FREDERICK COUNTY CPMT AGENDA

May 20, 2024 1:00 PM 107 N Kent St Winchester, VA 1st Floor Conference Room

- I. Introductions
- II. Adoption of Agenda
- III. Consent Agenda
 - A. April Minutes
 - B. Budget Request Forms
- IV. Executive Session
 - A. Vendor Inquiry/Questionable Practices
- V. Committee Member Announcements
- VI. CSA Office
 - A. CSA Committee Vacancy Updates
 - B. April Financial Statement
 - C. Vendor Contracts
 - D. OCS Proposed Procedure Change
- VII. Old Business
 - A. FAPT Structure Policy Status Updates
 - B. Policy Clarification
- VIII. New Business
 - A. CPMT Private Provider Rep Reappointment
 - B. Administrative Memorandum #24-03
- IX. Informational Items
 - A. None
- X. Assigned Tasks
 - A. TBD
- XI. Upcoming Meetings
 - Joint FAPT/CPMT- June 11, 2024, 12:30-1:30pm, FAPT Room
 - CPMT- June 24, 2024, 1:00-3:00pm, 1st Floor Conference Room
- XII. Adjourn

- Motion to convene in Executive Session pursuant to 2.2-3711(A)(4) and (16), 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 the Child & Family Team Meeting process, and whose case is being
 assessed by this team or reviewed by the Community Management and Policy Team
- · Motion to return to open session-
- Certification 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.
- · Roll Call Affirmation
- Motion to Approve cases discussed in Executive Session

^{**}Instructions for Closed Session:

CPMT Meeting Minutes: April 22, 2024

The Community Policy and Management Team (CPMT) met in the 1st Floor Conference Room at 107 N Kent St, Winchester, VA 22601, on April 22, 2024, at 1:00 pm.

The following members were present:

- Leea Shirley, Lord Fairfax Health District
- Denise Acker, Northwestern Community Services Board
- Jay Tibbs, Frederick County Administration
- Jerry Stollings, 26th District Juvenile Court Service Unit
- David Alley, Private Provider Representative, Grafton Integrated Health Network
- · Dr. Michele Sandy, Frederick County Public Schools
- Linda Gibson, Frederick County Department of Social Services proxy

The following members were not present:

Tamara Green, Frederick County Department of Social Services

The following non-members were present:

- Jacquelynn Jury, CSA Coordinator
- · Sarah Makomva, CSA Account Specialist
- Katherine Webster, UR/CQI Specialist

Call to Order: Dr. Michele Sandy called the meeting to order at 1:00 pm.

- I. Introductions
- II. Adoption of Agenda
 - A. Leea Shirley made a motion to adopt the April agenda; Jay Tibbs seconded. CPMT approved.
- III. Consent Agenda- The following items were included in the Consent Agenda for CPMT's approval:
 - A. March 25, 2024 CPMT Minutes. Dr. Michele Sandy motioned to approve the March minutes; Jerry Stollings seconded. CPMT approved.
 - B. Budget Request Forms- Confidential Under HIPAA. Denise Acker made a motion to approve the Budget Request Forms; Jerry Stollings seconded. CPMT approved. Private Provider Representative abstained from voting on funding for youth receiving services provided by their respective agency or where there may appear to be a personal financial gain from the provision of services.

IV. Executive Session

- A. Adoption to Convene to Executive Session- Jerry Stollings made a motion to go into Closed Executive Session to discuss cases confidential by law as permitted by Section §2.2-3711 (A) (4) and (16), and in accordance with the provisions of 2.2-5210 of the Code of Virginia. Jay Tibbs seconded. CPMT approved.
- B. Adoption of Motion to Come Out of Executive Session- Denise Acker made a motion to come out of Closed Session and reconvene in Open Session, Leea Shirley seconded; CPMT approved.

C. Roll Call Certification of Executive Session- Certify to the best of each Frederick County CPMT member's knowledge (1) the 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.

•	Dr. Michele Sandy	Aye
	Linda Gibson	Aye
	Jerry Stollings	Aye
	David Alley	Aye
	Denise Acker	Aye
	Jay Tibbs	Aye
	Leea Shirley	Aye

- D. Adoption of Motion to Approve Items Discussed in Executive Session
 - Denise Acker made a motion to hold the March invoice for possible double billing for individual therapy in a group setting from case #1. David Alley seconded; CPMT approved.
 - Leea Shirley made a motion to approve paying for May 2024 childcare services for case #2 until Jacqulynn Jury hears back from OCS regarding policy clarification. Jerry Stollings seconded; CPMT approved.

V. Committee Member Announcements

- A. Denise Acker announced NWCSB hired a new Executive Director, Ellen Harrison, who will start on May 15, 2024. She is currently the Chief Deputy Commissioner for the Department of Behavioral Health & Developmental Services. She was formerly the Executive Director in Harrisonburg/Rockingham.
- B. Jerry Stollings announced in Shenandoah County a probation officer was promoted to be a supervisor in Harrisonburg, a second intake officer resigned to go into law enforcement, and a third probation officer was promoted to quality control for Prince William Court Services Unit. By the end of May there will be one probation officer in Shenandoah County. Those employment positions will be posted as soon as possible.
- C. Dr. Michele Sandy announced she will be retiring as of June 30, 2024, after 32 years of service.

