OCFS Presentation at the Maine Coalition for Housing & Quality Services Meeting

Elissa Wynne, MSW
AD of Child Development and Behavioral Health Services
February 10, 2020

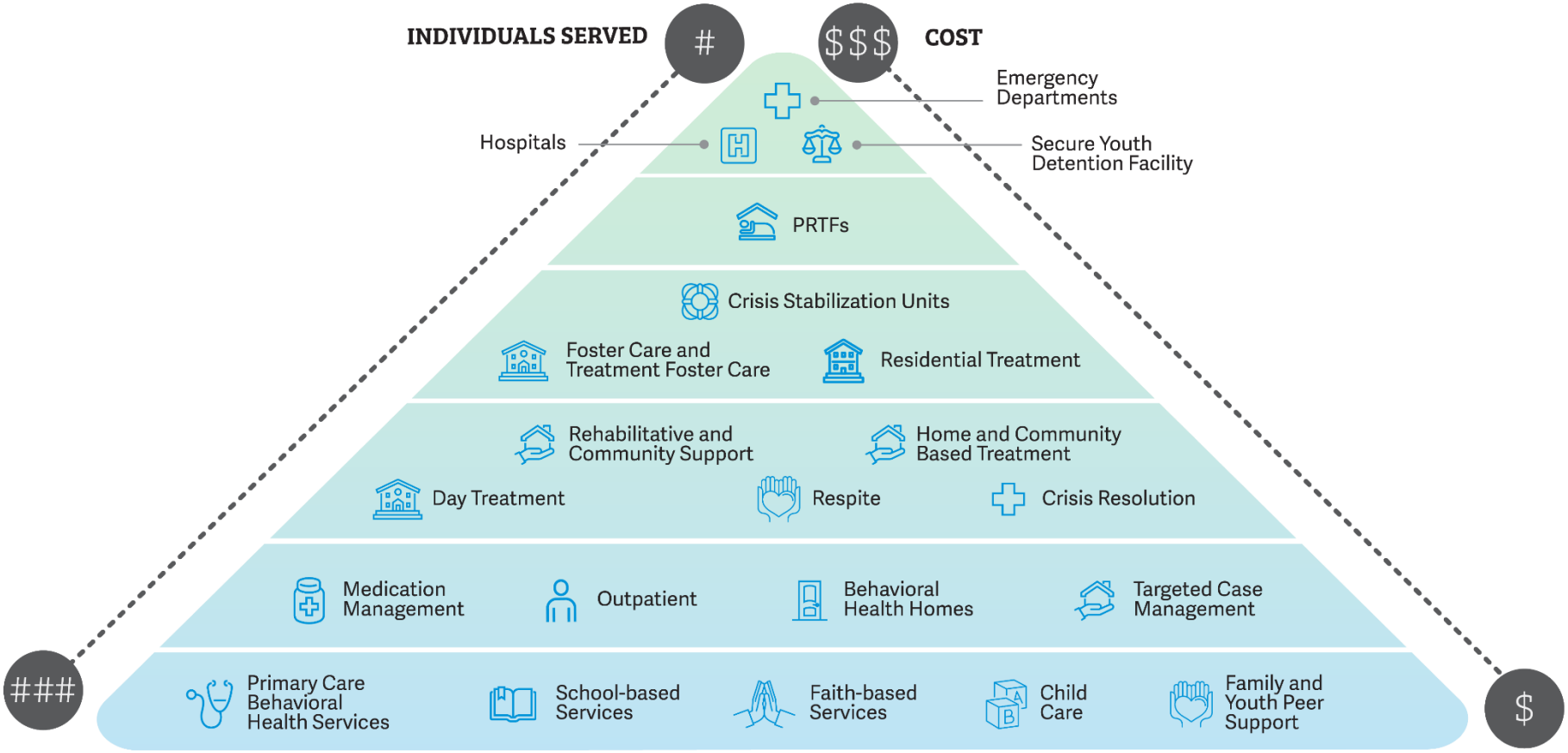
Children's Behavioral Health Services Visioning

All Maine children and their families receive the services and supports they need to live safe, healthy, and productive lives in their home, school and community.

