Winchester CPMT Agenda

August 12, 2014, 1:30pm
Frederick/Winchester Health Department
10 Baker Street
Winchester, VA 22601

Approve Minutes from 7/8/2014

Announcements

Financial Report

a. Review of July 2014 Financials

Old Business

a. Strategic Planning & Assignment of Work Committees
   1. Foundation & Structure (Blowe, Dopkowski, Gleason)
   2. Education, Training, & Expectations (Roussos, Kiser)
   3. Data-Driven Accountability & Service Provision (Scardino, Bober)
   4. CPMT Service Development (Kish, Devine)
b. Intensive Care Coordination Services (attachment)
c. National Center for Missing and Exploited Children—Mark Gleason

New Business

a. OSC Administrative Memo #14-04(attachment)
b. OSC Administrative Memo #14-06(attachment)
c. State Sponsored Utilization Review(attachment)

Motion to Convene in Executive Session

Motion to convene in Executive Session pursuant to 2.2- 3711 (A) (4) and (15), and in accordance with the provisions of 2.2 – 5210 of the Code of Virginia for proceedings to consider the appropriate provision of services and funding for a particular child or family or both who have been referred to the family assessment and planning team and whose case is being reviewed by the community policy and management team.

Motion to Come Out of Executive Session & Immediately Reconvene in Open Session

Motion to Certify Compliance by Roll Call Vote

Move that the members of the Winchester City CPMT certify that to the best of each member's knowledge, (1) only public business matters lawfully exempted from open meeting requirements, and (2) only such public business matters were identified in the motion by which the closed meeting was convened were heard, discussed, or considered in the closed meeting.

Motion to Approve All Cases

Motion to Adjourn

Next Meeting: September 9, 2014 at 1:30pm, at Frederick/Winchester Health Department, 10 Baker Street, Winchester VA 22601

JULY MINUTES

Minutes

Winchester CPMT
10 Baker Street, Conference Room
Tuesday, July 8, 2014
2:00 p.m.

MEMBERS PRESENT
Mary Blowe, City of Winchester
Dr. Charles Devine, Virginia Dept. of Health
Amber Dopkowski, Winchester Dept. of Social Services
Mark Gleason, Northwestern Community Services Board
Craig Gerhart, City of Winchester
Lyda Kiser, Parent Representative
Sarah Kish, Winchester Public Schools
Peter Roussos, Dept. of Juvenile Justice
Paul Scardino, National Counseling Group

MEMBERS/OTHERS NOT PRESENT
Kelly Bober, Child Advocacy Center

Others Present:
Karen Farrell, Winchester Comprehensive Services Act Coordinator
Connie Greer, Winchester Dept. of Social Services
Katherine Hermann, Assistant City Attorney

RECAP OF CPMT VOTES:

Motion:	Action:	Status:
• Motioned to approve the minutes from June 10, 2014 CPMT Meeting.	1st: Dr. Devine 2nd: Ms. Dopkowski	Approved unanimously
• Motioned to approve the appointment of Winchester Public Schools Representative as Vice Chair for CPMT.	1st: Mr. Gerhart 2nd: Ms. Dopkowski	Approved unanimously
• Motion to convene in Executive Session pursuant to 2.2-3711 (A) (4) and (15), and in accordance with the provisions of 2.2 - 5210 of the Code of Virginia for proceedings to consider the appropriate provision of services and funding for a particular child or family or both who have been referred to the family assessment and planning team and whose case is being reviewed by the community policy and management team.	1st: Ms. Kiser 2nd: Dr. Devine	Approved unanimously
• Motion to come out of Executive Session	1st: Dr. Devine 2nd: Ms. Dopkowski	Approved unanimously
• Motion to Certify Compliance by Roll Call Vote Move that the members of the Winchester CPMT certify that to the best of each member's knowledge, (1) only public business matters lawfully exempted from open meeting requirements, and (2) only such public business matters were identified in the motion by which the closed meeting was convened were heard, discussed, or considered in the closed meeting.	1st: Dr. Devine 2nd: Ms. Dopkowski	Approved unanimously

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Minutes

Winchester CPMT
10 Baker Street, Conference Room
Tuesday, July 8, 2014
2:00 p.m.

Motion:	Action:	Status:
• Motion to Approve All Cases, as presented or amended	1st: Dr. Devine 2nd: Mr. Roussos	Approved Mr. Scardino abstained from 3 cases
• Motion to adjourn CPMT Meeting	1st: Ms. Dopkowski 2nd: Mr. Roussos	Approved Unanimously

Item	Discussion	Action
Call to Order/Additions to the Agenda	The meeting was opened by Chair, Mark Gleason, at 2:0 pm.	
Approval of Minutes		Dr. Devine motioned to approve the minutes from June 10, 2014. Ms. Dopkowski. Motion to approve the minutes passed unanimously.
Announcements		
Financial Report	The Financial Report was distributed and included expenditures for June, 2014 Report: June, 2014 Gross Expenditures: $90,925.54 Expenditure Refunds: $1,101.94 Net Expenditures: $89,193.60 Local Dollars: $40,690.70 Regular Medicaid Payments to Providers: $61,762.42 Local Match: $17,706.51 Wrap Dollars Funds Beginning Balance: $23,424.00 Encumbered: $100.00 Disbursed: $11,695.00 Remaining Funds: $11,629.00 Non-Mandated Funds Beginning Balance: $20,162.00 Encumbered: $4,530.00	Ms. Farrell reviewed the report.

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Minutes
Winchester CPMT
10 Baker Street, Conference Room
Tuesday, July 8, 2014
2:00 p.m.

Item	Discussion	Action
	Disbursed: $12,859.85 Remaining Funds: $2,772.15 Unduplicated Foster Care Case Count: 87	The CPMT requested an additional line item for "Cost per Child" on the Nine Year Comparison Report.
Old Business: **a. Strategic Planning Report-Assignment of Work Committees**	Four Strategic Target Areas were identified as follows: 1. CPMT Foundation and Structure (Dopkowski, Gleason, Blowe) 2. Common Ground through Education, Training and Shared Expectations (Roussos, Kiser) 3. Data-Driven Accountability and Service Provision (Scardino, Bober) 4. CPMT Services Development (Kish, Devine)	1. Goals of work committee are achieved or in process. The upload of updated CSA policy and forms is in process. Forms will be PDF "Fillable" forms. 2. Meeting pending. 3. No report. 4. No report.
b. Eligibility Determination for Non-Medicaid Children		Mr. Gleason, Mr. Scardino and Ms. Dopkowski to schedule a meeting to review the Request for Quote template.
c. Intensive Care Coordination Services		No update from Office of Comprehensive Services (OCS).
d. CPMT Chair and Vice Chair Rotation	Vice Chair rotation	DJJ is not able to perform duties of Vice Chair at this time due to staffing shortage. The representative from Winchester Public Schools agreed to Vice Chair role, assuming Chair role on July 1, 2015 in accordance with this revised rotation schedule.