VI. CSA Office Business

- A. CSA Committee Vacancy Updates- Jacquelynn Jury announced the Private Provider Rep & Parent Rep for FAPT as well as the Parent Rep for CPMT positions are still vacant. She emailed vendor contacts, and no interest has been expressed at this time.
- B. March 2024 Financial Statement
 - a) Total Net Expenditures as of March 2024- \$2,472,623.77 or 61% of the allocation. Encumbered for future spending is \$1,628,680.01.
 - b) Wrap Allocation is \$330,409.00.
 - c) Youth Served as of end of March 2024 is 122

- (1) 84 in Community Based Services
- (2) 26 in TFC
- (3) 12 in Congregate Care
- (4) 18 in Private Day School
- d) Jacquelynn Jury informed CPMT that we have used \$2,172.50 or 5% of non-mandated funds at this time and \$31,413.00 is encumbered.
- e) Jacquelynn Jury informed CPMT that Frederick County has \$124,740.00 encumbered for SpEd WrapAround funds.
- C. Vendor Contracts- Jacquelynn Jury announced she is still revising FY25 contracts, as well as adding information as suggested by the county attorney. Once complete, she will electronically send to CPMT to review the drafts.

VII. Old Business

- A. FAPT Structure Policy Status Update-
- 1. Jacquelynn Jury shared concerns about corrected FAPT documentation not being corrected properly and resubmitted to the CSA office in a timely manner. At this time, these cases have not been removed from the FAPT schedule per policy due to several reasons, mainly the impact on families. Katherine Webster shared some software incompatibility issues with NWCSB which is part of the problem. Denise Acker will follow up with the agency about the possibility of adding more Adobe licenses. CPMT discussed different ways to fix the discussed issues. Linda Gibson suggested also copying Jennifer Smith, as well as the case manager's supervisor, on FAPT paperwork that is not properly resubmitted by DSS.
- 2. Jacquelynn Jury shared concerns that the case manager's presentation during the FAPT meeting has not changed since the new expectations were implemented. Case managers are not linking progress and behaviors to goals being worked on with each service provided. Katherine Webster also shared concerns that documentation submitted that she reviews is often very different than what is verbally shared in the FAPT meeting. CPMT discussed how to resolve the said issues going forward. CPMT decided if FAPT documentation is not properly corrected Monday morning, the CPMT chair for that agency should be copied on response emails so they are able to identify themes and patterns with employees.

VIII. New Business

A. Administrative Memorandum #24-02 provides notice regarding the approval and adoption of new regulations dictating the transfer of cases between localities. Specifically, the transfer of private Special Education services will occur immediately upon the family moving to the new VA locality. The local CPMT of the sending locality will notify the CPMT in the receiving locality of the change of residence and continue to fund the placement until the student no longer resides in the locality. The receiving locality CPMT will notify the LEA of the transfer and will be responsible for funding the private placement once the student resides in the new school division. The sending locality is no longer responsibility for funding the placement for 30 days after moving.

IX. Informational Items

A. Local CSA Administrative Resource Survey Results- FY2023 – This survey was provided to show the number of staff by locality and use of the administrative budget. Jacquelynn Jury provided results of this survey to CPMT for informational purposes.

X. Assigned Tasks

- Jacquelynn Jury will contact OCS about policy clarification regarding childcare and subsidy application process.
- Jacquelynn Jury will email CPMT members electronic copies of FY25 contract drafts for review.

XI. Next CPMT Meeting

- May 20, 2024, 1:00-3:00pm, 1st Floor Conference Room
- XII. Adjourn at 2:39 pm: Jerry Stollings made a motion to adjourn the meeting, Jay Tibbs seconded. CPMT agreed.

Minutes Completed By: Sarah Makomva



3363 Shawnee Dr. Suite 1 · Winchester, VA 22602 · Phone: 540.535.0043 · Fax: 540.535.0011 · www.fpscorp.com

Jackie Jury
Frederick County CSA Office
107 North Kent Street
Suite 200
Winchester, VA 22601

Phone: 540-722-8395 Fax: 540-678-0682

Dear Jackie,

I have an interest in being the private provider representative for the Frederick County Family Assessment and Planning Team. As you know I served on the Loudoun County FAPT for 5 years from 2007-2012. I have over 28 years of experience in the mental health/developmental disabilities field. I have been working at Family Preservation Services since March of 2003 as an in-home counselor, mentor, Reconnecting Youth program coordinator, Behavior specialist, behavior technician and currently a Licensed Behavior Analyst within our ABA program since October of 2016 (BCBA since August of 2016).

