



**The Community Technical Assistance Center**  
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# **Voluntary Foster Care Agency Leadership Forum**

May 14, 2015  
10 am – 1 pm



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# Objectives

- Provide an overview of Health Care Reform initiatives and the changes anticipated in the Children's System of Care
- Describe the Technical Assistance available to Voluntary Foster Care Agencies
- Present the results of the Readiness Assessment
- Preview how agencies will use their Readiness Assessment results to create a strategic plan for organizational change

# Agenda

1. Welcome - Dan Ferris, Assistant Director of Policy & External Affairs, NYU McSilver/CTAC
2. Overview: Health Care Reform and Changes to the Children's System of Care – Lana Earle, Deputy Director, NYS Department of Health, Division of Program Development & Management, Office of Health Insurance Programs and Laura Velez, Deputy Commissioner, NYS Office of Children and Family Services, Child Welfare and Community Services
3. Foster Care Transition Activities Update – Terri Greco, Project Director, Foster Care Technical Assistance Project, IPRO
4. Health Homes Technical Assistance Overview – Adele Gorges, Executive Director, and John Lee, Director, New York Care Coordination Program
5. Readiness Assessment Results and Technical Assistance Trainings and Resources Overview - Dan Ferris, Assistant Director of Policy & External Affairs, NYU McSilver/CTAC
6. Foster Care Grants and Application Process – Lana Earle, Deputy Director, NYS Department of Health, Division of Program Development & Management, Office of Health Insurance Programs
7. Wrap Up/Questions and Answers



# Overview: Health Care Reform and Changes to the Children's System of Care



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# Key Medicaid Redesign Team (MRT) Initiatives for Children

## Improving Health and Integrating Health Care Services for Children

### *Key MRT initiatives work together to:*

- ✓ Provide care management to children,
- ✓ Integrate the delivery of physical and behavioral health services,
- ✓ Identify and address needs early to prevent escalation and longer term need for higher end services,
- ✓ Maintain child in community and at home with support services



### *October 2015: Enrollment of Children in Health Homes*

Expands care management services to wider array of children (including children in foster care) who will meet Health Home eligibility criteria

### *Late 2015/Early 2015: Expanded Medicaid State Plan Services*

### *Beginning in January 2017 (NYC, Long Island) July 2017 (ROS)*

- Children's Medicaid behavioral health services will transition to Managed Care (those services are currently carved out of managed care and are delivered through fee-for-service)
- Children in Foster Care will be moved to Managed Care
- HCBS services available under Children's waivers (OCFS B2H for Foster Care, OMH SED, DOH CAH I/II) will be aligned into one array of HCBS services
- Children's waiver programs (B2H, OMH SED, CAH I/II) will be discontinued and those children will transition to Health Home

# Providing Care Management to Children

- Primary tenant of MRT Reform initiatives is “Care Management for All”
- Care management will be provided under different models depending on needs of child and implementation schedule for Health Home, the behavioral health transition to managed care, and the enrollment of foster care children in managed care
  - Patient Centered Medical Homes – Primary Care focus
  - Health Homes – Program launched in 2012 with plan to prioritize enrollment of adults, followed by children
    - Chronic condition based eligibility criteria, including serious emotional disturbance and trauma (proposed)
  - Managed Care Plans (i.e., enrolling all members in a Plan, including Foster care children in 2017)
  - HCBS care management (wider array of HCBS services available in 2017)



# First Key MRT Children's Initiative to be Implemented

## – Health Home Model for Children

- First key element of the MRT Initiatives for Children will begin this October with the enrollment of Children in Health Homes
- Over the past year, the State Agency partners have worked with stakeholders to tailor the Health Home Model for children to:
  - Expand Health Home eligibility criteria to include trauma at risk for another condition
  - Incorporate modified Child and Adolescent Needs and Strengths Assessment-NY tool in the model
  - Develop Health Home rates for children
  - Tailor the delivery of the six core Health Home services to children to the needs of the child and family
  - Develop referral and assignment process for enrolling children into Health Home (parental consent requirements)
  - For Foster Care, Model includes a Key role for Local Departments of Social Services (LDSS) and Voluntary Foster Care Agencies (VFCA)
    - VFCA provide the care management for children enrolled in Health Homes
    - LDSS provides consent to refer and enroll Foster care children in Health Homes
    - LDSS assigns child to VFCA for purpose of providing Health Home care management



<b>Anticipated Schedule of Activities for Expanding Health Homes to Better Serve Children</b>	<b>Due Date</b>
Draft Health Home Application to Serve Children Released	<b>June 30, 2014 - Completed</b>
Due Date to Submit Comments on Draft Health Home Application to Serve Children	<b>July 30, 2014 - Completed</b>
Due Date to Submit Letter of Interest	<b>July 30, 2014 - Completed</b>
Final Health Home Application to Serve Children Released	<b>November 3, 2014 - Completed</b>
Due Date to Submit Health Home Application to Serve Children	<b>March 2, 2015 – Completed</b>
Review and Approval of Health Home Applications to Serve Children by the State	March 2, 2015 to June 15, 2015 <b>Review Process Underway</b>
HH and Network Partner Readiness Activities	June 15, 2015 to September 30, 2015
State Webinars, Training and Other Readiness Activities	Through Fall 2015
Begin Phasing in the Enrollment of Children in Health Homes	October 2015
<i>Children’s Behavioral Health Services and other Children’s Populations Transition to Managed Care</i>	<i>January 2017 (NYC/LI) July 2017 (ROS)</i>

# Health Home Model for Children Helps Support other MRT Initiatives for Children to be Implemented 2017

- Health Homes will provide care management to a wider array of children with chronic and complex needs that meet the eligibility and appropriateness criteria (over time could be approximately 175,000 children)
- For those children, Health Homes will provide a structure for managing the expanded array of State Plan Services, and the integration of behavioral and physical health benefits and HCBS services (for those eligible) that will become available in 2017 with the shift to managed care



# Proposed New State Plan Services

- Crisis Intervention
- Community Psychiatric Supports and Treatment (CPST)
- Other Licensed Practitioner
- Psychosocial Rehabilitation Services
- Family Peer Support Services
- Youth Peer Advocacy and Training

State is working to received CMS approval of the new State Plan services as soon as possible (in advance of 2017)



# Existing Medicaid Services Transition to Managed Care (2017)

- OMH Residential Treatment Facility
- Home & Community Based Services (HCBS) under 1915(c) Waivers of OMH, OCFS and DOH
- Services paid under the OCFS Foster Care Per Diem

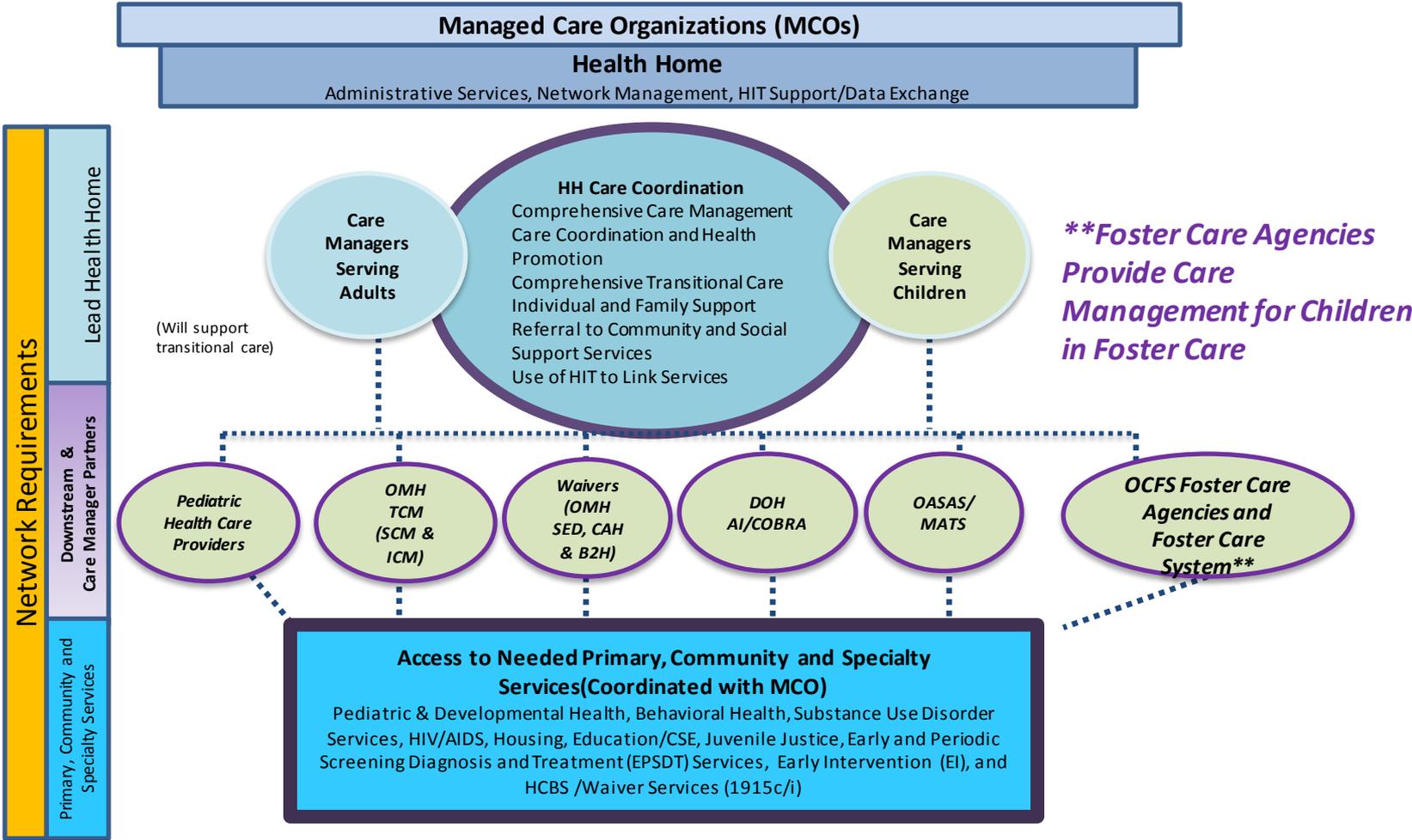


## Proposed HCBS Array (available to children on Medicaid who meet specific population and functional criteria)

- Care Coordination (only for those ineligible for, or opt out of, Health Home)
- Skill Building
- Family/Caregiver Support Services
- Crisis & Planned Respite
- Prevocational Services
- Supported Employment Services
- Community Advocacy and Support
- Non-Medical Transportation
- Day Habilitation
- Adaptive and Assistive Equipment
- Accessibility Modifications
- Palliative Care