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Minutes

Winchester CPMT
10 Baker Street, Conference Room
Tuesday, July 8, 2014
2:00 p.m.

Item	Discussion	Action
e. National Center for Missing and Exploited Children	Mr. Gleason explained the collaborative arrangement between NWCSB and the National Center for Missing and Exploited Children (NCMEC). NWCSB is currently the only agency with this relationship.	Mr. Gleason requested the CPMT to consider partnering with the NWCSB and NCMEC to be part of a collaborative model to assist in connecting victim's families with appropriate services. The Agencies represented agreed to cooperate in this effort.
New Business f. **Resolution of CPMT Meetings 2014/2015**	Resolution No. 2015-01 regarding the dates and times of regularly scheduled CPMT meetings	Dr. Devine motioned to approve Resolution No. 2015-01 regarding the dates and times of regularly scheduled CPMT meetings. Discussion ensued. A start time of 1:30 p.m. for the regularly scheduled CPMT meetings was suggested. Mr. Scardino seconded the motion as amended. The motion passed unanimously.
Motion to Convene in Executive Session	Motion to convene in Executive Session pursuant to 2.2-3711 (A) (4) and (15), and in accordance with the provisions of 2.2 – 5210 of the Code of Virginia for proceedings to consider the appropriate provision of services and funding for a particular child or family or both who have been referred to the family assessment and planning team and whose case is being reviewed by the community policy and management team.	Mr. Gleason asked that the meeting move into Executive Session. On motion by Ms. Kiser, seconded by Dr. Devine, the meeting moved into Executive Session.
Motion to Come Out of Executive Session & Immediately Reconvene in Open Session		Motion to come out of Executive Session by Dr. Devine and seconded by Ms. Dopkowski. Approved unanimously.
Motion to Certify Compliance by Roll Call Vote	Move that the members of the Winchester CPMT certify that to the best of each member's knowledge, (1) only public business matters lawfully exempted from open meeting requirements, and (2) only such public business matters were identified in the motion by which the closed meeting was convened were heard, discussed, or considered in the closed meeting.	Motion to Certify Compliance by Roll Call Vote was made by Dr. Devine, seconded by Ms. Dopkowski, and unanimously approved.
Motion to Approve All Cases	Motion to Approve all cases as accepted or amended. Mr. Scardino – abstained from 3 cases	All cases were approved, as noted, on motion by Dr. Devine, seconded by Mr. Roussos. Motion

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Minutes
Winchester CPMT
10 Baker Street, Conference Room
Tuesday, July 8, 2014
2:00 p.m.

Item	Discussion	Action
		was approved with noted abstentions.
Motion to Adjourn/Next Meeting Date	The next CPMT meeting will be held Tuesday August 12, 2014 at 1:30 p.m., Winchester/Frederick County Health Department, 10 Baker Street, Conference Room, Winchester VA	The meeting was adjourned on motion by Ms. Dopkowski and seconded by Mr. Roussos at 3:15 p.m.

Attachments: May 2014 Financials
June Agenda Attachments

Transcribed by CPG

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CSA Pool Reimbursement Request Report Worksheet

Chart A

Date: July 1, 2014

Period Ending: June, 2014

Part 1 - Expenditure Description

		Number of Clients	Gross Total Expenditures	Expenditure Refunds	Net Total Expenditures
1.	**Congregate Care/Mandated & Non-Mandated Residential Services**				
1a.	Foster Care - IV-E Child in Licensed Residential Congregate Care	1	1,812.50		**1,812.50**
1b.	Foster Care - all other in Licensed Residential Congregate Care	1	20,449.03	9.45	**20,439.58**
1c.	Residential Congregate Care - CSA Parental Agreements; DSS Non-Custodial		0.00		**0.00**
1d.	Non-Mandated Services/Residential/Congregate Care		0.00		**0.00**
1e.	Educational Services - Congregate Care	3	23,056.75		**23,056.75**
2.	**Other Mandated Services**				
2a.	Treatment Foster Care - IV-E	9	21,465.50	60.00	**21,405.50**
2a.1	Treatment Foster Care		0.00		**0.00**
2a.2	Treatment Foster Care - CSA Parental Agreements; DSS Non-Custodial		0.00		**0.00**
2b.	Specialized Foster Care - IV-E; Community Based Services		0.00		**0.00**
2b.1	Specialized Foster Care			41.97	**-41.97**
2c.	Family Foster Care - IV-E; Community Based Services	6	1,216.41		**1,216.41**
2d.	Family Foster Care Maintenance Only	1	666.00	828.52	**-162.52**
2e.	Family Foster Care - Children Receiving Maintenance/Basic Activities; IL	4	2,155.20	87.00	**2,068.20**
2f.	Community Based Services	8	10,268.15	75.00	**10,193.15**
2f.1	Community Transition Services		0.00		**0.00**
2g.	Special Education Private Day Placement	2	8,514.75		**8,514.75**
2h.	Wrap-Around Services for Students With Disabilities		0.00		**0.00**
2i.	Psychiatric Hospitals/Crisis Stabilization Units		0.00		**0.00**
3.	Non-Mandated Services/Community Based	1	691.25		**691.25**
4.	**Grand Totals: Sum of categories 1 through 3**	**36**	**90,295.54**	**1,101.94**	**89,193.60**

Part 2 - Expenditure Refund Description (reported in line 4)

Vendor Refunds and Payment Cancellations	
Parental Co-Payments	
Payments made on behalf of the child (SSA, SSI, VA benefits)	741.00
Child Support Collections through DCSE	360.94
Pool prior-reported expenditures re-claimed under IV-E	
Other (specify)	
Total Refunds (must agree with line 4)	**1,101.94**

Chart B

CSA Comprehensive Services Act

CSA Statistics Home > CSA Pool Reporting

CSA Reports Pool Reimbursement Reports FY14 Transaction History for Winchester - FIPS 840

Pended Forms are not on this report

Active Pool Report Preparers

Nancy Valentine (540) 686-4838
Donna Veach (540) 686-4826
Amber Johnson (540) 686-4823
Karen Farrell (540) 686-4832