I believe I could be a valuable asset to the Frederick County FAPT. Please consider me for this appointment.

Thank you,

C. Sean Hilleary, MSW, PBSF, BCBA, LBA

C. Sean Hilleary, MSW, PBSF, BCBA, LBA

ABA Program Manager

Family Preservation Services 3363 Shawnee Drive, Ste. 1 Winchester, VA 22602 540-535-0043 (office) 540-535-0011 (fax) 540-303-6946 (cell)





3363 Shawnee Dr. Suite 1 · Winchester, VA 22602 · Phone: 540.535.0043 · Fax: 540.535.0011 · www.fpscorp.com



CHRISTOPHER SEAN HILLEARY MSW, PBSF, BCBA, LBA

441 Royal Street, Winchester, Virginia 22601 PHONE (540) 303-6946 (Cell) seanhillyt@gmail.com

WORK EXPERIENCE:

3/2003 – Present Family Preservation Services, Inc. Winchester, VA

Licensed Behavior Analyst, Qualified Mental Health Professional, Coordinator of Behavioral Treatment Services (ABA Therapy) program, Positive Behavioral Support Facilitator, Safety Care Trainer, First Aid/CPR/AED trainer, Behavior Analyst Technician, Therapeutic Mentor, In-Home Services Counselor, Regional Coordinator – Loudoun County, VA, Reconnecting Youth Coordinator, Mentor Supervisor, CIT trainer

- A. Assisted in the development of ABA program within our agency, through funding from EPSDT (Early and Periodic Screening Diagnostic and Treatment) funds (VA Medicaid) as well as local CSA (Comprehensive Services Act) funds, for children and their families diagnosed with Autism, Mental Retardation, Down Syndrome and Traumatic Brain Injury, since the program's inception in 2009. Have also started to accept insurances.
- B. Complete initial and continued stay service request authorizations for MCOs for client services.
- C. Keep up to date on all licensure requirements for LBA position, Medicaid regulations for ABA program, requirements to maintain BCBA certification with the BACB (Behavior Analytic Certification Board), supervision requirements for field experience for BCBA candidates, Registered Behavior Technicians (RBTs).
- D. Currently Coordinator for Applied Behavior Analysis Program (former BTS (Behavior Treatment Service) program), supervising staff, coordinating care, assessing children and families, development of ISP objectives, behavior plans, functional assessments with family and staff input, supervise RBT's, BTs and supervise individuals pursuing BCBA certification.
- E. Conduct Functional Behavioral Assessments with input from clients (when possible), families, teachers and other members of treatment team.
- F. Develop and implement Positive Behavior Support Plans and Behavior Intervention Plans with treatment team input.
- G. Facilitate team meetings, when appropriate.
- H. Teach/train staff process of conducting FBAs and PBS plans, principles of behavior, principles of Applied Behavior Analysis, functions of behavior, behavioral interventions.
- I. Train staff in use of Safety Care by QBS, Inc. for crisis prevention and intervention strategies (currently version 7).
- J. Teach/train families/treatment teams on implementation of PBS plans and data collection.
- K. Provide intensive individual and family sessions in the client's home for client's with various DSM-V diagnoses, including but not limited to: ODD, ADHD, Autism Spectrum Disorders, Intellectual Disabilities, Angelman Syndrome, Sexual Abuse Victims, Victims of Physical Abuse/Neglect, PTSD, RADS, Substance Abuse, Conduct Disorder, Depression, and Bi-Polar Disorder.
- L. Provide therapeutic mentoring services in the home, community and academic settings with the client, teachers and the family to increase daily living skills, communication skills, social skills and community independence skills.
- M. Maintain and monitor a case record to include SGIRPP notes, monthly case reviews/ISP updates and/or 90-day reviews for Medicaid cases, CAFAS (Child and Family Assessment Scale) scores and assessments, CANS (Child and Adolescent Needs and Strengths) assessments (no longer used); ISP plans, objectives, and goals.
- N. Provide crisis intervention with client and family during escalated situations.
- O. On-call responsibility 24 hours per day, 7 days per week.
- P. Provide individual and family counseling in the home environment with clients and family members to increase family dynamics as well as increase anger management skills with clients.
- Q. Facilitated and Coordinated services for Reconnecting Youth program through Loudoun County Juvenile Court Services Unit from November 2003 through December 2007 to include group bonding day long exercises, classroom curriculum, individual activity sessions, budgeting for activities and classroom expenses and completion of mid-term and completion progress reports to Loudoun County Court Services Unit.
- R. Coordinate therapeutic mentoring, in home counseling, Reconnecting Youth and intensive in home services in Loudoun County Region.