Updated August 2019

Next update: July 2020

Children's Behavioral Health Service Array



Short Term Vision Strategies (2019 – 2022)

Implementation Roadmap Strategy	Vision Strategy
Revise the waitlist process for home- and community-based services to ensure optimal client/provider assignment	**Revise the waitlist process**
Improve coordination for youth transitioning from child to adult behavioral health services	**Improve coordination for transition-aged-youth behavioral health services**
Facilitate access to services that can help parents and families better support children with behavioral health needs	**Facilitate access to parent support services**
Amend current service definition for Section 28 (Rehabilitative and Community Services) to focus on effective, targeted interventions for I/DD and Autism	**Explore options to amend current service definition for Section 28**
Hire a full-time, on-site OCFS Medical Director	**Hire full-time, on-site OCFS Medical Director**
Clarify CBHS roles, responsibilities, procedures, policies, and practices.	**Clarify CBHS roles, responsibilities, procedures, policies, and practices.**

Long Term Vision Strategies (2019 – 2025)

Implementation Roadmap Strategy	Vision Strategy
Develop a statewide strategy to address shortages in the behavioral health care workforce	**Address shortages in the behavioral health care workforce**
Review and align residential services to best practices and new federal quality standards (Family First Prevention Services Act)	**Align residential services to best practices and federal quality standards**
Improve the quality, responsiveness, and role of children's behavioral health crisis services	**Improve CBHS crisis services**
Expand of the use of evidence-based models and evidence-informed interventions. Select evidence-based practices that align with best practices and new federal quality standards (Family First Prevention Services Act), including FFT, MST, and TF-CBT	**Expand of the use of evidence-based models and evidence-informed interventions**
Support initiatives to enhance skills of early childhood and home-based workers to address challenging behaviors in young children	**Enhance skills of early childhood workforce to address challenging behaviors**
Explore a statewide or regional "single point of access" for all children/youth to be screened for behavioral health issues under a uniform set of protocols and screening tools and be referred to the appropriate services for their level of need	**Explore a statewide or regional "single point of access"**
Develop and implement plans to establish one or more Psychiatric Residential Treatment Facilities within Maine to ensure a full continuum of care options within the state as part of a strategy to reduce or eliminate out of state placements	**Establish one or more Psychiatric Residential Treatment Facilities**

OCFS Data Dashboard Sample Screenshots

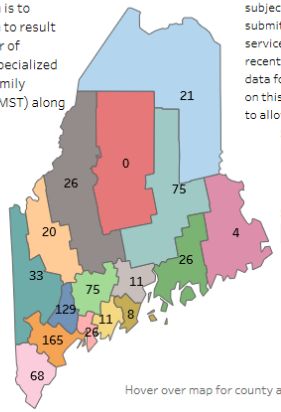
Data Dashboard

Number of Children That Received Evidence-Based Children's Behavioral Health Services

The goal of the Children's Behavioral Health system is to provide high quality services that have been proven to result in positive outcomes. This report tracks the number of children that received evidence-based services of Specialized Rehabilitative and Community Support Services, Family Functional Therapy (FFT), Multi Systemic Therapy (MST) along with MST - Problem Sexual Behavior.

State Total

All Services	698



Note: Data based on MaineCare claims and is subject to change. MaineCare billing can be submitted up to 12 months from date of service. For example, choosing the most recent month will likely contain incomplete data for the counties and state total. Based on this, data displayed has a two month delay to allow for more claims to be submitted.

Select Month/Year: October 2019

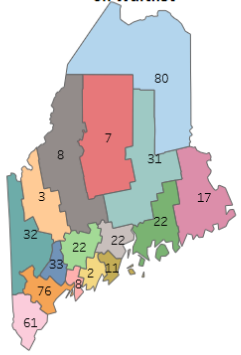
Select Service: All Services

Hover over map for county and detailed information.