Transaction History

Match Rate: 0.4587	Status	Period End	Date Filed	Total Amount	State	Local
Beginning Balance				**$1,218,121.00**	**$659,331.00**	**$558,790.00**
Pool Reimbursement History						
	9	07/31/2013	08/02/2013	$166.42	$493.75	($327.33)
	9	08/31/2013	09/05/2013	$70,156.19	$40,942.14	$29,214.05
	9	09/30/2013	10/01/2013	$76,193.02	$44,898.67	$31,294.35
	9	10/31/2013	11/01/2013	$76,052.90	$47,385.06	$28,667.84
	9	11/30/2013	12/02/2013	$109,379.65	$62,089.91	$47,289.74
	9	12/31/2013	01/07/2014	$103,368.41	$57,125.30	$46,243.11
	9	01/31/2014	02/04/2014	$108,602.83	$59,713.28	$48,889.55
	9	02/28/2014	03/05/2014	$115,147.77	$63,686.43	$51,461.34
	9	03/31/2014	04/01/2014	$66,667.82	$38,763.54	$27,904.28
	9	04/30/2014	05/01/2014	$152,250.00	$81,510.21	$70,739.79
	9	05/31/2014	06/02/2014	$30,652.63	$19,820.25	$10,832.38
	5	06/30/2014	07/02/2014	$89,193.60	$48,502.90	$40,690.70
Pool Reimbursement Expenditure Totals				**$997,831.24**	**$564,931.44**	**$432,899.80**
Supplement History						
			04/25/2014	$40,839.00	$49,346.00	($8,507.00)
Supplement Totals				**$40,839.00**	**$49,346.00**	**($8,507.00)**
CSA System Balance				**$261,128.76**	**$143,745.56**	**$117,383.20**

Transaction History without WRAP Dollars

Match Rate: 0.4587	Status Period End	Date Filed	Total Amount	State	Local
Beginning Balance			**$1,194,697.00**	**$646,652.00**	**$548,045.00**
Pool Reimbursement History					
	- 07/31/2013	08/02/2013	$166.42	$493.75	($327.33)
	- 08/31/2013	09/05/2013	$64,626.19	$37,948.75	$26,677.44
	- 09/30/2013	10/01/2013	$74,333.02	$43,891.85	$30,441.17
	- 10/31/2013	11/01/2013	$75,432.90	$47,049.45	$28,383.45
	- 11/30/2013	12/02/2013	$107,904.65	$61,291.49	$46,613.16
	- 12/31/2013	01/07/2014	$102,858.41	$56,849.24	$46,009.17
	- 01/31/2014	02/04/2014	$108,302.83	$59,550.89	$48,751.94
	- 02/28/2014	03/05/2014	$115,147.77	$63,686.43	$51,461.34
	- 03/31/2014	04/01/2014	$65,267.82	$38,005.72	$27,262.10
	- 04/30/2014	05/01/2014	$152,250.00	$81,510.21	$70,739.79
	- 05/31/2014	06/02/2014	$30,652.63	$19,820.25	$10,832.38
	- 06/30/2014	07/02/2014	$89,193.60	$48,502.90	$40,690.70
Pool Reimbursement Expenditure Totals			**$986,136.24**	**$558,600.93**	**$427,535.31**
Supplement History					
		04/25/2014	$40,839.00	$49,346.00	($8,507.00)
Supplement Totals			**$40,839.00**	**$49,346.00**	**($8,507.00)**
CSA System Balance (Non-WRAP):			**$249,399.76**	**$137,397.07**	**$112,002.69**

Transaction History WRAP dollars only

Match Rate: 0.4587	Status Period End	Date Filed	Total Amount	State	Local
WRAP Allocation Additions History					
		08/01/2013	$19,138.00	$10,358.00	$8,779.00
		10/25/2013	$4,286.00	$2,319.00	$1,966.00
WRAP Allocation Additions Totals			**$23,424.00**	**$12,677.00**	**$10,745.00**

Pool Reimbursement History - WRAP only

-	07/31/2013	08/02/2013	$0.00	$0.00	$0.00
-	08/31/2013	09/05/2013	$5,530.00	$2,993.39	$2,536.61
-	09/30/2013	10/01/2013	$1,860.00	$1,006.82	$853.18
-	10/31/2013	11/01/2013	$620.00	$335.61	$284.39
-	11/30/2013	12/02/2013	$1,475.00	$798.42	$676.58
-	12/31/2013	01/07/2014	$510.00	$276.06	$233.94
-	01/31/2014	02/04/2014	$300.00	$162.39	$137.61
-	02/28/2014	03/05/2014	$0.00	$0.00	$0.00
-	03/31/2014	04/01/2014	$1,400.00	$757.82	$642.18
-	04/30/2014	05/01/2014	$0.00	$0.00	$0.00
-	05/31/2014	06/02/2014	$0.00	$0.00	$0.00
-	06/30/2014	07/02/2014	$0.00	$0.00	$0.00
Pool Reimbursement Expenditure Totals -WRAP only			**$11,695.00**	**$6,330.51**	**$5,364.49**
CSA System Balance (WRAP only):			**$11,729.00**	**$6,348.70**	**$5,380.30**

Chart C

Wrap-Around Services for Students with Disabilities
2013 - 2014

Child	7	2	9	11	13	12	6	TOTAL SPENT
Agency	WPS-NREP	WPS-NREP	WPS-NREP	WPS	WPS	WPS-NREP	NWCSB	
Worker	Clatter	Clatter	Clatter	Kish	Kish	Clatter	Hines	
JUL								0.00
AUG	1,620.00	260.00	480.00	40.00	400.00	2,490.00	240.00	5,530.00
SEP	1,260.00		600.00					1,860.00
OCT			180.00				440.00	620.00
NOV	1,140.00			80.00	255.00			1,475.00
DEC		130.00		40.00	340.00			510.00
JAN		130.00			170.00			300.00
FEB								0.00
MAR				100.00		1,300.00		1,400.00
APR								0.00
MAY								0.00
JUN								0.00
TOTAL/ CHILD	4,020.00	520.00	1,260.00	260.00	1,165.00	3,790.00	680.00	11,695.00
				Beginning Balance				**23,424.00**
				Disbursed				11,695.00
				Encumbered				100.00
				Remaining Funds				**11,629.00**

Non-Mandated Funds
2013-2014

Chart D

Child	7	4	1	8	10	13	2	14	3	15	5	16	TOTAL SPENT
	WPS												
Agency	**NREP**	**WPS**	**NWCSB**	**WPS**	**WPS**	**WPS**	**NREP**	**WPS**	**WPS**		**DJJ**	**NWCSB**	
Worker	Clatter	McK	Yowell	McK	McK	Kish	Clatter	McK	McK		Perry		
JUL													0.00
AUG			405.00		394.00						475.00		1,274.00
SEP					550.60	340.00	260.00				450.00		1,600.60
OCT		225.00	1,080.00		536.80	340.00	260.00	40.00					2,481.80
NOV	990.00		675.00	225.00			130.00						2,020.00
DEC	870.00		495.00		67.20								1,432.20
JAN	540.00		270.00										810.00
FEB			360.00	120.00					465.00				945.00
MAR				30.00					360.00	225.00			615.00
APR				30.00					400.00	50.00			480.00
MAY									360.00	150.00			510.00
JUN												691.25	691.25
JUN 1													0.00
													0.00
TOTAL/													0.00
CHILD	2,400.00	225.00	3,285.00	405.00	1,548.60	680.00	650.00	40.00	1,585.00	425.00	925.00	691.25	12,859.85
		Beginning Balance											**20,162.00**
		Disbursed											12,859.85
		Encumbered											4,530.00
		Remaining Funds											**2,772.15**

