

Program Guidance

Title IV-E Prevention Services Plan



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Background

The Families First Prevention Services Act was signed into law as part of the Bipartisan Budget Act in February 2018. This act reforms the federal child welfare financing streams and provides a monumental shift by allowing states to access funds to provide prevention intervention services that strengthen and stabilize families so children can stay in their homes.

On August 17, 2020, North Dakota became the seventh state in the country to receive approval of its **Family First Prevention Services Act: Title IV-E Prevention Services Plan** from the federal Children's Bureau. North Dakota's Prevention Services Plan provides ND Department of Human Services (The Department) access to federal Title IV-E funding for approved evidence-based mental/behavioral health and substance abuse treatment and recovery support services as well as in-home parent skill-based programs. Find ND's plan at:

<http://www.nd.gov/dhs/services/childfamily/family-first>.

Title IV-E is a payer source for an approved prevention service. The approved services eligible for Title IV-E reimbursement in North Dakota are:

- Healthy Families
- Parents as Teachers
- Nurse-Family Partnership
- Homebuilders
- Brief Strategic Family Therapy
- Parent-Child Interaction Therapy
- Multisystemic Therapy
- Functional Family Therapy
- Family Check-Up/Everyday Parenting

For more information regarding these services: <https://preventionservices.abtsites.com/program>

The Department's Children and Family Services Division is responsible for program administration of the Title IV-E Prevention Services Plan. This includes determining eligibility, monitoring agreements with approved providers, ensuring federal requirements are met, completing quality assurance reviews, and paying for Title IV-E services. The Department is also committed to the principles of person-centered and trauma-informed care.

Individual Eligibility Application

The application is accessible to all individuals and partners in the community. An individual or referral partner that is interested in applying on behalf of a child can do so by completing the application located on the ND Title IV-E webpage. [Click here to access the page.](#) The child's parent/caregiver must consent to the application for it to move forward. Once an application for eligibility is submitted it will be reviewed by the Children and Family Services Division. If approved, the applicant and parent/caregiver will be notified of the approval and next steps. If denied, the applicant and parent/caregiver will be notified and provided information on additional community-based resources.

Child Eligibility Criteria

- ✓ 17 years and under (post-natal)
- ✓ North Dakota resident
- ✓ Not in an open foster care program or under the custody of a public agency (i.e., Human Service Zone, Division of Juvenile Services, or Tribal Social Services) with exception if they are a pregnant or parenting youth
- ✓ Living in a home of a parent/caregiver
- ✓ At risk of out of home placement if preventative services are not offered

Once the child has met the above criteria a determination of eligibility must be completed. Federal guidance defines an eligible child as “a candidate for foster care”.

North Dakota's definition of a candidate for foster care is:

A child who is at risk of out of home placement and has an active case plan to maintain the child in the child's home.

Once a child is deemed eligible, services can also be delivered to the child's caregivers.





To determine eligibility, an application must be completed through an online process. [Click here to access the application.](#) It gathers information on whether a child may be at risk of out of home placement based on circumstances and characteristics of the family as a whole and/or circumstances and characteristics of the child or the parent/kinship caregiver's ability to safely care for and nurture their child. Once the application is received, it is reviewed and approved/denied by the Children and Family Services Division.

Circumstances and characteristics of the child may include:

- DSM Diagnosis for an emotional, behavioral, or mental health disorder with symptoms are expected to last or have lasted one year or longer
- Serious emotional disturbance
- Moderate to severe impairment or limitations in the home, school, or community
- Moderate to severe impairment or limitations in their achievement of a developmentally appropriate skill (social, behavioral, cognitive, communicative, or adaptive)
- Adopted and the current arrangement is at risk of a disruption
- Entered a legal guardianship and the arrangement is at risk of a disruption
- Pregnant or parenting a child(ren)
- Siblings who are currently placed in foster care
- Actively involved with in-home case management through a local Human Service zone or Tribal Social Services office

