy 1 was developed in past years as an opportunity for localities to partner in the development of new programs by using up to \$100,000 for start up costs for new programs. The General Assembly would need to appropriate up to \$2 million for this purpose. This provision has never been funded and OCS would like to eliminate the carve out policy.

Policy 2 was reviewed by the CPMT previously. Public comments provided by VML offered additional language for "good cause" and particularly outlined situations where invoices are delayed past Sept 30 because of insurance or Medicaid submissions. The SEC was interested in whether localities have received delayed invoices and how often this occurs. Initial feedback is that managing the year-end deadline is the responsibility of the locality as outlined in their contract.

CSA suggests CPMT offer public comment supporting the proposal provided by VML.

ATTACHMENT:

Notice of Intent to Develop Policy 4.3 Policy 4.3 Notice of Intent to Develop Policy 4.5.2 Policy 4.5.2 Public Comment

STAFF:

Janet Bessmer, CSA

State Executive Council (SEC) for Children's Services

Notice of Intent to Develop/Revise Policy

Approved for Public Comment by the SEC: June 13, 2024 **Public Comment Period Ends:** 5:00 PM, August 1, 2024

Number and Name of Proposed/Revised Policy:

Policy 4.3 "Carve Out" of Allocation for Development of New/Expanded Services (Adopted April 30, 2013)

Basis and Purpose of the Proposed/Revised Policy:

The authority for the SEC to develop a policy for public participation falls is provided for in §2.2-2648.D.9. of the *Code of Virginia* which states that the State Executive Council for Children's Services shall: "Provide administrative support and fiscal incentives for the establishment and operation of local comprehensive service systems."

The proposed repeal of Policy 4.3 removes a policy that has never been utilized, as the required funds have not been appropriated to allow for the activities addressed in this policy. The policy as it currently stands has no applicability. Additionally, Executive Order 19 calls for a 25% reduction in regulatory requirements. In examining policies that are discretionary and not currently relevant, the SEC is fulfilling the requirements of the Executive Order and acting in the spirit of the guidance set forth by the Office of Regulatory Management.

Summary of the Proposed/Revised Policy:

Policy 4.3 outlines a process where localities can utilize a portion of their state and local pool fund allocations to defray one-time program start-up costs for new or expanded CSA services which are designed to meet the needs of children and families. Because there is a potential fiscal impact of \$2,000,000, the utilization of these funds is dependent upon the appropriation of the necessary funds. To date, there has not been any appropriation of these funds; therefore, the policy should be considered for repeal.

Preliminary Fiscal Impact Analysis:

Repeal of this policy has no fiscal impact as no funding has been appropriated for its implementation.

4.3 "CARVE-OUT" OF ALLOCATION FOR DEVELOPMENT OF NEW/EXPANDED SERVICES (ADOPTED APRIL 30, 2013)

In any 12 month period two or more localities may submit a proposal to allocate ('carve out') a portion of their state and local pool fund allocations to defray one time program start up costs for new or expanded CSA services which are designed to meet the needs of children and families and to maintain children in their home community. The allocation shall not exceed, per jurisdiction, \$100,000 or 5% of their allocation in the fiscal year of application, whichever is smaller. Not more than \$2,000,000 in state general funds may be used for this purpose.

Programs for which these funds may be applied must be designed to:

- (a) provide CSA services for which a demonstrated need exists in the locality, based on assessment using the Service Gap Survey distributed by the OCS and align with the goals of the Commonwealth; and
- (b) become financially self sustaining beyond the start up phase. Services designed to be supported through "fee for service" arrangements may be considered financially self-sustaining.

The proposal for use of funds shall be submitted to and approved by the OCS and will include, but not be limited to:

- (a) description of the service,
- (b) support for the need,
- (c) cost assessment,
- (d) evaluation of public/private collaborations,
- (e) information related to financial sustainability of the program, and
- (f) expected outcomes and mechanism for providing program evaluation.

All fiscal accountability requirements of CSA shall be applicable to use of funds.

<u>Fiscal Impact</u>: Implementation of this policy has the potential fiscal impact of \$2,000,000. Implementation of the policy shall therefore be dependent upon appropriation of necessary funds.

State Executive Council (SEC) for Children's Services

Notice of Intent to Develop/Revise Policy

Approved for Public Comment by the SEC: June 13, 2024 **Public Comment Period Ends:** 5:00 PM, August 16, 2024

Number and Name of Proposed/Revised Policy:

Policy 4.5.2 – Time Frames Regarding CSA Pool Fund Reimbursement

Basis and Purpose of the Proposed/Revised Policy:

Section 2.2-2648.D.3 of the *Code of Virginia* requires the SEC to: "Provide for the establishment of interagency programmatic and fiscal policies developed by the Office of Children's Services, which support the purposes of the Children's Services Act (§ 2.2-5200 et seq.), through the promulgation of regulations by the participating state boards or by administrative action, as appropriate."