Nine Year Comparison Chart

Chart E

	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013 - 2014
July	6,498.08	295.28	4,911.51	10,266.93	9,458.29	5,069.89	3,038.21	3,166.90	166.42
August	157,319.26	301,614.45	229,488.55	191,849.47	145,415.77	113,164.41	145,670.33	92,757.41	70,156.19
September	151,160.78	221,315.88	162,491.89	219,001.82	128,872.42	140,623.38	126,252.80	146,176.67	76,193.02
October	93,777.46	278,714.69	272,889.23	186,159.65	159,100.81	125,383.16	113,566.55	132,011.04	76,052.90
November	238,833.64	220,279.28	218,628.54	199,049.04	117,450.86	161,810.81	117,093.83	112,159.19	109,379.65
December	178,871.60	224,376.62	220,635.60	159,066.88	111,673.88	107,885.14	101,861.19	116,376.55	103,368.41
January	180,029.22	221,742.92	224,949.12	128,052.33	130,627.75	142,931.48	151,908.54	163,869.33	108,602.83
February	194,620.61	207,392.25	113,213.17	127,964.87	83,063.75	133,838.60	121,575.88	107,440.05	115,147.77
March	149,559.13	170,101.10	264,666.84	168,271.90	119,700.47	144,940.45	117,899.40	120,489.59	66,667.82
April	229,081.25	227,323.93	236,615.22	142,434.91	136,286.49	160,351.57	101,993.55	108,460.48	152,250.00
May	267,902.81	216,049.75	224,636.22	126,503.97	128,319.69	173,228.70	121,909.56	127,950.48	30,652.63
June	374,199.30	228,889.80	246,399.13	175,922.47	132,160.41	111,218.28	126,270.80	87,566.12	89,193.60
June (2)		279,563.29	202,903.78	155,089.52	143,870.07	212,852.44	155,010.08	136,161.26	
		9,753.59							
	2,208,856.98	2,807,412.83	2,622,428.80	1,989,633.76	1,546,000.66	1,733,298.31	1,504,050.72	1,454,585.07	997,831.24
Medicaid Pay.	704,460.84	742,443.68	788,982.19	553,523.98	542,278.28	445,437.88	26,551.56	202,738.74	61,762.42
TOTAL	2,913,317.82	3,549,856.51	3,411,410.99	2,543,157.74	2,088,278.94	2,178,736.19	1,530,602.28	1,657,323.81	1,059,593.66
Med. Loc. Match	161,568.09	170,279.46	180,953.07	110,657.07	95,542.20	82,464.82	7,612.00	58,122.66	17,706.51
CSA Local Share	1,013,202.68	1,287,760.27	1,202,908.08	826,992.80	616,075.51	716,796.97	642,150.99	633,091.05	392,209.10
# Children Served	103	96	95	105	114	116	97	75	87
								(unduplicated youth served YTD)	(unduplicated youth served YTD)

Winchester Community Policy and
Management Team

24 Baker Street
Winchester, VA 22601
540-662-3087
www.winchesterva.gov

I, Mark Gleason, Chairperson of Winchester Community Policy and Management Team, hereby certify on this 8th day of July 2014 that the following Resolution is a true and exact copy of one and the same adopted by the Community Policy and Management Team of the City of Winchester, assembled in regular session on the 8th of July 2014.

RESOLUTION

WHEREAS, the Community Policy and Management Team of the City of Winchester, Virginia, finds it desirable to establish a schedule of its Regular Meetings for the period beginning July 8, 2014 and concluding June 30, 2015; and

NOW THEREFORE, BE IT RESOLVED that all meetings hereinafter described shall be conducted at the Frederick-Winchester Health Department, 10 Baker Street, Winchester, Virginia, beginning at 1:30 P.M. for the Regular Meeting.

BE IT FURTHER RESOLVED that the following schedule of Regular Meetings is, hereby, adopted.

Schedule of Regular Meetings

July 8, 2014 (2:00 p.m.)	January 13, 2015
August 12, 2014	February 10, 2015
September 9, 2014	March 10, 2015
October 14, 2014	April 14, 2015
November 11, 2014	May 12, 2015
December 9, 2014	June 9, 2015

Resolution No. 2015-01.

ADOPTED by the Community Policy and Management Team of the City of Winchester on the 8th day of July 2014.

Witness under my hand,

Mark Gleason,
Chairperson
Community Policy and Management Team

JULY FINANCIALS

CSA Pool Reimbursement Request Report Worksheet

Date: August 5, 2014

Period Ending: July, 2014

Chart A

Part 1 - Expenditure Description

		Number of Clients	Gross Total Expenditures	Expenditure Refunds	Net Total Expenditures
1.	**Congregate Care/Mandated & Non-Mandated Residential Services**				
1a.	Foster Care - IV-E Child in Licensed Residential Congregate Care				**0.00**
1b.	Foster Care - all other in Licensed Residential Congregate Care			0.31	**-0.31**
1c.	Residential Congregate Care - CSA Parental Agreements; DSS Non-Custodial				**0.00**
1d.	Non-Mandated Services/Residential/Congregate Care				**0.00**
1e.	Educational Services - Congregate Care				**0.00**
2.	**Other Mandated Services**				
2a.	Treatment Foster Care - IV-E				**0.00**
2a.1	Treatment Foster Care				**0.00**
2a.2	Treatment Foster Care - CSA Parental Agreements; DSS Non-Custodial				**0.00**
2b.	Specialized Foster Care - IV-E; Community Based Services				**0.00**
2b.1	Specialized Foster Care			83.94	**-83.94**
2c.	Family Foster Care - IV-E; Community Based Services				**0.00**
2d.	Family Foster Care Maintenance Only	2	1,148.00	966.00	**182.00**
2e.	Family Foster Care - Children Receiving Maintenance/Basic Activities; IL	1	541.00	292.00	**249.00**
2f.	Community Based Services			75.00	**-75.00**
2f.1	Community Transition Services				**0.00**
2g.	Special Education Private Day Placement				**0.00**
2h.	Wrap-Around Services for Students With Disabilities				**0.00**
2i.	Psychiatric Hospitals/Crisis Stabilization Units				**0.00**
3.	Non-Mandated Services/Community Based				**0.00**
4.	**Grand Totals: Sum of categories 1 through 3**	**3**	**1,689.00**	**1,417.25**	**271.75**

Part 2 - Expenditure Refund Description (reported in line 4)

Vendor Refunds and Payment Cancellations	
Parental Co-Payments	
Payments made on behalf of the child (SSA, SSI, VA benefits)	946.00
Child Support Collections through DCSE	471.25
Pool prior-reported expenditures re-claimed under IV-E	
Other	
Total Refunds (must agree with line 4)	**1,417.25**

CSA Comprehensive Services Act

Chart B

CSA Reports Pool Reimbursement Reports FY15 Transaction History for Winchester - FIPS 840
Pended Forms are not on this report