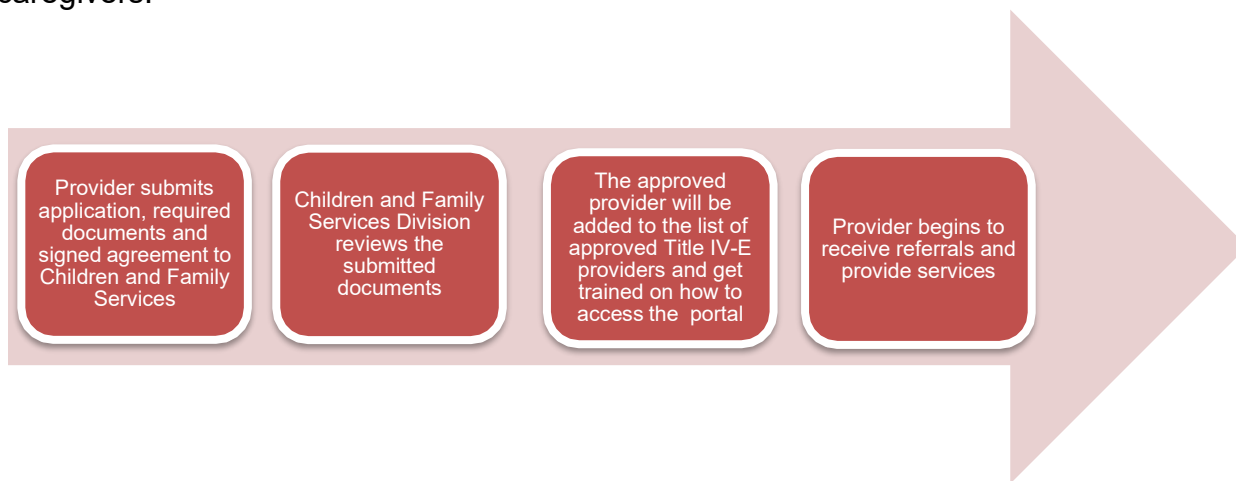
- Actively involved with child protective services through a local Human Service zone or Tribal Social Services office
- Actively involved with the Division of Juvenile Services
- Experienced a prior out of home placement
- Currently involved in two or more services offered in the community by a local agency
- Previously in foster care
- Experienced inadequate supervision in the home based on family and youth circumstances
- Cared for by an adult in the home (*i.e., parent, custodian, guardian, kin caregiver*) who has limited parental capacity to meet educational, medical, safety, or basic needs of the child(ren) due to the adult's:
 - Mental health or substance use concerns
 - Inability to address serious needs of the child
 - Physical or intellectual disability
 - Debilitating or life-threatening medical needs
 - Homelessness or substandard living conditions
 - Inability to manage the child's behavioral needs in the home
 - Use of substances resulting in the birth of a substance exposed newborn
 - Incarceration (at least one parent)

Additional information may be needed to substantiate that without preventative services, any one of these circumstances and/or characteristics could lead to out of home placement.

Title IV-E

Prevention Services Providers

Community and private service agencies/providers can apply to become an approved Title IV-E prevention services provider by completing the application located on the ND Title IV-E webpage. When applying providers must identify what Title IV-E approved service(s) they will offer and submit proof of qualifications and completion of training requirements for that service to the Children and Family Services Division. Providers must also agree to and sign the agreement outlining the requirements set forth by Children and Family Services and the Family First Prevention Services Act. Once approved, providers will be able to receive reimbursement for Title IV-E approved prevention services delivered to an eligible child and the eligible child's caregivers.



Applying to Become a Title IV-E Provider

If organizations or individuals desire to become a Title IV-E Provider and meet the requirements, they can start by completing the online Provider Application and the Provider Agreement available at <http://www.nd.gov/dhs/services/childfamily/iv-e-prevention.html>. Application components include:

1. Verification of required qualifications, training, certification and/or accreditation of each individual providing the approved Title IV-E prevention service(s) and/or screening service;
2. Verification of insurance meeting all requirements as stated in the agreement; and
3. Completed and signed W-9 form and state Vendor ID to receive payment.

After the provider application and signed service agreement is submitted to the email box TitleIVeprevention@nd.gov, it will be reviewed by the Children and Family Services Division for approval/denial. Once providers are approved, they will be placed on the list of North Dakota Approved Title IV-E Providers and can begin receiving referrals, providing services, and receiving Title IV-E reimbursement from the Department.

Provider Requirements

Approved providers for *Healthy Families*, *Parents as Teachers*, *Nurse Family Partnership*, *Homebuilders*, *Brief Strategic Family Therapy*, *Multisystemic Therapy*, *Functional Family Therapy*, *Family Check-Up/Everyday Parenting* or *Parent-Child Interaction Therapy* must at a minimum:

- ▶ Accept all eligible participants into their approved program unless the Provider is at program capacity
- ▶ Follow minimum basic training requirement(s) per discipline of the evidenced-based program/service they will be providing and must have supporting documentation that their staff have competency in the recommended training areas through their degree or continuing education
- ▶ Develop a plan (treatment/prevention/case) for the child/caregiver that is completed within the first 30-days of service and specifies that without effective preventative services, the child is at risk of out-of-home placement.
 - The plan should: address the child and parent/caregiver's identified needs, includes the identified service(s) being provided, includes case plan goals and tasks (e.g., prevention strategies) to keep the child safely in the home, document progress towards the achievement of the case plan goals, verifies whether the prevention strategies function as intended (*justifying your level of care*), assesses child safety on a regular basis, reviewed with the parent/caregiver and child if developmentally appropriate, and is updated at a minimum every six months.
- ▶ Collect and report on the participant's outcomes specified by the Department. Outcomes will be collected monthly prior to reimbursement of the service.
- ▶ Provide the Department, upon request, documentation and access to the Provider and participant records as part of conducting state/federal audits, and, if found out of compliance, the Department may request the Provider submit a plan to remedy the noted audit concerns
- ▶ Comply with all state and federal laws and regulations pertaining to use, disclosure, maintenance, retention, and safeguarding of confidential information regarding participants, including the Health Insurance Portability and Accountability Act (HIPAA) at 45 CFR Part 160 and Part 164; and the federal privacy law for Substance Use Disorder patient records, 42 USC § 290dd-2, and its implementing regulations, 42 CFR Part 2, and other such laws and regulations as may apply. Additionally, provider assumes responsibility for obtaining any *Authorization to Disclose Information* forms that may be necessary to meet coordination requirements and data reporting per this Agreement
- ▶ The reimbursable rate, which is pre-determined by the Department for each Title IV-E prevention service
- ▶ Maintain records related to the participant for whom payment was made for service(s) rendered by the Provider for a period of seven years from the end of the fiscal year in which the service(s) were completed
- ▶ Ensure all funding sources are exhausted before utilizing the Title IV-E funds as payer of last resort; and
- ▶ Notify the Department within five business days when a participant's eligibility status has changed, the service(s) has ended, and/or if the participant turns age 18 while receiving Title IV-E prevention service(s).

Provider Requirements

Those wanting to provide *Screening Services* must at a minimum:

- ▶ Use the screening tool provided by the Department
- ▶ If completing screenings by telehealth must have an application that allows for client signature and is HIPPA compliant
- ▶ Have knowledge and understanding of the approved IV-E Service(s) and the target populations
- ▶ Recommend the most appropriate Title IV-E prevention service(s) for the child and parent/caregiver(s)
- ▶ Make program information available to the child and parent/caregiver(s) to allow for individual choice when the Provider does not provide the recommended service(s)
- ▶ Comply with all state and federal laws and regulations pertaining to use, disclosure, maintenance, retention, and safeguarding of confidential information regarding participants. Health Insurance Portability and Accountability Act (HIPAA) at 45 CFR Part 160 and Part 164; and the federal privacy law for Substance Use Disorder patient records, 42 USC § 290dd-2, and its implementing regulations, 42 CFR Part 2, and other such laws and regulations as may apply. Additionally, provider assumes responsibility for obtaining any *Authorization to Disclose Information* forms that may be necessary to meet coordination requirements and data reporting per this Agreement
- ▶ Submit the screening tool to the Department through the online system
- ▶ Provide the Department, upon request, documentation, and access to the participant records as part of conducting state/federal audits. If found out of compliance, the Department may request the Provider submit a plan to remedy the noted audit concerns
- ▶ Ensure all funding sources are exhausted before utilizing the Title IV-E funds as payer of last resort; and
- ▶ Accept the reimbursable rate, which is pre-determined by the Department for each Title IV-E prevention service

After the provider is approved by the Children and Family Services Division, an invitation and directions are sent to the provider outlining the steps necessary to gain access to the Families First Title IV-E portal. Access to the portal is necessary to ensure the provider is included on the list of approved Title IV-E prevention services providers as well as generate reimbursement for services provided to eligible children and their parents/caregivers.

Providers will then be placed on the List of North Dakota Approved Title IV-E Providers found on the Title IV-E Prevention Services webpage, [which can be accessed by clicking here](#). This list identifies all approved Title IV-E providers in the state and their location, the Title IV-E prevention service they offer, and whether or not they provide the prevention service via telehealth.

Process Flow

After an individual application is submitted, criteria and eligibility are reviewed. Once reviewed, the applicant will receive a response from Children and Family Services as to whether the application is pending, denied, or approved.

A **pending** application means there was not sufficient information to determine the child's eligibility and additional information is needed.

A **denied** application means the child does not meet one or more of the criteria. If there is belief an error has occurred, a new application can be submitted.

An **approved** application means the child meets eligibility requirements.

If the child is not receiving services from an approved Title IV-E provider an initial screening is needed. The screen is to identify the most appropriate Title IV-E prevention service for the child/caregiver. This is accomplished through a screening process with the family.

Screening

A screening is needed if the child is not currently receiving services from an approved Title IV-E provider. The screening should be completed within 14 calendar days from the date the application was approved. These are the steps when a screening is needed:

1. Go to the Title IV-E webpage at <http://www.nd.gov/dhs/services/childfamily/iv-e-prevention.html>.
2. Click on "Find an Approved Providers" to find a Screening Provider.
3. Screenings can be completed either in person or through telehealth so any screening provider on the list can be selected.
4. Contact the selected screener, provide the Title IV-E Client ID and schedule for a screening. The Client ID is provided to the client when the application is approved by letter or email.

The Screening Provider is responsible for the following steps in the screening process:
Completing the Department's *Title IV-E Prevention Services Screening Tool* (screenshot of the tool is on the next two pages)

1. Making recommendations of the most appropriate Title IV-E prevention service(s) to address the needs identified.
2. Assisting the applicant in selecting a provider.
3. Completing the *Authorization to Disclose Information* (SFN 1059) between themselves and the referred Title IV-E service provider.