- S. Development and implementation of behavioral treatment plans to in homes, schools and community settings for children with Autism, Asperger's Syndrome, Oppositional Defiant Disorder, Bi-Polar Disorder, Fetal Alcohol Syndrome, Down Syndrome, Reactive Attachment Disorder and Intellectual Disabilities (as well as many other diagnoses).
- T. Supervise therapeutic mentors and behavior aides to ensure quality of service delivery, paperwork completion, assist in treatment development/implementation and provide support to mentors and BAs.
- U. Review all in home services, mentoring, intensive in home services and Behavioral treatment services SGIRPP progress notes to ensure that they meet standards set by Medicaid for compliance and to ensure quality service delivery to clients and their families.
- V. Provide case management and care coordination services to clients and families to coordinate services, monitor behaviors/services, assess treatment needs/progress/setbacks and link clients/families to community resources.

10/2000 – 3/2003 Frederick County Department of Social Services Child Protective Services Worker

Winchester, VA

- A. Investigate allegations of physical abuse and neglect of children as well as allegations of sexual abuse, mental neglect, and medical neglect.
- B. Ensure that children are safe in their home environment and recommend any community resources that the may be needed by the family.
- C. Maintain and monitor a case record to include, narrative of this worker's involvement with the family, services recommended, any written correspondence with the family, and any oral or written correspondence with outside community resources.
- D. Assess the child's safety with an Initial Safety Assessment, Child Risk Assessment, Family Needs Assessment and any services the family may need.
- E. Participate in any court proceedings that said investigations or family assessments may require.
- F. Coordinate with outside agencies, community resources and intradepartmental resources to determine and develop service plans for families.
- G. Remove children from their family, if child is deemed unsafe in current environment, and coordinate a foster care placement with members of the team (foster care workers, law enforcement, community resources and other CPS workers) to ensure the safety of the child.
- H. Provide case management for above said investigations, children that come into foster care, and family services cases/protective orders.
- I. Knowledge and application of VA State Child Protective Services policies.

1/1995-10/2000 Grafton School, Inc.

Berryville, VA and Winchester, VA

Community Facilitator/Residential Instructor/Shift Supervisor's Office Substitute

- A. Develop goals and objectives for consumer service plans as well as behavioral treatment plans for consumers with DSM-IV diagnoses of Autism Spectrum Disorders, Mental Retardation, Oppositional Defiant Disorder, Pervasive Developmental Disorders, Emotionally Disturbed Learning Disabled, Conduct Disorders, Schizophrenia, as well as consumers with other diagnoses in the DSM-IV.
- B. Assist consumer in planning and participation of academic and residential based behaviors.
- C. Implement individual and family crisis management intervention strategies with above said consumers and their families.
- D. Provide informal training to co-workers and in-home training to several in-community clients and their families.
- E. Responsible for reporting and documentation of allegations of consumer neglect or abuse. Also reports and supervised the documentation of any consumer suicidal statements, gestures or attempts.
- F. Participate, as a member of client treatment teams to discuss client's needs, issues, progress, IEP/CSP modifications, behavior plans, etc.
- G. Collect and document a variety of data pertaining to consumer activities, accomplishments, and behavioral responses such as daily logs and consequence records to document the consumer's progress. Also documented information needed to fulfill Medicaid Waiver, ID Waiver, DD waiver requirements.
- H. Preparation of quarterly reports.
- I. Aid in the development of daily, weekly and monthly activity schedules along with input from the team, parents, and the consumers themselves.

OTHER RELATED EXPERIENCE:

- ∨ Information regarding employment prior to 1995 is available upon request.
- ∨ Participation in FAPT (Family Assessment Planning Team) meetings. Sit on Loudoun County Family Assessment and Planning Team two Fridays of every month from October 2007 to January 2012.
- Attended Commonwealth Autism Services Annual Conferences in Richmond, Virginia annually from 2005-2018. Set up vendor table at conference from 2008-2017 to market agency and services to families.
- ∨ Successfully completed Positive Behavior Support Training (class section) on December 13, 2007.
- ** Received Positive Behavior Support Facilitator Endorsement from the State of Virginia through the Partnership for People with Disabilities, who is affiliated with Virginia Commonwealth University, in February 2009 and currently remain and endorsed Positive Behavior Support Facilitator.
- Numerous trainings/Conferences in all Child Protective Services related issues including Eastern Regional Prevent Child Abuse Convention in Birmingham, Alabama in 2001 and various DJJ conferences locally, statewide and nationally.
- ∨ Attended numerous workshops pertaining to Autism/Asperger's Syndrome while at Grafton and Family Preservation Services.
- ∨ Attendance at least three VARC conventions in Virginia Beach, Virginia while employed at Grafton School
- ∨ Member of the annual Concern Hotline Fish Fry Committee for the past 20 years. Co-Chair of the "Fish Crew" Committee for the 18 of 20 years.
- Nominated and elected to the Board of Directors of the Concern Hotline (Suicide Prevention/Crisis intervention hotline) in Winchester, Virginia in August, 2008. Vice President of Concern Hotline Board of Directors from January 2010 to November 2012.
 - è Rejoined Concern Board of Directors in 2017. Re-elected as Vice President in late 2017 and President of the Board of Directors again in 2018 to present.
- Completed WVU generalist placement internship at CLEAN, Inc. in September 2011. Focus during internship was on strengthening and overseeing current community service program for youth who are court ordered to serve community service through the juvenile court unit.
- Completed WVU advanced placement internship at Bridging the GAPS in Winchester, VA, which is a residential substance abuse treatment facility in April of 2013.
- ∨ Joined Virginia Youth Ballet Board of Directors in fall of 2016, currently Vice President of VYB Board of Directors.