Additionally, Section 2.2-2648.D.19 of the Code of Virginia requires the State Executive Council for Children's Services (SEC) to "Establish and oversee the operation of an informal review and negotiation process with the Director of the Office of Children's Services and a formal dispute resolution procedure before the State Executive Council, which include formal notice and an appeals process, should the Director or Council find, upon a formal written finding, that a CPMT failed to comply with any provision of this Act. 'Formal notice' means the Director or Council provides a letter of notification, which communicates the Director's or the Council's finding, explains the effect of the finding, and describes the appeal process to the chief administrative officer of the local government with a copy to the chair of the CPMT. The dispute resolution procedure shall also include provisions for remediation by the CPMT that shall include a plan of correction recommended by the Council and submitted to the CPMT. If the Council denies reimbursement from the state pool of funds, the Council and the locality shall develop a plan of repayment."

The proposed changes to the existing policy 4.5.2 align the policy with the standard policy format adopted by the State Executive Council in September 2022 by adding sections 4.5.2.1 (Purpose), 4.5.2.2 (Authority), 4.5.2.3 (Definitions),

4.5.2.4(Pool Fund Reimbursements), and 4.5.2.5 (Policy Review), as well as footers to denote dates of Adoption, Effect, Revision, and page numbers.

The proposed changes include modifications to existing content that designate timeframes for final claims for reimbursement, the process for requesting final reimbursement submission waivers, and allow the OCS Executive Director to grant or decline waiver requests. The revised policy also requires localities to develop procedures related to regular reconciliation of local expenditures and pool fund distribution and the temporary unavailability of report preparers and/or fiscal agents.

Summary of the Proposed Policy:

Policy 4.5.2 provides guidance to local Children's Services Act (CSA) programs regarding the fiscal process related to pool fund reimbursement.

Preliminary Fiscal Impact Analysis:

There is no anticipated fiscal impact of the revisions to this policy on either the Commonwealth or local governments.

POLICY 4.5 FISCAL PROCEDURES

4.5.2 Times Frames Regarding CSA Pool Fund Reimbursement

4.5.2.1 *Purpose*

To provide guidance to local Children's Services Act (CSA) programs regarding the fiscal process related to pool fund reimbursement.

4.5.2.2 Authority

- A. <u>2.2-2648.D.3</u> of the Code of Virginia requires the State Executive Council for Children's Services (SEC) to "Provide for the establishment of interagency programmatic and fiscal policies developed by the Office of Children's Services, which support the purposes of the Children's Services Act (§ 2.2-5200 et seq.), through the promulgation of regulations by the participating state boards or by administrative action, as appropriate."
- B. Section <u>2.2-2648.D.19</u> of the Code of Virginia requires the State Executive Council for Children's Services (SEC) to "Establish and oversee the operation of an informal review and negotiation process with the Director of the Office of Children's Services and a formal dispute resolution procedure before the State Executive Council, which include formal notice and an appeals process, should the Director or Council find, upon a formal written finding, that a CPMT failed to comply with any provision of this Act. 'Formal notice' means the Director or Council provides a letter of notification, which communicates the Director's or the Council's finding, explains the effect of the finding, and describes the appeal process to the chief administrative officer of the local government with a copy to the chair of the CPMT. The dispute resolution procedure shall also include provisions for remediation by the CPMT, which shall include a plan of correction recommended by the Council and submitted to the CPMT. If the Council denies reimbursement from the state pool of funds, the Council and the locality shall develop a plan of repayment."

Adopted: Jume 30, 1995 **Effective:** June 30, 1995

Revised: 1996, 1997, 1998, 1999, 2000, 2009, 2012, 2024

4.5.2.3 Definitions

"Final Year-End Report" means the last request for reimbursement submitted by a locality to the OCS for the previous fiscal year.

"Fiscal Agent" means the individual designated by the locality as responsible for the final approval and submission of CSA financial documents to the Office of Children's Services.¹

"Fiscal Year" means the period that begins on the first day of July through the last day of June of the succeeding year.

"Good Cause" means a substantial reason or legal justification for failing to appear, act, or respond to an action. The burden of establishing good cause rests on the locality requesting a waiver from the September 30 final year-end report.