The Screener must then upload the screening tool and the *Authorization to Disclose Information* (SFN 1059) into the portal. Children and Family Service Division will review and authorize.

Title IV-E Prevention Services Screening Tool
(01/2021)

Clear Fields

Screening Date: Referral ID:
 Child Client Name: Child Client ID:
 Parent/Caregiver Name: Child Client Age:
 Is the child client an infant and first-born? Yes
 Is the parent a pregnant or parenting youth? Yes

Instructions: Using the scale below, rate each item in collaboration with the caregiver. If deemed appropriate, additional information can be gathered from the youth when over the age of 12. Please answer each question and score appropriately based on the information gathered.

NA Not Applicable	1 Mild (almost never)	2 Moderate (occasional)	3 Severe (often)	4 Extreme (most of the time)
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Child/Youth	Score	Comments
The child/youth misses required school/childcare days	NA	
The child/youth has mental health condition that impacts functioning in more than one setting (home, school, daycare, community)	NA	
The child/youth has behavioral concerns that impact functioning in more than one setting (home, school, daycare, community)	NA	
The child/youth uses mood altering substances and/or tobacco that are not prescribed	NA	
The child/youth has involvement with juvenile justice	NA	
The child/youth has experienced prior out-of-home placement(s) or treatment episodes	NA	
The child/youth engages in developmentally inappropriate tasks, behaviors and activities	NA	
The child/youth displays difficulty in attaching to their caregiver	NA	
Total Score:	0	

Based on the scoring, recommend the following service(s) for the child/family:

- Score of 22 - 28: Functional Family Therapy/Multisystemic Therapy/ Homebuilders/ Healthy Families/Parents as Teachers/Nurse-Family Partnership
- Score of 15 - 21: Brief Strategic Therapy/Parent-Child Interaction Therapy/Homebuilders/ Healthy Families/ Parents as Teachers/Nurse-Family Partnership
- Score of 8 - 14: Brief Strategic Therapy/Parent-Child Interaction Therapy/Healthy Families/Parents as Teachers/Nurse-Family Partnership
- Score of 1 - 7: Healthy Families/Parents as Teachers/Nurse-Family Partnership/Possible referral to other community resources

These are only recommendations and you may choose a higher or lower level of service intensity based on information not contained in this screening. Justify the change in level in the recommendation section.

Parent/Caregiver	Score	Comments
The parent/caregiver has mental health condition that impacts their ability to provide a safe and stable home	NA	
The parent/caregiver struggles to provide protective capacities to keep the child safe	NA	
The parent/caregiver has substance use that impacts their ability to provide a safe and stable home	NA	
The parent/caregiver requires assistance to maintain family interactions including conflict, child follow through or parenting practices	NA	
The family has involvement with child welfare (In-home Case Management or Child Protective Services)	NA	
The parent/caregiver is inconsistent in ensuring the child/youth participates in required activities such as education or medical appointments	NA	
The parent/caregiver displays or expresses difficulty in bonding with the child	NA	
Total Score:	0	

Based on the scoring, recommend the following service(s) for the child/family:

- Score of 22 - 28: Functional Family Therapy/Multisystemic Therapy/ Homebuilders/Healthy Families/Parents as Teachers/Nurse-Family Partnership
- Score of 15 - 21: Brief Strategic Therapy/Parent-Child Interaction Therapy/Homebuilders/Healthy Families/ Parents as Teachers/Nurse-Family Partnership
- Score of 8 - 14: Brief Strategic Therapy/Parent-Child Interaction Therapy/Healthy Families/Parents as Teachers/Nurse-Family Partnership
- Score of 1 - 7: Healthy Families/Parents as Teachers/Nurse-Family Partnership/Possible referral to other community resources

These are only recommendations and you may choose a higher or lower level of service intensity based on information not contained in this screening. Justify the change in level in the recommendation section.

RECOMMENDED TITLE IV E IN HOME SKILL BUILDING SERVICES

<i>Check all recommended programs</i>	<i>Justification for recommended level of service</i>	<i>Can family access in their community?</i>
<input type="checkbox"/> Healthy Families		Yes
<input type="checkbox"/> Nurse-Family Partnership		Yes
<input type="checkbox"/> Parents as Teachers		Yes

RECOMMENDED TITLE IV E THERAPY SERVICES

<i>Check all recommended programs</i>	<i>Justification for recommended level of service</i>	<i>Can family access in their community?</i>
<input type="checkbox"/> Homebuilders		Yes
<input type="checkbox"/> Parent Child Interaction Therapy		Yes
<input type="checkbox"/> Brief Strategic Family Therapy		Yes
<input type="checkbox"/> Functional Family Therapy		Yes
<input type="checkbox"/> Multisystemic Therapy		Yes