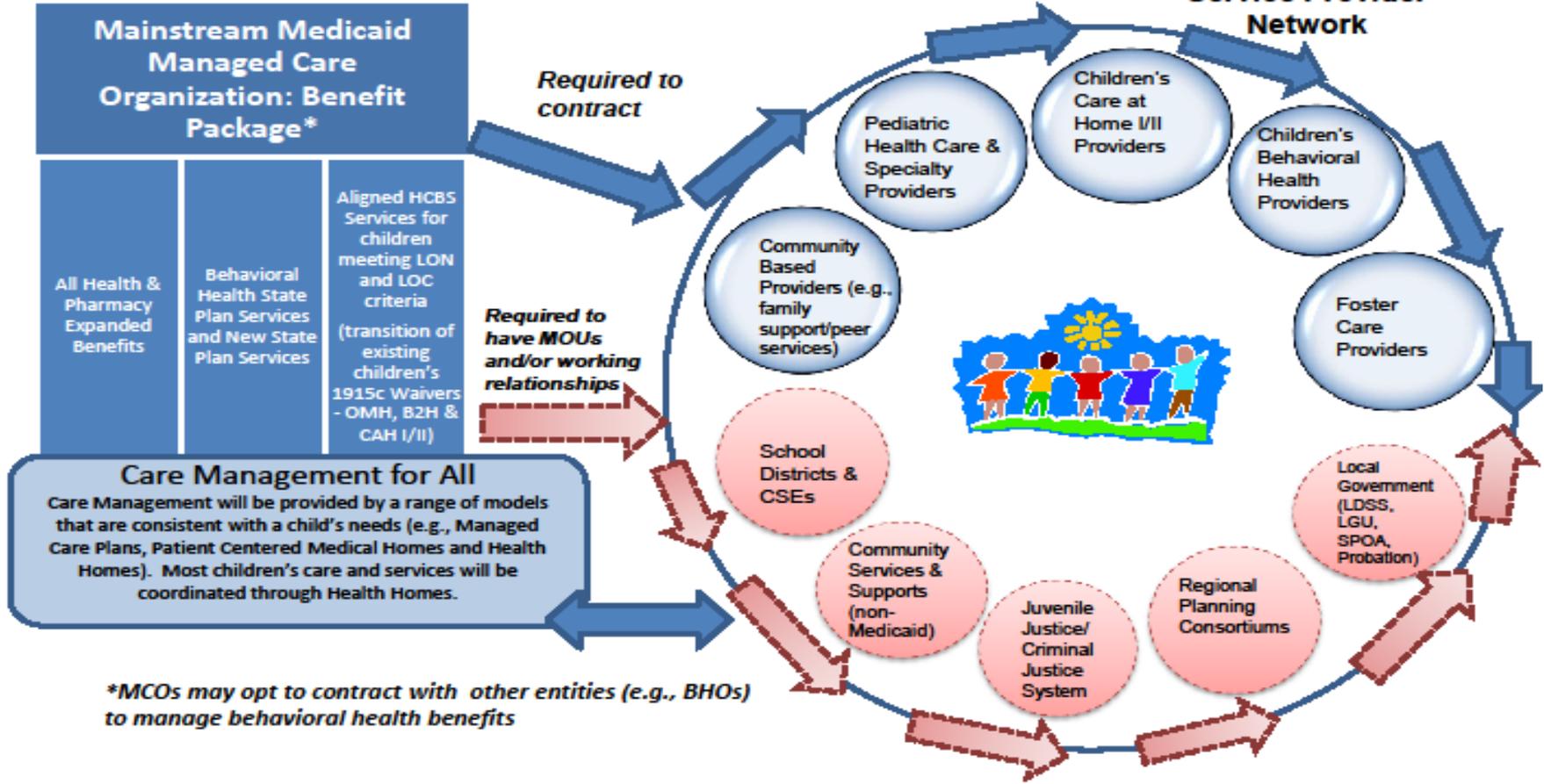


# New York State Health Home Model for Children



# Proposed 2017 Children's Medicaid Managed Care Model

For all children 0-21 years old



# Foster Care Managed Care Readiness Activities

A collaboration between IPRO, the New York State (NYS) Department of Health's Office of Health Insurance Programs (OHIP) and the New York State Office of Children and Family Services (OCFS). Its purpose is to ensure the achievement of important activities that will facilitate the transition of children placed in voluntary agencies to Medicaid Managed Care.





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# IPRO Project Partners



**IPRO has engaged a panel of highly qualified consultants and subject matter experts to accomplish project activities:**

- **Empire Health Advisors (EHA):** Data Collection & Analysis
- **New York Care Coordination Program (NYCCP):** Health Home Training
- **Raymond Schimmer:** Foster Care Subject Matter Expert
- **Community Technical Assistance Center (CTAC) of New York at the NYU McSilver Institute for Poverty Policy and Research:** Readiness Assessment, Technical Assistance, and Medicaid Managed Care Training



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# IPRO Project Partners



## DATA COLLECTION AND ANALYSIS METHODOLOGY

- Multi-Agency Work Group
  - NYSDOH OHIP
    - Division of Program Development and Management (DPDM)
    - Division of Finance and Rate Setting (DFRS)
  - OCFS
  - Mercer
  - Chapin Hall
  - Foster Care Subject Matter Expert

# IPRO Project Partners

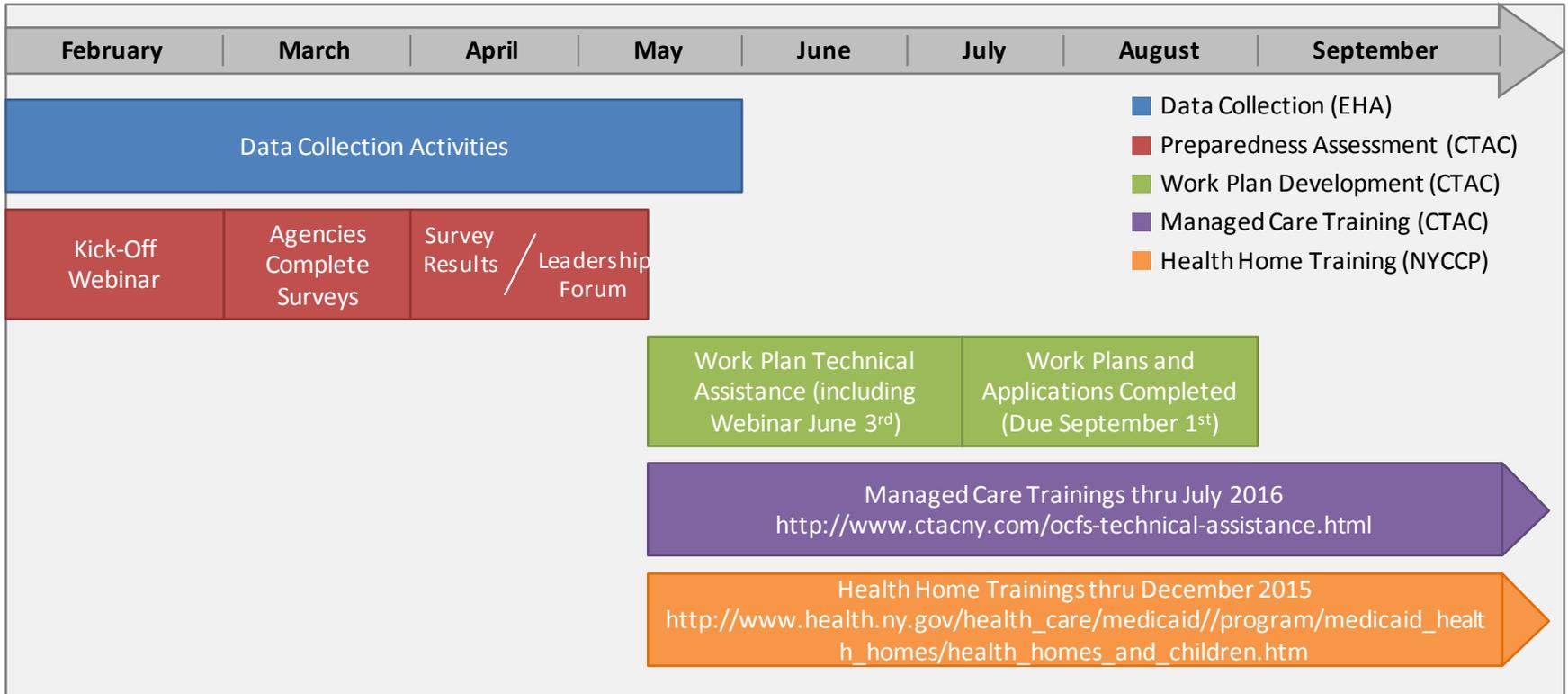


## DATA COLLECTION AND ANALYSIS

- Statistically Drawn Random Sample
  - Over 600 children
  - Twenty-six agencies
- Medical Record Reviews
- Review of CONNECTIONS Data
- Activity Studies
- Medicaid Claims Data