Good cause may include:

- A state of emergency declared by the President, Governor, or appropriate local authority that results in the closure of local government offices on September 30 or that otherwise limits a locality's ability to submit reimbursement requests before the September 30 deadline.
- A documented failure of local information technology systems that prevents submission of reimbursement requests. Such failures occurring before September 30 should be communicated to the Office of Children's Services as soon as practicable upon discovery.
- A failure of the OCS system of record for submitting reimbursement requests.
- o Instances where provider invoices to localities are delayed pending resolution of appeals of Medicaid denials of payment.

• Good cause does not include:

- Failure to adopt, implement, and carry out local procedures to reconcile actual CSA reimbursements against expected reimbursements using local general ledgers, Pool Fund Distribution History, and the Pool Transaction History reports on the CSA website (<u>www.csa.virginia.gov</u>).
- Failure of the local fiscal agent to approve reimbursements submitted by the local report preparer.
- Failure to obtain and/or process invoices received from service providers for services provided through June 30 of the previous fiscal year. Fiscal years are divided into four quarters (July 1 - September 30; October 1 - December 31; January 1 - March 30; and April 1 - June 30).

Adopted: Jume 30, 1995 **Effective:** June 30, 1995

¹ The OCS information technology systems allow only a single individual to serve as the fiscal agent at any given time. Localities should contact OCS if the currently designated local CSA fiscal agent cannot complete approval of reimbursement requests. OCS will assist the locality in establishing an alternate fiscal agent.

"Report Preparer" means the individual designated by the locality to process local CSA expenditures such that they may be submitted to the Fiscal Agent for approval and submission to the Office of Children's Services.²

"Waiver" means an extension of the time frame in which a locality may submit the final yearend report.

4.5.2.4 **Pool Fund Reimbursements**

- a)—Final claims for reimbursements for prior year payments will not be accepted after the first quarter of the next fiscal year. (Adopted June 30, 1995)
- b) With the exception of the final year-end report referenced above, request for reimbursement of local pool expenditures must be submitted no later than thirty (30) days after the close of the quarter in which the expenditure was paid. Localities may continue to report as often as monthly, but must report at least every quarter. A report should be submitted at the end of the quarter even if it indicates no expenditures were made during that quarter. The state fiscal agent will be monitoring local compliance with this requirement and will advise local administrative officials if there is noncompliance. (Adopted June 30, 1995)
- c) Effective for the quarter ending September 30, 1995, localities that have not submitted their Quarterly Services Utilization report will have their pool reimbursements held in abeyance until the quarterly report is submitted. A notice will be mailed to the local fiscal agent advising that the reimbursement request is considered incomplete until the past due statistical data is received. The quarterly report will be mailed to the same address as the fiscal reports beginning with the September 30 report due on or before October 15. The CSA Evaluation staff will be sending each locality a revised minimal report format including a submission timetable and at that time will again remind localities of the fiscal impact of not submitting the statistical data. (Adopted June 30, 1995)
- d) Effective April 30, 1999 a locality may request a waiver to the September 30 final year-end report requirement, either by written request for an extension to the OCS prior to the September 30 cutoff date, or post September 30, only if local governments demonstrate mitigating circumstance beyond their control. (Adopted April 30, 1999)
- e) Expenditures and Refunds are reported according to the following expenditure reporting categories:
 - Foster Care IV-E children in Licensed Residential Congregate Care; pool expenditures for costs not covered by IV-E (i.e., non room-and-board)
 - Foster Care all others in Licensed Residential Congregate Care
 - Residential Congregate Care CSA Parental Agreements; DSS Noncustodial Agreements
 - Non-Mandated Services/Residential/Congregate
 - Educational Services Congregate Care

Adopted: Jume 30, 1995 Effective: June 30, 1995

² Localities should contact OCS if the currently designated local CSA report preparer(s) is/are unable to prepare reimbursement requests. OCS will assist the locality in establishing additional report preparers.

