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SPECIALIZED FOSTER CARE (SFC)

FREQUENTLY ASKED QUESTIONS

Below are the questions and responses from the Children's Provider Meeting on May 26, 2010.

- 1) **If a provider runs out of Field Capable Clinical Services (FCCS) funds, can a provider use Wrap Tier II Full Service Partnership (FSP) funds?**

Yes, a provider can use Wrap Tier II FSP funds as long as the following criteria are met:

- Client has an open DCFS case
- Client has EPSDT
- Provider has received a referral from the client's CSW for Wrap Tier II FSP
- Client is then enrolled in Wrap Tier II FSP

- 2) **Define "DCFS Involved."**

Mental health services to any DCFS involved child or youth can be claimed to the IS plan previously known as Basic - Enhanced Specialized Foster Care (SFC). DCFS involved children and youth are those with an open DCFS case (includes court involved, involuntary, Voluntary Family Maintenance (VFM), Voluntary Family Reunification (VFR), and Permanency Planning (PP) cases; it does not include adoption cases). ***The term does not include children and youth who are in the investigation (Emergency Response) stage of the DCFS process.***

The target population for all SFC programs is DCFS involved children and youth who are eligible for Full Scope Medi-Cal, meet medical necessity provisions, and meet the criteria for the respective SFC program (Wraparound, MAT, Enhanced SFC, etc.).

- 3) **What are the guidelines for providing Enhanced SFC services and billing to the Enhanced SFC IS Plan in terms of serving DCFS involved kids?**

The types of services provided should promote home based services, meet the unique and changing needs and strengths of the children and family involved, and support collaborative partnerships which is consistent with the Core Practice Model, which includes a focus on child and family engagement, teaming, needs and strengths-based assessment, tracking and adapting services and outcomes, and transitioning families to informal support systems. Core Practice Model Training will come in the first quarter of fiscal year 2010-11. Enhanced mental health services, including Therapeutic Behavioral Services (TBS), can be provided to those children and youth from the target population. Should a child's DCFS case close while in the course of receiving services from an enhanced SFC plan, s/he may continue to receive services the duration of the current IS episode.

- 4) **For kids in residential placements, can providers bill to Enhanced SFC?**

Yes, Enhanced SFC pays for mental health services that are consistent with the Katie A. Settlement Agreement, which promotes home-based services and family reunification. Though it can pay for mental health services for a child in residential placement, it does not pay for residential services and should not be used to support ongoing, existing services.

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- 5) **Can providers receive monthly data reports of the matched DCFS/DMH children and youth being served at their agencies? And if so, how often?**

Yes, future reports will be made available on a quarterly basis.

- 6) **If the funds for Wrap and FSP programs are exhausted, will providers get additional dollars for next fiscal year?**

Additional Tier II Wraparound funds will be made available early in Fiscal Year (FY) 2010-2011 for those providers who have demonstrated their ability to maximize their current Wraparound allocations.

- 7) **Can MAT providers get additional funds, if fully utilized?**

No, not at this time.

- 8) **Will MAT agencies that fully utilize their MAT allocation this FY receive an increase in their MAT allocation next FY?**

No, we do not anticipate being able to provide additional MAT allocations in the immediate future. However, we will be monitoring expenditures for the various SFC Programs and may reallocate funding as necessary to fulfill the obligations of the Katie A. Settlement Agreement.

- 9) **If a program is over in Wrap and under in MAT, can funds be moved?**

No, funds cannot be moved in a formal sense or in any permanent way. However, any underutilized Wraparound, MAT and Intensive In Home dollars (exclusive of Wrap Tier II FSP) can be used flexibly within the guidelines described in the January 14, 2010 memo from Dr. Southard.

- 10) **Can we accept referrals for MAT children if they are coming from other service areas?**

Yes, we would also encourage communication and coordination of MAT referrals with the DCFS and DMH MAT Coordinators involved.

- 11) **Can an RMD bulletin for MAT, Wrap and Enhanced SFC be created?**

Yes, we are working with RMD to develop guidelines for the various SFC Programs.

- 12) **Can there be MAT language in the minute order for both treatment and assessment?**

Yes, we have encouraged the use of recommended language for the MAT minute order, which does provide for assessment and any necessary treatment. However, some court rooms have chosen not to use this language.