# Timeline of All Foster Care Readiness Activities



# **Overview of Technical Assistance to be Offered for VFCA Interested in Providing Health Home Care Management for Children Enrolled in Foster Care**

## Tentative Health Home Schedule for Children: Technical Assistance

Topic	Webinar or Face-to-Face (F2F)	Date(s)
<b>INTRODUCTION</b>		
<b>Overview of Health Homes</b>	Webinar 10AM-1PM	May 14
<b>ADMINISTRATOR TRACK</b>		
What It Means to Be a Downstream Provider	Webinar 1-2:30PM	May 26
Outcomes and Quality Assurance	Webinar 1-2:30PM	June 23
Finances and Billing	Webinar 1-2:30PM	July 21
Policies and Procedures for NYS Children's Health Homes	Webinar 1-2:30PM	August 18
<b>CARE MANAGER TRACK</b>		
Comparison and Differentiation of the Roles of Care Managers, Case Managers and County Case Planners	Webinar 1-2:30PM	June 18
Enrollment, Consent and Confidentiality	Webinar 1-2:30PM	July 16
Supervision (Care Manager Supervisors only)	Webinar 1-2:30PM	July 20
Completing Assessment, Developing the Care Plan – Face-to-Face (F2F)	F2F (9)	July 27 - September 17
<b>Final Wrap-up</b>	Webinar 1-2:30PM	October 15
<b>Implementing and Re-evaluating the Care Plan</b>	Webinar 1-2:30PM	November 5
<b>Overview of Motivational Interviewing</b>	Webinar 1-2:30PM	December 3

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# Categories of Health Home for Children Technical Assistance

Category	Audience
Overview of Health Homes	Leadership and Care Managers
Administrative Track	Agency Leadership Team
Care Manager Track	Care Management Supervisors and Care Managers

# Health Home Administrative Track

Topic	Format	Date	Time
What It Means to be a Downstream Provider	Webinar	May 26	1 to 2:30 pm
Outcomes and Quality Assurance	Webinar	June 23	1 to 2:30 pm
Finance and Billing	Webinar	July 21	1 to 2:30 pm
Policies and Procedures for HH for Children	Webinar	Aug 18	1 to 2:30 pm

# TOPIC: What It Means to be a Downstream Provider

## Learning Objectives:

- Understand the expectations and requirements of New York State Health Homes
- Understand how downstream care management agencies can work effectively with the Health Home

# Topic: Outcomes and Quality Assurance

## Learning Objectives:

- Understand expected outcomes resulting from the work of Health Homes
- Understand how Health Home processes and outcome measures are tracked and reported
- Understand the key elements of a successful Health Home Quality Assurance Program
- Understand how to use audit tools
- Understand the resources available to support the development of a QA program

# Topic: Finance & Billing

## Learning Objectives:

- Understand what is billable under Health Homes
- Understand how a Health Home Care Management Agency bills and receives payment for services provided
- Understand the documentation requirements tied to billing
- Understand how to develop financial projections for your agency

# Topic: Policies and Procedures for Children's Health Home Model

## Learning Objectives:

- Understand what policies and procedures will be required in order to be in compliance with State expectations
- Understand process for development of policies and procedures

# Health Home Care Manager Track (Tentative)

Topic	Format	Date	Time
Comparison & Differentiation of Roles: Care Manager, Case Manager and County Case Planner	Webinar	June 18	1 to 2:30 pm
Understanding the MAPP Enrollment, Consent and Confidentiality processes	Webinar	July 16	1 to 2:30 pm
Supervision (Care Management Supervisors)	Webinar	July 20	1 to 2:30 pm
Completing Assessments and Developing Care Plans	In Person (9 sessions)	July 27 to Sept 17	Full Day
Final Wrap Up	Webinar	Oct 15	1 to 2:30 pm
Implementing & Re-evaluating the Care Plan	Webinar	Nov 5	1 to 2:30 pm
Overview of Motivational Interviewing and Engagement	Webinar	Dec 3	1 to 2:30 pm

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# Topic: Comparison & Differentiation of Roles: Care Manager, Case Manager and County Case Planner

## Learning Objectives:

- Understand the different roles that the Health Home Care Manager, the Foster Care Agency Case Manager and the County Case Planner play in supporting the needs of the child
- Receive guidance on how to effectively work together

# Topic: Enrollment, Consent and Confidentiality

## Learning Objectives:

- Gain thorough understanding of the complex consent and confidentiality process
- Gain the ability to apply this knowledge as necessary

# TOPIC: Supervision (only for supervisors)

## Learning Objectives:

- Learn effective techniques to assist them in determining appropriate caseloads for their Care Managers
- Learn about technology tools available for managing caseloads

# Topic: Completing Assessments and Developing Care Plans

## Learning Objectives:

- Become familiar with the CANS-NY assessment (and others as identified) and utilize the information obtained through its use to develop the Plan of Care
- Understand how to develop a child and family centered, resiliency focused, integrated Plan of Care

# Topic: Final Wrap Up

## Learning Objectives:

- Gain a solid foundation of understanding of Children's Health Home services
- Understand the Care Manager role in serving the population eligible for these services

# TOPIC: Implementing & Re-evaluating the Care Plan

## Learning Objectives:

- Understand the events that trigger the need for review of the Care Plan
- How to be proactive with safety planning
- Understand the role of Managed Care Organizations

# Topic: Overview of Motivational Interviewing and Engagement

## Learning Objectives:

- Become familiar with and understand the concept of MI and tools that will assist in determining when and how to apply MI
- Gain knowledge about effective engagement techniques that will assist Care Managers (CM) in obtaining the necessary "buy in" from parents (bio, foster, guardians) to enable the CM to provide Health Home services



# The Community Technical Assistance Center

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## **Dan Ferris, MPA, Assistant Director of Policy and External Affairs, McSilver Institute**

Community Technical Assistance Center of New York

# About CTAC & Managed Care (MCTAC)

- CTAC was founded in 2011 as the Children's Technical Assistance Center (now the Community TAC of NY)
- In September 2014, the Managed Care Technical Assistance Center launched in partnership with NYS DOH, OMH, and OASAS, to help to prepare providers transition to Medicaid Managed Care
- CTAC & MCTAC are offering:
  - Foundational information
  - Support and capacity building including tools & training on critical domains necessary for Managed Care readiness



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# Survey to Help Foster Care Agencies Assess their Managed Care Readiness

- Voluntary Agencies completed a Managed Care Readiness Assessment to help assess the degree to which they are ready to operate in a Managed Care environment
- Completing the Readiness Assessment was required in order to apply for a Foster Care Grant
- The Application will require VAs to use the results of the Readiness Assessment to develop a work plan that will identify how the agency plans to use its allocation of the grants to fulfill its readiness needs



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## Preliminary Results

OCFS Readiness Assessment & Addendum



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# Voluntary Agency Readiness Benchmark Report



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### SAMPLE Readiness Assessment Benchmark Tool

**Introduction.** Readiness Assessments from 89 OCFS agencies were analyzed. The following data is included in your report:

- **Average Score** – the mean of the population (N=89) in the domain, which could range from 0 - 5
- **Agency Score** – the agency's individual score in the domain, which could range from 0 - 5
- **Percentile** – percentage of agencies scoring less than the agency's score

Domain	Average Score	Agency Score	Percentile
Understanding MCO Priorities & Present Managed Care Involvement	2.73	4.0	88%
MCO Contracting	2.55	3.0	61%
Communication /Reporting (Services authorization, etc.)	1.62	1.4	42%
IT System Requirements	2.48	2.23	46%
Level of Care (LOC) Criteria / Utilization Management Practices	2.02	1.31	33%
Member Services/Grievance Procedures	2.00	1.0	29%
Interface with Physical Health, Social Support and Health Homes	3.40	3.4	44%
Quality Management/Quality Studies/Incentive Opportunities	2.25	1.78	33%
Finance and Billing	2.71	2.09	36%
Access Requirements	2.32	3.0	56%
Demonstrating Impact/Value (Data Management & Evaluation Capacity)	1.83	0.75	20%
<b>Total Score</b>	<b>2.36</b>	<b>2.18</b>	<b>47%</b>

### Recommendation

Aggregate Readiness Assessment results will be presented at upcoming forums for OCFS Voluntary Agency Leadership Members. Learn more at: <http://www.ctacny.com/ocfs-technical-assistance.html>



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# Summary

- 93 total number of OCFS agencies – 100% participation!
- 88 agencies included in the **final analytic sample**
- 5 agencies did not submit responses in time to be included in the analysis, but will receive benchmark score reports

*Note: Not all agencies responded to every question, for this reason the sample sizes may vary.*