- Treatment Foster Care IV-E
- Treatment Foster Care
- Treatment Foster Care CSA Parental Agreements; DSS Noncustodial Agreements
- Specialized Foster Care IV-E ; Community Based Services
- Specialized Foster Care
- Family Foster Care IV-E ; Community Based Services
- Family Foster Care Maintenance only
- Family Foster Care Children receiving maintenance and basic activities payments; independent living Stipend/Arrangements
- Community Based Services
- Community Transition Services Direct Family Services to Transition from Residential to Community
- Special Education Private Day Placement
- Wraparound services for students with disabilities
- Psychiatric Hospitals/Crisis Stabilization Units
- Non-Mandated Services/Community-Based

(Adopted 1994, Revised 1995, 1996, 1997, 1998, 1999, 2000, 2009, 2012)

Adopted: Jume 30, 1995 **Effective**: June 30, 1995

- f) Each Pool Fund Reimbursement Request requires certification of compliance with CSA requirements per the following: "The expenditures and refunds reported herein were incurred in accordance with provisions of the CSA, and have not been reported on a previous claim. Documentation is maintained to support the expenditure and refund amounts reported, and to demonstrate that each expenditure and refund was made on behalf of a specific child (or list of specific children) and complies with the CSA Manual, COV and Appropriation Act requirements including utilization management and FAPT criteria." (Adopted 1995, Revised 1999)
 - A. The Office of Children's Services will not accept final claims for reimbursements for prior year payments after September 30 of the next fiscal year.
 - B. Localities may submit requests for reimbursement to the Office of Children's Services monthly but must report at least every quarter. A reimbursement report shall be generated and submitted for each calendar month, even if it indicates no expenditures were made during that month.
 - C. A locality may request a waiver to the September 30 final year-end report requirement specified in 4.5.2.4.A. by:
 - 1. Submitting a written request to the OCS Executive Director before or after the September 30 cutoff date.
 - 2. The OCS Executive Director will grant or decline a waiver based on their determination that "good cause" exists.
 - 3. If a locality does not agree with the OCS Executive Director's determination of "good cause," they may request an appeal of the decision through the State Executive Council's dispute resolution policy (Policy 3.4).
 - D. Localities shall adopt and implement procedures to reconcile actual CSA reimbursements against expected reimbursements using local general ledgers and the Pool Fund Distribution History, the Pool Transaction History, and other available reports on the CSA website (www.csa.virginia.gov).
 - E. Localities shall adopt procedures to address position vacancies, including temporary unavailability, in the roles of Report Preparer and/or Fiscal Agent that impact the timely submission of the CSA reimbursement requests.

4.5.2.5 Policy Review

This policy will be subject to periodic review by the State Executive Council for Children's Services.

Adopted: June 30, 1995 **Effective**: June 30, 1995

Revised: 1996, 1997, 1998, 1999, 2000, 2009, 2012, 2024

Public Comments and Responses – Proposed Revisions to State Executive Council for Children's Services Policy 4.5.2 Time Frames Regarding CSA Pool Fund Reimbursement

| # | Commenter | Summary of Comments | OCS Response |
|---|--|--|---|
| 1 | Janet Bessmer (Fairfax/Falls Church CSA) | Requested the addition of "but is not limited to" into the definition of good cause so it reads: "Good cause may include but is not limited to." | 1. Adding this language to the policy creates an overly broad landscape for the interpretation of good cause by the Executive Director of OCS. More specific language within this policy will allow for more consistent and precise application of the policy. Instances beyond those outlined in the policy are best heard by the State Executive Council for final determination. |
| 2 | Dean Lynch (Virginia Association of Counties) | Requested the inclusion of a local declaration of emergency in addition to a state of emergency declared by the Governor or the President in the "good cause" examples. | 1. The wording of the first example of "good cause" was changed to read "A state of emergency declared by the President, Governor, or appropriate local authority that results in the closure of local government offices on September 30 or that otherwise limits a locality's ability to submit reimbursement requests before the September 30 deadline." |
| | | 2. Requested deletion of the second sub-bullet of the "good cause" examples, which read, "Such failures occurring before September 30 must be communicated to the Office of Children's Services at the time of their occurrence." | 2. The wording of the second example of "good cause" was changed to read "A documented failure of local information technology systems that prevents submission of reimbursement requests. Such failures occurring before September 30 should be communicated to the Office of Children's Services as soon as practicable upon discovery." |
| | | 3. Requested adding an additional example of "good cause" to include "Circumstances beyond a locality's control, to include an inability to receive invoices from service providers despite a good-faith effort to pursue and obtain such invoices." | 3. A fourth bullet was added to the examples of "good cause" that reads, "Instances where provider invoices to localities are delayed pending resolution of appeals of Medicaid denials of payment." This change was specific so as not to allow all instances of tardy invoices, which should be dealt with through the locality's contract with the provider. |
| | | | |

