

# Family First Update- BHIS Subcommittee

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January 5, 2022

**3 months into implementation**

# Family First Implementation- Prevention

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# Focus on keeping children safely at home

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- 50% Reimbursement- Federal funding available for provision of prevention services that meet criteria established through the [Title IV-E Prevention Services Clearinghouse](#)
  - In-home parent skill-based programs; mental health services; substance use disorder prevention and treatment services; and/or kinship navigator support services
  - Services must be included in Colorado's five-year Title IV-E Prevention Program Plan
- Services can be provided to the child/youth, parents/guardians and/or kin, regardless of family income
- 12 months of services permitted consecutively and no lifetime max
- Requires services to be trauma-informed



# Family First Prevention Services *(Voluntary)*

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## UPDATES

Colorado's Title IV-E Prevention Program Plan was submitted for final approval on 09/30/21.

- Heard back in December. Plan is not yet approved.

## STRENGTHS

- Some regions have a baseline infrastructure for evidence-based prevention services
- IV-E Drawdown will be deposited into the Colorado Child Abuse Prevention Trust Fund (HB21-1248)
- [Colorado Lab Report](#): Short- and long-term strategy recommendations for expanding Family First services
- Transition Funds dedicated to prevention
  - Mini-grants through 2023, totaling \$500,000/year

## CHALLENGES

- Claiming logistics
- Broader aspects of our candidacy definition are a longer-term effort
- Some regions are resource deserts
- Workforce challenges
- Equity
- Medicaid
  - Rates vary for EBPs
  - Providers
  - Medical necessity approvals/denials
  - Data



# Family First Prevention Services

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The current list of programs Colorado is planning to claim for federal Title IV-E reimbursement upon initial Family First implementation include:

- Nurse-Family Partnership (NFP)
- Parents as Teachers (PAT)
- SafeCare
- Healthy Families America (HFA)
- Child First\*
- Parent Child Interaction Therapy (PCIT)
- Multisystemic Therapy (MST)
- Functional Family Therapy (FFT)
- Fostering Healthy Futures (Preteen and Teen)

CDHS is committed to including the following services in its state prevention plan as soon as feasible. These services require additional work in order to fully meet Family First requirements:

- Trauma-Focused Cognitive Behavioral Therapy
- High Fidelity Wraparound
- Motivational Interviewing