Active Pool Report Preparers
Nancy Valentine (540) 686-4838
Donna Veach (540) 686-4826
Amber Johnson (540) 686-4823
Karen Farrell (540) 686-4832

Transaction History

Match Rate: 0.4587	Status	Period End	Date Filed	Total Amount	State	Local
Beginning Balance				**$1,195,388.00**	**$647,025.72**	**$548,362.28**
Pool Reimbursement History						
	5	07/31/2014	08/06/2014	$271.75	$129.94	$141.81
Pool Reimbursement Expenditure Totals				**$271.75**	**$129.94**	**$141.81**
Supplement History						
Supplement Totals				**$0.00**	**$0.00**	**$0.00**
CSA System Balance				**$1,195,116.25**	**$646,895.78**	**$548,220.47**

Transaction History without WRAP Dollars

Match Rate: 0.4587	Status	Period End	Date Filed	Total Amount	State	Local
Beginning Balance				**$1,176,583.00**	**$636,846.99**	**$539,736.01**
Pool Reimbursement History						
	-	07/31/2014	08/06/2014	$271.75	$129.94	$141.81
Pool Reimbursement Expenditure Totals				**$271.75**	**$129.94**	**$141.81**

Supplement History			
Supplement Totals	**$0.00**	**$0.00**	**$0.00**
CSA System Balance (Non-WRAP):	**$1,176,311.25**	**$636,717.05**	**$539,594.20**

Transaction History WRAP dollars only

Match Rate: 0.4587	**Status Period End**	**Date Filed**	**Total Amount**	**State**	**Local**
WRAP Allocation Additions History					
		08/06/2014	$18,805.00	$10,178.00	$8,626.00
WRAP Allocation Additions Totals			**$18,805.00**	**$10,178.00**	**$8,626.00**
Pool Reimbursement History - WRAP only					
	- 07/31/2014	08/06/2014	$0.00	$0.00	$0.00
Pool Reimbursement Expenditure Totals -WRAP only			**$0.00**	**$0.00**	**$0.00**
CSA System Balance (WRAP only):			**$0.00**	**$0.00**	**$0.00**

Chart C

Wrap-Around Services for Students with Disabilities
2014 - 2015

Child	7	2	9	11	13	12	6	TOTAL SPENT
Agency	WPS-NREP	WPS-NREP	WPS-NREP	WPS	WPS	WPS-NREP	NWCSB	
Worker	Clatter	Clatter	Clatter	Kish	Kish	Clatter	Hines	
JUL								0.00
AUG								
SEP								
OCT								
NOV								
DEC								
JAN								
FEB								
MAR								
APR								
MAY								
JUN								
TOTAL/								
CHILD								
				Beginning Balance				**18,805.00**
				Disbursed				0.00
				Encumbered				0.00
				Remaining Funds				**18,805.00**

Non-Mandated Funds
2014 - 2015

Chart D

Child	7	4	1	8	10	13	2	14	3	15	5	16	TOTAL
	WPS												SPENT
Agency	**NREP**	**WPS**	**NWCSB**	**WPS**	**WPS**	**WPS**	**NREP**	**WPS**	**WPS**		**DJJ**	**NWCSB**	
Worker	Clatter	McK	Yowell	McK	McK	Kish	Clatter	McK	McK		Perry		
JUL													0.00
AUG													
SEP													
OCT													
NOV													
DEC													
JAN													
FEB													
MAR													
APR													
MAY													
JUN													
JUN 1													
TOTAL/													
CHILD													
		Beginning Balance											**20,162.00**
		Disbursed											
		Encumbered											8,393.75
		Remaining Funds											**11,768.25**

Nine Year Comparison Chart

Chart E

	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013 -2014	2014-2015
July	295.28	4,911.51	10,266.93	9,458.29	5,069.89	3,038.21	3,166.90	166.42	271.75
August	301,614.45	229,488.55	191,849.47	145,415.77	113,164.41	145,670.33	92,757.41	70,156.19	
September	221,315.88	162,491.89	219,001.82	128,872.42	140,623.38	126,252.80	146,176.67	76,193.02	
October	278,714.69	272,889.23	186,159.65	159,100.81	125,383.16	113,566.55	132,011.04	76,052.90	
November	220,279.28	218,628.54	199,049.04	117,450.86	161,810.81	117,093.83	112,159.19	109,379.65	
December	224,376.62	220,635.60	159,066.88	111,673.88	107,885.14	101,861.19	116,376.55	103,368.41	
January	221,742.92	224,949.12	128,052.33	130,627.75	142,931.48	151,908.54	163,869.33	108,602.83	
February	207,392.25	113,213.17	127,964.87	83,063.75	133,838.60	121,575.88	107,440.05	115,147.77	
March	170,101.10	264,666.84	168,271.90	119,700.47	144,940.45	117,899.40	120,489.59	66,667.82	
April	227,323.93	236,615.22	142,434.91	136,286.49	160,351.57	101,993.55	108,460.48	152,250.00	
May	216,049.75	224,636.22	126,503.97	128,319.69	173,228.70	121,909.56	127,950.48	30,652.63	
June	228,889.80	246,399.13	175,922.47	132,160.41	111,218.28	126,270.80	87,566.12	89,193.60	
June (2)	279,563.29	202,903.78	155,089.52	143,870.07	212,852.44	155,010.08	136,161.26		
	9,753.59								
	2,807,412.83	2,622,428.80	1,989,633.76	1,546,000.66	1,733,298.31	1,504,050.72	1,454,585.07	997,831.24	
Medicaid Pay.	742,443.68	788,982.19	553,523.98	542,278.28	445,437.88	26,551.56	202,738.74	109,375.92	
TOTAL	3,549,856.51	3,411,410.99	2,543,157.74	2,088,278.94	2,178,736.19	1,530,602.28	1,657,323.81	1,107,207.16	271.75
Med. Loc. Match	170,279.46	180,953.07	110,657.07	95,542.20	82,464.82	7,612.00	58,122.66	31,356.71	
CSA Local Share	1,287,760.27	1,202,908.08	826,992.80	616,075.51	716,796.97	642,150.99	633,091.05	432,899.80	141.81
# Children Served	96	95	105	114	116	97	75	90	3
							unduplicated	unduplicated	unduplicated
							youth served	youth served	youth served
							Y-T-D	Y-T-D	Y-T-D
									90.58
									Average
									per child