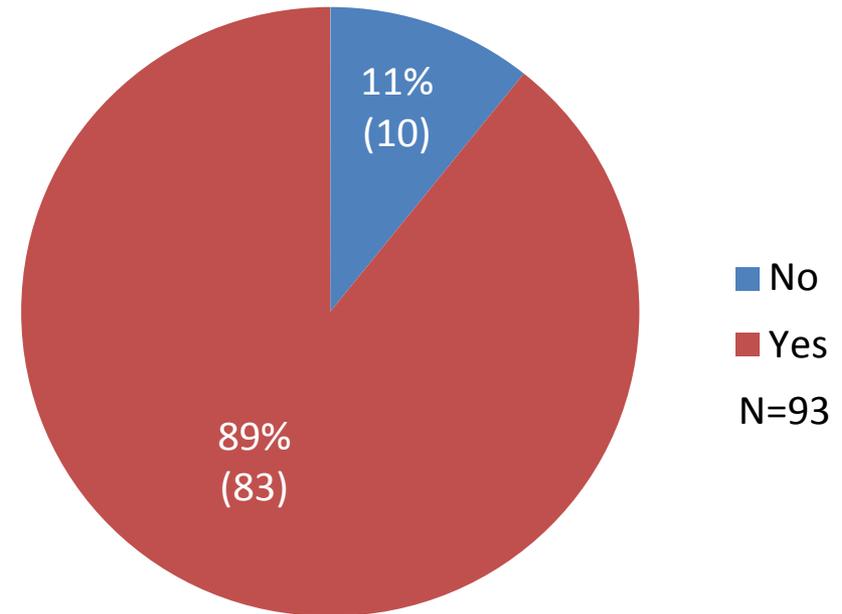


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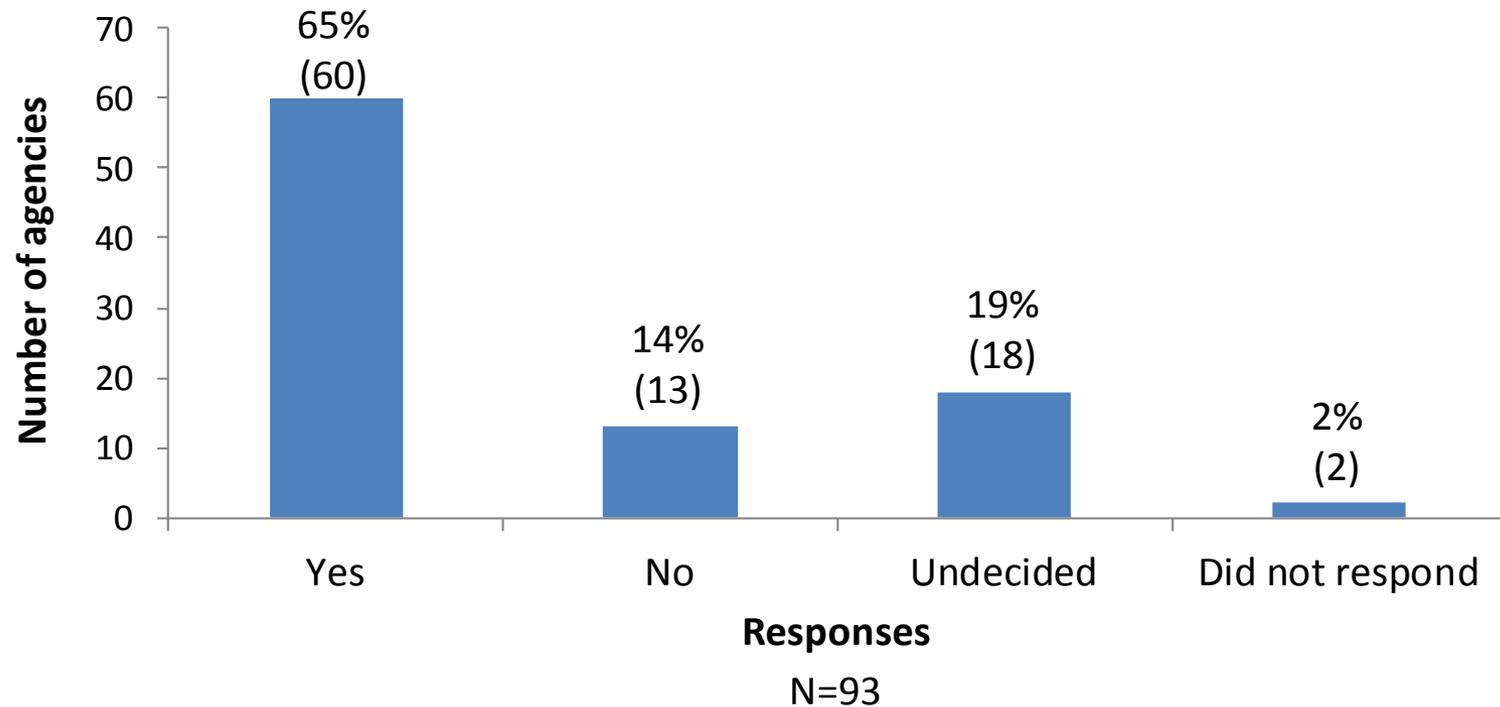
# Agency Characteristics

- Question 1:
  - Does your agency currently or plan to provide mental health, substance abuse, or primary care services?



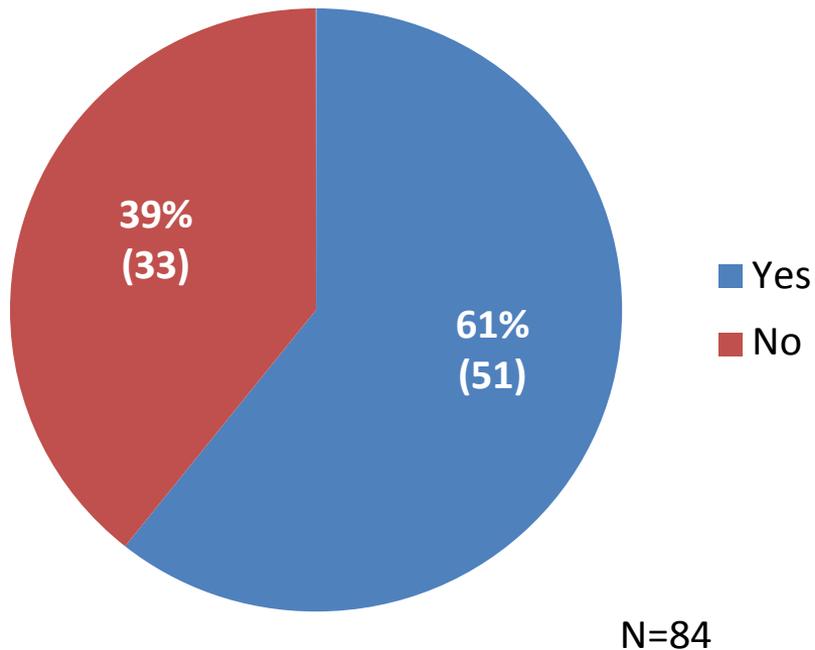
# Agency Characteristics

- Question 2:
  - Does your agency plan to provide Health Home Care Coordination?



# Agency Characteristics

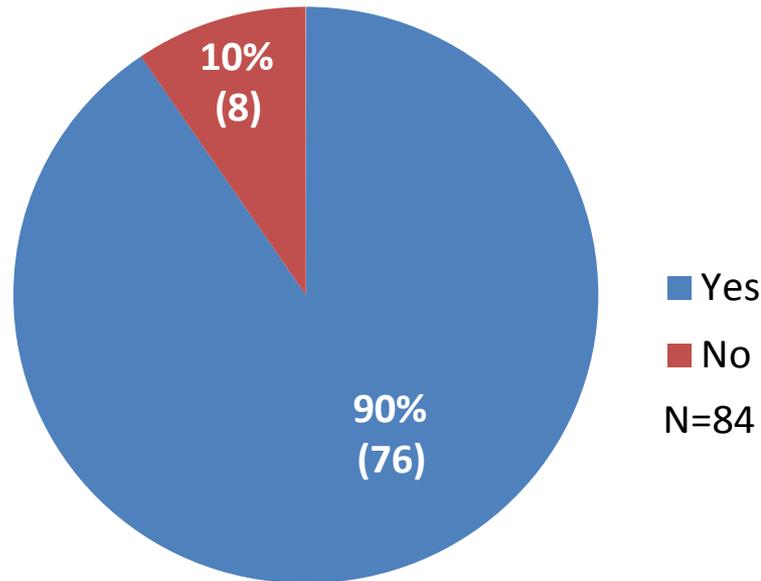
## Agencies that Currently Provide Onsite Primary Health Services



- **43 of 51 agencies (84%)** that currently provide onsite primary health services plan to continue providing them
- **5 agencies (10%)** that currently provide onsite primary health services plan to pursue Article 28 licensure

