

**CPMT PACKET**

**09/10/2015**

## **Winchester CPMT Agenda**

September 10, 2015, 2:00pm

WDSS, 24 Baker St

Winchester, VA 22601

**Approve Minutes from 08/13/15**

**Announcements**

**Financial Report**

- a. Review of June Supplemental and August 2015 Financials

**Old Business**

- a. Strategic Planning & Assignment of Work Committees
  1. Goal 1: Common Ground through Education, Training and Shared Expectations (Gleason, Kish, Roussos, Devine, Kiser)
  2. Goal 2: Data-Driven Accountability and Service Provision (Scardino, Bober)
  3. Goal 3: Ensure Quality and Appropriate Level of Services through UM and UR (Dopkowski)

**New Business**

- a. NWCSB FAPT Case Management
- b. Timber Ridge School Medicaid Unit Eligibility
- c. CANS for Residential Placements

**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:** Thursday October 8, 2015 at 2:00 at WDSS Boardroom

**AUGUST MINUTES WITH  
JULY FINANCIALS**

**Minutes**  
Winchester CPMT  
24 Baker Street, Board Room  
Thursday, August 13, 2015  
2:00 p.m.

**MEMBERS PRESENT**

Kelly Bober, Child Advocacy Center  
Amber Dopkowski, Winchester Dept. Social Services  
Mark Gleason, Northwestern Community Services Board  
Lyda Kiser, Parent Representative  
Sarah Kish, Winchester Public Schools  
Peter Roussos, Dept. of Juvenile Justice  
Dr. Charles Devine

**MEMBERS/OTHERS NOT PRESENT**

Mary Blowe, City of Winchester  
Eden Freeman, City of Winchester  
Paul Scardino, National Counseling Group

**Others Present:**

Karen Farrell, Winchester CSA Coordinator  
Donna Veach, Winchester Dept. of Social Services

**RECAP OF CPMT VOTES:**

**Motion:**

- Motion to approve the minutes from July 9, 2015, CPMT Meeting

**Action:**

1<sup>st</sup>: Mr. Roussos  
2<sup>nd</sup>: Ms. Kish

**Status:**

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.

1<sup>st</sup>: Ms. Kiser  
2<sup>nd</sup>: Mr. Roussos

Approved  
Unanimously

- Motion to come out of Executive Session

1<sup>st</sup>: Ms. Kiser  
2<sup>nd</sup>: Dr. Devine

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.

1<sup>st</sup>: Dr. Devine  
2<sup>nd</sup>: Mr. Roussos

Approved  
Unanimously

- Motion to Approve All Cases, as presented.

1<sup>st</sup>: Dr. Devine  
2<sup>nd</sup>: Ms. Kiser

Motion was  
approved with  
no abstentions

- Motion to adjourn CPMT Meeting

1<sup>st</sup>: Mr. Roussos  
2<sup>nd</sup>: Ms. Kish

Approved  
Unanimously





**Minutes**  
 Winchester CPMT  
 24 Baker Street, Board Room  
 Thursday, August 13, 2015  
 2:00 p.m.

Item	Discussion	Action
<b>Motion to Convene in Executive Session</b>	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. Kish, seconded by Mr. Roussos, the meeting moved into Executive Session.
<b>Motion to Come Out of Executive Session &amp; Immediately Reconvene in Open Session</b>		Motion to come out of Executive Session by Ms. Kish and seconded by Dr. Devine. Approved unanimously.
<b>Motion to Certify Compliance by Roll Call Vote</b>	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 Mr. Roussos, and unanimously approved.
<b>Motion to Approve All Cases</b>	Motion to Approve all cases as accepted or amended.	All cases were approved, on motion by Dr. Devine, seconded by Ms. Kish. Motion was approved with no abstentions.
<b>Motion to Adjourn/Next Meeting Date</b>	The next CPMT meeting will be held Thursday, September 17, 2015 at 2:00 p.m., Winchester Social Services Department, 24 Baker Street, Conference Room, Winchester, VA. Mr. Roussos will chair.	The meeting was adjourned on motion by Mr. Roussos and seconded by Ms. Kish.

Attachments: July, 2015 Financials  
 Revised CSA Policy Manual  
 Transcribed by DCV

**CSA Pool Reimbursement Request Report Worksheet**

Date: August 3, 2015

Period Ending: July 31, 2015

Chart A

**Part 1 - Expenditure Description**

	Number of Clients	Gross Total Expenditures	Expenditure Refunds	Net Total Expenditures
<b>1. Congregate Care/Mandated &amp; Non-Mandated Residential Services</b>				
1a. Foster Care - IV-E Child in Licensed Residential Congregate Care				0.00
1b. Foster Care - all other in Licensed Residential Congregate Care			249.88	-249.88
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