EDUCATION:

August 2013-March 2015 Florida Institute of Technology

Melbourne, FL

BCBA coursework to pursue BCBA

Passed BCBA exam in August of 2016. Became Licensed in December of 2016.

Aug. 2010-May 2013 West Virginia University

Martinsburg, WV

Masters of Social Work

1995-1996 Virginia Polytechnic Institute and State University Blacksburg, VA **BS Psychology**

1994-1995 Shepherd College

Shepherdstown, WV

Transfer to VPI

1991-1994 Lord Fairfax Community College

Middletown, VA

Associate in Liberal Arts

INTERESTS:

- A. Sports: Soccer, Football, Basketball, Baseball, and Golf
- B. Reading, Learning, Computers, Cooking, Spending times with friends and family, Crossword Puzzles and video gaming.

REFERENCES: Available upon request



Frederick County CSA Financial Update: April 2024

of Reports Submitted: 9

Year to Date Spending

Total Net Expenditures: 69% \$2,784,315.39

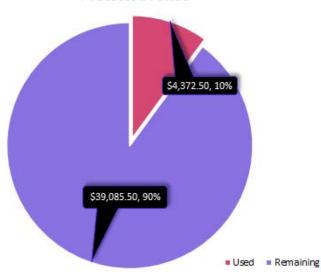
Sum-Sufficient Encumbered: \$1,414,326.34

Wrap Allocation: \$330,409.00

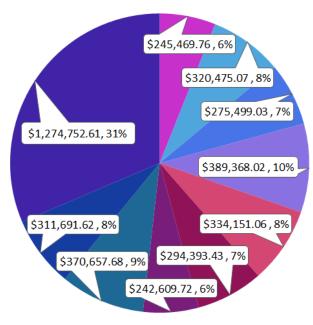
Protected State Share Allocation: \$34,011