# Agency Characteristics

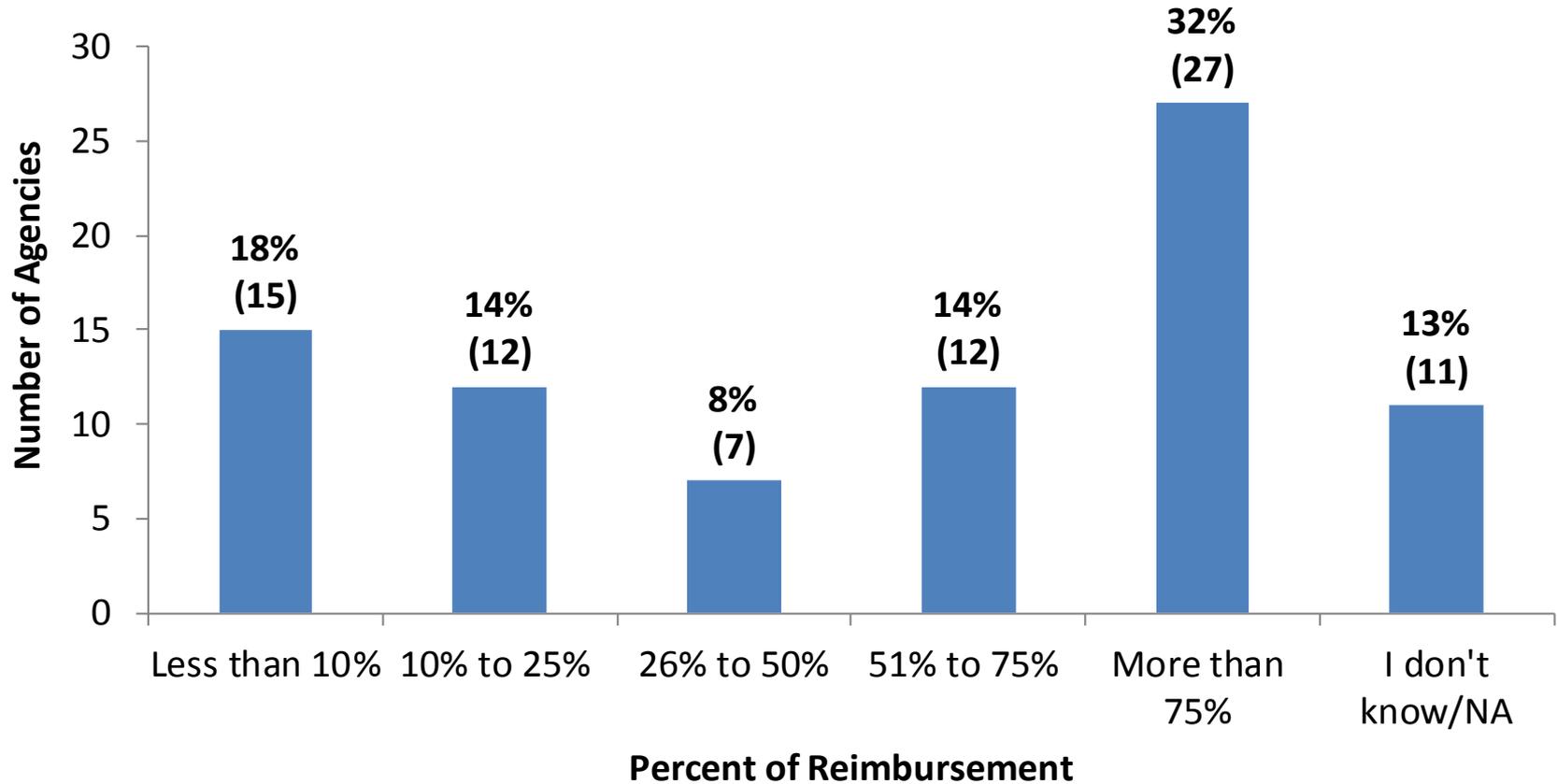
## Agencies that Currently Provide Onsite Behavioral Health Services



- **75 of 76 agencies (99%)** that currently provide behavioral health services plan to continue providing them