	Number of Clients	Gross Total Expenditures	Expenditure Refunds	Net Total Expenditures
<b>2. Other Mandated Services</b>				
2a. Treatment Foster Care - IV-E	3	798.00	215.00	583.00
2a.1 Treatment Foster Care	1	352.80		352.80
2a.2 Treatment Foster Care - CSA Parental Agreements; DSS Non-Custodial				0.00
2c. Family Foster Care - IV-E; Community Based Services				0.00
2e. Family Foster Care - Children Receiving Maintenance/Basic Activities; IL	2	1,227.00	893.37	333.63
2f. Community Based Services	1	420.00	137.00	283.00
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
<b>4. Grand Totals: Sum of categories 1 through 3</b>	<b>7</b>	<b>2,797.80</b>	<b>1,495.25</b>	<b>1,302.55</b>

**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)	921.00
Child Support Collections through DCSE	574.25
Pool prior-reported expenditures re-claimed under IV-E	
Other (specify)	
<b>Total Refunds (must agree with line 4)</b>	<b>1,495.25</b>

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Chart B



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**CSA Reports**  
**Pool Reimbursement Reports**  
**FY16**  
**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
<b>Beginning Balance</b>				\$993,730.00	\$537,874.05	\$455,855.95
<b>Pool Reimbursement History</b>						
	5	07/31/2015	08/04/2015	\$1,302.55	\$798.62	\$503.93
<b>Pool Reimbursement Expenditure Totals</b>				\$1,302.55	\$798.62	\$503.93
<b>Supplement History</b>						
<b>Supplement Totals</b>				\$0.00	\$0.00	\$0.00
<b>CSA System Balance</b>				\$992,427.45	\$537,075.43	\$455,352.02

**Transaction History without WRAP Dollars**

Match Rate: 0.4587	Status	Period End	Date Filed	Total Amount	State	Local
<b>Beginning Balance</b>				\$978,252.00	\$529,496.52	\$448,755.48
<b>Pool Reimbursement History</b>						
	-	07/31/2015	08/04/2015	\$1,302.55	\$798.62	\$503.93
<b>Pool Reimbursement Expenditure Totals</b>				\$1,302.55	\$798.62	\$503.93
<b>Supplement History</b>						
<b>Supplement Totals</b>				\$0.00	\$0.00	\$0.00
<b>CSA System Balance (Non-WRAP):</b>				\$976,949.45	\$528,697.90	\$448,251.55

**Transaction History WRAP dollars only**

Match Rate: 0.4587	Status	Period End	Date Filed	Total Amount	State	Local
<b>WRAP Allocation Additions History</b>						
<b>WRAP Allocation Additions Totals</b>				\$0.00	\$0.00	\$0.00
<b>Pool Reimbursement History - WRAP only</b>						
	-	07/31/2015	08/04/2015	\$0.00	\$0.00	\$0.00
<b>Pool Reimbursement Expenditure Totals -WRAP only</b>				\$0.00	\$0.00	\$0.00
<b>CSA System Balance (WRAP only):</b>				\$15,478.00	\$8,377.53	\$7,100.47

Wrap-Around Services for Students with Disabilities  
2014 - 2015

Chart C

Child				TOTAL SPENT
Agency				
Worker				
JUL				0.00
AUG				0.00
SEP				0.00
OCT				0.00
NOV				0.00
DEC				0.00
JAN				0.00
FEB				0.00
MAR				0.00
APR				0.00
MAY				0.00
JUN				0.00
TOTAL/ CHILD	0.00	0.00	0.00	0.00
			Beginning Balance	15,478.00
			Disbursed	0.00
			Encumbered	8,724.10
			Remaining Funds	6,753.90





CITY OF WINCHESTER

COMPREHENSIVE SERVICES FUND BALANCE  
COMPREHENSIVE SERVICE ACT

Chart F

FUND NAME	REVISED BUDGET	EXPENDITURES	FUND BALANCE	ENCUMBRANCES	FUND BALANCE	UNAPPROVED CREDIT		ADJUSTED FUND BALANCE
						AUTHORIZATIONS	& POSOS	
C15 CSA MANDATED 14/15 ASSIST	5,000.00	1,667.32	3,332.68	0.00	3,332.68	0.00	0.00	3,332.68
C15 CSA MANDATED 14/15 POS	1,688,949.00	1,626,801.36	62,147.64	19,994.00	42,153.64	0.00	0.00	42,153.64
C15 CSA NON-MANDATED 14/15 POS	20,162.00	15,157.55	5,004.45	900.00	4,104.45	0.00	0.00	4,104.45
C15 CSA W/A SRVS FOR STUDENTS 14/15 POS	30,414.00	15,697.61	14,716.39	0.00	14,716.39	0.00	0.00	14,716.39
C16 CSA MANDATED 15/16 ASSIST	5,000.00	373.00	4,627.00	0.00	4,627.00	0.00	0.00	4,627.00
C16 CSA MANDATED 15/16 POS	973,252.00	55,249.99	919,002.01	543,522.02	374,479.99	40,150.00	0.00	334,329.99
C16 CSA NON-MANDATED 15/16 POS	20,162.00	0.00	20,162.00	5,150.00	15,012.00	1,235.00	0.00	13,777.00
C16 CSA W/A SRVS FOR STUDENTS 15/16 POS	15,478.00	0.00	15,478.00	8,724.10	6,753.90	0.00	0.00	6,753.90
	2,758,417.00	1,714,946.83	1,043,470.17	578,290.12	465,180.05	41,385.00	0.00	423,795.05

