

Status of Performance-Based Contracting Model First Quarter Report

(FY2020 Appropriation Act - Public Act 67 of 2019)

December 31, 2019

Sec. 503. (1) *In accordance with the final report of the Michigan child welfare performance-based funding task force issued in response to section 503 of article X of 2013 PA 59, the department shall continue to review, update, or develop actuarially sound case rates for necessary child welfare foster care case management services that achieve permanency by the department and private child placing agencies in a prospective payment system under a performance-based funding model.*

(2) *By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations committees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office a report on the full cost analysis of the performance-based funding model. The report shall include background information on the project and give details about the contractual costs covered through the case rate.*

(3) *In accordance with the final report of the Michigan child welfare performance-based funding task force issued in response to section 503 of article X of 2013 PA 59, the department shall continue an independent, third-party evaluation of the performance-based funding model.*

(4) *The department shall only implement the performance-based funding model into additional counties where the department, private child welfare agencies, the county, and the court operating within that county have signed a memorandum of understanding that incorporates the intentions of the concerned parties in order to implement the performance-based funding model.*

(5) *The department, in conjunction with members from both the house of representatives and senate, private child placing agencies, the courts, and counties shall continue to implement the recommendations that are described in the workgroup report that was provided in section 503 of article X of 2013 PA 59 to establish a performance-based funding for public and private child welfare services providers. The department shall provide quarterly reports on the status of the performance-based contracting model to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, and the senate and house fiscal agencies and policy offices.*

(6) *From the funds appropriated in part 1 for the performance-based funding model pilot, the department shall continue to work with the West Michigan Partnership for Children Consortium on the implementation of the performance-based funding model pilot. The consortium shall accept and comprehensively assess referred youth, assign cases to members of its continuum or leverage services from other entities, and make appropriate case management decisions during the duration of a case. The consortium shall operate an integrated continuum of care structure, with services provided by both private and public agencies, based on individual case needs. The consortium shall*

Status of Performance-Based Contracting Model First Quarter Report

demonstrate significant organizational capacity and competencies, including experience with managing risk-based contracts, financial strength, experienced staff and leadership, and appropriate governance structure.



Status of Performance-Based Contracting Model First Quarter Report

The Michigan Department of Health and Human Services (MDHHS) continues to lead and utilize the Child Welfare Partnership Council to ensure stakeholder involvement in the implementation of the performance-based funding model. MDHHS has collaborated with Kent County MDHHS staff and the Kent County provider community involved in the West Michigan Partnership for Children (WMPC) to continue supporting the Kent County pilot.

The performance-based case rate funding model is intended to improve outcomes for children and families; allow for the effective allocation of resources to promote local service innovation, create service efficiencies, and incentivize service providing agencies to be accountable for achieving performance standards. The funding model reinforces positive outcomes and reinvests savings for continued improvements in the community. For example, as more children safely return home from foster care more quickly, the savings that result from returning/keeping children in their homes can be reinvested in developing services that will fortify and support the community to prevent other children from entering foster care in the first place.

Data Overview

	Fiscal Year 2019					
	Quarter 1	Quarter 2	Quarter 3	July 2019	Aug 2019	Sept 2019
New Referrals (Entries)	104	135	99	34	34	18
Monthly Program Closures (Exits)	125	88	145	39	32	41
Open Cases at the end of the Period	892	939	893	888	890	867

Data from prior months was updated to account for data entry lag. Data Source: Data Warehouse
Data Run Date: May 30, 2019; August 26, 2019; November 11, 2019

Discharge Reasons	Fiscal Year 2018	Fiscal Year 2019										
		Quarter 1		Quarter 2		Quarter 3		July 2019	August 2019	Sept 2019	Quarter 4	
Reunification with Parents	48%	43	34%	23	26%	77	53%	19	14	21	54	50%
Adoption	35%	48	38%	29	34%	37	26%	11	7	8	26	24%
Guardianship	7%	11	9%	9	10%	10	7%	2	2	5	9	8%
Emancipation	6%	4	3%	7	8%	12	8%	5	2	2	9	8%
Living with Relatives	1%	0	0%	1	0%	1	0%	1	5	0	6	6%
Other (AWOL, Transfer to another agency)	2%	19	15%	19	22%	8	6%	1	2	5	8	7%
Total Discharges		125		88		145		39	32	37	108	