# Agency Characteristics

## Percent of Current Reimbursement from Medicaid



N=84

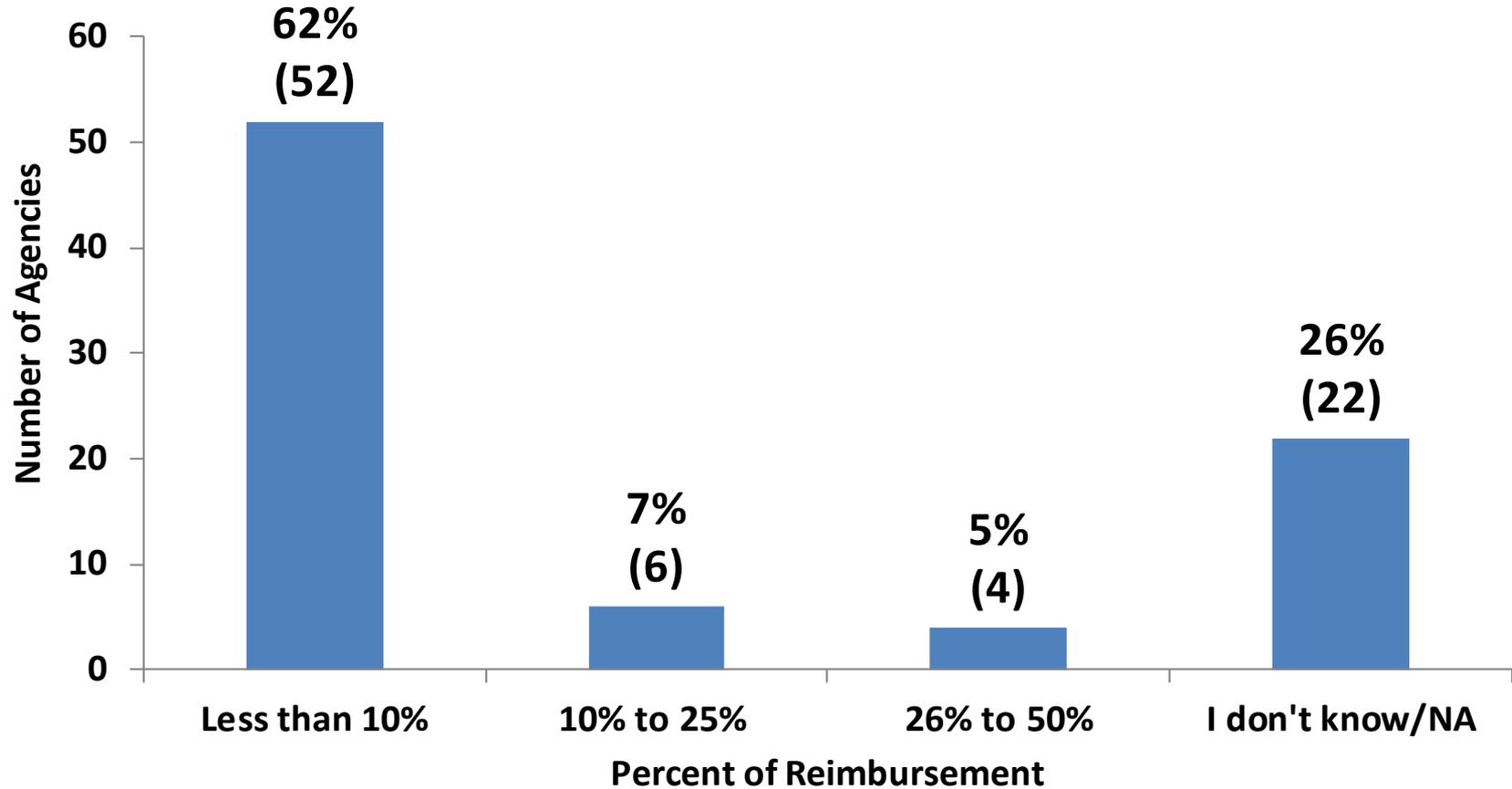


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# Agency Characteristics

Percent of current reimbursement from commercial insurance

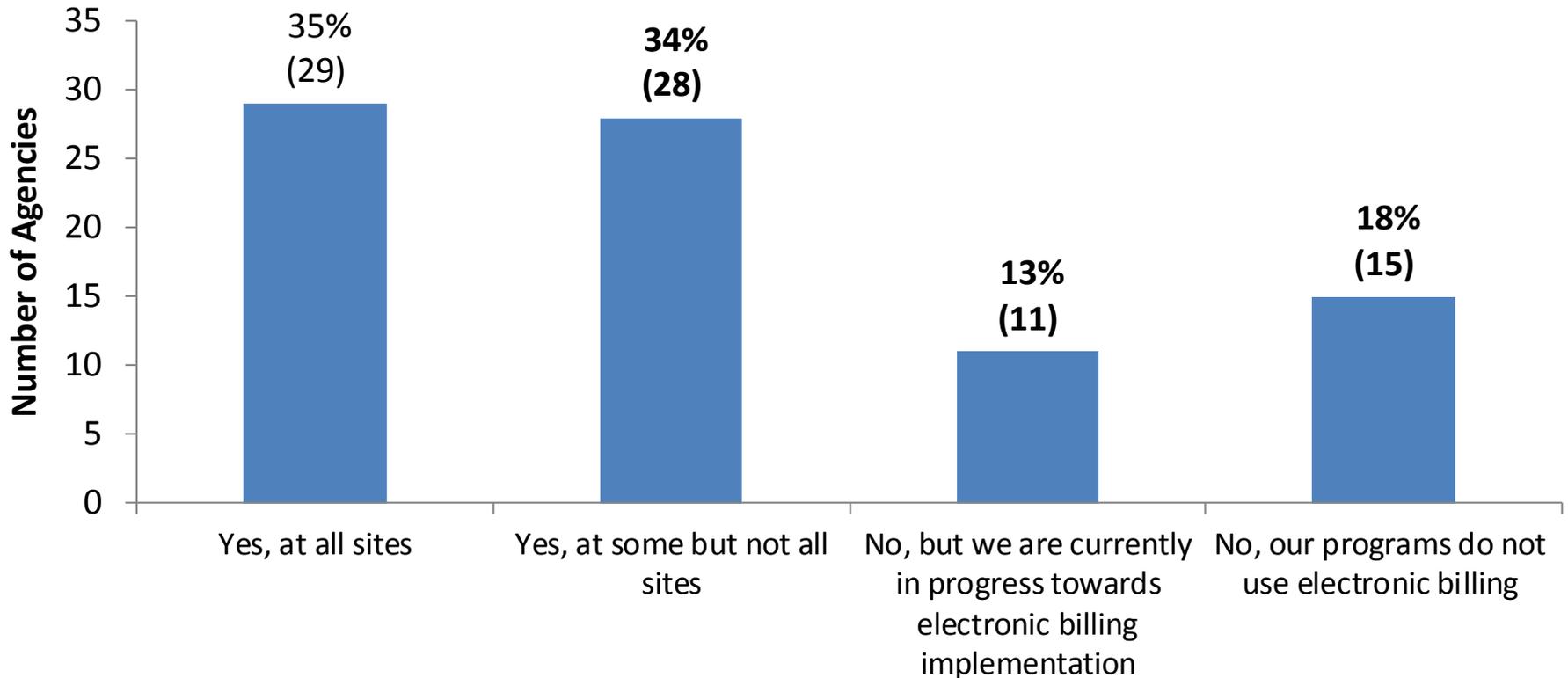


N=84



# EHR & IT Use

## Agency use of electronic billing software



Responses

N=83

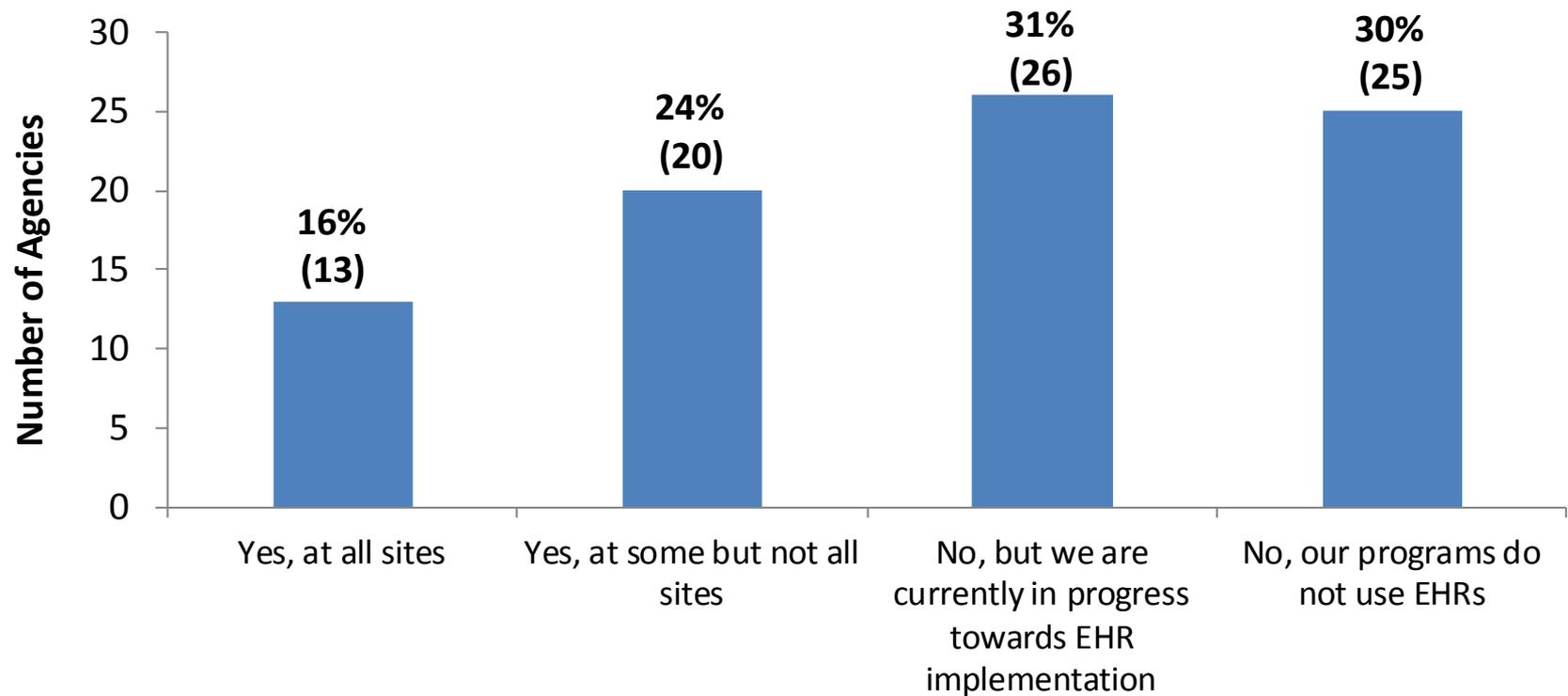


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# EHR & IT Use continued

## Agency use of an Electronic Health Record (EHR) for clinical/service documentation



**Responses**

N=84



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# OCFS Readiness Assessment

The **11 domains** assessed were as follows:

1. Understanding MCOs
2. MCO/Health Home Contracting
3. Communication/Reporting (Services authorization, etc.)
4. IT System Requirements
5. Level of Care (LOC)/Level of Need (LON) Criteria/Utilization Management Practices
6. Member Services/Grievance Procedures
7. Interface with Physical Health, Social Support and Health Homes
8. Quality Management/Quality Studies/Incentive Opportunities
9. Finance and Billing
10. Access Requirements
11. Demonstrating Impact/Value (Data Management & Evaluation Capacity)

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Aggregate – Mean Score of 11 Domains