**JUNE FINANCIALS  
SUPPLEMENTAL**

**CSA Pool Reimbursement Request Report Worksheet**

Chart A

Date: August 18, 2015  
 Period Ending: June 30, 2015

**Part 1 - Expenditure Description**

	Number of Clients	Gross Total Expenditures	Expenditure Refunds	Net Total Expenditures
<b>1. Congregate Care/Mandated &amp; Non-Mandated Residential Services</b>				
1a. Foster Care - IV-E Child in Licensed Residential Congregate Care				0.00
1b. Foster Care - all other in Licensed Residential Congregate Care				0.00
1c. Residential Congregate Care - CSA Parental Agreements; DSS Non-Custodial	5	37,850.70		37,850.70
1d. Non-Mandated Services/Residential/Congregate Care				0.00
1e. Educational Services - Congregate Care	3	31,119.56		31,119.56
<b>2. Other Mandated Services</b>				
2a. Treatment Foster Care - IV-E	15	52,437.92		52,437.92
2a.1 Treatment Foster Care	3	13,179.80		13,179.80
2a.2 Treatment Foster Care - CSA Parental Agreements; DSS Non-Custodial				0.00
2c. Family Foster Care - IV-E; Community Based Services	6	6,667.00		6,667.00
2e. Family Foster Care - Children Receiving Maintenance/Basic Activities; IL	2	954.00		954.00
2f. Community Based Services	21	16,635.75		16,635.75
2f.1 Community Transition Services				0.00
2g. Special Education Private Day Placement	2	5,688.58		5,688.58
2h. Wrap-Around Services for Students With Disabilities	1	991.39		991.39
2i. Psychiatric Hospitals/Crisis Stabilization Units				0.00
3. Non-Mandated Services/Community Based	5	2,660.00		2,660.00
4. Grand Totals: Sum of categories 1 through 3	63	168,184.70	0.00	168,184.70

**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)	
Child Support Collections through DCSE	
Pool prior-reported expenditures re-claimed under IV-E	
Other (specify)	
<b>Total Refunds (must agree with line 4)</b>	<b>0.00</b>

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Chart B



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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
<b>Beginning Balance</b>				\$1,206,997.00	\$653,308.99	\$553,688.01
<b>Pool Reimbursement History</b>						
	9	07/31/2014	08/06/2014	\$271.75	\$129.94	\$141.81
	9	08/31/2014	09/03/2014	\$66,462.27	\$37,034.51	\$29,427.76
	9	09/30/2014	10/02/2014	\$121,923.88	\$68,589.95	\$53,333.93
	9	10/31/2014	11/03/2014	\$126,088.83	\$67,498.17	\$58,590.66
	9	11/30/2014	12/03/2014	\$164,640.34	\$88,596.71	\$76,043.63
	9	12/31/2014	01/07/2015	\$204,456.19	\$111,822.17	\$92,634.02
	9	01/31/2015	02/06/2015	\$105,557.78	\$57,224.70	\$48,333.08
	9	02/28/2015	03/03/2015	\$183,358.95	\$100,486.68	\$82,872.27
	9	03/31/2015	04/02/2015	\$100,991.97	\$57,276.95	\$43,715.02
	9	04/30/2015	05/11/2015	\$153,605.45	\$87,648.58	\$65,956.87
	9	05/31/2015	06/02/2015	\$123,540.61	\$74,312.51	\$49,228.10
	9	06/30/2015	07/07/2015	\$145,627.68	\$82,906.98	\$62,720.70
	5	06/30/2015	08/24/2015	\$168,184.70	\$92,650.18	\$75,534.52
<b>Pool Reimbursement Expenditure Totals</b>				\$1,664,710.40	\$926,178.03	\$738,532.37
<b>Supplement History</b>						
			01/21/2015	\$46,431.00	\$41,261.00	\$5,170.00
			05/12/2015	\$15,477.00	\$13,754.00	\$1,723.00
			05/20/2015	\$455,458.00	\$270,867.00	\$184,591.00
<b>Supplement Totals</b>				\$517,368.00	\$325,882.00	\$191,484.00
<b>CSA System Balance</b>				\$59,652.80	\$53,012.96	\$6,639.84