Public Comments and Responses – Proposed Revisions to State Executive Council for Children's Services Policy 4.5.2 Time Frames Regarding CSA Pool Fund Reimbursement

| # | Commenter | Summary of Comments | OCS Response | | | | |
|---|--|---|---|--|--|--|--|
| | | 4. Suggested allowing localities to identify an alternate fiscal agent in the OCS IT system. | 4. Added Footnote 1: "The OCS information technology systems allow only a single individual to serve as the fiscal agent at any given time. Localities should contact OCS if the currently designated local CSA fiscal agent cannot complete approval of reimbursement requests. OCS will assist the locality in establishing an alternate fiscal agent." | | | | |
| 3 | Janet Areson (Virginia Municipal League) | Requested the inclusion of a local declaration of emergency in addition to a state of emergency declared by the Governor or the President in the "good cause" examples. | 1. The wording of the first example of "good cause" was changed to read "A state of emergency declared by the President, Governor, or appropriate local authority that results in the closure of local government offices on September 30 or that otherwise limits a locality's ability to submit reimbursement requests before the September 30 deadline." | | | | |
| | | 2. Requested deletion of the second sub-bullet of the "good cause" examples, which read, "Such failures occurring before September 30 must be communicated to the Office of Children's Services at the time of their occurrence." | 2. The wording of the second example of "good cause" was changed to read "A documented failure of local information technology systems that prevents submission of reimbursement requests. Such failures occurring before September 30 should be communicated to the Office of Children's Services as soon as practicable upon discovery." | | | | |
| | | 3. Requested the amendment of the final bullet of the "good cause does not include" subsection to clarify that OCS will consider the inability of a locality to obtain invoices despite documented good faith efforts before the September 30 deadline due to Medicaid and other insurance appeals. | 3. A fourth bullet was added to the examples of "good cause" that reads, "Instances where provider invoices to localities are delayed pending resolution of appeals of Medicaid denials of payment." This change was specific so as not to allow all instances of tardy invoices, which should be dealt with through the locality's contract with the provider. | | | | |
| | | | | | | | |

Public Comments and Responses – Proposed Revisions to State Executive Council for Children's Services Policy 4.5.2 Time Frames Regarding CSA Pool Fund Reimbursement

| # | Commenter | Summary of Comments | OCS Response |
|---|-----------|--|--|
| | | 4. Suggested the addition of language to clarify that local government can, and should, contact OCS if its local report preparer/fiscal agent is temporarily unable to perform their functional duties related to these roles. | 4. Added Footnote 1: "The OCS information technology systems allow only a single individual to serve as the fiscal agent at any given time. Localities should contact OCS if the currently designated local CSA fiscal agent cannot complete approval of reimbursement requests. OCS will assist the locality in establishing an alternate fiscal agent." Added Footnote 2: "Localities should contact OCS if the currently designated local CSA report preparer(s) is/are unable to prepare reimbursement requests. OCS will assist the locality in establishing additional report preparers.". |

MEMO TO THE CPMT

June 28, 2024

Information Item I- 2: Implementation of New Electronic Case Management and Fiscal System for CSA

ISSUE:

That DFS is replacing a legacy system used to support CSA and other programs in DFS such as adoption assistance and Title IVE. That agency case managers will be trained to complete CSA work in the new system. That this new system is used for state expenditure reporting which falls under the fiduciary responsibility of the CPMT.

BACKGROUND:

The Department of Family Services will be replacing a legacy software system with the Integrated Multifunction System (IMS) developed for Fairfax. IMS will be used to track and manage services for youth who are eligible for CSA funding, generate purchase orders and payments, and complete required data and expenditure reporting to the state Office of Children's Services.

One of the primary critical functions for the new system is to comply with all state CSA reporting requirements for LEDRS – Local Expenditure and Data Reimbursement System. In order to receive state reimbursement for CSA costs, every locality must submit client, service and fiscal data for each expenditure. Staff have committed significant resources towards ensuring that the new system is able to upload the correct data into the state system.

IMS implementation for CSA is scheduled in two phases: the initial go-live will occur in the first week of July and the second phase of agency/case manager training will occur in the Fall. Currently, case managers complete templates and forms online and then submit them through the CSA shared mailbox. CSA has been paperless since the beginning of COVID. The use of IMS will be a shift in process for case managers. The planning process for agency staff training is in the initial stages and more updates will be provided.

ATTACHMENT:

None

STAFF:

Michael Becketts, DFS Director Ferdous Hakim, DFS IT Manager Janet Bessmer, CSA

Information Item I-3: April Budget Report & Status Update, Program Year 2024

ISSUE:

CPMT members monitor CSA expenditures to review trends and provide budget oversight.

BACKGROUND:

The Budget Report to the CPMT has been organized for consistency with LEDRS reporting categories and Service Placement types.