Protected Encumbered \$29,133.00

Protected Funds

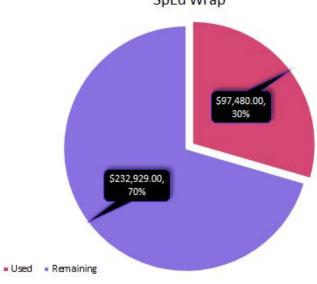


Monthly Expenditure

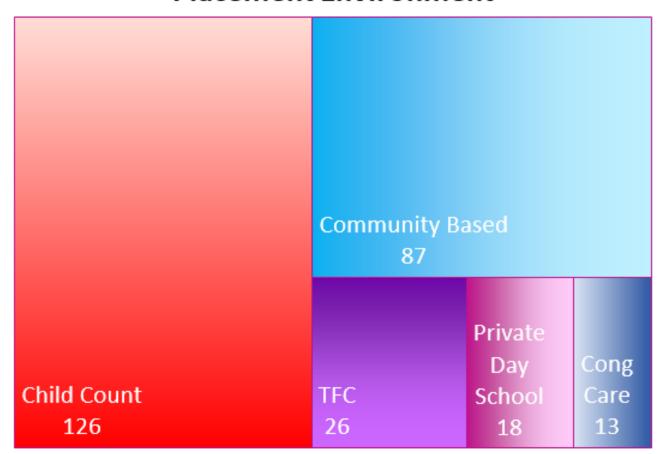


SpEd Wrap Encumbered \$72,483.75

SpEd Wrap



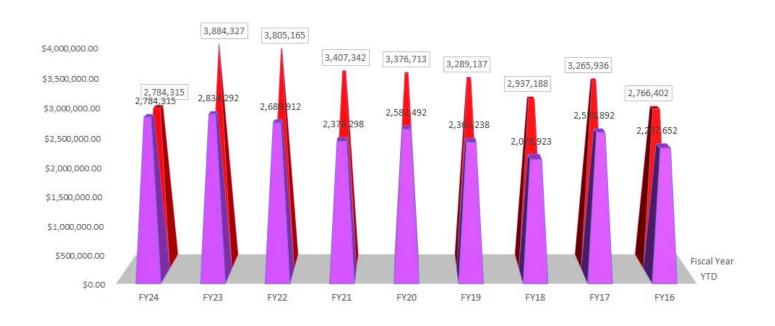
Placement Environment

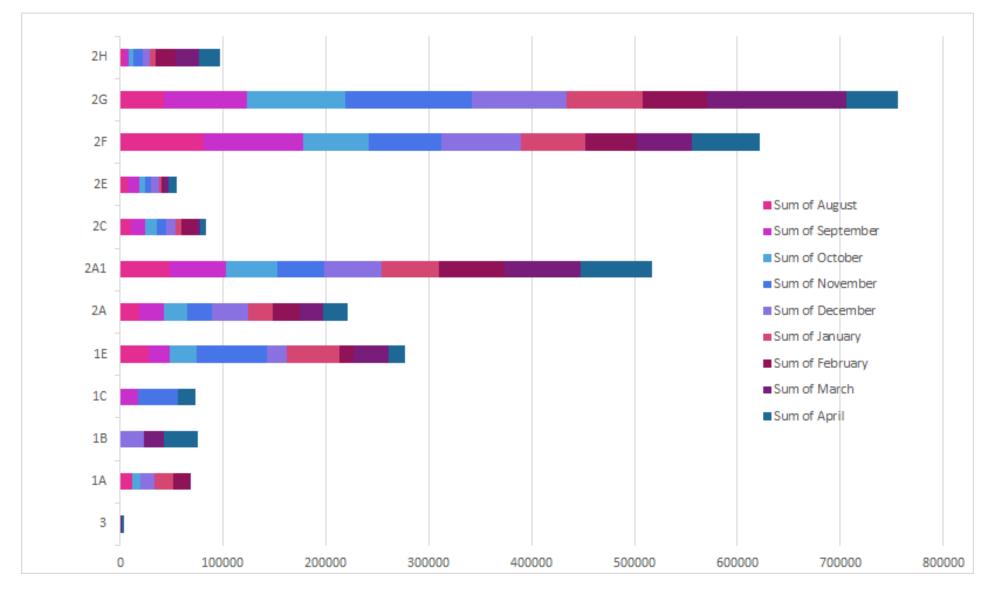


Unduplicated: Child Count, Congregate Care, Therapeutic Foster Care, Community Based Services

*Possible duplication of Private Day School students with youth in Congregate Care

Expenditure Trends





Primary Mandate Types (PMT):

- 1A- IV-E Congregate Care
- 1B- Non IV-E Congregate Care
- 1C- Parental Agreement Congregate Care
 *PMTs from 1A-1C do not include Daily Education
 payment of congregate care placements
- 1E- Residential Education

*Includes all services for RTC IEP and Education only for all other RTC placements

- 2A- IV-E Treatment Foster Home
- 2A1- Non IV-E Treatment Foster Home
- 2A2- Parental Agreement Treatment Foster Home
- 2C- IV-E Community Based Services
 *Only for youth placed in CFW Foster Homes
- 2E- Maintenance and Other Services

 *Only Basic Maintenance and Daycare for youth in Foster Care

- 2F- Non IV-E Community Based Services
 *Includes Daycare for youth not in Foster
 Care or IV-E CBS for youth placed in TFC or
 Cong Care
- 2G- Private Day School
- 2H- Special Education Wrap Around Services
- 3- Protected Funds
 *NonMandated

After discussing a DSS case in Executive Session, CPMT requested that I request clarification from OCS to help guide their decision. The question addressed requirements for utilizing other funding sources prior to accessing CSA funds, where the situation involved the safe caretaker applying for federally funded child care subsidy.

Response from Carol Wilson, OCS:

The expectation for CSA is that other funding streams will be explored and accessed if available (not obligated elsewhere) and appropriate for the need at hand. If another funding stream is available and appropriate to serve the child and family for a specific service as in this case, there is no reason to access CSA. As you point out, often other funding streams have no match (like adoption assistance) or a minimal match (like PSSF) and so local (and state) taxpayer dollars can be saved. While flexible in implementation CSA is also intended to be fiscally responsible.

But there is no state requirement (law or policy) that all other funding streams be exhausted before using CSA with one exception. The Appropriations Act requires that Medicaid be used prior to CSA for Medicaid-eligible children unless the necessary service is unavailable or inappropriate to meet the child's needs. So I would not use the terminology of exhausting other funding streams. But if another funding stream is available for the same purpose, as in this case, what is the justification for using CSA? CSA isn't a default funding stream that can be accessed because it's more convenient.

This appears to be a situation where it would be very difficult to justify the use of CSA funds. If child care subsidy is available, it is accessed before CSA. Situations such as this are why there is a child care subsidy program. This is not a foster home placement where child care may be paid as maintenance because the foster parent is working. CSA is not a financial assistance program for families, and if such a program is available (child care subsidy) then CSA funds should not be spent. If this case were audited, the auditor would question why CSA funds were used if child care subsidy was an option. What would be the justification or supporting documentation? Is there any?

I'm unclear why a "safe caretaker" has a child living with them for 3 months, but who wants "nothing to do with DSS." Regardless of funding source, the caretaker will still be involved with DSS as long as the child is in their home. The decision whether CSA will provide a service is up to the FAPT to recommend, and the CPMT to approve, so the LDSS cannot advise caregivers that CSA will pay for any specific service prior to those steps.

So I not use the term "exhausted" when dealing with this question; rather why is it appropriate to even consider using CSA?