Transaction History without WRAP Dollars						
Match Rate: 0.4587	Status	Period End	Date Filed	Total Amount	State	Local
<b>Beginning Balance</b>				\$1,176,583.00	\$636,846.99	\$539,736.01
<b>Pool Reimbursement History</b>						
	-	07/31/2014	08/06/2014	\$271.75	\$129.94	\$141.81
	-	08/31/2014	09/03/2014	\$66,462.27	\$37,034.51	\$29,427.76
	-	09/30/2014	10/02/2014	\$121,923.88	\$68,589.95	\$53,333.93
	-	10/31/2014	11/03/2014	\$126,088.83	\$67,498.17	\$58,590.66
	-	11/30/2014	12/03/2014	\$163,207.34	\$87,821.03	\$75,386.31
	-	12/31/2014	01/07/2015	\$200,570.58	\$109,718.89	\$90,851.69
	-	01/31/2015	02/06/2015	\$103,841.48	\$56,295.67	\$47,545.81
	-	02/28/2015	03/03/2015	\$182,547.45	\$100,047.42	\$82,500.03
	-	03/31/2015	04/02/2015	\$99,660.69	\$56,556.33	\$43,104.36
	-	04/30/2015	05/11/2015	\$153,605.45	\$87,648.58	\$65,956.87
	-	05/31/2015	06/02/2015	\$119,428.33	\$72,086.53	\$47,341.80
	-	06/30/2015	07/07/2015	\$144,211.43	\$82,140.36	\$62,071.07
	-	06/30/2015	08/24/2015	\$167,193.31	\$92,113.54	\$75,079.77
<b>Pool Reimbursement Expenditure Totals</b>				\$1,648,012.79	\$817,680.92	\$731,331.87
<b>Supplement History</b>						
			01/21/2015	\$46,431.00	\$41,261.00	\$5,170.00
			05/12/2015	\$15,477.00	\$13,754.00	\$1,723.00
			05/20/2015	\$455,458.00	\$270,867.00	\$184,591.00
<b>Supplement Totals</b>				\$517,368.00	\$325,882.00	\$191,484.00
<b>CSA System Balance (Non-WRAP):</b>				\$44,936.21	\$45,048.07	(\$111.86)

Transaction History WRAP dollars only

Match Rate: 0.4587	Status	Period End	Date Filed	Total Amount	State	Local
<b>WRAP Allocation Additions History</b>						
			08/06/2014	\$18,805.00	\$10,178.00	\$8,626.00
			10/26/2014	\$11,609.00	\$6,283.00	\$5,325.00
<b>WRAP Allocation Additions Totals</b>				<b>\$30,414.00</b>	<b>\$16,461.00</b>	<b>\$13,951.00</b>
<b>Pool Reimbursement History - WRAP only</b>						
-		07/31/2014	08/06/2014	\$0.00	\$0.00	\$0.00
-		08/31/2014	09/03/2014	\$0.00	\$0.00	\$0.00
-		09/30/2014	10/02/2014	\$0.00	\$0.00	\$0.00
-		10/31/2014	11/03/2014	\$0.00	\$0.00	\$0.00
-		11/30/2014	12/03/2014	\$1,433.00	\$775.88	\$657.32
-		12/31/2014	01/07/2015	\$3,885.61	\$2,103.28	\$1,782.33
-		01/31/2015	02/06/2015	\$1,716.30	\$929.03	\$787.27
-		02/28/2015	03/03/2015	\$811.50	\$439.26	\$372.24
-		03/31/2015	04/02/2015	\$1,331.28	\$720.62	\$610.66
-		04/30/2015	05/11/2015	\$0.00	\$0.00	\$0.00
-		05/31/2015	06/02/2015	\$4,112.28	\$2,225.98	\$1,886.30
-		06/30/2015	07/07/2015	\$1,416.25	\$766.62	\$649.63
-		06/30/2015	08/24/2015	\$991.39	\$536.64	\$454.75
<b>Pool Reimbursement Expenditure Totals -WRAP only</b>				<b>\$15,697.61</b>	<b>\$8,497.11</b>	<b>\$7,200.50</b>
<b>CSA System Balance (WRAP only):</b>				<b>\$14,716.39</b>	<b>\$7,964.89</b>	<b>\$6,751.50</b>

The Office of Children's Services is 2015  
 1604 South Pine Road, Ste 137, Richmond, VA 23299  
 Phone: (804) 642-1615 Fax: (804) 642-3331

Please direct questions and comments concerning this website to [csa@csa.virginia.gov](mailto:csa@csa.virginia.gov) or Children's Services Act, Commissioner of Child Welfare Services

Wrap-Around Services for Students with Disabilities  
2014 - 2015

Chart C

Child	3	12	18	TOTAL SPENT
Agency	WPS	WPS-NREP	WPS-NREP	
Worker	Mck	Clatter	Clatter	
JUL				0.00
AUG				0.00
SEP				0.00
OCT				0.00
NOV	300.00		1,133.00	1,433.00
DEC	260.00		3,625.61	3,885.61
JAN	470.00		1,246.30	1,716.30
FEB	245		566.50	811.50
MAR			1,331.28	1,331.28
APR				0.00
MAY			4,112.28	4,112.28
JUN			1,416.25	1,416.25
JUN SUPP			991.39	991.39
TOTAL/	1,275.00	0.00	14,422.61	15,697.61
CHILD				
			Beginning Balance	30,414.00
			Disbursed	15,697.61
			Encumbered	0.00
			Remaining Funds	14,716.39

