1. With these changes to the master contract, do we need to create new contracts for all of our current placement providers?

Due to the Qualified Residential Treatment Program (QRTP) requirements under the Family First Prevention Services Act (FFPSA), youth placed on or after October 1, 2021 will be eligible for QRTP discharge planning and aftercare support beginning with the third week of placement. If the provider is certified as a QRTP, the “Agreement” has standard language to address the QRTP requirements. If a youth is placed prior to October 1, 2021, the current “Agreement” would still be valid.

2. We use a blanket purchase order that covers all placement contracts and not individual contract specific purchase orders. Other counties are doing this as well. We also do not include specific dollar values in the contracts.

The question is likely stemming from the discussion about utilizing the “Encumbrance Amount” in SACWIS for each network provider contract set up in SACWIS. While it’s not a mandatory section to use, it’s available to use to help ensure that you still have encumbered funds for the contracts that have been entered into SACWIS. It’s a helpful tool for contract monitoring and helping to determine when/if you may need to request additional encumbrances for foster care purchases. If this is an area that you would like to use in SACWIS, you would need to take the blanket PO amount and divide it up amongst each of the network providers to put into SACWIS. You could do that a variety of ways (dividing equally or based on what you estimate that you will use with that provider, etc.). But it’s not a requirement to use the Encumbrance section in SACWIS.

3. Will contracts need to be resubmitted on Oct 1st if they expire at the end of the year. Should we be entering into new contracts, utilizing the new contract doc, given that the changes related to QRTP and aftercare services are effective 10/1/21? Can you repeat the part about doing an addenda come 10/1 so our contract has the new QRTP language? Our IV-E contracts are on a IV-E Cost reimbursement cycle and are valid through 3/31/2022. Would we have to amend these agreements or only amend the agreements that a child is placed at effective October 2021 or after, until we let our RFP and issue the new contract effective 4/1/2022?

We are asking agencies to begin using the revised “Agreement” beginning with placements into QRTPs on Oct. 1st. It would create the same amount of work to do addenda to each contract and Schedule A as it would to print the revised “Agreement” with the QRTP language included and hopefully will not require an addendum.

4. When you say we are required to get all signatures for the changes in Schedule A, does that mean we have to get a signature each time a child is placed?

No, only when you update the per diem on the Schedule A, after the initial contract would you need to have an addendum signed with the new Schedule A. The new functionality will allow
you to print the Schedule A rate information and the addendum for signature. Currently, you print the entire contract just to get a signature page.

5. There has been a lot of encouragement to negotiate rates and to look at a provider's ceiling rates but some providers will not negotiate a rate at or below ceiling. They absolutely refuse. Agencies are often stuck because a youth may already be placed there when the contract is due to be renegotiated. Any advice from ODJFS on dealing with these providers?

IV-E Agencies are encouraged to try to negotiate rates with providers. ODJFS suggests looking up the provider in SACWIS and reviewing the rates the provider is contracting with other IV-E Agencies for. Not all children need the same services in the same placement setting. Some rates can be negotiated per child and not per agency.

6. I am confused about the after care. Is that in the new master contract or did we have to do the non-placement contract? Regarding Aftercare services, is it correct that those services will be charged to Medicaid or Third-Party Insurance and the agency will be paying if no other insurance is available? Also, are the Aftercare costs only reimbursed if the agreed upon services are above and beyond what is required by Family First? So, aftercare services will be covered by Title IV-E dollars when Medicaid or insurance is not available? What are the reimbursement rates for reimbursement of costs spent on after care services/support?

Aftercare services, which is optional for IV-E Agencies to contract for non-placement services for children such as therapy, transportation, case management, etc. The service may not be a Medicaid or Third-Party Insurance covered cost. The child and family may not have Medicaid or Third-Party Insurance. The IV-E Agency would be responsible for paying for the aftercare services. A child may be eligible for Family First Prevention Services under Chapters 5101:40 and 5101:45 of the Administrative Code. There is no IV-E foster care maintenance reimbursement when children are not in the custody/care and placement of a IV-E Agency. Aftercare support is required when a youth is in a QRTP for more than 14 days and is discharged to a family-like setting. A QRTP is only required to provide six months of aftercare support which includes a monthly contact and referral to services.

7. Aftercare supports, and services are only required for youth who have been in the QRTP setting for at least 6 months, and only if they are stepped down into a family setting (i.e., reunification, kin, IL or foster care). Is this correct?

Beginning on October 1, 2021, FFPSA requires QRTPS to provide six months of aftercare support once a youth is discharged to family-like setting for any youth who is in the QRTP for more than 14 days. The family-like setting can be a foster home, relative, kinship Discharge planning begins on day one of the placement into a QRTP.