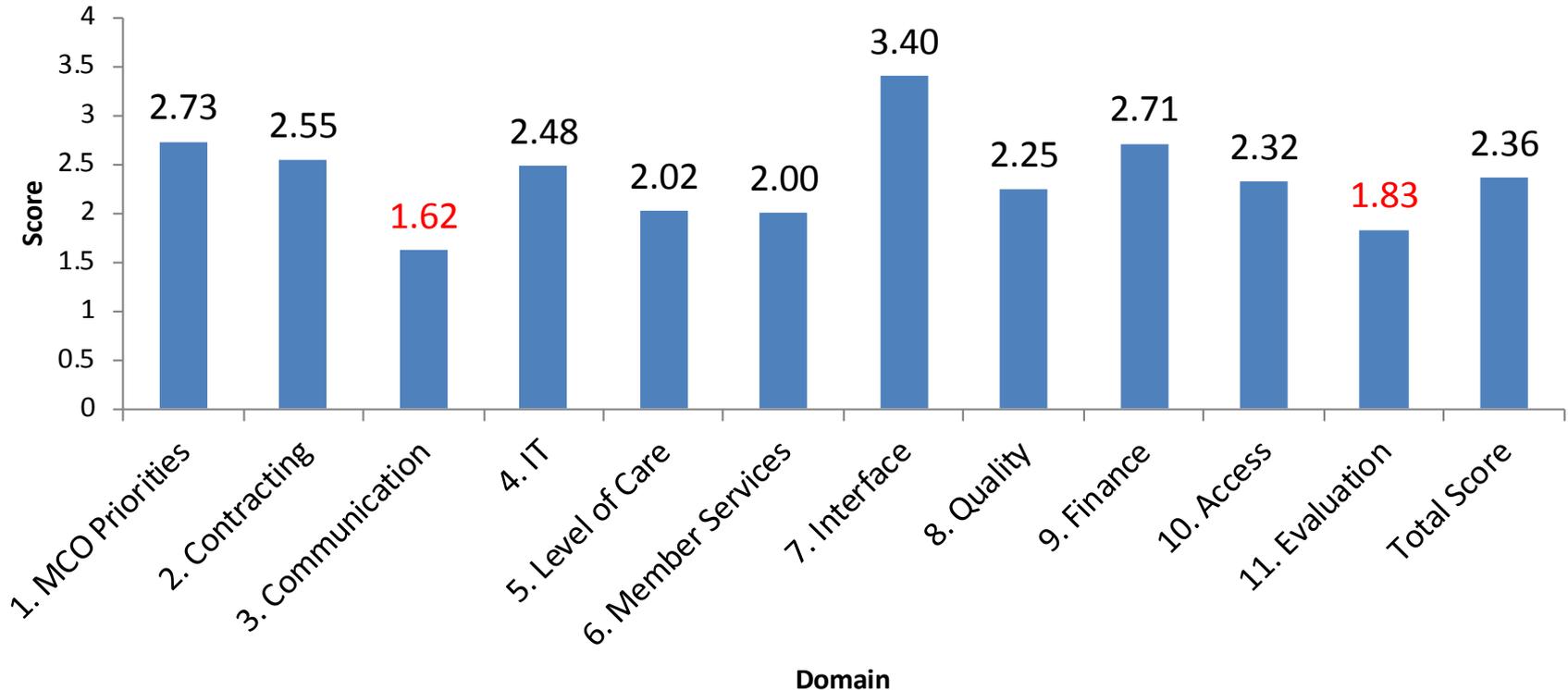


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# 11 Domains: Mean Scores

## Readiness Assessment Domain Scores

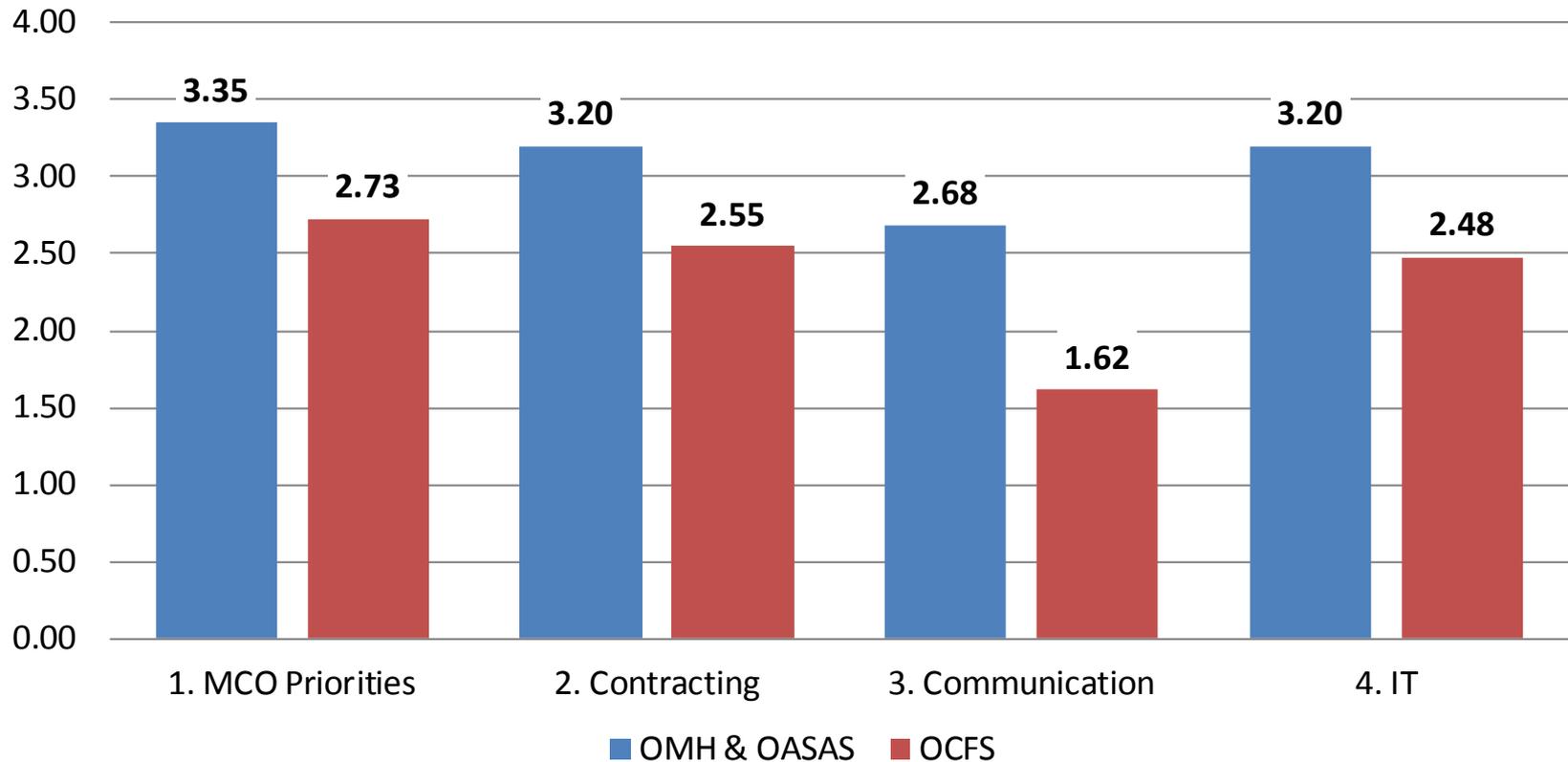


\* Responses were scored from 1 to 5, with 1 indicating the lowest degree of readiness.