There are few definite "no" answers in CSA as it was designed to be flexible. Unfortunately, sometimes people take advantage of that aspect as it's easier than an alternative. I'm guessing that's why the requirement to use Medicaid first (if available and appropriate) ended up in state law, because so many people were not bothering to go the Medicaid route.

And just because CSA <u>can</u> pay for something, it doesn't mean CSA <u>should</u> or <u>has to</u> pay for that something in a given situation. The Children's Services Act is designed to allow local decision makers who have all of the information to use their best judgment and spent the funding wisely. And if the CPMT decides it's appropriate to spend the money in this situation they can do that, but that decision should be made based on the all the factors considered, not just because it's the easiest thing to do. There should be documentation as to why that decision was made.

While CSA is flexible, the Act also encourages fiscal accountability. For example, FAPT is required by law to "4. Develop an individual family services plan that provides for appropriate and **cost effective services**." COV Section 2.2-5208 (emphasis added). CPMT is required to "6. Establish...accountability procedures for....funds management." (COV Section 2.2-5206)

Perhaps CPMT members should consider this request this way- If the funding for the child care was coming out of their individual agency budget would that make a difference in what they decide? Would they think it reasonable to use their agency funds for a similar request when another funding source is readily available?

Just some thoughts -



Frederick County, Virginia

Comprehensive Services Act 107 North Kent Street, 3rd Floor Winchester, VA 22601 Office: (540) 665-5688 FAX: (540) 535-2146

May 21, 2024

Mr. Michael Bollhoefer Frederick County Administrator 107 N. Kent Street Winchester, Virginia 22601

Dear Mr. Bollhoefer,

As CSA Coordinator of Frederick County, I am pleased to inform you that at the meeting on May 20, 2024, the CPMT re-nominated Mr. David Alley, Grafton Integrated Health Network, Case Management Administrator, by unanimous vote, to continue in the position of Private Provider Representative.

The Private Provider Representative is a mandated position on the CPMT. The State Code provides for both the private provider representative and the parent representative to be appointed by the Board of Supervisors. Appointments are for a two year term with members being eligible for reappointment. Traditionally, the Board of Supervisors has considered input on new appointments to the CPMT from the seated members.

Mr. Alley has been a Private Provider Representative since approximately July 2020. His participation on the CPMT has been collaborative, child and family focused, valuable and influential. He comes to us with high regard from those individuals who have worked with him.

The CPMT appreciates your consideration to reappoint Mr. David Alley to continue as the Private Provider Representative on the Frederick County CPMT.

Sincerely,

Jacquelynn Jury, MS, LPC CSA Coordinator Frederick County, VA



Scott Reiner, M.S. Executive Director

OFFICE OF CHILDREN'S SERVICES

Administering the Children's Services Act

ADMINISTRATIVE MEMO #24-03

To: CSA

CSA Coordinators

CC:

CSA Fiscal Agents

From:

Preetha Agrawal, Chief Information Officer

12

Date:

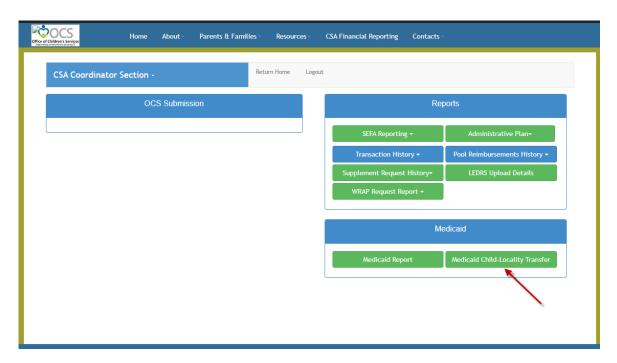
May 9, 2024

Subject: CSA Child Medicaid FIPS Change

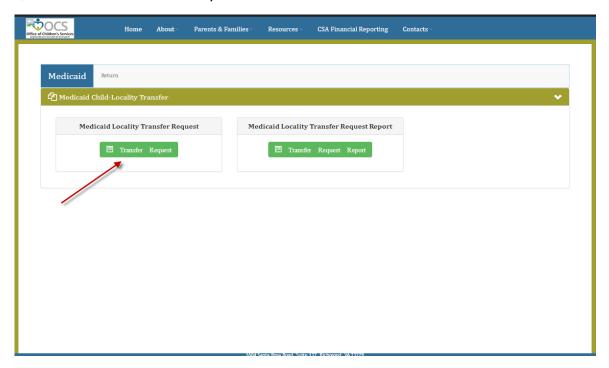
With the change in the Department of Medical Assistance Services' contractor from Magellan to Acentra, a new process is being implemented for local CSA programs to correct the records (and Medicaid financial match) for children who are mistakenly recorded in your locality. It is no longer the practice to make a notification to Magellan and then await correction.

