Title IV-E and the Family First Prevention Services Act
Some programs have a local matching requirement.

Each program has specific purposes for which funding can be used.

Most restrictive federal requirements.

Declining Flexibility.

Most Flexible Funding.
County General Funds

- Most flexible of all child welfare fund
- Varies significantly from county to county
- Is based on county tax levies and county levies and county commissioner appropriations
- These funds should be used last after drawing down all applicable federal funds
- Counties may use these funds to pay for non-eligible children and non-allowable services and to match federally funded programs
State GRF Funds

- State Child Protection Allocation
- Child, Family, and Adult Community and Protective Services Allocation
- Social Services Operating Allocation
The spending criteria focuses on 28 services that can be provided and paid for with this money; and specifically included in the Title XX Plan

ODJFS allocates this directly to CDJFS

0% match

No required eligibility criteria-only county imposed eligibility criteria identified in the Title XX plan

Stand alone PCSAs must have an agreement with their CDJFS to access these funds

Can be used for placement costs only if it is short term and the placement is secondary to the needs of the child and so documented in the child’s case plan (not recommended for placement)
Title XX TANF Transfer Funds

- Income must be less than 200% of federal poverty level and the services must be included on Title XX Plan
- 0% match
- Can be used to cover:
  - Non-allocated admin costs on Certification of Funds
  - RMS Costs associated with Title XX TANF Transfer Services
  - Direct Costs associated with Title XX TANF Transfer Services
  - Can be used for placement costs only if it is short term and the placement is secondary to the needs of the child and so documented in the child’s case plan (not recommended for placement)
Title IV-B Funds – Part I

- FFY Allocation
- As of October 1, 2007, Part 1 was capped at 10% for administration costs
- IV-B Caseworker Visits
- 75% federally reimbursable
- No eligibility criteria
- Not available for placement costs
Title IV-B Funds – Part II

- FFY Allocation
- Family Preservation
- Family Reunification
- Adoption Promotion and Support Services
- Family Support
- Part II – Operating (10% administration cap)
- 75% federally reimbursable
- No eligibility criteria
Title XIX Medicaid

- Must be in the care and placement responsibility of the agency
- Must be in a placement
- Must be placed in the state of Ohio
- Must meet the citizenship requirement
- Must be enrolled in a Managed Care Plan

***Families eligible for prevention services under FFPSA may or may not be Medicaid eligible.***
Title IV-E

Program History

- Pre-1980

- Title IV-A – AFDC-FC

- “Foster Care drift”
Adoption Assistance and Child Welfare Act of 1980

- Placement in out-of-home care was being used when other services were more appropriate

- Children were remaining in foster care for excessive periods of time

- Children were being forgotten once they entered out-of-home care
Adoption Assistance and Child Welfare Act of 1980

- Intent - Strengthen permanency planning for children
- Created Subpart E of Title IV of the Social Security Act
- First and only entitlement program ever established for child welfare activities
What is Title IV-E?

Title IV-E is a federal program that subsidizes the cost of care for eligible children placed in foster care.
Objectives of Title IV-E

- Reduce reliance on out-of-home care
- Encourage the use of preventive and reunification services
- Require permanency planning
Title IV-E

Ties to Title IV-A

- Funding for Title IV-E was transferred from Title IV-A

- Title IV-E eligibility remains dependent on the child meeting AFDC requirements

- PRWORA 1996 - Current day eligibility is based on the AFDC relatedness standards from July 1996
Federal Participation

**Maintenance Costs** – FMAP 63.09%
Food, clothing, shelter, personal incidentals, liability insurance, and travel to a child’s home for visitation or to school

**Administration Costs** – 50%
Referral to services, preparation and participation in judicial determinations, placement of a child, case plan development, and case reviews
Title IV-E

IV-E Program Eligibility

- Legal responsibility with required judicial determinations

- AFDC Relatedness
  - Age
  - Living with a specified relative
  - Deprivation
  - Need
  - Resources

- Licensed placement setting

- Annual judicial determination of reasonable efforts to finalize a permanency plan
IV-E Waiver Demonstration Project

- 15 counties
- 22 years
- Up front capitation
- Flexibility
- Sunset 9/30/2019
- Return to traditional claiming
- Payment lag
1980 to Present

- States only receive IV-E federal participation for children placed in foster care who meet all eligibility requirements
- Various interventions tested through use of the federal waiver demonstration project
- Not enough foster homes
- Costs of congregate care are staggering
- Opiate epidemic
- Numbers of children in care is increasing
After years of decline, the number of children in foster care has steadily risen in recent years.
Nationally, the percentage of children entering foster care due to parental substance use has risen.