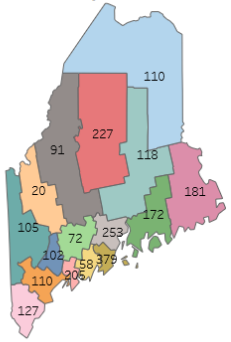
Access to Children's Behavioral Health Community-Based Services

The goal of the Children's Behavioral Health system is to provide timely access to community based behavioral health services. This report shows the number of children waiting and the average number of days children have been waiting to receive these services.

Number of Children on Waitlist



Average Number of Days on Waitlist



Select Month/Year: December 2019

Select Service: Rehabilitative and Communit...

State Total

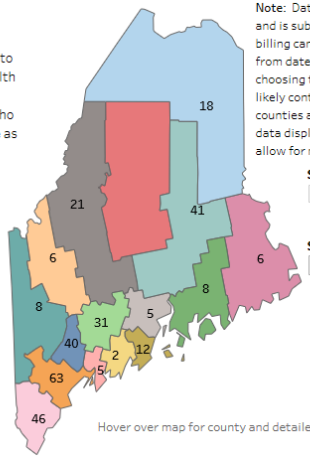
Service	
Rehabilitative and Community Services	435

Number of Children Receiving Residential Treatment Services

A goal of the Children's Behavioral Health system is to provide access to the correct level of behavioral health treatment for a child's need. This report shows the number of children from their county of residence who required and received residential treatment in state as well as out of state. Includes both children in State custody as well as those not in State custody.

State Totals

Service	
Services received in state	312



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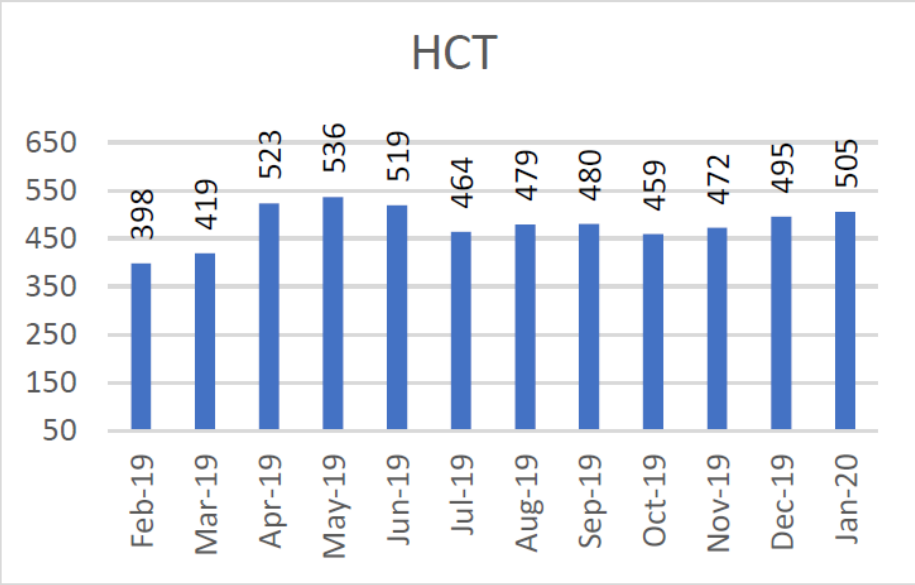
Select Service: Services received in state

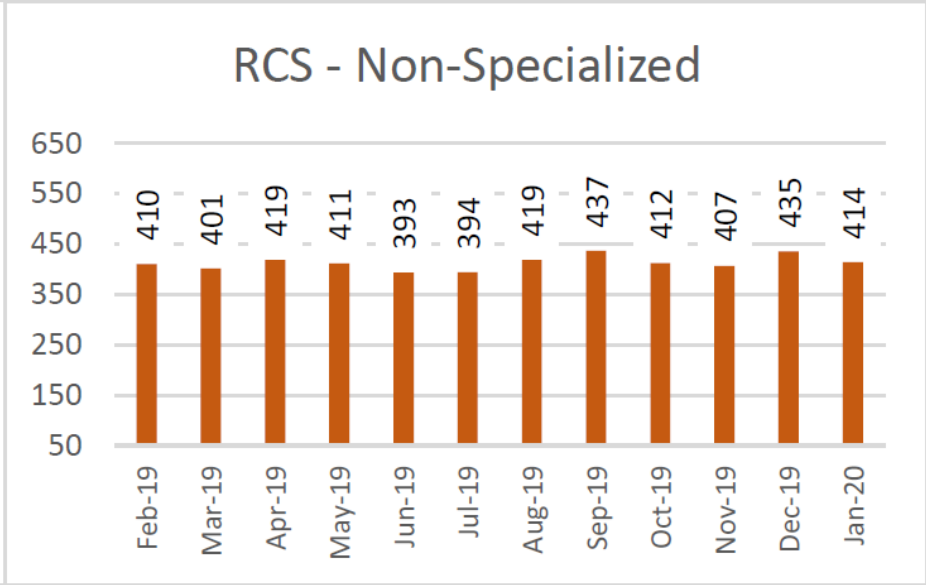
Hover over map for county and detailed information.