The attached chart details Program Year 2024 cumulative expenditures through April for LEDRS categories, with associated Youth counts. IEP-driven expenditures for Schools are separated out. Further information on the attachment provides additional information on recoveries, unduplicated youth count, and:

- -Average cost per child for some Mandated categories
- -Average costs for key placement types, such as Residential Treatment Facility, Treatment Foster Home, Education placements.

Total Pooled Expenditures: Pooled expenditures through April 2024 for FY24 equal \$28.2M for 895 youths. This amount is an increase from last year by approximately \$3.7M, or 15.45%. YTD Pooled expenditures for FY23 equaled \$24.5.3M for 887 youths.

| The chart below includes FY23 as a reference to prior year comparison. | | | | | | | | |
|--|----------------------|----------------------|-------------|----------|--|--|--|--|
| | Program Year 2023 | Program Year 2024 | Change Amt | Change % | | | | |
| Residential Treatment & Education | \$4,328,544 | \$5,247,231 | \$918,687 | 21.22% | | | | |
| Private Day Special Education | \$11,874,001 | \$12,741,579 | \$867,578 | 7.31% | | | | |
| Non-Residential Foster Home/Other | \$5,647,267 | \$6,590,607 | \$943,340 | 16.70% | | | | |
| Community Services | \$2,769,308 | \$3,664,571 | \$895,263 | 32.33% | | | | |
| Non-Mandated Services (All) | \$584,115 | \$725,297 | \$141,182 | 24.17% | | | | |
| Recoveries | (\$718,976) | (\$701,611) | \$17,365 | -2.42% | | | | |
| Total Expenditures | \$24,484,259 | \$28,267,674 | \$3,783,415 | 15.45% | | | | |
| Residential Treatment & Education | 94 | 137 | 43 | 45.74% | | | | |
| Private Day Special Education | 209 | 222 | 13 | 6.22% | | | | |
| Non-Residential Foster Home/Other | 313 | 331 | 18 | 5.75% | | | | |
| Community Services | 604 | 628 | 24 | 3.97% | | | | |
| Non-Mandated Services (All) | 177 | 174 | (3) | -1.69% | | | | |
| Unique Count All Categories | 1,397 | 1,492 | 95 | 6.80% | | | | |
| Unduplicated Youth Count | 887 | 895 | 8 | 0.90% | | | | |

Note: The number of youths served is unduplicated within individual categories, but not across categories.

The Office of Children's Services

Expenditure claims have been submitted to the State Office of Children's Services (OCS) through April 2024. Revenue has been received through March 2024. On 6/14/2024 we submitted a supplemental allocation to the state for \$7.5M and it was approved.

| FY2024 OCS SUBMISSIONS | | | | | | | | | | | | |
|------------------------|----------------|-----|----------------|-------|------------|-------------------------|---------|-------|------------|------------|--|------------------|
| Date Submitted | Month | Amo | ount Submitted | STATE | | Medicaid Withholding | | STATE | | | | Date Received |
| 8/29/2023 | Adm Allocation | \$ | 99,505 | | | | | \$ | 53,623 | 11/16/2023 | | |
| 8/28/2023 | July | \$ | 74,019 | \$ | 40,048 | \$ | 40,048 | | 0.00 | Aug-23 | | |
| 9/26/2023 | August | \$ | 1,041,074 | \$ | 579,100 | \$ | 52,126 | \$ | 526,973 | 11/16/2023 | | |
| 11/6/2023 | September | \$ | 1,873,551 | \$ | 1,064,891 | \$ | 38,801 | \$ | 1,026,090 | 11/30/2023 | | |
| 12/6/2023 | October | \$ | 2,428,535 | \$ | 1,378,301 | \$ | - | \$ | 1,378,301 | 12/29/2023 | | |
| 1/3/2024 | November | \$ | 4,088,692 | \$ | 2,248,284 | \$ | - | \$ | 2,248,284 | 1/31/2024 | | |
| 1/31/2024 | December | \$ | 4,019,217 | \$ | 2,213,434 | \$ | - | \$ | 2,213,434 | 2/29/2024 | | |
| 2/28/2024 | January | \$ | 3,337,930 | \$ | 1,868,854 | \$ | 35,405 | \$ | 1,833,449 | 3/29/2024 | | |
| 3/29/2024 | Fabruary | \$ | 4,354,932 | \$ | 2,448,165 | \$ | 61,857 | \$ | 2,386,308 | 4/30/2024 | | |
| 5/2/2024 | March | \$ | 3,898,697 | \$ | 2,178,392 | \$ | - | \$ | 2,178,392 | 5/31/2024 | | |
| 6/11/2024 | April | \$ | 3,151,028 | \$ | 1,768,884 | | | | | | | |
| TOTAL | | \$ | 28,267,674 | \$ | 15,788,352 | \$ | 228,237 | \$ | 13,791,231 | | | |

^{**}State total reimbursement does not include Administrative Allocation.

