NEW YORK STATE | Office of Children and Family Services

FAMILY FIRST PREVENTION SERVICES ACT OF 2016

Briefing for Child Welfare Stakeholders and County Government Officials

August 30, 2016

The Family First Prevention Services Act

The Family First Prevention Services Act (H.R. 5456) was formally introduced in the US House of Representatives in June and quickly passed the House

The bill's stated intention is to increase prevention services and move children in foster care out of residential settings like group homes and congregate care

The bill is expected to be taken up again when the Senate reconvenes on September 6th

What is FFPSA?

- The proposed bill allows for Title IV-E funds to pay for preventive services (that come with significant limitations and MOE impacts)
- The bill would all but eliminate Title IV-E foster care payments for children in congregate foster care except in limited federally allowable programs
- The proposed legislation would require validation of each placement in an allowable congregate care program for which there is no federal funding
- The proposed bill adds additional unfunded costs to support provisions of the bill

$248 Million Cost to NYS and Counties

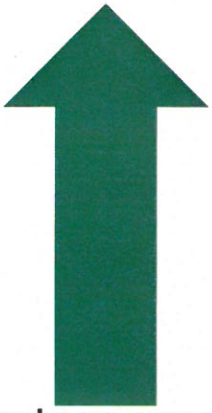
What is FFPSA?

The FFPSA, like the Fostering Connections to Success and Increasing Adoptions Act and the Child Care Development Block Grant (CCDBG) enacted in 2014 are well intended but largely unfunded

NYS and local governments simply cannot afford to implement such sweeping legislation without accompanying federal support

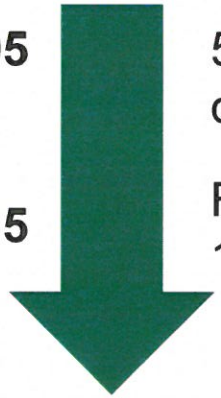
New York State's Story

Preventive Services



62/38 reimbursement: among the most robust in the U.S. Nearly 53,000 families and children served in preventive services cases

Foster Care

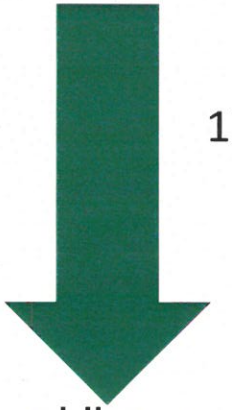


1995 54,000 children

2015 Fewer than 18,000 children

Reduced the number of children in care by 66%

Foster Care Children in Congregate Care



17.5 % (2015)

Reduced licensed bed capacity by 2,500

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Bill Provisions: Title I

Title I allows states to claim Title IV-E funding for certain preventive services

This is optional

- Effective Dates: October 1, 2016 and October 1, 2019
- Federal Title IV-E reimbursement is allowed for some preventive services, limited to 12 months per child
- Services available only for children at imminent risk of foster care and pregnant or parenting foster children; allowable services for children limited to mental health and substance abuse services
- Preventive services must have rigorous evaluations and be promising, supported or well-supported with at least 50% being well-supported
- Funding must be provided for and reported on an individual child basis
- Additional case management reporting requirements are mandated

Maintenance of Effort (MOE)

- Establishes a new State/Local MOE – spending shall be no less on "foster care prevention services and activities" than what was expended for foster care prevention in FFY 2014 under:
  - TANF
  - Title IV-B child welfare services programs
  - SSBG
  - State/local expenditures for any other state foster care prevention services and activities

The MOE impact on NYS is estimated at $300 million

*Section 111 FFPSA

Title II

Title II of the bill severely limits federal funding for children and youth in congregate care placements

This is mandatory

- Effective Date: October 1, 2019
- Federal reimbursement for congregate care is restricted to the first 14 days of placement unless certain criteria are met in federally-defined placements

Title II

The only congregate care settings that will receive federal financial support after 14 days are:

- Newly federally-defined Qualified Residential Treatment Programs (QRTPs)
- Independent living arrangements for youth 18 years and older
- Homes for pregnant/parenting teens

QRTP Requirements - Accreditation

Accreditation and licensing of QRTPs can only be done by specified accreditation entities:

- The Commission on Accreditation of Rehabilitation Facilities (CARF)
- The Joint Commission on Accreditation of HealthCare Organizations (JCAHO)
- The Council on Accreditation (COA)
- Any other independent, not-for-profit accrediting organization approved by the Secretary of HHS
- **No new federal funding to support this provision**

QRTP Requirements

Assessments:

- Each child must be assessed within 30 days of placement by an independent federally-defined qualified individual in conjunction with a federally-defined team of individuals; any changes in placement must be made within 30 days
- The courts must make an additional assessment within 60 days of placement and determine the placement is "appropriate"

Failure to complete a timely 30-day assessment will result in the loss of federal financial support for the duration of the placement

QRTPs Must:

- Provide a trauma-informed treatment model designed to meet clinical needs identified in assessment
- Have licensed nursing and clinical staff on site during business hours and on call during non-business hours
- Provide at least six months of post-placement family support services

Loss of Federal Funding

Any placements in non-eligible facilities and any delays in making required assessments for placements in federally eligible facilities within the prescribed timeframes will result in a loss of federal financial participation, in some cases, for the duration of the entire placement

Under the current Foster Care Block Grant, the County must then financially support the entire placement

Financial Impact

- Conservative estimates indicate that the fiscal impact of the bill to New York State from additional costs and lost federal funding is $248 million annually just to compensate for the drastic changes to the standards for federal funding of congregate care placements
- The state does not anticipate being in a position to increase its already significant investment in child welfare to offset this cost impact. Therefore, the cost of complying with this federal mandate will likely fall to counties and NYC
- Coupled with the large unfunded mandates provided for in the Child Care Development Block Grant, the negative financial impact would balloon to more than $500 million for New York State and localities

$248 Million Impact

If the FFPSA is implemented as currently written, the following costs would impact NYS and its counties:

- ($195M) Increased service costs for youth shifted to QRTPs and lost federal financial support for youth remaining in current congregate care facilities
- ($20M) to support administrative costs including hiring costs associated with providing oversight for licensing and technical assistance to and training for not-for-profits, and compliance with system changes
- ($3M) to comply with placement assessments, assuming all youth in congregate care settings require assessment to determine who transitions into QRTPs, as this is not currently performed

$248 Million Impact

- ($2M) for Adoption Incentive Delinking annual loss of federal funding due to delayed delinking of adoption incentive eligibility criteria in the years prior to the effective date
- ($28M) to comply with six-month post-placement mandates
- Fiscal impact for the New York State Unified Court System to comply with the 60-day requirement for a court assessment after a youth is placed in a congregate care placement is not yet final; however, this mandate would drive approximately 5,500 additional hearings in the first year

$248 Million Impact, cont'd.

Changes from current practice in NYS	Costs (in millions $)
Assumes NYS receives Federal Reimbursement for QRTPs	
Service costs for shifted youth & lost FFP	195
Administrative costs	20
Conduct mandated placement assessments	3
Adoption Delinking lost FFP	2
Compliance with 6-months post-placement activities	28
***Fiscal impact** **	**248**

* Note- Additional costs would also result from the 60-day count assessment mandate. These costs (to be determined) would drive several thousand (4-6K) additional hearings in Year 1.

Hearings should diminish to 2-3K in subsequent years.

What's Next

The Senate reconvenes on **September 6th** and will be in session briefly

New York State will continue efforts to slow the progress of the bill so that carefully crafted, equitable legislation can be substituted

What can you do?

Contact New York's two U.S. Senators and ask them to hold the bill until meaningful and fruitful debate can occur on how to best serve *ALL* of the most vulnerable children in our care.

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