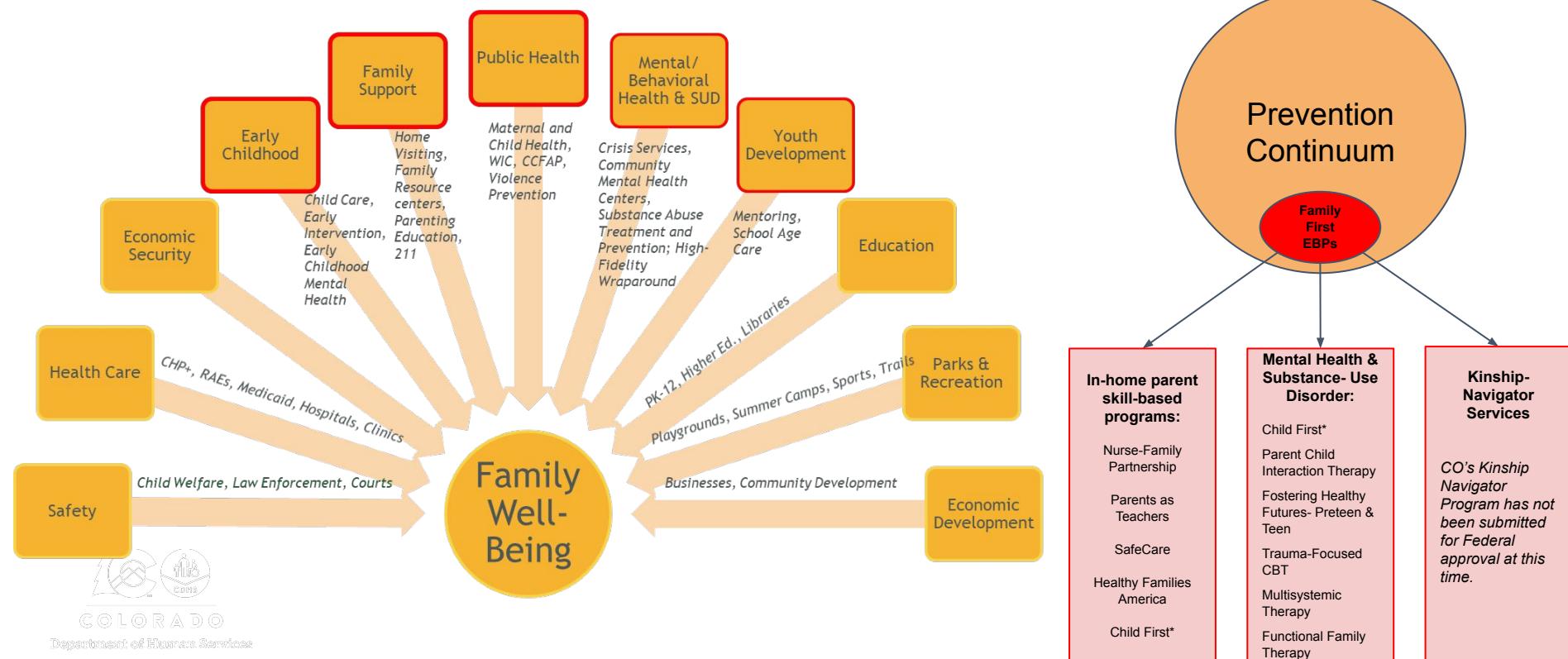
# Colorado's Definition of Candidacy

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Colorado's definition of candidacy includes the following circumstances or characteristics of the child/youth, parent, or kin caregiver that may put a child/youth at "serious risk" of entering or re-entering foster care:

- Substance use disorder or addiction
- Mental illness
- Lack of parenting skills
- Limited capacity or willingness to function in parenting roles
- Parents' inability, or need for additional support, to address serious needs of a child/youth or related to the child/youth's behavior or physical or intellectual disability
- Parental protective capacity compromised by basic needs challenges, i.e. homelessness, food insecurity, etc.
- Developmental delays
- Reunification, adoption or guardianship arrangements that are at risk of disruption

# Family First Services within the Prevention Continuum



# **Family First Implementation- Out-of-Home Placement**

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# **When it's not possible to safely keep a family together, ensure placement is high-quality, short-term & trauma- informed**

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- A new placement type was created called a Qualified Residential Treatment Program (QRTP)
- QRTP requirements:
  - Licensed by the state and nationally Accredited with a trauma-informed treatment model
  - 16 beds or fewer
  - Registered or licensed nursing and other clinical staff available/on call 24/7
  - Child, youth, family participation
  - Discharge planning and aftercare supports for at least 6 months
  - Requires independent assessment recommendation completed by a Qualified Individual before or upon admission
  - Court Approval: If the Court orders QRTP placement when not recommended by the independent assessment, placement is not eligible for 50% federal reimbursement (reduces the child welfare Block).
  - Length-of-stay lifetime limits
- A commitment to reduce the use of previous residential/non-family like out of home placements, including Residential Child Care Facilities (that are not QRTPs), Group Homes and Group Centers
- For any child/youth who is placed in these settings after October 1, 2021, federal funding is limited to 14 days, resulting in a much higher costs to the state and county



# Independent Assessment Process for QRTP Placement

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## STRENGTHS

- Rollout for all counties was completed prior to 10/1
- Relationships with ASOs; Process is going well
- Relationship with court partners

## CHALLENGES

- Qualified Individual Capacity & Waitlists
- Meeting 10 business day/14 calendar day timeline- ROIs
- QRTP Capacity & Location
- When QRTP is not recommended-Building recommendations around what's available in communities
- Juvenile Justice Reform/SB108

## UPDATES

- Effective July 1, 2022, RAEs will use the IA process for medical necessity determinations
- Any youth who was placed in an RCCF facility after 10/1/21 and, who while there, the facility becomes a QRTP is required to have an IA
- For youth placed in a QRTP prior to a completed IA, if the IA does not recommend QRTP: 14 + 30 days FCMPs and Medicaid



