

Ohio Qualified Residential Treatment Program (QRTP) Discharge Planning and Aftercare

Lunch and Learn

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Department of Mental Health and
Addiction Services



Department of
Job and Family Services

Welcome

Donna Sabo

Supervisor/Manager of Training and Product Development
Ohio Department of Mental Health and Addiction Services

Donna.Sabo@mha.ohio.gov

Colleen Tucker

Project Manager, Ohio Family and Children First Council
Ohio Department of Job and Family Services

Colleen.Tucker@jfs.ohio.gov

Gina Velotta

Foster Care Licensing Manager
Ohio Department of Job and Family Services

Gina.Velotta@jfs.ohio.gov

Deanna Robb

IV-E Policy Developer
Ohio Department of Job and Family Services

Deanna.Robb@jfs.ohio.gov



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Laura Hasyn

Director of Compliance
Genacross Lutheran Services

lhasyn@genacross.org

Dave Paxton

Chief Clinical Officer
The Village Network

Dpaxton@TheVillageNetwork.com

Agenda

- Introduction
- Family First Resources
- Ohio Administrative Code
- QRTP Requirements for Discharge Planning
- QRTP Requirements for After Care
- The Village Network's Experience
- Genacross' Experience
- Aftercare – Who Pays?

Family First Resources

- Family First Prevention Services Act
 - <https://jfs.ohio.gov/ocf/Family-First.stm>
 - Infosheets

- QRTP Requirements
 - <https://jfs.ohio.gov/ocf/FFPSA-QRTPRequirements.stm>

- Recorded Lunch and Learns
 - [Home \(force.com\)](https://home.force.com)

Discharge Planning

- The purpose of discharge planning is to reduce the length of residential stay as well as unplanned readmission to a residential care setting.
- The goal is to improve the coordination of services following discharge from residential care. (i.e. aftercare services)
- Individualized, community-based, trauma-informed supports that build on treatment gains to promote the safety and well-being of youth and families
- Include planning for aftercare services for all youth discharged from the facility to family-based settings

QRTP Rule Requirements

Discharge Planning

- Include planning for aftercare services for all youth discharged from the facility to family-based settings including:
 - (a) Reunification with family, (b) Pre-finalized adoptive family, (c) Kinship care, (d) Foster care, and (e) Independent living
- Begin in partnership with the legal custodian and/or custodial agency no later than the next business day after a youth is admitted to the QRTP.
- Be reviewed by the QRTP no less than every thirty days and during every service plan review.

QRTP Aftercare Supports

- The intent of the aftercare support requirement is to provide supports that will assist in reintegrating the youth into the community while also avoiding their reentry into residential care.
- All child-serving residential agencies certified by ODJFS or OhioMHAS are required to provide monthly aftercare supports to any youth placed in their facilities for 14 or more days, if the youth is discharged to any setting that is not another residential setting, detention, psychiatric facility or hospital.
- If the family and youth are receptive to services, the QRTP is required to refer and connect the youth and family to services. However, the QRTP does not need to be the service provider.

Aftercare Rule Requirements

- Include at least a six-month period of support after discharge, even if the youth reaches the age of majority.
- Be provided within the youth's community as appropriate to promote the continuity of care for children.

Aftercare Rule Requirements

- Be individualized and driven by the youth, the caregivers and the family as appropriate, and include the following:
 - (i) Monthly contact with the youth and caregivers to promote and maintain engagement, and to regularly evaluate the family's needs. Monthly contact may be in-person, through interactive videoconferencing, or via phone or other electronic means.
 - (ii) Coordinate engagement with any applicable community providers serving the youth or family. The QRTP will ensure they make themselves available to the community providers for ongoing consultation and document the consultation in writing. Documentation should include all resources and supports needed and detail how the resources and supports will be provided.
 - (iii) Written documentation provided to all participants of the discharge plan prior to discharge with information on how to access additional supports from the QRTP and community providers including contact information and steps required to access each provider.

Aftercare Defined

Aftercare Support: Monthly case management activities performed with or on behalf of a child/family, by the qualified residential treatment program (QRTP) as part of the required discharge plan developed by the permanency team for a minimum of six months from discharge. Aftercare support, as identified in the discharge plan, may be part of the "agreement for Title IV-E agencies and providers for the provision of placement services" or the Title IV-E agencies may use the "agreement for Title IV-E agencies for the provision of non-placement services" and the "Title IV-E schedule B" rate information.

Aftercare Services: Specific individualized community-based trauma informed services that build on treatment gains to promote the safety and well-being of children and families, with the goal of preserving the youth in a supportive family environment. Aftercare services may be part of the discharge plan and added to the "agreement for Title IV-E agencies for the provision of non-placement services" and the "Title IV-E schedule B" rate information.



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Residential Treatment Information System (RTIS)

- The ODJFS QRTP is required to document in Residential Treatment Information System (RTIS) the referrals or contact for services including documentation of the evaluation of the family or youth's needs for 6 months following the date of discharge and any additional follow-up information.
- The OhioMHAS QRTP is required to document all Title IV-E Youth placements in RTIS, or youth files for non IV-E youth, the referrals or contact for services including documentation of the evaluation of the family or youth's needs for 6 months following the date of discharge and any additional follow-up information.

The Village Network's Experience with Aftercare



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Genacross' Experience with Aftercare



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Aftercare – Who Pays?

- Aftercare support provided that is not available for Medicaid reimbursement shall be billed to the IV-E Agency per the “Agreement for Title IV-E Agencies and Providers for the Provision of Child Placement.”
- If the Provider is not enrolled on Medicaid, reimbursement for aftercare support provided shall be billed to the IV-E Agency.
- Aftercare support provided to children who are not enrolled on Medicaid shall be invoiced to the IV-E Agency less any private insurance/third-party payor reimbursement obtained by the Provider. Rates for aftercare support billed to the Agency shall be consistent with the prevailing Medicaid rate for Community Psychiatric Supportive Treatment (CPST) at the most recent version of which may be found at: Manuals and Rates (ohio.gov).

Aftercare – Who Pays?



- If the parties agree to not use the Medicaid rates for non-Medicaid eligible aftercare support (monthly contacts and referrals), an “Agreement for Title IV-E Agencies for the Provision of Non-Placement Services” will need to be created, and the negotiated aftercare support rates will be displayed on the Schedule B.
- If the youth is no longer in custody but the family is still has an open case with the IV-E Agency, the youth and family may be eligible for Family First Prevention Services (FFPS) pursuant to the rules in Chapter 5101:2-45 of the Administrative Code.

Aftercare – Who Pays?

- The IV-E agency may contract with any provider, including a QRTP for non-placement aftercare services. Any IV-E agency that contracts with a QRTP for non-placement aftercare services is to use the “Agreement for Title IV-E Agencies for the Provision of Non-placement Services.” The non-placement aftercare services may be billed to Medicaid, Third-party payor or the IV-E Agency per the “Non-Placement Agreement.”
- A IV-E Agency may choose to use the “Non-Placement Agreement” for any non-placement services and not just for those youth discharged from a QRTP.

OAC 5101:2-33-27

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Aftercare – Team Approach

- The youth may be discharged from the QRTP and multiple stakeholder groups may be involved:
 - Title IV-E Agency
 - Bridges Liaison
 - Local Family and Children First Council
 - Foster or Adoptive Parents
 - Kinship Provider
 - Family
- An opportunity to provide wrap-around supports and partner to meet the youth's needs

Questions



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