Non-Mandated Funds  
2014 - 2015

Chart D

Child	15	16	17	19	20	21	22	23	24	25	TOTAL SPENT
Agency	WPS	NWCSB	WPS	DJJ	DSS	WPS	DJJ	WPS	WPS	DSS	
Worker	Mck	Connell	Mck	Young	Penn	Mck	Perry	Mck	Mck	SNYDER	
JUL											0.00
AUG		669.80									669.80
SEP	210.00	953.05	265.00								1,428.05
OCT	100.00										100.00
NOV		613.15	255.00	550.00							1,418.15
DEC		773.10	265.00	445.00							1,483.10
JAN			125.00	200.00							325.00
FEB			210.00		350.00						560.00
MAR			280.00								280.00
APR			420.00	480.00		252.00	545.00				1,697.00
MAY			415.00	840.00			535.00	355.35			2,145.35
JUN			250.00	900.00		896.10			285.00	60.00	2,391.10
JUN SUPP			130.00	660.00		1,545.00			135.00	190.00	2,660.00
TOTAL/ CHILD	310.00	3,009.10	2,615.00	4,075.00	350.00	2,693.10	1,080.00	355.35	420.00	250.00	15,157.55
							Beginning Balance				20,162.00
							Disbursed				15,157.55
							Encumbered				0.00
							Remaining Funds				5,004.45



CITY OF WINCHESTER  
 COMPREHENSIVE SERVICES FUND BALANCE  
 COMPREHENSIVE SERVICE ACT

Chart F

FUND NAME	ORIGINAL BUDGET	BUDGET REVISIONS	REVISED BUDGET	EXPENDITURES	FUND BALANCE	ENCUMBRANCES	FUND BALANCE
C15 CSA MANDATED 14/15 ASSIST	5,000.00	0.00	5,000.00	1,667.32	3,332.68	0.00	3,332.68
C15 CSA MANDATED 14/15 POS	1,688,949.00	0.00	1,688,949.00	1,626,801.36	62,147.64	0.00	62,147.64
C15 CSA NON-MANDATED 14/15 POS	20,162.00	0.00	20,162.00	15,157.55	5,004.45	0.00	5,004.45
C15 CSA W/A SRVS FOR STUDENTS 14/15 POS	30,414.00	0.00	30,414.00	15,697.61	14,716.39	0.00	14,716.39
C16 CSA MANDATED 15/16 ASSIST	5,000.00	0.00	5,000.00	373.00	4,627.00	0.00	4,627.00
C16 CSA MANDATED 15/16 POS	973,252.00	0.00	973,252.00	55,249.99	918,002.01	567,954.02	350,047.99
C16 CSA NON-MANDATED 15/16 POS	20,162.00	0.00	20,162.00	0.00	20,162.00	5,150.00	15,012.00
C16 CSA W/A SRVS FOR STUDENTS 15/16 POS	15,478.00	0.00	15,478.00	0.00	15,478.00	8,724.10	6,753.90
	2,758,417.00	0.00	2,758,417.00	1,714,946.83	1,043,470.17	581,838.12	461,642.05

# **AUGUST FINANCIALS**

**CSA Pool Reimbursement Request Report Worksheet**

Chart A

Date: September 2, 2015  
 Period Ending: August, 2015

**Part 1 - Expenditure Description**

	Number of Clients	Gross Total Expenditures	Expenditure Refunds	Net Total Expenditures
<b>1. Congregate Care/Mandated &amp; Non-Mandated Residential Services</b>				
1a. Foster Care - IV-E Child in Licensed Residential Congregate Care		0.00		0.00
1b. Foster Care - all other in Licensed Residential Congregate Care		0.00	67.95	-67.95
1c. Residential Congregate Care - CSA Parental Agreements; DSS Non-Custodial	5	31,879.78		31,879.78
1d. Non-Mandated Services/Residential/Congregate Care		0.00		0.00
1e. Educational Services - Congregate Care	3	27,487.82		27,487.82
<b>2. Other Mandated Services</b>				
2a. Treatment Foster Care - IV-E	12	41,495.88	50.00	41,445.88
2a.1 Treatment Foster Care	3	8,151.80		8,151.80
2a.2 Treatment Foster Care - CSA Parental Agreements; DSS Non-Custodial		0.00		0.00
2c. Family Foster Care - IV-E; Community Based Services	8	6,735.20		6,735.20
2e. Family Foster Care - Children Receiving Maintenance/Basic Activities; IL	2	1,963.00	1,021.04	941.96
2f. Community Based Services	31	16,774.37		16,774.37
2f.1 Community Transition Services		0.00		0.00
2g. Special Education Private Day Placement	1	200.00		200.00
2h. Wrap-Around Services for Students With Disabilities	1	141.63		141.63
2i. Psychiatric Hospitals/Crisis Stabilization Units		0.00		0.00
3. Non-Mandated Services/Community Based	2	1,710.00		1,710.00
<b>4. Grand Totals: Sum of categories 1 through 3</b>	<b>68</b>	<b>136,539.48</b>	<b>1,138.99</b>	<b>135,400.49</b>

**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)	921.00
Child Support Collections through DCSE	217.99
Pool prior-reported expenditures re-claimed under IV-E	
Other (specify)	
<b>Total Refunds (must agree with line 4)</b>	<b>1,138.99</b>

