**Indiana Family Preservation Services**

**July 9, 2021 Provider Call**

**Agenda and Questions**

1. Updates from the Evaluation Team:
	1. Elisabeth Wilson to provide updates
		1. Next fidelity update will be available within a month or so
		2. Phase 2 of Family Pres evaluation has started
			1. Analyzing front line staff by sending survey to FCMs and conducting interviews
			2. This survey is not for providers
2. INFPS formal evaluation is posted on the INFPS page. Here is the direct link: <https://www.in.gov/dcs/files/ProviderSummary_INFPS_Evaluation_2021_02_22.pdf>
3. Current research on the importance of this work: [https://www.nccprblog.org/2018/08/and-now-there-are-at-least-five-still.html?m=1](https://protect2.fireeye.com/v1/url?k=0aa380e3-5538b9d1-0aa7c9e3-8697e44c76c2-bf07f9ab6bb7810f&q=1&e=5d987444-b1bb-45c5-9691-7a895ffda8dc&u=https%3A%2F%2Fwww.nccprblog.org%2F2018%2F08%2Fand-now-there-are-at-least-five-still.html%3Fm%3D1)

How have we been doing? (Page 17, 21, 23, 33, 36)

<https://www.acf.hhs.gov/sites/default/files/documents/cb/cwo2017.pdf>

* 1. Important to understand the importance of safely keeping kids with their own families whenever possible



1. Crystal Whitis to provide brief update on her new initiative to assist FCMs with selecting providers for referrals.
	1. Goal is to put information about Family Preservation providers in one place so FCMs can find the best provider for a particular family
	2. What services do you provide within Family Preservation?
	3. What can you provide outside of Family Pres?
	4. Please submit information to your Regional Services Coordinator
		1. Focus on answering questions sent by RSC
		2. We will follow up later with more questions as needed
2. Concrete supports reminder—Please complete this form for any concrete spend, and send to Bridget McIntyre (*Bridget.McIntyre@dcs.in.gov*) or the Child Welfare Plan (*ChildWelfarePlan@dcs.in.gov*): [*https://www.in.gov/dcs/files/Expense%20Tracking%20Agencies.xlsx*](https://www.in.gov/dcs/files/Expense%20Tracking%20Agencies.xlsx)

This form has been updated to fix the date issue and is also being sent with this agenda to you. This should be completed monthly, please, and be sure to include ALL of your concrete-support spending.