Chart F

CITY OF WINCHESTER
COMPREHENSIVE SERVICES FUND BALANCE
COMPREHENSIVE SERVICE ACT

FUND NAME	REVISED BUDGET	EXPENDITURES	FUND BALANCE	ENCUMBRANCES	FUND BALANCE	UNAPPROVED CREDIT AUTHORIZATIONS & POSOS	ADJUSTED FUND BALANCE
C14 CSA MANDATED 13/14 ASSIST	0.00	(19,929.45)	19,929.45	0.00	19,929.45	0.00	19,929.45
C14 CSA MANDATED 13/14 POS	1,235,536.00	1,148,313.47	87,222.53	55,890.87	31,331.66	0.00	31,331.66
C14 CSA NON-MANDATED 13/14 POS	20,162.00	14,917.35	5,244.65	770.00	4,474.65	0.00	4,474.65
C14 CSA W/A SRVS FOR STUDENTS 13/14 POS	23,424.00	11,795.00	11,629.00	0.00	11,629.00	0.00	11,629.00
C15 CSA MANDATED 14/15 ASSIST	16,000.00	1,227.00	14,773.00	0.00	14,773.00	0.00	14,773.00
C15 CSA MANDATED 14/15 POS	1,140,421.00	0.00	1,140,421.00	493,520.28	646,900.72	4,872.00	642,028.72
C15 CSA NON-MANDATED 14/15 POS	20,162.00	0.00	20,162.00	8,273.75	11,888.25	120.00	11,768.25
C15 CSA W/A SRVS FOR STUDENTS 14/15	4,000.00	0.00	4,000.00	0.00	4,000.00	0.00	4,000.00
C15 CSA W/A SRVS FOR STUDENTS 14/15 POS	14,805.00	0.00	14,805.00	0.00	14,805.00	0.00	14,805.00
	2,474,510.00	1,156,323.37	1,318,186.63	558,454.90	759,731.73	4,992.00	754,739.73

AUGUST ATTACHMENTS

State Executive Council for the Comprehensive Services Act

Policy: Intensive Care Coordination
Adopted April 30, 2013

Definition of Intensive Care Coordination

Intensive Care Coordination shall include facilitating necessary services provided to a youth and his/her family designed for the specific purpose of maintaining the youth in, or transitioning the youth to, a family-based or community based setting. Intensive Care Coordination Services are characterized by activities that extend beyond regular case management services that are within the normal scope of responsibilities of the public child serving systems and that are beyond the scope of services defined by the Department of Medical Assistance Services as "Mental Health Case Management."

Population to be Served by Intensive Care Coordination

Youth shall be identified for Intensive Care Coordination by the Family Assessment and Planning team (FAPT). Eligible youth shall include:

1. Youth placed in out-of-home care[1]
2. Youth at risk of placement in out-of-home care[2]

[1]Out-of-home care is defined as one or more of the following:

- Level A or Level B group home
- Regular foster home, if currently residing with biological family and due to behavioral problems is at risk of placement into DSS custody
- Treatment foster care placement, if currently residing with biological family or a regular foster family and due to behavioral problems is at risk of removal to higher level of care
- Level C residential facility
- Emergency shelter (when placement is due to child's MH/behavioral problems)
- Psychiatric hospitalization
- Juvenile justice/incarceration placement (detention, corrections)

[2] At-risk of placement in out-of home care is defined as one or more of the following:

- The youth currently has escalating behaviors that have put him or others at immediate risk of physical injury.
- Within the past 2-4 weeks the parent or legal guardian has been unable to manage the mental, behavioral or emotional problems of the youth in the home and is actively seeking out-of-home care.
- One of more of the following services has been provided to the youth within the past 30 days and has not ameliorated the presenting issues:
  - Crisis Intervention
  - Crisis Stabilization
  - Outpatient Psychotherapy
  - Outpatient Substance Abuse Services
  - Mental Health Support

NOTE: Intensive Care Coordination cannot be provided to individuals receiving other reimbursed case management including Treatment Foster Care-Case Management, Mental Health Case Management, Substance Abuse Case Management, or case management provided through Medicaid waivers.

Providers of Intensive Care Coordination

Providers of ICC shall meet the following staffing requirements:

1) Employ at least one supervisory/management staff who has documentation establishing completion of annual training in the national model of "High Fidelity Wraparound" as required for supervisors and management/administrators (such documentation shall be maintained in the individual's personnel file);
2) Employ at least one staff member who has documentation establishing completion of annual training in the national model of "High Fidelity Wraparound" as required for practitioners (i.e., Intensive Care Coordinators). Such documentation shall be maintained in the individual's personnel file.

Intensive Care Coordination shall be provided by Intensive Care Coordinators who possess a Bachelor's degree with at least two years of direct, clinical experience providing children's mental health services to children with a mental health diagnosis. Intensive Care Coordinators shall complete training in the national model of "High Fidelity Wraparound" as required for practitioners. Intensive Care Coordinators shall participate in ongoing coaching activities.

Providers of Intensive Care Coordination shall ensure supervision of all Intensive Care Coordinators to include clinical supervision at least once per week. All supervision must be documented, to include the date, begin time, end time, topics discussed, and signature and credentials of the supervisor. **Supervisors of Intensive Care Coordination shall possess a Master's degree in social work, counseling, psychology, sociology, special education, human, child, or family development, cognitive or behavioral sciences, marriage and family therapy, or art or music therapy with at least four years of direct, clinical experience in providing children's mental health services to children with a mental health diagnosis. Supervisors shall either be licensed mental health professionals (as that term is defined in 12 VAC35-105-20) or a documented Resident or Supervisee of the Virginia Board of Counseling, Psychology, or Social Work with specific clinical duties at a specific location pre-approved in writing by the applicable Board.** Supervisors of Intensive Care Coordination shall complete training in the national model of "High Fidelity Wraparound" as required for supervisors and management/administrators

Training for Intensive Care Coordination

Training in the national model of "High Fidelity Wraparound" shall be required for all Intensive Care Coordinators and Supervisors including participation in annual refresher training. Training and ongoing coaching shall be coordinated by the Office of Comprehensive Services with consultation and support from the Department of Behavioral Health and Developmental Services.

COMMONWEALTH of VIRGINIA

Susan Cumbia Clare, M.Ed
Executive Director

OFFICE OF COMPREHENSIVE SERVICES
Administering the Comprehensive Services Act for At-Risk Youth and Families

ADMINISTRATIVE MEMO #14-04

TO: CPMT CHAIRS
CSA COORDINATORS

FROM: SUSAN CUMBIA CLARE

DATE: JULY 14, 2014

SUBJECT: STANDARDIZED LEVELS OF TREATMENT FOSTER CARE

On June 20, 2014, the State Executive Council (SEC) adopted policy supporting the implementation of standardized levels of care for services purchased from private licensed child placing agencies and approved related guidelines. The July 1, 2015 effective date of this policy will enable private providers to make necessary adjustments to services and localities to transition services outlined in the individual family service plans of children.

The policy reflects the culmination of work by the "Standardizing Levels of Care in Treatment Foster Care" workgroup which was established in response to language first included in the 2011 Appropriation Act, Item 274 M, requiring the SEC to authorize guidelines for treatment foster care. The workgroup was comprised of representatives of various stakeholder groups including private providers; local departments of social services; the Virginia Municipal League; local CSA coordinators; the Virginia Department of Social Services, licensing division and family services division; the Virginia Department of Medical Assistance Services; and the Office of Comprehensive Services. The SEC commended the workgroup members for exemplary collaboration in the development of recommendations and guidelines.