OTHER

No Title IV-E services recommended

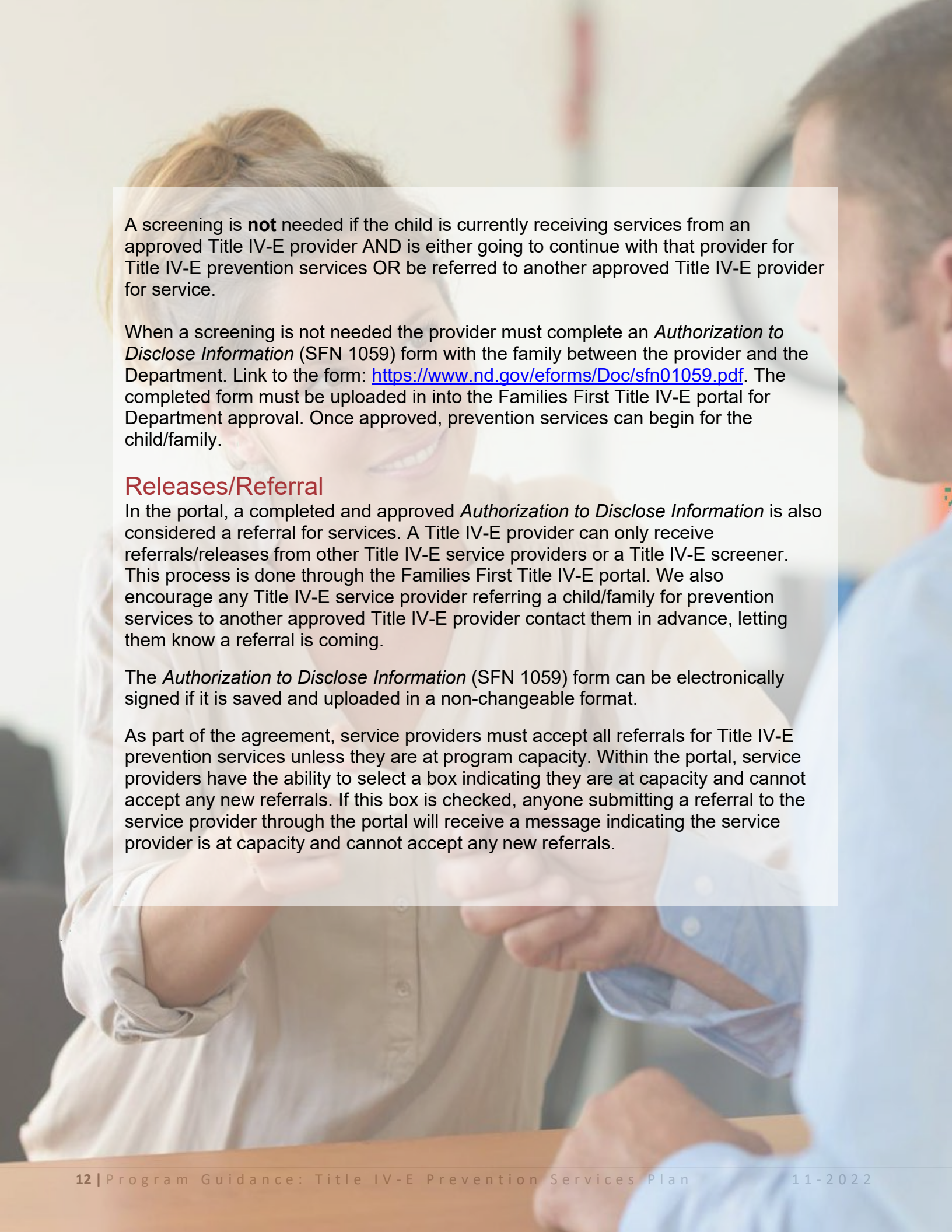
Other community referrals (list all):

- I am the screening provider and will provide recommended service(s). I will have the client complete a Release of Information SFN 1059 between myself (the provider) and the Department of Human Services-Children and Family Services Division.
- I am the screening provider and I will not be providing the recommended service(s). I will assist the client in finding a provider for the recommended service(s). I will have the client complete a Release of Information SFN 1059 between the new provider and the Department of Human Services-Children and Family Services Division.

Screening Provider Name:

Screening Provider Signature:

Date:



A screening is **not** needed if the child is currently receiving services from an approved Title IV-E provider AND is either going to continue with that provider for Title IV-E prevention services OR be referred to another approved Title IV-E provider for service.

When a screening is not needed the provider must complete an *Authorization to Disclose Information* (SFN 1059) form with the family between the provider and the Department. Link to the form: <https://www.nd.gov/eforms/Doc/sfn01059.pdf>. The completed form must be uploaded into the Families First Title IV-E portal for Department approval. Once approved, prevention services can begin for the child/family.