CBH Waitlist Trending

Home and Community Treatment



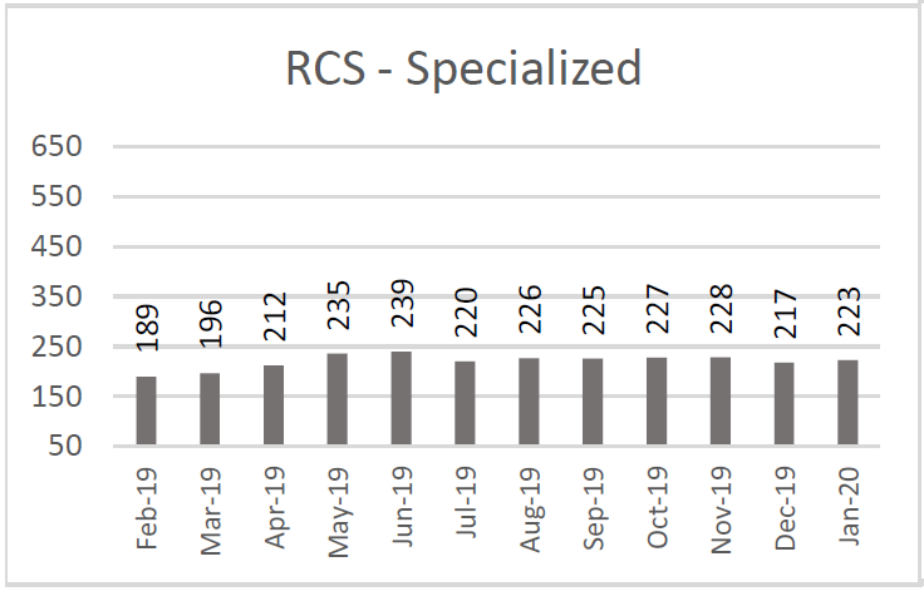
Rehabilitative Community Services



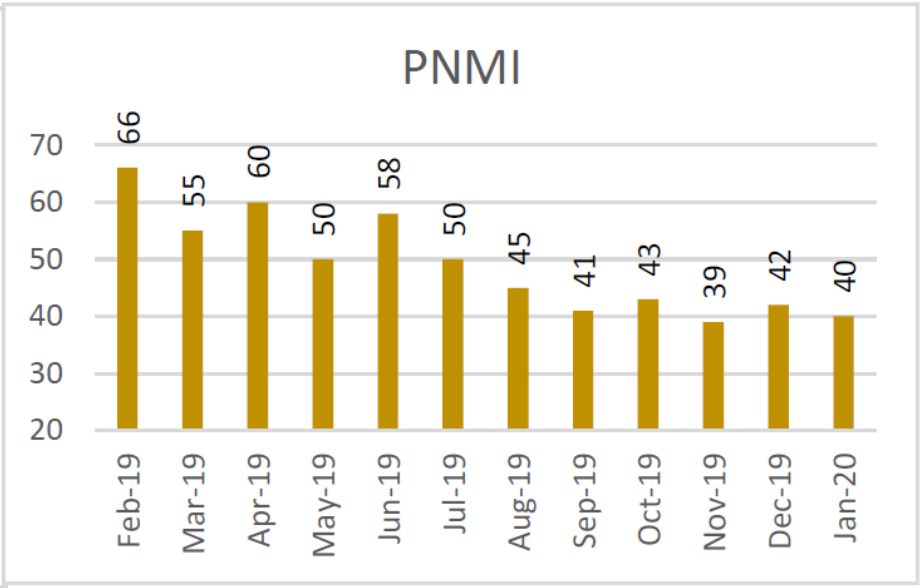
*Waitlist data provided by KEPRO
# of clients waiting for the service on the last day of the month