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Chart B



Contact Us

**CSA Reports**  
**Pool Reimbursement Reports**  
**FY16**  
**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
<b>Beginning Balance</b>				\$993,730.00	\$537,874.05	\$455,855.95
<b>Pool Reimbursement History</b>						
	5	07/31/2015	08/04/2015	\$1,302.55	\$798.62	\$503.93
	5	08/31/2015	09/02/2015	\$135,400.49	\$75,426.31	\$59,974.18
<b>Pool Reimbursement Expenditure Totals</b>				\$136,703.04	\$76,224.93	\$60,478.11
<b>Supplement History</b>						
<b>Supplement Totals</b>				\$0.00	\$0.00	\$0.00
<b>CSA System Balance</b>				\$657,026.96	\$461,649.12	\$395,377.84

**Transaction History without WRAP Dollars**

Match Rate: 0.4587	Status	Period End	Date Filed	Total Amount	State	Local
<b>Beginning Balance</b>				\$978,252.00	\$629,496.52	\$448,755.48
<b>Pool Reimbursement History</b>						
	-	07/31/2015	08/04/2015	\$1,302.55	\$798.62	\$503.93
	-	08/31/2015	09/02/2015	\$135,258.86	\$75,349.65	\$59,909.21
<b>Pool Reimbursement Expenditure Totals</b>				\$136,581.41	\$76,148.27	\$60,413.14
<b>Supplement History</b>						
<b>Supplement Totals</b>				\$0.00	\$0.00	\$0.00
<b>CSA System Balance (Non-WRAP):</b>				\$841,690.59	\$453,348.25	\$388,342.34

**Transaction History WRAP dollars only**

Match Rate: 0.4587	Status	Period End	Date Filed	Total Amount	State	Local
<b>WRAP Allocation Additions History</b>						
			08/28/2015	\$15,478.00	\$8,377.00	\$7,100.00
<b>WRAP Allocation Additions Totals</b>				\$15,478.00	\$8,377.00	\$7,100.00
<b>Pool Reimbursement History - WRAP only</b>						
	-	07/31/2015	08/04/2015	\$0.00	\$0.00	\$0.00
	-	08/31/2015	09/02/2015	\$141.63	\$76.66	\$64.97
<b>Pool Reimbursement Expenditure Totals -WRAP only</b>				\$141.63	\$76.66	\$64.97
<b>CSA System Balance (WRAP only):</b>				\$15,336.37	\$8,300.87	\$7,035.50

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 100 South Ross Road, Ste 107, Richmond, VA 23226  
 Phone (804) 382-2615 Fax (804) 382-2131

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Wrap-Around Services for Students with Disabilities  
2014 - 2015

Chart C

Child	18			TOTAL SPENT
Agency Worker	WPS-NREP Clatter			
JUL				0.00
AUG	141.63			141.63
SEP				0.00
OCT				0.00
NOV				0.00
DEC				0.00
JAN				0.00
FEB				0.00
MAR				0.00
APR				0.00
MAY				0.00
JUN				0.00
TOTAL/ CHILD	141.63	0.00	0.00	141.63
			Beginning Balance	15,478.00
			Disbursed	141.63
			Encumbered	7,647.75
			Remaining Funds	7,688.62





Chart F

CITY OF WINCHESTER  
 CSA FUND BALANCE  
 CHILDREN'S SERVICE ACT (CSA)

FUND NAME	ORIGINAL BUDGET	BUDGET REVISIONS	REVISED BUDGET	EXPENDITURES	FUND BALANCE	ENCUMBRANCES	FUND BALANCE
C15 CSA MANDATED 14/15 ASSIST	5,000.00	0.00	5,000.00	1,667.32	3,332.68	0.00	3,332.68
C15 CSA MANDATED 14/15 POS	1,688,949.00	0.00	1,688,949.00	1,626,801.36	62,147.64	0.00	62,147.64
C15 CSA NON-MANDATED 14/15 POS	20,162.00	0.00	20,162.00	15,157.55	5,004.45	0.00	5,004.45
C15 CSA W/A SRVS FOR STUDENTS 14/15 POS	30,414.00	0.00	30,414.00	15,697.61	14,716.39	0.00	14,716.39
C16 CSA MANDATED 15/16 ASSIST	5,000.00	0.00	5,000.00	1,983.90	3,016.10	0.00	3,016.10
C16 CSA MANDATED 15/16 POS	973,252.00	0.00	973,252.00	200,598.04	772,653.96	465,187.87	307,466.09
C16 CSA NON-MANDATED 15/16 POS	20,162.00	0.00	20,162.00	1,710.00	18,452.00	7,735.00	10,717.00
C16 CSA W/A SRVS FOR STUDENTS 15/16 POS	15,478.00	0.00	15,478.00	141.63	15,336.37	7,647.75	7,688.62
	2,758,417.00	0.00	2,758,417.00	1,863,757.41	894,659.59	480,570.62	414,088.97

**SEPTEMBER**  
**ATTACHMENTS**

**Northwestern Community Services  
FAPT Case Management**

**Summary Statement:**

Northwestern Community Services currently has one staff member specifically assigned as a dedicated FAPT Case Manager for the six political jurisdictions it serves. Due to the acuity and requirements of FAPT cases, the FAPT case manager currently carries a caseload of 12 cases. This position is currently subsidized by the revenue generated by other agency case managers. In addition to meeting the requirements of a FAPT Case Manager, a NWCS case manager must meet the case management requirements dictated by other regulatory requirements. FAPT case management services are substantially different than NWCS case management services.