If you identify errors (i.e., a youth being incorrectly assigned to your locality) for payments beginning with FY 2024, you can report this error through the CSA system as follows:

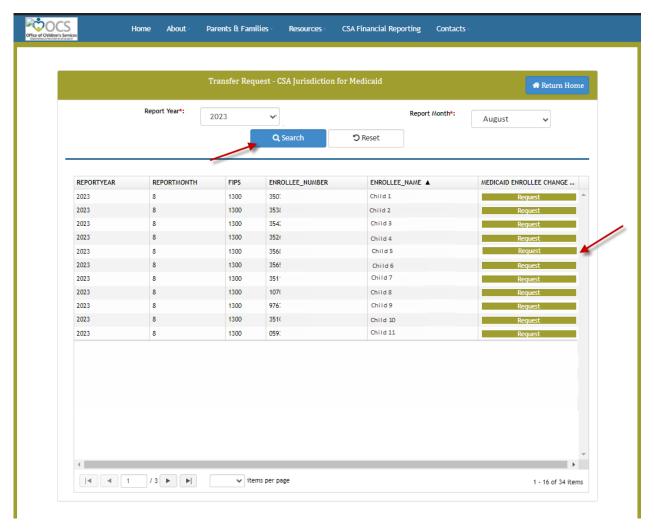
- 1. On the CSA website, after logging in to Local Government Reporting, click on your module, either CSA Coordinator or Fiscal Agent.
- 2. Under the Medicaid section, click on the "Medicaid Child Locality Transfer" button as indicated in the following screenshot.



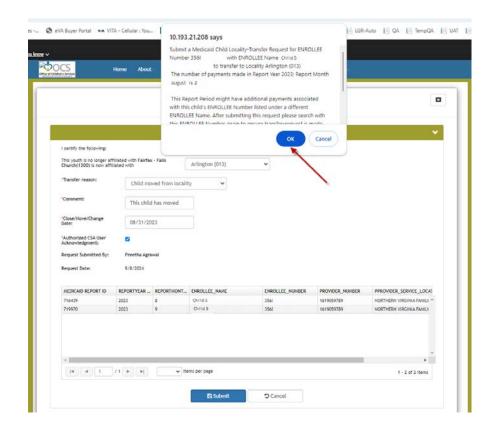
3. Next, click on the "Transfer Request" button as shown.



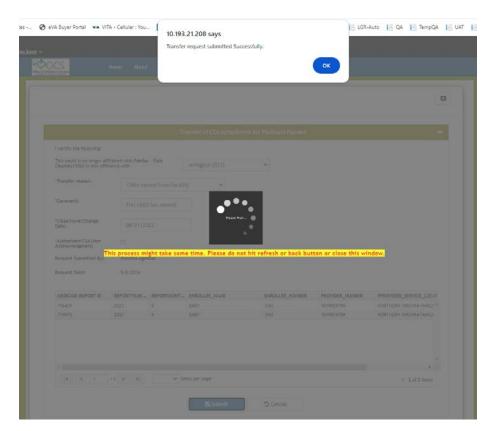


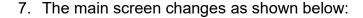


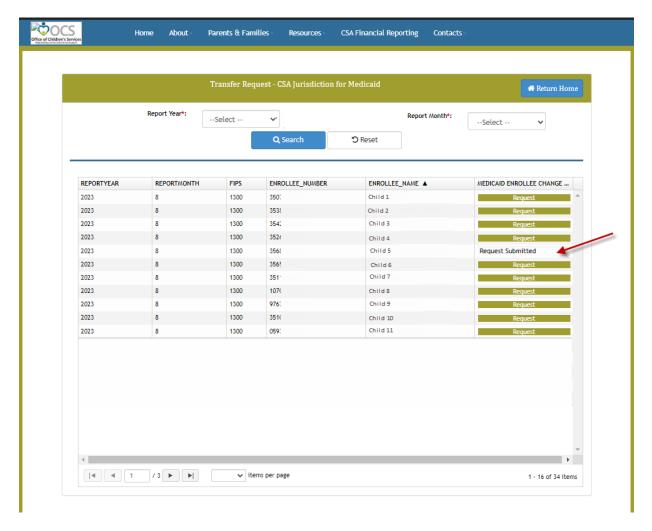
5. Next, click the "Request" button for the child for whom the locality change needs to be requested. Enter the details for the Transfer of CSA jurisdiction. If the correct locality is not known, then scroll to the bottom of the screen and select "Locality Not Known." Fill in all the mandatory fields and click the "Submit" button. In the tabular section, all payments for the child in the system after the reporting month will be flagged for the change request.



6. After submission, the confirmation screen appears.







The changes and corresponding credits/debits to the involved CSA localities will then be made in the next reporting period, and you will be able to see the adjustments in your monthly Medicaid report.

These new screens will be deployed effective May 13, 2024.

Please note that changes can only be made for local Medicaid share for FY2024 and after. Adjustments for FY2023 and earlier can no longer be made.

Questions may be directed to: csa.virginia.gov with the subject line: Medicaid Child FIPS Change.