CBH Waitlist Trending

Rehabilitative Services



Private Non Medical Institution



*Waitlist data provided by KEPRO
# of clients waiting for the service on the last day of the month

CBHS Priorities

Waitlist

- Waitlist Advisory Group (WAG)
- Referral Management Solutions (KEPRO)
  - More information on the referral form
  - Efficiencies
- HCT Clinician Only
- BHP Recruitment
- Family Travel Reimbursement
- Provider Travel Reimbursement

CBHS Priorities

Evidence-Based Practices

- Trauma-Focused Cognitive Behavioral Therapy
- Multisystemic Therapy
- Functional Family Therapy
- System of Care Grant

Workforce

- BHP Recruitment

CBHS Priorities

Crisis

- Aftercare Services Pilot
- Training

Residential Services

- Fingerprinting
- QRTP

Other

- Child Welfare and CBHS Staff Training

Reimbursement for Families

Janet T. Mills
Governor

Jeanne M. Lambrew, Ph.D.
Commissioner

Maine Department of Health and Human Services
Child and Family Services
11 State House Station
2 Anthony Avenue
Augusta, Maine 04333-0011
Tel.: (207) 624-7900; Toll Free: (877) 680-5866
TTY: Dial 711 (Maine Relay); Fax: (207) 287-5282

Dear Parent/Guardian:

The Office of Child and Family Services (OCFS) recognizes that children make the best gains when their family is involved in treatment on a regular basis. It can be difficult to have a child placed in an out-of-home placement, and it is imperative that the child continue to remain connected to their family during their time away and in treatment. The cost of travel can sometimes be a barrier for families to engage, at the greatest level possible, in their child's treatment.

As such, OCFS will provide financial reimbursement for guardians of youth placed in out of home placement for the period of 2/1/2020 to 1/31/2021. This reimbursement is for guardians traveling to participate in their child's treatment. Participation in therapy sessions, as well as attending treatment team meetings would qualify as 'participation in treatment'. The child may be placed in Maine or in other states.

- For guardians of a child placed in Maine, OCFS will reimburse guardians who travel more than 50 miles from home to the residential placement, for bi-weekly trips (every other week) after the first 50 miles. OCFS will also reimburse one night of lodging for the bi-weekly trips, up to $75.00, if the guardian travels more than 200 miles one way.
- For guardians of a child placed in New England, OCFS will reimburse guardians who travel more than 50 miles from home to the residential placement, for bi-weekly trips (every other week) after the first 50 miles. This includes New Hampshire, Vermont, Massachusetts, Connecticut and New York. OCFS will also reimburse one night of lodging for the bi-weekly trips, up to $75.00, if the guardian travels more than 200 miles one way.
- For guardians of a child placed outside of New England, OCFS will reimburse guardians who travel once quarterly; reimbursement shall include airfare, hotel and mileage/car rental. *This does not apply to youth placed with agencies who fund quarterly trips.* Lodging reimbursement will be up to $75.00 per night, with a maximum of 4 nights per quarterly visit, if the residential program is located outside of New England.

FOR ALL GUARDIANS, the yearly maximum reimbursement to one individual or agency is $5,000.00 per state fiscal year.

For guardians with more than one child in the same residential program, one bi-weekly trip will be reimbursed per the guidelines.

For guardians with more than one child in different residential programs, one bi-weekly trip for each child will be reimbursed per the guidelines.