RECOMMENDATION:

For CPMT members to accept the April Program Year 2024 budget report as submitted.

ATTACHMENT:

Budget Chart

STAFF:

Patti Conway

^{**} State reimbursement for July was applied to the Medicaid withholding.

Program Year 2024 Year To Date CSA Expenditures and Youth Served (through April Payment)

| Trans Descrip Payment |
|-----------------------|
|-----------------------|

| | | | Data | | Local | County | Youth in | Schools | Youth in | Total |
|---------------------|-------------------------------|---|--------------|---------------------------------|------------|---------------|----------|-------------|----------|--------------|
| Mandated/ Non-M | a Residential/Non-Residential | Serv Type Descrip | Total \$ | Unique children within category | Match Rate | & Foster Care | Category | (IEP Only) | Category | Expenditures |
| Mandated | Residential | Residential Treatment Facility | \$3,451,827 | 87 | 57.64% | \$3,451,827 | 87 | | | \$3,451,827 |
| | | Group Home | \$114,788 | 4 | 57.64% | \$114,788 | 4 | | | \$114,788 |
| | | Education - for Residential Medicaid Placements | \$967,123 | 28 | 46.11% | \$874,424 | 24 | \$92,699 | 4 | \$967,123 |
| | | Education for Residential Non-Medicaid Placements | \$711,456 | 17 | 46.11% | \$618,757 | 13 | \$92,699 | 4 | \$711,456 |
| | | Temp Care Facility and Services | \$2,037 | 1 | 46.11% | \$2,037 | 1 | \$0 | 0 | \$2,037 |
| | Residential Total | | \$5,247,231 | 137 | | \$5,061,833 | 129 | \$185,398 | 8 | \$5,247,231 |
| | Non Residential | Special Education Private Day | \$12,741,579 | 222 | 46.11% | \$5,281,259 | 9 | \$7,460,320 | 213 | \$12,741,579 |
| | | Wrap-Around for Students with Disab | \$332,162 | 65 | 46.11% | \$332,162 | 65 | | | \$332,162 |
| | | Treatment Foster Home | \$3,983,501 | 111 | 46.11% | \$3,983,501 | 111 | | | \$3,983,501 |
| | | Foster Care Mtce | \$960,681 | 105 | 46.11% | \$960,681 | 105 | | | \$960,681 |
| | | Independent Living Stipend | \$350,242 | 24 | 46.11% | \$350,242 | 24 | | | \$350,242 |
| | | Community Based Service | \$2,929,903 | 474 | 23.06% | \$2,929,903 | 474 | | | \$2,929,903 |
| | | ICC | \$734,668 | 154 | 23.06% | \$734,668 | 154 | | | \$734,668 |
| | | Independent Living Arrangement | \$901,554 | 23 | 46.11% | \$901,554 | 23 | | | \$901,554 |
| | | Psychiatric Hospital/Crisis Stabilization | \$62,467 | 3 | 46.11% | \$62,467 | 3 | | | \$62,467 |
| | Non Residential Total | | \$22,996,757 | 1181 | | \$15,536,437 | 968 | \$7,460,320 | 213 | \$22,996,757 |
| Mandated Total | | | \$28,243,988 | 1318 | | \$20,598,270 | 1,097 | \$7,645,718 | 221 | \$28,243,988 |
| | | | | | | | | | | |
| Non-Mandated | Residential | Residential Treatment Facility | \$78,192 | 3 | 57.64% | \$78,192 | 3 | | | \$78,192 |
| | | Education - for Residential Medicaid Placements | \$1,420 | 1 | 46.11% | \$1,420 | 1 | | | \$1,420 |
| | | Education for Residential Non-Medicaid Placements | \$13,797 | 1 | 46.11% | \$13,797 | 1 | | | \$13,797 |
| | Residential Total | | \$93,409 | 5 | | \$93,409 | 5 | | | \$93,409 |
| | Non Residential | Community Based Service | \$452,356 | 106 | 23.06% | \$452,356 | 106 | | | \$452,356 |
| | | ICC | \$179,532 | 63 | 23.06% | \$179,532 | 63 | | | \$179,532 |
| | Non Residential Total | | \$631,888 | 169 | | \$631,888 | 169 | | | \$631,888 |
| Non-Mandated Tot | al | | \$725,297 | 174 | | \$725,297 | 174 | | | \$725,297 |
| | | | | | | | | | | |
| Grand Total (with I | Ouplicated Youth Count) | | \$28,969,285 | 1492 | | \$21,323,567 | 1,271 | | 221 | \$28,969,285 |