Releases/Referral

In the portal, a completed and approved *Authorization to Disclose Information* is also considered a referral for services. A Title IV-E provider can only receive referrals/releases from other Title IV-E service providers or a Title IV-E screener. This process is done through the Families First Title IV-E portal. We also encourage any Title IV-E service provider referring a child/family for prevention services to another approved Title IV-E provider contact them in advance, letting them know a referral is coming.

The *Authorization to Disclose Information* (SFN 1059) form can be electronically signed if it is saved and uploaded in a non-changeable format.

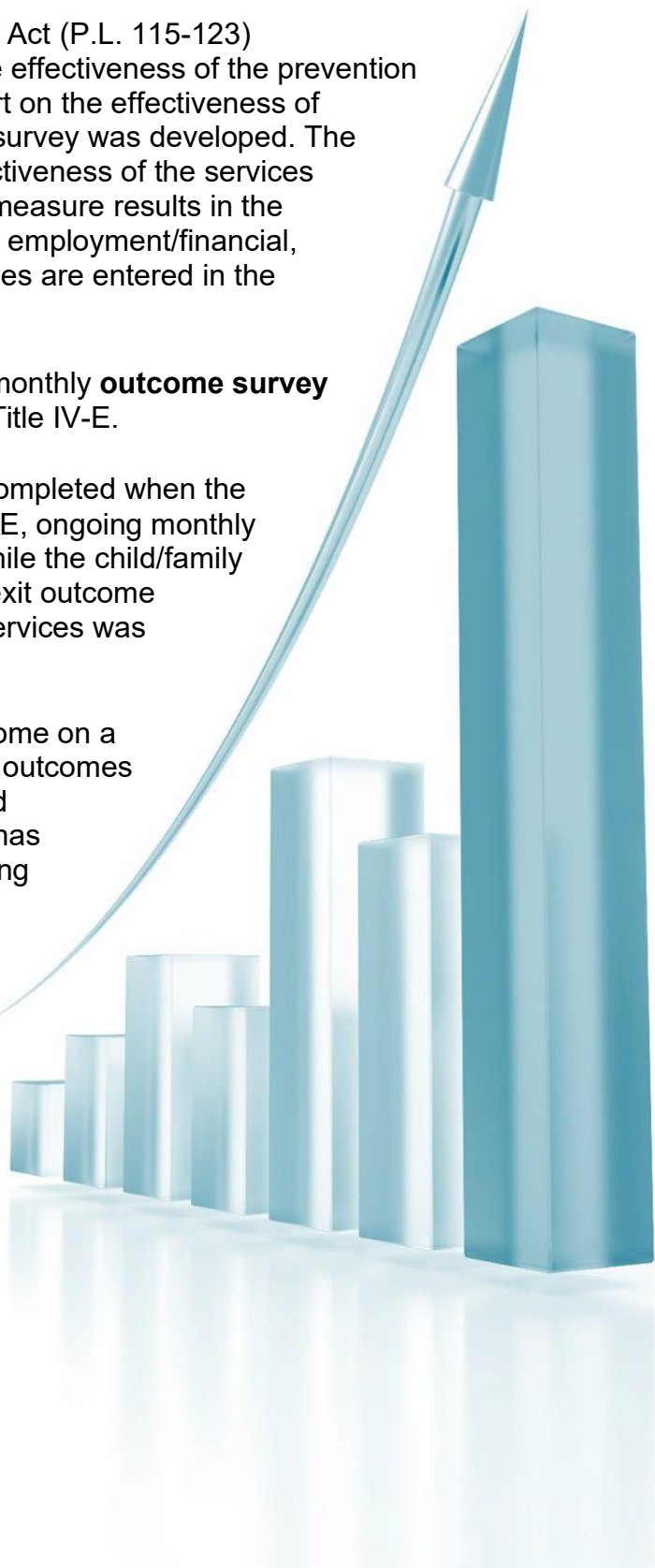
As part of the agreement, service providers must accept all referrals for Title IV-E prevention services unless they are at program capacity. Within the portal, service providers have the ability to select a box indicating they are at capacity and cannot accept any new referrals. If this box is checked, anyone submitting a referral to the service provider through the portal will receive a message indicating the service provider is at capacity and cannot accept any new referrals.

Outcomes

The federal Family First Prevention Services Act (P.L. 115-123) requires states to measure and report on the effectiveness of the prevention services provided. For North Dakota to report on the effectiveness of approved prevention services an outcomes survey was developed. The outcomes identified are to measure the effectiveness of the services provided to the child/family. The outcomes measure results in the areas of parenting, housing, social supports, employment/financial, health, and education/childcare. The outcomes are entered in the portal.

Providers will be responsible to complete a monthly **outcome survey** on each child/family they are serving under Title IV-E.