Data from the prior quarter was updated to account for data entry lag. Data Source: Data Warehouse
Data Run Date: May 30, 2019; August 26, 2019; November 11, 2019

Status of Performance-Based Contracting Model First Quarter Report

Placement Settings for Children at the end of Specified Period Fiscal Year 2019												
	Quarter 1		Quarter 2		Quarter 3		July		Aug		Sep	
							2019		2019		2019	
Total Open Cases	892		939		888		888		890		867	
Foster Home	291	33%	350	37%	337	38%	328	37%	343	39%	345	40%
Relative	230	26%	262	28%	231	26%	216	24%	224	25%	231	27%
Parental Home	122	14%	108	12%	125	14%	129	15%	121	14%	107	12%
Residential Care	72	8%	76	8%	73	8%	69	8%	68	8%	58	7%
Adoptive Home	105	12%	76	8%	60	7%	79	9%	71	8%	68	8%
Independent Living	22	2%	18	2%	17	2%	17	2%	16	2%	15	2%
Fictive Kin	16	2%	20	2%	19	2%	18	2%	19	2%	19	2%
Shelter	7	1%	8	1%	6	1%	7	1%	7	1%	7	1%
Guardian	10	1%	5	1%	6	1%	12	1%	9	1%	7	1%
Other (i.e. Jail, Detention, AWOL, Hospital)	17	2%	16	2%	19	2%	13	1%	12	1%	10	1%

*Data retrieved: Monthly Management Report, November 4th, 12-month data

Fiscal

Expenses-Cash Basis	FY18	*Revised FY19 Q1	*Revised FY19 Q2	FY19 Q3	FY19 Q4	FY19 Projected Spending Compared to FY18
Foster Care Administration	\$ 15,240,083	\$ 3,911,337	*\$3,947,918	\$3,855,665	\$3,895,789	↑
Caregiver Maintenance Expenses	\$ 3,648,410	\$ 1,034,043	*\$1,065,638	\$1,114,158	\$1,429,399	↑
Enhanced Foster Care Maintenance & Administration/ Incentives/ Treatment Foster Care Administration	\$ 1,053,168	\$ 769,197	*\$1,084,541	\$708,452	\$886,566	↓
Residential Expenses	\$ 10,525,555	*\$ 2,123,421	*\$2,060,536	\$2,247,017	\$2,609,065	↓
Shelter Expenses	\$ 1,167,662	*\$ 265,038	*\$375,775	\$276,530	\$329,681	↓
Ancillary Services	\$ 1,325,453	\$ 349,206	*\$156,190	\$475,489	\$419,019	↓
Adoption Administration	\$ 1,337,245	\$ 432,870	*\$288,636	\$451,434	\$475,952	↑

*Revised amounts. Data Source: FY18-WMPC Accounting Report, FY19-Q2 Cost Report - FINAL, FY19-Q3 Cost Report - FINAL, FY19-Q4 Cost Report.