NWCS will therefore no longer be able to accept the assignment of FAPT case manager unless one of the following conditions is met:

1. The individual is already being served by NWCS as an open case; or
2. The individual is currently being discharged from a psychiatric hospital secondary to a Temporary Detention Order; or is being discharged from Commonwealth Hospital, the designated state facility for children and adolescents.
3. NWCS receives reimbursement via the local CPMT for said case management services, as designated immediately below.
  - a. **Initial FAPT presentation:** This would represent the first month of FAPT CM services and would include opening the case for FAPT, determination of client need, locating appropriate services, preparation of FAPT documentation, presentation to FAPT, and implementation of FAPT recommended services - \$326.50 per month
  - b. **Tier 1: Local Placement:** This tier would represent those youth located with the Northwestern catchment area. Services would include face to face contact with the client and/or family based on service requirement, collateral contact and collaboration with service providers, preparation of FAPT follow up documentation and presentation to FAPT \$400.00 (monthly rate includes mileage and additional FAPT-related activities)
  - c. **Tier 2: Non-Local Placement:** This tier would represent those youth located outside of the Northwestern catchment area. Services would include face to face contact with the client and/or family based on service requirement, placement visits, collateral contact and collaboration with service providers, preparation of FAPT follow up documentation and presentation to FAPT - \$500.00 per month (monthly rate includes base rate, mileage, and time away from other clients)

**Contents of this Document:**

In the sections that follow, NWCS will outline the particulars of its position, including:

1. Sample charges by other CSB's for FAPT Case Management
2. Facts about NWCS as well as its relation to FAPT/CPMT
3. A brief summary of NWCS case management services and requirements

#### 4. A discussion of NWCS FAPT Case Management

##### Sample charges by other CSB's:

1. Fairfax/Falls Church: \$500.00
2. Highland: \$900.00
3. Loudoun: \$326.50
4. Middle Peninsula/Northern Neck: \$326.50 (five hours or less); \$30.00 per hour for additional time over five hours; total cap at \$800.00 per month
5. Rappahannock-Rapidan: \$326.00 per month base rate; \$70.00 per hour for placements within 60 miles; \$70.00 per hour + .50 per mile.

##### NWCS and FAPT/CPMT:

CSB's are unique among those core agencies required by code to be members of the FAPT and CPMT. Specifically, NWCS is the only core agency that:

1. Is a vendor of services for the CPMT, and is a fee-for-service agency;
2. Is required by law and/or regulation to charge for its services;
3. Must make through fee collection over 50% of its budget

NWCS is also unique among CSB's in that

- Northwestern is a **"small budget rural CSB"**.
- NWCS serves **6 political jurisdictions**. There are three other CSB's that do so, and 3 CSB's that serve more than six.
- The **area served** by NWCS is 1,637 square miles. This is the seventh highest area served of all CSB's in the Commonwealth.
- NWCS's **catchment area** has the second highest population density of the 23 rural CSB's in the Commonwealth. The overall population density is the 19<sup>th</sup> highest of all CSB's (urban and rural) in the Commonwealth.
- The **total population** for the catchment area served by NWCS is approximately 223,491. As a CSB, we serve the 14<sup>th</sup> highest population of all CSB's.

NWCS is a small budget rural CSB whose demographics are similar to a medium-large size CSB. That is, NWCS serves a very large catchment area in terms of total population, population density, and total square miles.

##### NWCS Case Management Services:

Community Services Boards (CSB's) are mandated by the Code of Virginia to provide Emergency Services prescreenings and, when funds are available, case management services. The case management services are licensed by the Virginia Department Behavioral Health and Developmental Services. Any case management services offered by a CSB are therefore required to meet the program's licensing standards.

By accepting reimbursement for targeted case management services via Virginia Medicaid, CSB's agree to apply the Medicaid standards for services delivery to all clients. That is, to not have different standards for different payor sources. Northwestern

Community Services (NWCS) must therefore treat any FAPT case management cases as it would any other case management case.

### **Eligibility Criteria**

The individual shall meet the DBHDS criteria of serious mental illness, serious emotional disturbance in children and adolescents, or youth at risk of serious emotional disturbance.

1. There must be documentation of the presence of serious mental illness for an adult individual or of serious emotional disturbance or a risk of serious emotional disturbance for a child or adolescent.
2. The individual must require case management as documented on the ISP, which is developed by a qualified mental health case manager and based on an appropriate service specific provider assessment and supporting documentation.
3. To receive case management services, the individual must be an “active client,” which means that the individual has an ISP in effect which requires regular direct or client-related contacts and communication or activity with the client, family, service providers, significant others, and others, including a minimum of one face- to-face contact every 90 days.