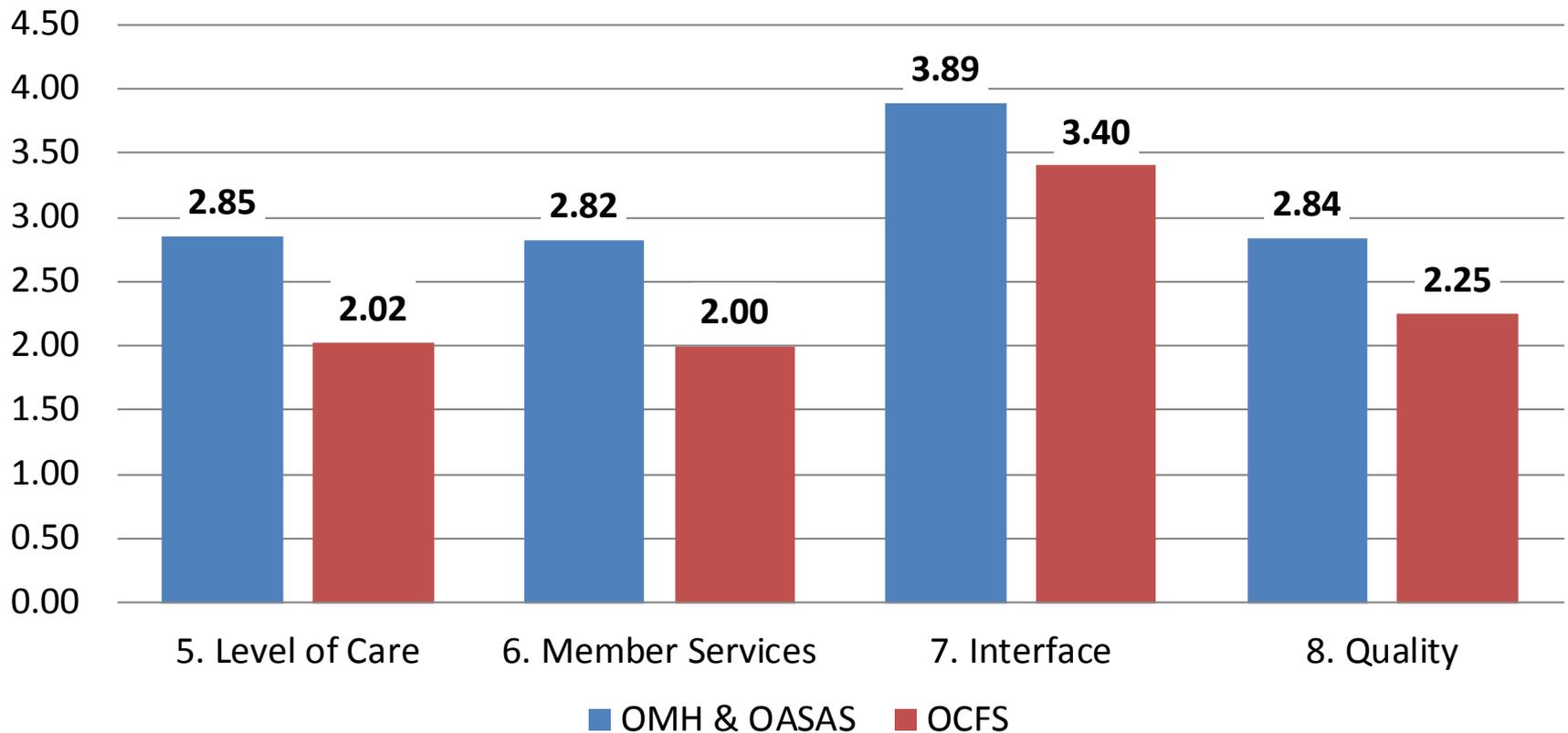
# 11 Domains: Score Comparison

## Comparison of Domain Scores between OCFS and OMH/OASAS Agencies



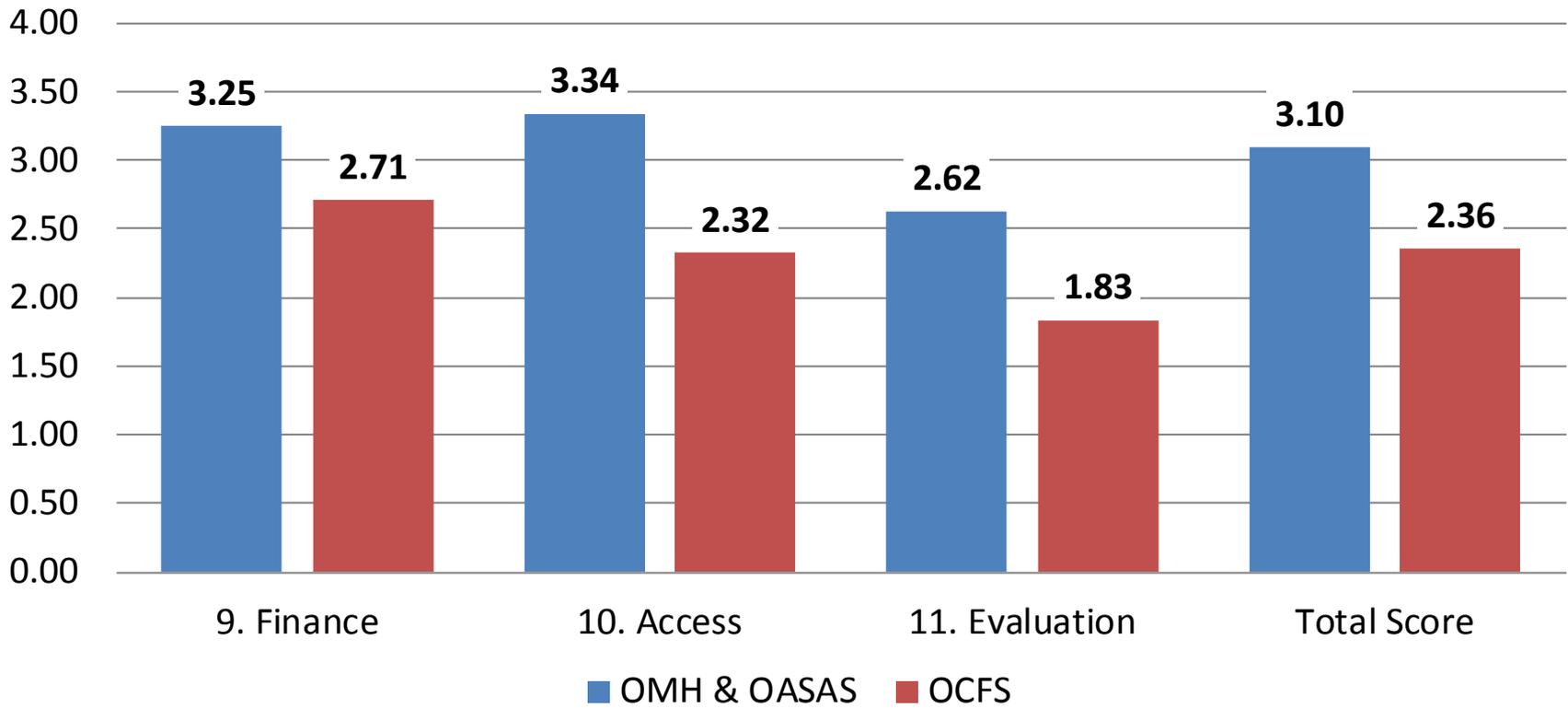
# 11 Domains: Score Comparison

## Comparison of Domain Scores between OCFS and OMH/OASAS Agencies



# 11 Domains: Score Comparison

Comparison of Domain Scores between OCFS and OMH/OASAS Agencies



# Training, Tools, and Resources

# Types of Available TA & Resources

**How do I know what I need? First, consider whether:**

- I am going to provide primary healthcare, behavioral health, and/or substance abuse services
- I am going to become a downstream Health Home Care Coordinator
- I am still not sure



# How do I know what I need? (cont.)

- Consider your Agency's current business structure:
  - Do we have an Article 31 or Article 28 license?
  - Do we have contracts with Managed Care?
  - Is Medicaid billing a significant portion of our business?
  - Do we use revenue cycle management?
  - What is our experience and comfort level with outcomes, utilization management, and credentialing?



# Technical Assistance Schedule

## – Readiness and Work Plan TA (May-July 2015)

- **SAVE THE DATE:** Webinar on Wednesday, June 3<sup>rd</sup> - 1:30 – 3 pm
  - How to use your individualized Benchmarking Report to create a Work Plan
  - Completing the Foster Care Grant Application
- **CTAC “Office Hours”**

## – Managed Care 101 for OCFS Voluntary Agencies (Summer 2015)

- Foundational Elements (e.g. MCO priorities, terminology, etc.)
- Operating in a Managed Care Environment (agency essentials, options for infrastructure development)
- Developing/Refining a strategy and business plan for Managed Care

## – Readiness Domain-Specific Training (January 2016)



# Work Plan Development

- Using a work plan template, individualized results of the readiness assessment, and a menu of suggested activities in areas of greatest need, agencies will develop individual strategies as part of the contracting process with DOH.
- Agencies will be guided through what options and activities are intended for “Day One” readiness and ongoing transition TA needs.



# Sample - Work Plan Template

Objective	Readiness Survey Domain Areas	Readiness Score	Completed? (Yes/No/NA)	Tasks Please indicate: Managed Care (MC) or Health Homes (HH) <i>(see examples tasks from menu of examples)</i>	Performance Measures	Resources Needed (Describe)	Funding Source(s) (Grant-funded, Grant- pooled, In-Kind)	Estimated Date of Completion (Month/Year)
Finance and Billing*	MCO Priorities							
	MCO/HH Contracting							
	Finance and Billing							



# Managed Care 101 Template Presentations

- Three variations of a template introduction to Managed Care presentation will be available to present to or share with key provider stakeholders:
  - Agency leadership
  - Front Line Staff
  - Board Members
- A recording of each presentation will also be made available



# Domain-Specific Offerings

- Tailored specifically for Foster Care Agencies affected by transition to Medicaid Managed Care
- Integrated and coordinated with Health Home TA whenever possible
- Master Schedule
- In-person and web-based trainings to address:
  - Contracting
  - Business Improvement Practices & Strategy
  - Revenue Cycle Management
  - Utilization Management
  - Outcomes & Data Driven Decision Making



# Domain-Specific Offerings

Managed Care Training Area	Target Audience	Synopsis
<b>Contracting</b>	Agency Leadership	Negotiation, Leverage, Demonstrating Value, Provider Networks
<b>Revenue Cycle Management</b>	Finance Staff Front Line Staff	Systems and procedures for prior to service, during services, following services, ongoing
<b>Utilization Management</b>	Agency Leadership Quality Assurance Management	Medically Necessary Appropriate, Effective
<b>Outcomes and Data Driven Decision Making</b>	Agency Leadership Quality Improvement Staff	Data Collection and Analysis
<b>Business Improvement Practices and Strategy</b>	Agency Leadership	Foundations of Managed Care, Strategic Organizational Change Change Management/Leadership



# What Participants Can Do to Make the Most of TA Supports

- Designate a Medicaid Managed Care Readiness project team including:
  - Executive leadership
  - Finance & Clinic leadership
  - Evaluation staff when available
- Commit to investing the time and effort needed to assess, diagnosis, improve, and monitor your organization's operations, business practices, and financial performance
- Utilize the trainings, tools, and resources available and provide feedback!



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# Tools & Resources

- **Available now:**
  - Recordings and slides for in-person and online trainings
  - Managed Care Glossary, Top Acronyms, and Key Terms for Managed Care
  - FAQs
  - Outputs to Outcomes online assessment measure database
- **Coming Soon:**
  - Managed Care Plan Matrix: an interactive map with contact, authorization, and claims/billing info (Statewide)
  - Managed Care script
  - Managed Care 101 Presentations



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# The Managed Care Technical Assistance Center

EFFICIENT PRACTICES. EFFICIENT CARE.

ASK MCTAC

[WHAT WE DO](#)

[PROVIDER READINESS](#)

[GET THE RIGHT TOOLS](#)

[LEARNING COMMUNITIES](#)

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## Glossary of Terms



[Top Acronyms](#)



[Managed Care Language Guide](#)

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Term	Explanation
<b>Mainstream Managed Care Organization (MCO)</b>	Qualified Mainstream Managed Care Organization that meets the qualifications established by this RFQ to manage behavioral health services for Medicaid beneficiaries.
<b>Managed Care Plans</b>	Includes the Mainstream MCO, Managed Care Organizations, and Health and Recovery Plans.
<b>Managed Care Technical Assistance Center (MCTAC)</b>	Provides trainings and resources to support BH providers in New York State with the successful transition to Medicaid Managed Care.
<b>Managed Long Term Care (MLTC)</b>	A care management program for individuals in the community as an alternative to a nursing home or health-related facility.
<b>Medicaid Redesign Team (MRT)</b>	The Medicaid Redesign Team was established by Governor Cuomo in January 2011 as a means of finding new ways to lower Medicaid spending in New York State (CHC NYS).
<b>Medical Loss Ratio (MLR)</b>	The percent of premium an issuer spends on claims and expenses that improve health

# OCFS Technical Assistance Online

<http://www.ctacny.com/ocfs-technical-assistance>

Email: [OCFSta.info@nyu.edu](mailto:OCFSta.info@nyu.edu)

NYS DOH issued an official announcement on February 5, 2015, detailing technical assistance offerings and opportunities for grant allocation for participating OCFS Voluntary agencies. The announcement is available at: [http://www.mcsilver.org/wp-content/uploads/2015/02/Final-VA-LTR\\_20150205.pdf](http://www.mcsilver.org/wp-content/uploads/2015/02/Final-VA-LTR_20150205.pdf)

Resources from CTAC's Managed Care Kickoff for OCFS Voluntary Agencies webinar are now available including:

- [Webinar slides](#) and the [video recording of the webinar](#)
- [FAQ](#)

Coming soon: This presentation and much more!



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# Foster Care Grants and Application Process



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# FOSTER CARE READINESS RESOURCES

- \$20 million available in Enacted Budget to assist with TRANSITION and READINESS ACTIVITIES
- \$18 million distributed as grants through Request for Application/Contract Process
- Formula will be used to determine amount each agency will receive, and Voluntary Agency will receive a letter notifying them of the amount they are eligible to apply
- AGENCY ELIGIBILITY based on:
  - Completion of Readiness Assessment
  - Completion of Work Plan demonstrating how grant will be used to address needs identified in Benchmarking Report



# APPLICATION DOCUMENTATION

- Statewide Financial System Vendor ID
- Completion of the Vendor Responsibility Questionnaire
- Registration in the Grants Gateway
- Completion of the Prequalification Application
- Brief Program Narrative
- Work Plan
  - – informed by Benchmarking Report
- Budget
  - Reflects the resources needed to achieve work plan objectives
  - Pooling resources is ***strongly*** encouraged

# APPLICATION PROCESS: PROJECTED KEY DATES

MAY 18<sup>TH</sup> – Benchmarking Reports sent

MAY 21<sup>ST</sup> – Post-Webinar FAQ available

MAY 29<sup>TH</sup> – Award Allocation Letters sent

**JUNE 3<sup>RD</sup> – WEBINAR: APPLICATIONS AND WORK  
PLAN DEVELOPMENT**

JUNE 5<sup>TH</sup> – Applications distributed

**SEPT 1<sup>ST</sup> – APPLICATIONS DUE**

OCT 1<sup>ST</sup> – Review of Applications completed

DEC 31<sup>ST</sup> – Contracts executed



**Questions?**

## For additional questions:

- Visit: <http://www.ctacny.com/ocfs-technical-assistance>
- General E-mail: [OCFSta.info@nyu.edu](mailto:OCFSta.info@nyu.edu)
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