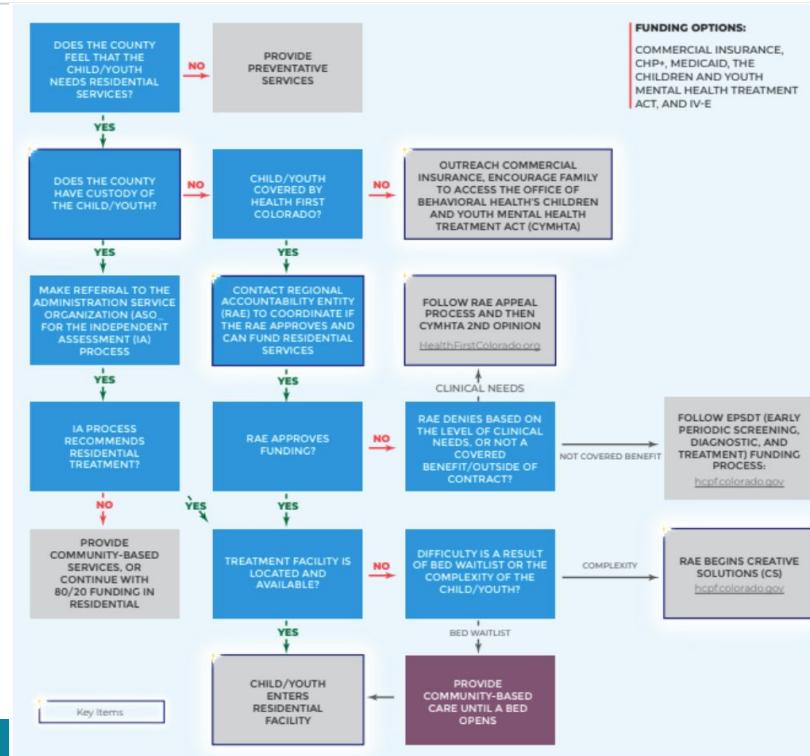
# Independent Assessment Process for QRTP Placement- #s as of 12/13/21

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- 129 Assessments completed (May-December 13th)
- Final Recommendation:
  - 70% recommended QRTP and
  - 30% recommended community-based care
- 71% were identified as crossover youth
- % of assessments completed within 10 business day/14 calendar day timeline: 35%
- Location at time of referral: 37% in Residential; 33% Detention; 19% in Community; 7% Hospital; 1% Out-of-State Residential
- 72% had GALs listed and of those 80% were interviewed

# CDHS Resource- Funding and Approval Guide for Residential

[Download a pdf of the flowchart.](#)





# Qualified Residential Treatment Programs (QRTPs)

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## STRENGTHS

- Colorado addressed IMD
- Making progress toward state's target QRTP Capacity (250)
- 184 beds across 15 facilities are approved as QRTP in Trails

## CHALLENGES

- Approved QRTP Providers are full with existing placements that are grandfathered in
- Workforce shortages
- Some regions won't have a single QRTP provider available locally (SLV, NE, NW)
- Billing Q&A
- Aftercare services- Location & RAE coordination
- Need more Federal Guidance
- High-acuity crisis
- There are limited family-like settings that can serve children/youth with behavioral health needs and/or history of juvenile justice-involvement (Behind on therapeutic and treatment foster care, respite, crisis stabilization)

# 15 Providers are licensed as Qualified Residential Treatment Programs, as of December 7 (184 beds)

## I. Facilities approved in Trails as QRTPs

PROVIDER	COUNTY/REGION	CAPACITY
Shiloh- Estes	Jefferson/Metro	7
Shiloh- Yarrow	Jefferson/Metro	8
Shiloh- Longmont	Weld/Metro	16
TGTHR Attention Homes- Boulder	Boulder/Metro	8
Gateway Residential Program	Delta/SW	15
Griffith Centers	El Paso/SE	16
Third Way- Bannock	Denver/Metro	14
Third Way- Pontiac	Denver/Metro	16
Third Way- York	Denver/Metro	16
Future Bound	El Paso/SE	6
Nevada House	El Paso/SE	10
Drew's House	El Paso/SE	5
Turning Point- Matthews	Larimer/Metro	16
Turning Point- Prospect	Larimer/Metro	15
Mt Saint Vincent Home	Denver/Metro	16
<b>Total</b>		<b>184</b>

## II. Additional facilities actively pursuing QRTP designation

PROVIDER	COUNTY/REGION	CAPACITY
Alternative Homes for Youth Greeley	Weld/Metro	16
Brad's Place	El Paso/SE	8
ROP Morrison	Jefferson/Metro	8
The Daisy Center	Mesa/SW	15
Mount Evans Qualifying House	Clear Creek/Metro	15
<b>Total</b>		<b>62</b>

## III. Facilities working toward RCCF with plans to also obtain QRTP Status

PROVIDER	COUNTY/REGION	CAPACITY
Rise Home for Boys	Arapahoe/Metro	5
Evergreen Group Center	Boulder/Metro	11
<b>Total</b>		<b>16</b>