### **Required Activities**

The following services and activities must be provided:

1. A comprehensive service specific provider assessment must be completed by a qualified mental health case manager to determine the need for services. The CM service specific provider assessment is part of the first month of CM service and requires no service authorization
2. Service specific provider assessment and planning services, to include developing an ISP (does not include performing medical and psychiatric assessment, but does include referral for such).
3. This service specific provider assessment then serves as the basis for the ISP.
4. The service provider must notify or document the attempts to notify the primary care provider or pediatrician of the individual’s receipt of community mental health rehabilitative services, specifically mental health case management.
5. The ISP must document the need for case management and be fully completed within 30 days of initiation of the service, and the case manager shall review the ISP every three months. The review will be due by the last day of the third month following the month in which the last review was completed. A grace period will be granted up to the last day of the fourth month following the month of the last review. When the review was completed in a grace period, the next subsequent review shall be scheduled three months from the month the review was due and not the date of actual review.
6. Mandatory monthly case management contact, activity, or communication relevant to the ISP. Written plan development, review, or other written work is excluded.
7. Linking the individual to needed services and supports specified in the ISP.
8. Provide services in accordance with the ISP.
9. Coordinating services and treatment planning with other agencies and providers.

10. Enhancing community integration through increased opportunities for community access and involvement and creating opportunities to enhance community living skills to promote community adjustment.
11. Making collateral contacts with significant others to promote implementation of the service plan and community adjustment.
12. Monitoring service delivery as needed through contacts with service providers as well as periodic site visits and home visits.
13. Education and counseling, which guide the individual and develop a supportive relationship that promotes the service plan. Counseling, in this context, is not psychological counseling, examination, or therapy. The case management counseling is defined as problem-solving activities designed to promote community adjustment and to enhance an individual's functional capacity in the community. These activities must be linked to the goals and objectives on the Case Management ISP.
14. Educational activities do not include group activities that provide general information and that do not provide opportunities for individualized application to specific individuals. For example, group sessions on stress management, the nature of serious mental illness, or family coping skills are not case management activities.
15. A face-to-face contact must be made at least once every 90-day period. The purpose of the face-to-face contact is for the case manager to observe the individual's condition, to verify that services which the case manager is monitoring are in fact being provided, to assess the individual's satisfaction with services, to determine any unmet needs, and to generally evaluate the member's status.
16. Case Management services are intended to be an individualized client-specific activity between the case manager and the member. There are some appropriate instances where the case manager could offer case management to more than one individual at a time. The provider bears the burden of proof in establishing that the case management activity provided simultaneously to two or more individuals was consumer-specific. For example, the case manager needs to work with two individuals, each of whom needs help to apply for income assistance from Social Security. The case manager can work with both individuals simultaneously for the purpose of helping each individual obtain a financial entitlement and subsequently follow-up with each individual to ensure he or she has proceeded correctly.

#### **NWCS and FAPT Case Management:**

Northwestern Community Services currently has one CYFS FAPT Case Manager position. This FAPT case manager is responsible for managing an assigned caseload of children and adolescents experiencing primarily mental health problems. The case manager assesses client needs, develops, implements and reviews service plans, as well as working with other community resources in meeting/achieving client service needs.

Currently, the FAPT case manager's caseload generally consists of cases that have been referred by state hospitals and current Northwestern cases that need additional resources through FAPT such as residential placements.

The case manager must know all policies and procedures of each FAPT Team which includes: Page County, Shenandoah County, Warren County, Frederick County, Clarke County, and the City of Winchester. Although CSA policies are uniform throughout the state, each locality has different procedures and requirements for opening a FAPT case, documentation, and presenting cases.

Below are required duties of the CYFS FAPT Case Manager which are in addition the duties of a Medicaid Targeted Case Manager:

1. Maintains an increased frequency of communication with local FAPT teams regarding cases. This includes communication with the CSA coordinator, other providers, presenting cases to FAPT, as well as requests made by the CSA coordinator/FAPT team regarding documentation, placement, or case information in general (including completion of the MUAI)
2. Assists in locating appropriate residential placements for clients. This can be a timely endeavor, as each residential placement has their own requirements and each client has their unique needs. The case manager must have an extensive knowledge of residential facilities, populations served, and admission criteria.
3. Once placement is secured, maintaining communication with the residential facility regarding client progress, communication with the referral source regarding the placement, communication with guardian, as well as the FAPT team. The case manager also must have one face to face contact with the client at the residential facility every 30 days, rather than the 90 day requirement our CSB operates under.
4. Participate in discharge planning with residential facility which includes step down treatment in the community. This step down includes communicating with local agencies about establishing treatment post discharge and maintaining contact regarding status of client. The case manager must have knowledge of community providers, populations served, and admission criteria. Case manager maintains communication with the FAPT team and guardian concerning discharge and step down treatment.
5. Coordinates Family Team meetings as needed.