1. Current referral information:



* 1. Working on provider level point-in-time data report
	2. Manual process for Bridget to compile – please be patient!
	3. Ideally, these reports will be available for you to access yourself, but we are not there yet
	4. Fidelity Report
		1. How you are entering Survey
	5. Point-in-Time
		1. Separate report, comes from Bridget
		2. Regarding children/families directly and your agency relative to state average in each category
		3. Total cases; cases with more than 90 days of service; number of maltreatment; number of removals
1. Questions submitted:
2. We continue to get different answers and requests to close out referrals with each office that we serve. We were initially going by the FCM informing us to close a case but then in another FP provider call it was mentioned that FP services should not be closed out unless the case has officially closed and we received the cancelled referral. We have followed that procedure but continue to have issues with some offices on back dating cancellations because they told us the case was closing even after we instructed them that we need to have the cancelled referral. We have kept good communication with the FCM’s but sometimes they don’t even have a date. What should we do? Can we close out based on a date from the FCM?
	1. We must serve families for as long as the case is open – we cannot just stop services for families who still have open involvement with DCS.
		1. If the case closes, you’ll need to stop serving
		2. If you continue to serve and were not notified that the case was closed, please email referral@dcs.in.gov or childwelfareplan@dcs.in.gov
		3. Sometimes when we get a court order for case closure, KidTraks backdates the closure to the court date – let us know this so we can help work through it
	2. When a family is just not participating…
		1. FCM is asking the provider if they want to close
		2. Provider is attempting several times a week to engage the family
		3. Otherwise non-billable time, but provider is going out and attempting to communicate
		4. Complete regular invoicing as long as you are continuing to attempt to engage families
			1. Providers reporting that their invoicing is begin denied in these situations
			2. Dan’s team will take another look at the invoice – email dcspaymentresearchunit@dcs.in.gov
			3. Remember that there are 1800 open cases right now – so invoicing has to be reviewed individually and some things may be missed on the first pass
			4. Number of denials is significantly decreasing since the beginning of Family Pres
		5. Keep trying to engage families!!!!
		6. If DCS decides to close the case or remove, then the referral will cancel
	3. DCS needs to decide what to do in instances such as when a family goes out of state for an entire summer, for example
3. Anything else?
	1. Can you remind me who to contact regarding denials?  Billing is being denied for services not being held during a particular week; however documentation shows attempts to do F/F contact as well as notifying DCS of not being able to make contact with client.
		1. dcspaymentresearchunit@dcs.in.gov
	2. Regarding outcome measures. We are coming up on the one year mark from when our first FP cases were discharged. One of our outcome questions is whether the family had any substantiated reports of abuse or neglect (12 months post discharge). Is this something that DCS will be tracking and we can get that information from DCS or will providers need to be completing their own surveys 12 months post discharge? This makes me wonder about the accuracy of family responses.
		1. DCS is tracking 12 months post-treatment from when families leave care
		2. Only on the evaluation population (Jan-Mar 2021 and Jan-Mar 2019)
			1. Do families get another report
			2. Do children come back into our care
		3. Families can continue with providers after case closure if you can bill third party, such as Medicaid or private insurance
	3. Question not specific to FP but is related to services provided. With Redwood we billed them a service fee for conducting drug screens. New company say they are not contracted with DCS to do so. Can you let us know what's going on with that?
		1. Redwood’s contract was also not exactly set up for the collection fee in a treatment/assessment
			1. Redwood would not allow providers to invoice Medicaid
		2. Collection should be part of the treatment/assessment
		3. You can use any provider you’d like, but DCS can only pay for screens to contracted provider – they invoice DCS for device, screening, and confirmation
		4. Regarding Family Pres – if you are providing SUD treatment under the INFPS referral, we can provide a drug screening referral to allow you to do so, or you can utilize your private lab if you prefer, but DCS can not reimburse for any screening that is not done through Cordant Health Solutions.
	4. If we receive a family preservation case with episodes of domestic violence, but we do not offer DV services, should be continue to serve this case? What if we discover concerns with DV during the assessment?
		1. There is a separate DV service standard, but you are to follow the Family Preservation, not DV.
		2. If you do not have the ability to treat the root cause issue (DV, in this situation), decline the referral
		3. If you didn’t know until the assessment – providers are encouraged to expand your clinicians’ knowledge base; then no matter what the family presents with, you can continue to work with that family
			1. There are many EBPs that include domestic violence components
			2. Many do not require specialized licensure and are not expensive
	5. Dan, how long is the current response time when we submit our questions via the list serve?
		1. Most inquiries are responded to within a day or 2. Some of the more complex can take up to a week to research, consult with others, etc
	6. When will we receive the updated service standard for therapists?
		1. Talks about updating qualifications
		2. Indiana law changing regarding sign-offs for diagnoses
			1. The law is priority – follow the law
			2. We have not had any audit findings regarding anyone signing off on diagnoses that were not supposed to
			3. It is on our list, but primarily follow the law over DCS Service Standards
	7. Just wondering if DCS isn't tracking families that are not part of the evaluation process, have we thought of an easy and uniform way for providers to get this information?
	8. DCS does still track outcomes of kids and families who are not in the formal evaluation, and will continually update overall outcomes and provider-level outcomes going forward—we are formally evaluating the service with an experimental group (cases served January – March 2021) and a control group (the same case types, January – March 2019) for the formal comparison, but we are tracking ALL cases.

Next meeting 7/23/2021 @ 1:00 EDT THANK YOU!