8. We have a provider who requested Medicaid eligible rates and non-Medicaid eligible rates. For the non-Medicaid rates, the breakdown given was for Board and Care rate and Mental Health services. How do we put this on the schedule A to meet the request on non-Medicaid rates?
I believe that question refers to kids we have in placement and are paying for that we don't have custody of and aren't on Medicaid, I'm referring to QRTP but for "placement" contract. They are noting the Board and care rate as $381.79 + Mental Health Services as $209.15 for a total of $590.94

SEE ABOVE. The aftercare support or aftercare services may not be a Medicaid covered services regardless of the child’s eligibility for coverage. Aftercare support is required and aftercare services, such as therapy, coaching, transportation, etc. are not required.

9. Can we use the non-placement services contract for a contract between an agency and a provider for visitation or family coaching?

Yes, IV-E Agencies may choose to use the “Agreement for Title IV-E Agencies for the Provision of Non-Placement Services” for any non-placement contract between their agency and any provider.

10. Can you clarify what services would be in Non-Placement (Schedule B)?

Family coaching, case management, counseling, respite, transportation, court testimony, supervised visitation, etc.

11. Regarding Non-Placement services contract for QRTP facilities. If we choose to negotiate a different rate other than the Medicaid rates for their services, do we complete schedule B prior to agreement being signed??

Yes, if your agency chooses to contract for aftercare services: coaching, case management, therapy, supervised visitation, etc. then you would use the “Agreement for Title IV-E Agencies for the Provision of Non-Placement Services” and the Schedule B for your negotiated or Medicaid rates. The Non-Placement Agreement and Schedule B would be used if you negotiate different rates than the Non-Medicaid covered rates for aftercare support, which includes monthly contacts and referral to services.

12. Can agencies request a coach to come and work with us on this and how enter these things (for us hands on learners)?

Requests are to be made through the SACWIS Help Desk.

13. Will the new Master Contract be available in SACWIS on October 1, 2021? Our agency is worried about processing 2022 contracts too early. Are there any concerns with that?

Yes, the updated contract will be available in SACWIS as of 10/01/2021. Is it suggested for any Congregate Care Providers to utilize the new contract when available.

14. How do we know what provider to select when there are multiple pages of providers with the same information (name, address, etc)?

When using Provider Search, select the Provider where the Provider category is Agency Contract.
15. If we were doing our contracts effective 7/1/2021, should we now be making these effective 10/1/2021? Or does this matter with regard to SACWIS?

For any contract with a Congregate Care Provider, it is suggested to create a new contract as of 10/01/2021 to ensure the contract contains all of the appropriate language for QRTP.

16. What does the encumbered amount/date mean or how does it impact the contract in SACWIS? Our agency has been making these fields match the original amount/date.

When an agency has an encumbered amount, this is the amount approved for spending with the provider that is above the contracted amount. The encumbered amount/date is not required to be used in SACWIS but can be used to receive notifications when reaching the selected percentage. This can also be done by selecting contract amount, rather than encumbered amount.

17. Will there be a signature line included in the addendum page?

When a singular addendum is selected through the Contract Detail Screen, the addendum will include the signature area. When addenda are printed with the Placement or Non-Placement Contract, the addenda will not have a signature area. It will be included at the end of the selected contract.

18. What addendum do we select when we are updating the contract amount?

When updating the contract amount, select the Addendum Reason of Amount.

19. In the past, the provider addresses or names may not be corrected (don’t match the Secretary of Ohio’s website for the registered business). Is there a way to correct this name? The county prosecutor makes the agency ensure the name matches, so we’ve had to change the PDF (paper version).

This functionality has been recorded as a future enhancement.

20. Will there be a new user training for contracts that we can watch (a webinar or online course)?

IV-E Policy and SACWIS are working to create step-by-step training videos.

21. For the notification, does entering 0.2 mean that you get notified if you spend 20% of the contract or if you have 20% remaining on the contract?

Remaining.

22. Do the number of leave days we agreed to pay show on the printed contract now? The number used to appear in SACWIS, but it did not actually print on the contact document.
This has not changed. Leave days will continue to display SACWIS, but are not defined in the contract.

23. Where will the signature page be placed for the contract signature? Will it follow the contract document or the addenda? This is in reference to generating the entire contract the first time.

The signature area will continue to display at the end of the Placement or Non-Placement Contract.

24. Was a signature page added for amendments? Or do we have to print out the entire agreement for a new amendment?

Yes, when an addendum is printed singularly, it will contain a signature area.

25. If a child ages out of the system and ends up in the adult system shortly after. Can this be documented and cause for an end to aftercare support if they are incarcerated as an adult?

If aftercare supports are not provided as defined within the contract, it is suggested to create an addendum.