Recoveries -\$701,611
Total Net of Recoveries \$28,267,674
Unduplicated child count 895

| Key Indicators | Cont. Pow Child | | D V. 2022 VTD | D V. 2024 VTD |
|---|---|--------------------------------|---------------|-------------------|
| | Cost Per Child | | ŭ | Prog Yr 2024 YTD |
| | Average Cost Per Child Based on Total Expenditures /All Services (unduplicated) | | \$19,109 | \$31,584 |
| | Average Cost Per Child Mandated Residential (unduplicated) | | \$44,314 | \$51,953 |
| | Average Cost Per Child Mandated Non- Residential (unduplicated) | | \$22,057 | \$28,890 |
| | Average Cost Mandated Community Based Services Per Child (unduplicated) | | \$3,313 | \$5,835 |
| | Average costs for key placement types | | | |
| | Average Cost for Residential Treatment Facility (Non-IEP) | | \$28,416 | \$39,676 |
| | Average Cost for Treatment Foster Home | | \$21,889 | \$35,887 |
| | Average Education Cost for Residential Medicaid Placement (Residential) | | \$52,136 | \$34,540 |
| | Average Education Cost for Residential Non-Medicaid Placement (Residential) | | \$61,730 | \$2,037 |
| | Average Special Education Cost for Private Day (Non-Residential) | | \$36,462 | \$57,394 |
| | Average Cost for Non-Mandated Placement | | \$2,442 | \$4,168 |
| | | | | |
| Category | Program Year 2024Allocation | Year to Date Expenditure (Net) | | Percent Remaining |
| SPED Wrap-Around Program Year 2024 Allocation | \$499,469 | \$364,675 | | 27% |
| Non Mandated Program Year 2024 | \$1,630,458 | \$780,892 | | 52% |
| Program Year 2024 Total Allocation | \$33,538,460 | \$28,267,674 | | 16% |

MEMO TO THE CPMT

June 28, 2024

Information Item I- 4: CSA Coordinator's Report

ISSUE:

To improve communication, engagement and oversight of the CSA program, the CSA Coordinator will provide the CPMT with a summary of current trends and issues in the service delivery system.

BACKGROUND:

To facilitate the CPMT's long-range planning, monitoring, and oversight of the effectiveness of the CSA program, the CSA Coordinator provides a summary of trends and issues for CPMT's awareness and consideration.

Issue #1: Serious Incident Reporting (SIR) - Providers are required to notify the case manager and family within 24 hours when an incident occurs. They must then follow up with a written SIR to the case manager and CSA program. CSA will follow up with the provider and case manager as needed for SIRs that indicate systemic or contractual concerns or deficiencies. The CSA Management Team has a role in managing these concerns with DPMM and the referring agency. The CSA tracks SIRs and provides summary reports to the CPMT.

Our locality has had several recent incidents where providers have not notified the case manager or CSA in a timely manner when youth have left the program without authorization and police involvement has been needed.

Issue #2: Contract rate increases for FY 25 – DPMM is in the final stages of approval for requested rate increases for FY 25. The estimated increase in our local expenditure is \$318 K due to rate increases.

Issue #3: <u>GAO report on residential treatment</u> – our local utilization of residential has been increasing since COVID due to more children entering foster care, a reduction in foster homes to accept youth with higher acuity and complex needs, combined with provider staffing shortages and resulting capacity issues. While the findings are not new, it is important for us to re-affirm our commitment to high quality care, intensive monitoring of services and capacity building for community-based options.

Child Welfare: Abuse of Youth Placed in Residential Facilities | U.S. GAO

Item 4: <u>Proposal for Revision to OCS Allocation and Supplemental process</u> - In recent webinars, OCS has discussed changing how annual CSA allocations will be made. The proposal is for OCS to reimburse localities based on LEDRS reporting. An initial allocation would not be provided and a supplemental allocation request would not be needed. The state matching funds would just be provided as each expenditure request is submitted. Our budget and CSA staff participated in the webinars and based on the information provided, support this change if it were to be made. It would result in a reduction in steps for budget

ATTACHMENT:

None

STAFF:

Janet Bessmer, CSA Director