- An initial outcomes survey needs to be completed when the child/family gets approved under Title IV-E, ongoing monthly outcomes surveys must be completed while the child/family are receiving Title IV-E services and an exit outcome survey for the last month the Title IV-E services was provided to the child/family.
- The provider needs to answer each outcome on a scale of 1 to 5 by rating the child/family's outcomes based on their contact with the family and information received. Select NA if there has been no contact with the child/family during that month receiving services or if this question does not pertain to child/family.
- Documentation in the child/family's plan should support the data reported in the monthly outcomes.
- The monthly outcomes survey must be completed and correlate to the month in which services were invoiced, otherwise the invoice will not be approved.



TITLE IV-E PREVENTION SERVICES: CHILD/FAMILY OUTCOMES SURVEY

Child Client Name:

Child Client ID:

Parent/Caregiver Name:

Program/Service Providing:

Outcomes for the month of:

On a scale of 1 to 5 (1 = strongly disagree, 5 = strongly agree), rate the child/family's outcomes based on your contact and information received. Select NA if you have not had contact with the child/family receiving services or if this question does not pertain to child/family.

Parent/Caregiver

1.a. In the last 30 days, the parent/caregiver demonstrates protective capacities to keep the child safe.

1 - strongly disagree 2 - disagree 3 - neutral 4 - agree 5 - strongly agree 0 - NA

1.b. In the last 30 days, the parent/caregiver maintains safe and positive family relationships and environment.

1 - strongly disagree 2 - disagree 3 - neutral 4 - agree 5 - strongly agree 0 - NA

1.c. In the last 30 days, the parent/caregiver demonstrates positive parenting skills.

1 - strongly disagree 2 - disagree 3 - neutral 4 - agree 5 - strongly agree 0 - NA

1.d. In the past 30 days, the parent/caregiver actively implements newly taught skills.

1 - strongly disagree 2 - disagree 3 - neutral 4 - agree 5 - strongly agree 0 - NA

Housing

2. In the last 30 days, the child/family lives:

(1) Homeless

(2) Transitional Living/Shelter

(3) With Relatives/Friends

(4) Permanent home with some unmet needs

(5) Permanent home, stable and well maintained

(0) Other

NA

Social Supports

3. In the last 30 days, the family utilizes natural supports, (including health/wellness services, self-help groups, religious activities, community activities, family, and friends)

(1) Never

(2) Rarely

(3) Sometimes

(4) Often

(5) Frequently

NA

Employment/Financial

4.a. In the past 30 days, the parent/caregiver is(are)

(1) Not employed or in school

(2) Not employed, student

(3) Seeking employment

(4) At least 1 parent is employed part-time

(5) At least 1 parent is employed Full-time

(0) Other

NA

4. b. In the past 30 days, the parent/caregiver
- (1) Has inadequate income to meet basic needs
 - (3) Utilizes community resources to meet basic needs
 - (5) Maintains adequate income to meet family needs
 - NA

Health and Behavior

- 5.a. In the last 30 days, the child/youth is engaging in developmentally appropriate tasks and activities.
- 1 - strongly disagree 2 - disagree 3 - neutral 4 - agree 5 - strongly agree 0 - NA
- 5.b. In the last 30 days, the child/youth is in good physical and mental health with no hospitalizations.
- 1 - strongly disagree 2 - disagree 3 - neutral 4 - agree 5 - strongly agree 0 - NA
- 5.c. In the last 30 days, the parent/caregiver is in good physical and mental health with no hospitalizations.
- 1 - strongly disagree 2 - disagree 3 - neutral 4 - agree 5 - strongly agree 0 - NA
- 5.d. In the last 30 days, the child/youth is free from mood altering substances and tobacco.
- 1 - strongly disagree 2 - disagree 3 - neutral 4 - agree 5 - strongly agree 0 - NA
- 5.e. In the last 30 days, the parent/caregiver only uses legal mood-altering substances in moderation.
- 1 - strongly disagree 2 - disagree 3 - neutral 4 - agree 5 - strongly agree 0 - NA
- 5.f. In the last 30 days, the child/youth has not engaged or repeated in violence, theft, or other harmful behaviors.
- 1 - strongly disagree 2 - disagree 3 - neutral 4 - agree 5 - strongly agree 0 - NA

Education/Childcare

- 6.a. In the last 30 days, the child/youth attends school/childcare nearly every day. (If under school age, the childcare days should be determined based on numbers of days they were supposed to attend but did not.)
- | | |
|--|---|
| <input type="checkbox"/> (1) Not attending (0%) | <input type="checkbox"/> (4) Attends most of the time (75%) |
| <input type="checkbox"/> (2) Attends very infrequently (25%) | <input type="checkbox"/> (5) Attends regularly (100%) |
| <input type="checkbox"/> (3) Attends infrequently (50%) | <input type="checkbox"/> (0) NA |
- 6.b. The child/youth participates in routines and expectations with average capability.
- 1 - strongly disagree 2 - disagree 3 - neutral 4 - agree 5 - strongly agree 0 - NA
- 6.c. The parent/caregiver supports opportunities for the child/youth's educational readiness.
- 1 - strongly disagree 2 - disagree 3 - neutral 4 - agree 5 - strongly agree 0 - NA

Provider Payment

The service provider will submit the Title IV-E Prevention Services Invoice to Children and Family Services Division through the Families First Title IV-E portal for reimbursement. When submitting an invoice for prevention services the service provider must answer four questions to verify that the child remains Title IV-E eligible:

1. Child client at the time of service(s) was not in foster care (exception is if the youth is pregnant/parenting);
2. The prevention strategies are listed in the child's plan; and
3. Without these prevention strategies out-of-home placement is likely.