HOW TO RECEIVE REIMBURSEMENT:

- Guardians without a Case Manager: complete enclosed vendor form and return it in the envelope provided; submit Individual Planning Fund (IPF) request for actual mileage and any hotel accommodations/airfare/car rental. Receipts must accompany all requests. All requests will be processed by Judy Demerchant. Forms can be found at the following link: https://www.maine.gov/dhhs/ocfs/cbhs/provider/flex-funds.html
- Guardians with a Case Manager: IPF must be submitted in EIS, with accompanying documentation. Case Manager shall submit receipts and completed vendor form on behalf of family receiving reimbursement—case management agencies shall not receive reimbursements on behalf of families.
- The request will be processed when complete, and the approval letter will be sent to the person submitting the request.

Reimbursement Rates:

- Mileage will be reimbursed at .22 per mile.
- Lodging reimbursement will be up to $75.00 per night if traveling more than 200 miles one way, with a maximum of 1 night per bi-weekly visit, for residential programs in Maine and New England.
- Lodging reimbursement will be up to $75.00 per night, with a maximum of 4 nights per quarterly visit, for residential programs outside of New England.
- Airfare reimbursement will be based on average rates to closest airport to residential program from Portland, ME.

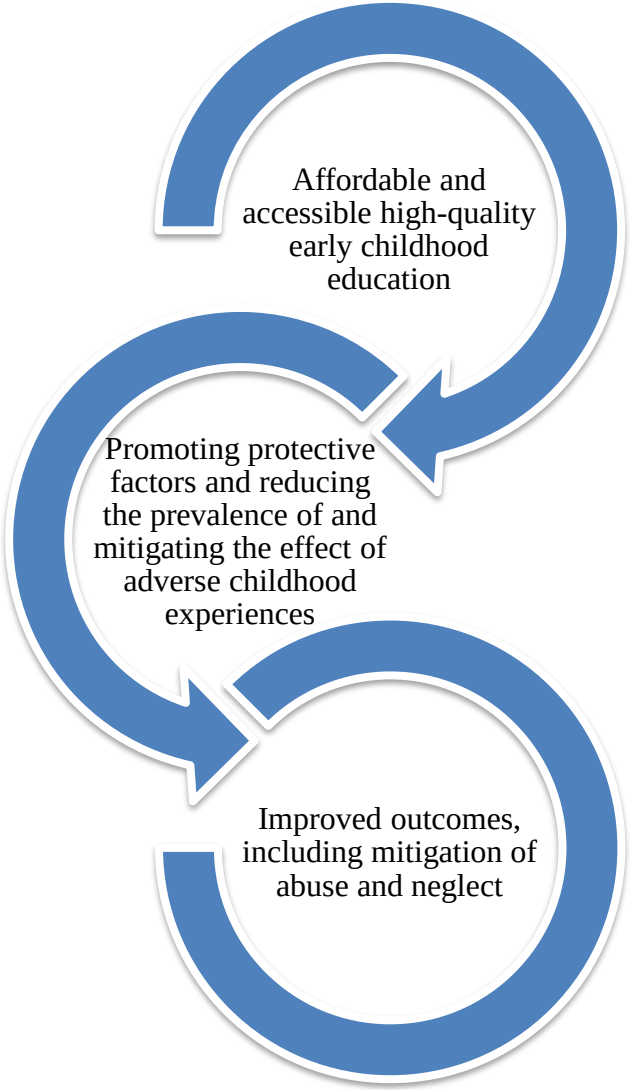
Please call Judy DeMerchant at 207-493-4135 with any questions.

Sincerely,

Elissa Wynne, MSW

Elissa Wynne, Associate Director

Early Childhood Education



Current Efforts

- Administer Federal grant funding to support early childhood education and allow parents to work or attend school or training. We currently support over 3,000 families and nearly 5,000 children with this funding. There is currently no waiting list for these services.
- Currently focused on bringing subsidy program and child care licensing into federal compliance.
- Increased reimbursement rates.
- Encouraging high-quality care by providing high reimbursement to providers that obtain quality ratings.
- Streamlining eligibility.
- Support the Maine Roads to Quality Professional Development Network to assist early childhood education staff with their professional growth and development.
- Collaborating on innovative solutions to improve the quality of child care available and provide effective and accessible professional growth and development opportunities to early childhood education staff.
- Early Childhood Mental Health Consultation

Questions?

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