Link to the analysis of transitioning providers:

[https://drive.google.com/file/d/1WFklaF16j\\_xsZy4rarKPxEYQ5VBvXI50/view?mc\\_cid=eecddbaebe&mc\\_eid=6d142be18b](https://drive.google.com/file/d/1WFklaF16j_xsZy4rarKPxEYQ5VBvXI50/view?mc_cid=eecddbaebe&mc_eid=6d142be18b)



# Psychiatric Residential Treatment Facilities (PRTFs)

## PREVIOUS

- Two existing PRTFs were largely taking out-of-state kids and not admitting appropriate in-state referrals

## RECENT CHANGES

- Effective July 1, 2021 the PRTF rate was increased to \$750 per day
- Residential providers' transition plans-->

## GOAL:

- Colorado needs facilities that can meet the need of Colorado's residents programmatically through appropriate staffing, expertise, and treatment.

### IV. Facilities actively pursuing (or currently) PRTF license

PROVIDER	COUNTY/REGION	CAPACITY
Cedar Springs	El Paso	24
Denver Children's Home	Denver/Metro	40
Devereux	Jefferson/Metro	30 Domestic (40 for ORR)
Jefferson Hills	Jefferson/Metro	30
Southern Peaks	Fremont/SE	40
Third Way - Lowry	Denver/Metro	30

Note: SB21-137 High-Acuity Beds

CDHS-managed--Estimated # of new beds expected: 15

+Plus 10 additional beds for children/youth with IDD (SB276)

+Plus 10 additional beds at CMHIP in next 3-6months



# Family-like Placements

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## STRENGTHS/OPPORTUNITIES

- New rate for Treatment Foster care: \$231
- New rate for Therapeutic Foster care: \$178
- New rates for Foster Care with respite
  - New licensing category: “Respite child care center”
- For crossover youth: Relative Information Form (SB108)
- \$350k in Family First Transition Funds Grants awarded: Funding Opportunity #2022000042
  - 4 awardees: recruit/retain foster parents; build therapeutic foster care in counties; respite program for foster parents

## CHALLENGES

- There are limited family-like levels of care that can serve children/youth with behavioral health needs and/or a history of juvenile justice involvement (Kinship, Foster homes, inc treatment and therapeutic; etc.)
- Longer runway to build up treatment and therapeutic foster care
- Long-standing challenges- recruitment/retention of standard foster care



# New Funding Reimbursement Opportunity- Children placed with parent in a Special Connections program

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**Title IV-E agencies may claim title IV-E foster care maintenance payments (FCMPs) for a child placed with a parent in a licensed residential family-based treatment facility for substance abuse for up to 12 months. Agencies may also claim administrative costs.**

- Requirement that the child is under the placement and care responsibility of the title IV-E agency while placed with the parent in the facility (out-of-home placement)
- ***Ongoing meetings:***
  - Current funding
  - Shortened stays after expanded Medicaid benefit took effect
    - Medical Necessity & the dyad
  - Practice challenges
  - Create guidance to share with county partners
  - Work with Federal Funding Maximization group to figure out claiming logistics

# Additional Resource Slides

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# The Family First Prevention Services Act in Colorado

## **AN IMPLEMENTATION GUIDE FOR COUNTY DIRECTORS**



Colorado's Family First Implementation Guide for County Directors is a collaboration between the Colorado Department of Human Services and the [Colorado Human Services Directors Association](#).

**<https://co4kids.org/family-first-implementation-guide-county-directors>**

The Family First  
Prevention Services Act  
in Colorado

## **AN IMPLEMENTATION GUIDE FOR COUNTY DIRECTORS**





# Colorado Family First Transition Funds Act

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- CO received \$7.7m. Our state created a diverse 15-member group to review and prioritize funding proposals (state agency has final say)
  - Dedicated: \$4.4 million; About \$3.3million remaining
  - \$1.5 million- Competitive mini-grants for prevention from 2020-2023 (up to 500,000 each calendar year). Awarded 2 rounds so far. (12 awardees--3 county DHS, others are prevention providers, family resource centers). Funding programs like training in-house therapist in PCIT, PAT, FFT, mentoring for JJ-involved youth, parent coach
  - \$1.155 million- A bill that passed last year required that about 1.1million or 10% of our state's transition funds go to placement providers to help them transition to a model that is eligible for IV-E and medicaid under family first
  - \$352,089- Just awarded a separate RFA for efforts focused on building a comprehensive continuum of placement options (efforts to serve high acuity youth in family-like settings; recruitment and retention of therapeutic and treatment foster homes; enhanced supports for foster parents and kinship families): 4 awardees, recruit/retain foster parents; build therapeutic foster care in counties; respite program for foster parents