Source: Adoption and Foster Care Reporting System (AFCARS) FY2016
Children Exiting Foster Care

Among children who exited foster care in 2016:

- 51% were reunified with their families
- 23% exited to adoption
- 17% exited to live with relatives or guardians
- 8% aged out
- 2% other*

*"Other" includes transferred to another agency, ran away or died.
Numbers may not equal 100% due to rounding.
Family First Prevention Services Act of 2018

- Signed into law on February 9, 2018, as part of the Bipartisan Budget Act (Public Law 115-123) of 2018

- Amends parts of the Social Security Act (Title IV-B, Title IV-E) to allow states to use federal matching funds for prevention services (mental health, substance abuse, family counseling and parenting skills training) to help keep at-risk children safely in their homes and to prevent removal, agency custody and placement in foster care

- Limitations on IV-E Foster Care Maintenance payments for residential/congregate care placement and new standards
Core Goals of Family First

- Help children remain safely at home with their families whenever possible.

- Ensure that children who must come into care are in the most family-like/least restrictive setting possible.

- Set expectation of high standards of care and services for our children and families.
QUALIFIED RESIDENTIAL TREATMENT PROVIDER REQUIREMENTS
Ensuring Appropriate Placements in Foster Care

The following placement options already are allowable under current Title IV-E and will continue under Family First:

- Facility for pregnant and parenting youth
- Supervised independent living for youth 18 years and older
- Specialized placements for youth who are victims of or at-risk of becoming victims of sex trafficking
- Foster Family Home (defined) – no more than 6 children in foster care, with some exceptions
Ensuring Appropriate Placements in Foster Care

- Beginning October 1, 2018, Title IV-E foster care maintenance payments can be made on behalf of a child in foster care who is placed with their parent in a licensed residential family-based treatment facility for up to 12 months.
  - No income test applies for these services, unlike other Title IV-E foster care placements.

- Beginning as early as October 1, 2019, after 2 weeks in care, Title IV-E federal support will be available for foster care maintenance payments for eligible youth placed in a Qualified Residential Treatment Program (QRTP).
What is a Qualified Residential Treatment Program (QRTP)?

✓ Has a trauma informed treatment model and a registered or licensed nursing and other licensed clinical staff onsite, consistent with the QRTP’s treatment model.
✓ Facilitates outreach and engagement of the child’s family in the child’s treatment plan
✓ Provides discharge planning and family-based aftercare supports for at least 6 months
✓ Licensed and accredited

There are no time limits on how long a child or youth can be placed in a QRTP as long as the placement continues to meet his/her needs as determined in assessment.
Ensuring Appropriate Placements in Foster Care

In addition:

✓ An independent level of care assessment by a qualified clinician will be required within 30 days of placement to assess the child’s need for placement in a QRTP, rather than a family foster care setting.

✓ If it is determined that the child should be placed in a QRTP, court review and approval will be required within 60 days of placement.

✓ At every permanency hearing, the custodial agency will need to document assessment of the ongoing need for placement in a QRTP.

✓ If determined that a child should not be placed in a QRTP, the custodial agency has an additional 30 days from the date of determination to transition the child to another setting.
Ensuring Appropriate Placements in Foster Care

States have the option to delay these provisions for 2 years to October 1, 2021.

However, delays in implementation of these provisions also requires a delay in implementation of prevention services provisions.
# Key Decisions Regarding QRTP Standards

## Treatment Model Considerations
- Family Engagement in Treatment Planning
- Provision of Aftercare Services
- Certification of Trauma-Informed Model of Services
- 24/7 Access to Licensed Nursing & Clinical Staff

## Independent Level of Care Assessment
- Assessment Tool/s to be Used
- Determination of Who is a Qualified Clinician
- Process for Ongoing Re-Assessment of Level of Care

## Licensing, Accreditation & Contracting Considerations
- **QRTP** Classification
- Background Check Requirements
- Pregnant & Parenting Teens & Sex Trafficking Exemptions
- Group Home or Family Foster Care?
- Master Contract Changes

## Court Oversight
- Process: Administrative Review vs. Hearing
- Forms & Judicial Tools
- Judicial Training
Ohio currently has 2,131 children living in congregate care settings. This represents 13.3% of our children in care.

These children have a greater likelihood of re-entering care after exit, contributing to Ohio’s high rate of foster care re-entry.

The goals must be two-fold:

- Coming into compliance AND
- Reducing our reliance on congregate care

Focus of the Work: Family & Youth-driven vs. Agency-driven