To complete an invoice, the service provider must enter what service was provided, dates of service during that month, select which monthly outcomes survey correlates to the month of service, and how many units were provided.

The Department of Human Services has set rates for the following approved prevention services. The Department will continue to review and update the rate table (next page) to include all approved prevention services.



Service	Rate	Specification
Screening	\$ 40.00	Per Screening
<ul style="list-style-type: none"> • Must use screening tool provided by Department of Human Services -Children and Family Services • Screening must identify the recommended service, the selected provider of the service and necessary release of information documents which are then submitted to the Department 		
Brief Strategic Family Therapy	\$ 50.00	Per 15 minutes (8+minutes of therapeutic intervention)
<ul style="list-style-type: none"> • Reimbursement of the service as directed by the guidelines and fidelity requirements of the Title IV-E approved model • The purpose of the therapeutic intervention must be identified in treatment/case plan • If a session exceeds 60 minutes the therapeutic necessity must be documented within the progress note to justify the extended time • Rates include all costs associated with the program 		
Parent-Child Interaction Therapy	\$ 50.00	Per 15 minutes (8+minutes of therapeutic intervention)
<ul style="list-style-type: none"> • Reimbursement of the service as directed by the guidelines and fidelity requirements of the Title IV-E approved model • The purpose of the therapeutic intervention must be identified in treatment/case plan • If a session exceeds 60 minutes the therapeutic necessity must be documented within the progress note to justify the extended time • Rate includes all costs associated with the program 		
The Family Check-Up	\$ 400.00	Assessment (one per family per year)
	\$ 400.00	Review/Feedback (one per family per year)
<ul style="list-style-type: none"> • Assessment is 2 sessions that includes set up of new client (intake) • Reimbursement of the service as directed by the guidelines and fidelity requirements of the Title IV-E approved model • Rate includes all costs associated with the program 		
Every Day Parenting (follow-up to Family Check-Up)	\$ 150.00	Per session
<ul style="list-style-type: none"> • Reimbursement of the service as a follow up service of parent management training to the Title IV-E approved model The Family Check-Up • Rate includes all costs associated with the program 		
Functional Family Therapy	\$ 50.00	Per 15 minutes (8+minutes of therapeutic intervention)
<ul style="list-style-type: none"> • Reimbursement of the service as directed by the guidelines and fidelity requirements of the Title IV-E approved model • The purpose of the therapeutic intervention must be identified in treatment/case plan • If a session exceeds 60 minutes the therapeutic necessity must be documented within the progress note to justify the extended time • Rate includes all costs associated with the program 		
Homebuilders	\$ 220.00	Per home visit/session
<ul style="list-style-type: none"> • Reimbursement of the service as directed by the guidelines and fidelity requirements of the Title IV-E approved model • Rate includes all costs associated with the program 		
Healthy Families	\$ 185.00	Per home visit/session
<ul style="list-style-type: none"> • Reimbursement of the service as directed by the guidelines and fidelity requirements of the Title IV-E approved model • Rate includes all costs associated with the program 		
Parents as Teachers	\$ 185.00	Per home visit/session
<ul style="list-style-type: none"> • Reimbursement of the service as directed by the guidelines and fidelity requirements of the Title IV-E approved model • Rate includes all costs associated with the program 		
Nurse- Family Partnership	\$ 220.00	Per home visit/session
<ul style="list-style-type: none"> • Reimbursement of the service as directed by the guidelines and fidelity requirements of the Title IV-E approved model • Rate includes all costs associated with the program 		



Quality Assurance

The Department will conduct utilization file reviews with approved providers on an ongoing basis. As part of the utilization file review the Department will verify that 1) staff are conducting risk assessments to ensure ongoing child safety, and 2) the development of the prevention/treatment/case plan to include goals/strategies to keep the child safely in the home. The utilization file review will also ensure the child's plan identifies the services being provided address the goals/strategies and that all necessary *Authorization to Disclose Information* forms are part of the file. The service provider will document in the child's plan whether the service is functioning as intended, addressing the needs that have been identified, and working toward the achievement of the prevention strategies.

The Department will implement a Continuous Quality Improvement process (CQI) that will include outcomes measured by both the Department and service providers to monitor activities provided under the Title IV-E Prevention Services Plan. This CQI process will be used to ensure participants are provided quality services that protect the safety and health of every child and family and to determine the impact of those services on child and family level outcomes and functioning.