# Family First Web-Based Training Resources- Publicly Available

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- The [QRTP Benchcard](#) was created to help judicial officers and members of the legal community understand rules and regulations that should guide their work related to placing a child or youth in a QRTP. A [QRTP Benchcard training](#) is available for several stakeholder groups (GALs, county attorneys, child welfare directors, CASA volunteers, and judicial officers, juvenile justice)
- [Colorado Independent Assessment Toolkit](#)
- Colorado's Child Welfare Training System offers [introductory Family First web-based training](#).
- Colorado's 2021 Children, Youth and Families (CCCYF) Virtual Convening [Plenary on the Family First Prevention Services Act](#) is a training resource available to the judicial community.
- Family First [Training Opportunity for Colorado's Judicial Officers](#): National Association of Counsel for Children (NACC) in partnership with Colorado's Court Improvement Program, pre-convening event: (Passcode: ColoFFPSA21)
- Colorado Court Improvement Program Virtual Training Series for Judicial and Legal Practice Considerations:
  - Before a Petition is filed: [Recording](#) and [Materials](#)
  - After a Petition is Filed and a Child Enters Foster Care: [Recording](#) and [Materials](#)



# August Lunch & Learn Series Resources

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Hosted in Partnership by CDHS and CHSDA: Understanding Financial Claiming for Prevention Services Under Family First.

- **Session 1:** [August 12 Recording](#) and [Powerpoint](#). Topics: The difference between traditional IV-E and Family First IV-E; Colorado Child Abuse Prevention Trust Fund; Core Prevention Services.
- **Session 2:** [August 19 Recording](#) and [Powerpoint](#). Topic: Blending and braiding of funding sources to support a continuum of prevention services.
- **Session 3:** [August 24 Recording](#) and [Powerpoint](#). Topics: Impact of Family First claiming for prevention service providers outside of child welfare; New requirements under Family First for prevention service providers.
- **Session 4:** [August 31 Recording](#) and [Powerpoint](#).Topics: Review Updated CDHS Fiscal Analysis; Changes to the Placement Continuum and how it affects funding.

## Treatment Foster Care

“Treatment Foster Care” means a clinically effective alternative to residential treatment facilities that combines the treatment technologies typically associated with more restrictive settings with a nurturing and individualized family environment (§ 26-6-102(40), C.R.S.).

New rate: \$231

Capacity: A treatment foster home shall not exceed two (2) children or youth placed in the home for treatment., except a sibling(s) of a child/youth who is placed for treatment in the foster home may be placed in the same foster home when it is in the best interest of all of the siblings, in order to maintain their relationship.

Referral: Indicators for treatment foster care placement include, but are not limited to prior placement in a RCCF, a hospital setting, a community crisis center, an acute care unit, a juvenile justice placement, a disrupted or dissolved adoption, and a disrupted foster home care placement; and, Current behaviors that demonstrate high levels of aggression, suicidality, emotional distress, delinquent behaviors, and/or other emotional or psychological issues.

## Therapeutic Foster Care

“Therapeutic Foster Care” means a program of foster care that incorporates treatment for the special physical, psychological, or emotional needs of a child placed with specially trained foster parents, but does not include medical foster care. § 26-6-102(39), C.R.S. (2020).

New rate: \$178

Capacity: No foster child/youth shall be placed in a therapeutic foster care home if that placement will result in more than six total children/youth, including biological, adoptive, and other children/youth, in that home.

Indicators for therapeutic foster care placement include, but are not limited to: discharge from a residential child care facility or treatment foster care home, a determination that the needs of the child/youth cannot be met in a traditional foster care home, and/or a disrupted foster care home placement.