In addition to recommending the policy, the workgroup developed guidelines for implementing standardized levels of care. These guidelines, entitled "Guidelines for Determining Levels of Care for Foster Care Services with Licensed Child Placing Agencies," are attached.

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The adopted policy is as follows:

> *Effective July 1, 2015, when purchasing foster care services through a licensed child placing agency, Community Policy and Management Teams shall ensure that levels of foster care services are appropriately matched to the individual needs of a child or youth in accordance with the SEC approved "Guidelines for Determining Levels of Care for Foster Care Services with Licensed Child Placing Agencies."*

The Office of Comprehensive Services will provide information and training on the policy and guidelines in the coming months. Questions regarding the policy or guidelines may be directed to Carol Wilson, 804-662-9817, or to the Office of Comprehensive Services at the following e-mail address: csa.office@csa.virginia.gov .

Attachment

Cc: Margaret Schultze, Commissioner, Virginia Department of Social Services
Charlie Laslie, President, Virginia Coalition of Private Provider Associations

COMMONWEALTH of VIRGINIA

Susan Cumbia Clare, M.Ed
Executive Director

OFFICE OF COMPREHENSIVE SERVICES
Administering the Comprehensive Services Act for At-Risk Youth and Families

ADMINISTRATIVE MEMO #14-06

TO: CPMT CHAIRS
CSA COORDINATORS

FROM: SUSAN CUMBIA CLARE

DATE: July 30, 2014

SUBJECT: STANDARD SERVICE NAMES

In March 2013 the State Executive Council established a workgroup to identify standard service names and descriptions to be utilized statewide to report services purchased under the Comprehensive Services Act. The workgroup completed its task and reported to the SEC in March 2014. The SEC expressed its support for implementation of standard service names.

The need to standardize service names across localities was highlighted in part by a proof-of-concept project in which data on CSA purchased services were collected from seven localities. Analysis of that small subset of data revealed in excess of 4,000 service names. This extreme number was attributed not only to the common practice of using an open text field in the data system used to track purchased services, but also to the wide variance in service names used across the local CSA programs. Additionally, the use of a single, generic name to describe widely dissimilar services was identified as a common issue across the state.

As the Office of Comprehensive Services has initiated the routine collection, integration, and analysis of data regarding client-specific services, the need to standardize service names and ensure common definitions is essential to ensure meaningful analysis and reporting. The comprehensive list of service names and definitions, created by the workgroup and refined through consultation with partner state agencies and local stakeholders, is attached. It is important that localities understand the following regarding use of these service names:

1. The description of each service is designed to distinguish the uniqueness of the service from all other services, while at the same time be broad enough to allow flexibility to match the

service to a particular child's strengths and needs. For example, an outpatient therapy using a particular modality, such as "art therapy," would be reported under the service name "Outpatient Services."

2. Where particular limiting requirements are applicable to a service, e.g., licensing or eligibility requirements, those requirements are reflected either in the definition or through a footnote referencing the regulatory authority.

3. There exists an "Other" service name to enable reporting of a service that is of such a unique nature that it does not fit an identified service name and definition. Reporting of a service as "Other" is expected to be infrequent and will be monitored on a regular basis. OCS will, on an annual basis, add a service name to the list if there is sufficient evidence to suggest it is a commonly used service that cannot be appropriately reported under an existing service name. Adequate notice will be provided to enable updating of local data reporting systems prior to implementation of any new service name.

4. Local governments will be required to begin reporting using only the standard service names effective July 1, 2015. This implementation date provides time for localities to adjust local practices and update data reporting systems to implement use of the standard names. It is anticipated that local data systems will include the service names in a "drop down" list to ensure the integrity of data submission. OCS will implement data quality standards to reject service names that do not conform to the standard service names.

A review of all data elements reported to OCS is currently underway and recommendations to establish consistency in reporting across localities will be forthcoming. The standardization of data, including the use of standard service names, will enhance the integrity of data analysis and reporting. Resulting data analyses will increase state and local capacity to make data-informed decisions to improve program performance.

Questions about the standard service names may be directed by e-mail to csa.office@csa.virginia.gov or by phone to one of the program consultants listed below:

Anna Antell, 804-662-9136
Brady Nemeyer, 804-662-9819
Carol Wilson, 804-662-9817

COMMONWEALTH of VIRGINIA

Susan Cumbia Clare, M.Ed.
Executive Director

OFFICE OF COMPREHENSIVE SERVICES
Administering the Comprehensive Services Act for At-Risk Youth and Families

MEMORANDUM

TO: CSA Coordinators

CPMT Chairs

FROM: Scott Reiner, Assistant Director

RE: State Sponsored Utilization Review

DATE: June 25, 2014

In accordance with elements of the Comprehensive Services Act (i.e., §2.2-2648 (15) and §2.2.-5206(6)), the Office of Comprehensive Services (OCS) makes available utilization review services ("State Sponsored Utilization Review") for localities that lack the capacity for internal utilization review and/or who document that state-sponsored utilization review is their plan for meeting these requirements for children placed in residential facilities. Utilization review of non-residential cases and cases placed in residential care for educational reasons (IEP) remain the sole responsibility of the locality.

OCS has reviewed and revised the agreement for State Sponsored Utilization Review (UR). The agreement sets the parameters under which utilization review for children in residential placements through the CSA is provided, and is a voluntary agreement between the locality and OCS. Localities opting to utilize State Sponsored Utilization Review through OCS will be required to sign this new agreement. A copy of that Agreement is attached to this memo.

The primary change to prior practice is that with the exception of cases that are in residential placement for educational reasons only (IEP), all CSA cases placed in a residential program will now be submitted for Utilization Review (this includes cases in which Medicaid is funding the Room/Board and/or specific treatment services). This change is being made with recognition that the funding source does not drive how youth are treated, such that all CSA youth should receive the same level of review and attention. Other changes to the existing agreement are technical in nature for the purpose of clarity.

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If your locality wishes to receive State Sponsored Utilization Review, please properly execute the agreement and return two signed original copies to OCS by September 1, 2014. OCS will then endorse the agreements and return an original copy.

Thank you for your cooperation. If you have any questions, please contact Anna Antell, the Program Consultant responsible for the utilization review process at OCS. Anna can be reached at anna.antell@csa.virginia.gov or 804-662-9136.

MEMORANDUM OF AGREEMENT BETWEEN THE VIRGINIA OFFICE OF COMPREHENSIVE SERVICES AND LOCALITIES PARTICIPATING IN STATE SPONSORED UTILIZATION REVIEW UNDER THE COMPREHENSIVE SERVICES ACT

This Agreement is made and entered into this ___ day of _____, 2014 between the Office of Comprehensive Services ("OCS") and the Community Policy and Management Team of _____(name of locality) ("participating CPMTs").