# Colorado Lab Strategy Report for the Family First Service Continuum

	Services Matched to Needs	Services Prioritized for Fiscal Drawdowns	Evaluation and CQI Priorities
<b>SHORT-TERM</b>	<p><b>In-home Parent Skill-based</b></p> <ul style="list-style-type: none"> <li>• Nurse-Family Partnership</li> <li>• SafeCare</li> <li>• Child First</li> <li>• Parents as Teachers</li> </ul> <p><b>Mental Health Array</b></p> <ul style="list-style-type: none"> <li>• Child First</li> <li>• Fostering Healthy Futures Preteen</li> <li>• Functional Family Therapy</li> <li>• Multisystemic Therapy</li> <li>• Parent-Child Interaction Therapy</li> <li>• Trauma-Focused Cognitive Behavioral Therapy</li> </ul>	<p><b>In-home Parent Skill-based</b></p> <ul style="list-style-type: none"> <li>• SafeCare</li> <li>• Child First</li> <li>• Parents as Teachers</li> </ul> <p><b>Mental Health Array</b></p> <ul style="list-style-type: none"> <li>• Child First</li> <li>• Fostering Healthy Futures Preteen</li> <li>• Functional Family Therapy</li> <li>• Multisystemic Therapy</li> <li>• Parent-Child Interaction Therapy</li> <li>• Trauma-Focused Cognitive Behavioral Therapy</li> </ul>	<p><b>Ongoing rigorous evaluation:</b></p> <ul style="list-style-type: none"> <li>• SafeCare</li> <li>• Child First</li> <li>• Trauma-Focused Cognitive Behavioral Therapy</li> <li>• Telehealth or Hybrid Delivery Adaptations of Select Services (i.e., Multisystemic Therapy, Functional Family Therapy, Fostering Healthy Futures Preteen and Teen)</li> </ul> <p><b>Capacity-building for CQI:</b></p> <ul style="list-style-type: none"> <li>• Onboarding to statewide platform for meeting CQI requirements<sup>iv</sup></li> <li>• Building capacity for specific services to engage in CQI<sup>iv</sup></li> </ul>
<b>LONG-TERM</b>	<p><b>In-Home Parent Skill-based Array</b></p> <ul style="list-style-type: none"> <li>• Brief Strategic Family Therapy</li> <li>• Family Spirit</li> <li>• Healthy Families America</li> <li>• Family Check-Up</li> </ul> <p><b>Mental Health Array</b></p> <ul style="list-style-type: none"> <li>• Brief Strategic Family Therapy</li> <li>• High Fidelity Wraparound</li> <li>• Fostering Healthy Futures Teen</li> <li>• Trust-Based Relational Intervention (TBRI) Caregiver Training</li> </ul>	<p><b>In-Home Parent Skill-based</b></p> <ul style="list-style-type: none"> <li>• Nurse-Family Partnership (for pregnant and parenting adolescents in foster care only)</li> <li>• Brief Strategic Family Therapy</li> <li>• Healthy Families America</li> <li>• Family Check-up</li> </ul> <p><b>Mental Health Array</b></p> <ul style="list-style-type: none"> <li>• High Fidelity Wraparound</li> <li>• Fostering Healthy Futures Teen</li> <li>• Brief Strategic Family Therapy</li> <li>• Trust-Based Relational Intervention</li> </ul> <p><b>Additional Services:</b></p> <ul style="list-style-type: none"> <li>• Differential Response</li> <li>• Colorado Community Response via Motivational Interviewing</li> </ul>	<p><b>Ongoing Rigorous Evaluation:</b></p> <ul style="list-style-type: none"> <li>• Fostering Healthy Futures Teen</li> <li>• High Fidelity Wraparound</li> <li>• Trust-Based Relational Intervention</li> </ul> <p><b>Capacity-building for CQI:</b></p> <ul style="list-style-type: none"> <li>• Onboarding to statewide platform for meeting CQI requirements<sup>iv</sup></li> <li>• Building capacity for specific services to engage in CQI<sup>iv</sup></li> </ul>



# CO Lab Strategy Report Recommendations: In-home Parent Skill-Based Service Array

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## Short-term:

Nurse-Family Partnership (NFP)

SafeCare

Child First

Parents as Teachers

## Long-term:

*Brief Strategic Family Therapy*

*Family Spirit*

*Healthy Families America*

*Family Check-Up*



Strategy for the Evidence-Based  
Aspects of the Family First Service  
Continuum



# CO Lab Strategy Report Recommendations: Mental Health Service Array

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## **Short-term:**

**Trauma-Focused CBT**

**Child First\***

**Parent-Child Interaction Therapy**

**Fostering Healthy Futures Preteen**

**Multisystemic Therapy**

**Functional Family Therapy**

## **Long-term:**

*Brief Strategic Family Therapy*

*High Fidelity Wraparound*

*Fostering Healthy Futures Teen*

*Trust-Based Relational Intervention  
(TBRI) Caregiver Training*



Strategy for the Evidence-Based  
Aspects of the Family First Service  
Continuum

## Age Range Mental Health Array