I. Purpose

This Agreement provides the framework for provision of state sponsored utilization review for selected cases for purposes of partial compliance with § 2.2-2648(15) and § 2.2-5206(6) of the Virginia Comprehensive Services Act (hereinafter referred to as CSA). This Agreement specifically delineates the duties and responsibilities of the "Community Planning and Management Team (hereinafter referred to as the CPMT) of localities electing to obtain such state sponsored utilization review and the Office of Comprehensive Services (hereinafter referred to as the OCS) as well as a mutually agreed upon review process. This Agreement will serve as the locality's official Utilization Review plan for residential cases.

II. The Review Process

A. General:

1. OCS will provide utilization review services for the cases of children in non-educational residential/congregate care placements under the CSA to participating CPMTs voluntarily choosing to receive state sponsored utilization review. These placements are defined in the CSA Service Categories & Data Set Definitions approved by the State Executive Council and found at: http://www.csa.virginia.gov/html/CSA%20service%20categories%20and%20definitions%20-%20December%202011.pdf).

2. The purpose of utilization review is to provide participating CPMTs information, technical assistance and/or consultation to assist in:

   - Making sound planning decisions to provide appropriate and effective services in the least restrictive environment for individual children that:
     - Tailor services and supports to the unique strengths and needs of children and their families;
     - Build upon natural family and community supports whenever possible;
     - Use public funds appropriately; and
     - Respect that CPMTs make the ultimate decisions on services and funding for a particular child.

- Improving outcomes and services for individual children and their families.
- Building capacity to implement the utilization review function locally for those communities that wish to do so.

3. In performing utilization review, OCS will consider the placement of and services provided to children whose placements receive any funding through the CSA. With the exception of cases that are in a residential placement for educational reasons only (IEP), all cases placed in a residential program through the FAPT/CPMT will be submitted for review to OCS.

4. When providing utilization review under this Agreement, OCS will provide qualified personnel to conduct the reviews and may consult with licensed professionals recommended by the Department of Behavioral Health and Developmental Services, if needed, on clinically complex cases.

5. OCS will develop necessary forms and guidelines for the use of the CPMT in submitting cases for utilization review.

6. OCS and the CPMT agree to comply with all applicable State and Federal confidentiality requirements and will not re-disclose any confidential information without the authorization of the individual, their parent or legally authorized representative unless otherwise permitted by law.

7. All communications that include personal identifying information and/or protected health information shall be transmitted in a method that protects the security and confidentiality of such information. Typically this means using only encrypted e-mail communications, hard copy via U.S. Mail or other courier service, and fax transmission only when the recipient is alerted to an impending transmission so that they may be present as that transmission is received.

B. Scope of Review

1. OCS will periodically review all cases submitted under the terms of the Agreement. These reviews will examine all required documentation submitted to OCS by the CPMT relating to individual CSA placements.

2. Upon request of either party, the locality and the OCS will negotiate an on-site CSA review. On-site reviews will be limited to in-state placements.

3. The OCS review will include, but will not be limited to, the following:

   - An initial review, and periodic re-reviews of:
     - the appropriateness of the placement based on the individual and unique needs and strengths of the child and family;

- the appropriateness of the placement facility's treatment plan and the Individual and Family Service Plan (IFSP) developed by the Family Assessment and Planning Team (FAPT), to include the level of family and youth involvement in these plans, as well as the utilization of the information from the Child and Adolescent Needs and Strengths (CANS) assessment in the development of these plans;
- written progress reports and updates including progress or lack of progress on the IFSP goals, to include the appropriateness of goals and objectives, as well as identified strategies to achieve these goals; and
- recommendations for length of stay and discharge planning.

C. Utilization Review Schedule

Children whose stay in the residential placement is less than 60 calendar days are exempt from review.

1. Initial Review: Each CPMT will provide the following information to OCS for each CSA placement covered under this agreement within 60 calendar days of the placement. Information for Initial Reviews should include the following:

   - CSA Review Checklist (found on the CSA website)
   - Documentation from the FAPT addressing the placement (e.g., FAPT minutes, case documentation submitted to the CPMT, etc.)
   - Most recent CANS assessment
   - Most recent IFSP
   - Most recent Foster Care plan (if applicable)
   - Information about prior placements (if applicable)
   - Psychotropic medication information
   - Most recent Magellan (Medicaid) Authorization/UM Form (if applicable)
   - Service/treatment plan and progress reports from the placement
   - Psychological evaluation, if available
   - Discharge plan

2. Subsequent Reviews: After the initial 60-day review, each CPMT will submit information for review every 90 days for the duration of the placement. All subsequent 90-day reviews shall include:

   - CSA Review Checklist (found on the CSA website)
   - Documentation from the FAPT addressing the placement (e.g., FAPT minutes, case documentation submitted to the CPMT, etc.)
   - Most recent CANS assessment (if updated since prior submission)
   - Most recent IFSP
   - Most recent Foster Care plan (if applicable)
   - Psychotropic medication information (if updated since prior submission)
   - Most recent Magellan (Medicaid) Authorization/UM Form (if applicable)

- Service/treatment plan reviews and progress reports from the placement
- Actions/changes in the service plan and/or IFSP taken in response to most recent utilization review
- Discharge plan

3. Discharge Notification: CPMT will send to OCS the Discharge Notification form (found on the CSA website) within 14 calendar days after child's discharge from the residential placement.

4. OCS Review Schedule: Within 30 calendar days of receipt from the CPMT of all necessary documentation, OCS will complete the review for each child. If an on-site review is determined to be appropriate, this can be extended an additional 30 calendar days. OCS utilization reviews will be submitted to the CPMT chairperson and the locality's CSA Coordinator.

III. Additional Responsibilities

A. OCS will:

1. Provide, upon request by the CPMT, training and consultation to assist with the effective implementation of this agreement.

2. Perform utilization review pursuant to this agreement at no cost to the locality.

B. The CPMT will:

1. Designate an individual to be responsible for serving as the liaison with OCS and for meeting the obligations identified in this agreement.

2. Document the use of and/or response of the FAPT to the UR recommendations.

IV. PERIOD OF PERFORMANCE

Services under this Agreement will begin July 1, 2014 or the date of signing, whichever is later. This Agreement will automatically renew each year for a period of five years unless either party gives the other party advance written notice of termination 60 days prior to June 30th of each year.

V. TERMINATION

This Agreement may be terminated by the parties by either party giving the other party 60 days written notice of termination.

VI. AMENDMENT

This Agreement may be amended upon the written Agreement of both parties when signed by the parties and attached hereto.

VII. APPROPRIATIONS

Services under this Agreement shall be contingent upon sufficient appropriations for this purpose by the General Assembly.

Commonwealth of Virginia Office of Comprehensive Services	Community Planning and Management Team of _____ (Locality Name)
By: _____ Susan Cumbia Clare Executive Director	By: _____ _____ Print Name & Title
Date: _____	Date: _____