Status of Performance-Based Contracting Model

First Quarter Report

Key Innovations and Status Updates

- WMPC's Enhanced Foster Care (EFC) service continues to provide individualized treatment for children in general foster care who present with intensive behavioral or emotional needs. Between January 1, 2018 – September 30, 2019, WMPC provided this service to 153 children. EFC has assisted with maintaining community-based placements and has been a much-needed support for children stepping out of residential and into the community. Thirty-nine that received EFC services in FY19 stepped down from residential placements. Thirty (77%) of those children remained in a community placement throughout the year.
- Implementation of EFC continues to contribute to decreased placements in residential settings. Based on WMPC expenditures on residential placements, WMPC spent \$1,485,516 million (14%) less on residential in FY19 than in FY18.
- WMPC's performance and quality improvement team continue to analyze performance data and engage with its network providers monthly to discuss key performance measures, data quality, outcome measures, and quality improvement plans. WMPC also meets with providers on a quarterly basis to assess performance against the contract as a condensed review of contract compliance and achievement of outcomes.
- During FY2019, WMPC met the target for three of twelve state key performance indicators. From FY18 to FY19, WMPC improved in seven of the twelve state key performance indicators, maintained stable performance in three of the state key performance indicators, and decreased in performance for two state key performance indicators. In FY19, WMPC exceeded the state average in ten of the eleven state key performance indicators published by the MDHHS. (Refer to attachment: Fiscal Year 2019 Quarter Four Performance Report)
- WMPC and MDHHS collaboratively developed a new performance framework for the duration of the pilot that more heavily focuses on the impact the funding model has on child level outcomes and is tied to the pilot's key goals.
- WMPC hosted local residential providers to develop a continuum of shelter and residential services to keep youth in Kent County instead of placing youth far from their homes and families. The group identified current needs and barriers in serving youth in care, as well as brainstormed programming ideas related to high-needs youth. The group met again in December to further develop a programming model that will address the gaps within the current continuum of services.
- Since launching a new Utilization Management Model in July 2019, WMPC continues to refine its process to improve services for youth. Monthly meetings with private agencies, as well as targeted and timely case reviews, have contributed to an increase in family finding and ensuring least-restrictive placements.
- WMPC and MDHHS co-facilitated a Youth Aging Out forum where a variety of services providers from the community participated in discussing barriers to success for youth aging out of foster care as well as brainstorming solutions. WMPC will develop and procure contracts and develop partnership to address the service gaps for this vulnerable population.

Status of Performance-Based Contracting Model First Quarter Report

- Through a grant with the Michigan Health Endowment Fund, WMPC is beginning implementation of the evidence-based, trauma-informed Sanctuary model in FY20. This effort will include the child and family service system in Kent County, to include MDHHS, the Kent County Circuit Court – Family Division, and Network 180 (the CMH). The goal is a fully integrated, trauma-informed system of care and the process will take three years.
- WMPC added two additional Board Members: Cheryl Schuch, Executive Director of Family Promise, and Sally Andreatta, Executive Director of the Grand Rapids Student Advancement Foundation. These board members joined Dr. Nkechye Ezech, Executive Director of the Early Learning Neighborhood Collaborative, and Kayla Morgan, a former foster youth and founder and owner of Resilient Roots, a trauma-informed yoga practice who started on WMPC's Board last quarter. WMPC has three additional board slots to fill to fulfill its objective of adding seven members representative of the diversity of the community and to allow for a non-provider quorum. These seven board members are in addition to the original five-member board of directors, comprised of a representative from each of the five private case management agencies that comprise the consortium (Bethany Christian Services, Catholic Charities West Michigan, D.A. Blodgett – St. John's, Samaritas, and Wellspring Lutheran Services.)
- MDHHS received the second annual evaluation report from Westat.

Attachments:


- Fiscal Year 2019 Quarter Four Performance Report





WMPC Network
FY 2019 Quarter 4 Performance Report
July – September 2019

FY2019 Comparative Performance Analysis

Source: MiSACWIS Info View Reports, retrieved 11/2019

		Benchmark	FY18	FY19	Change
Social Work Contacts 	Worker-Child Visits	95%	88%	95%	7%
	Worker-Parent Visits	85%	63%	66%	3%
	Parent-Child Visits	85%	52%	48%	-4%
	Worker-Supervisor Meetings	95%	96%	98%	2%

		Benchmark	FY18	FY19	Change
Medicals & Dentals 	Initial Medical	85%	84%	84%	0%
	Yearly/Periodic Medical	95%	84%	85%	1%
	Initial Dental	90%	77%	75%	-2%
	Yearly Dental	95%	82%	86%	4%

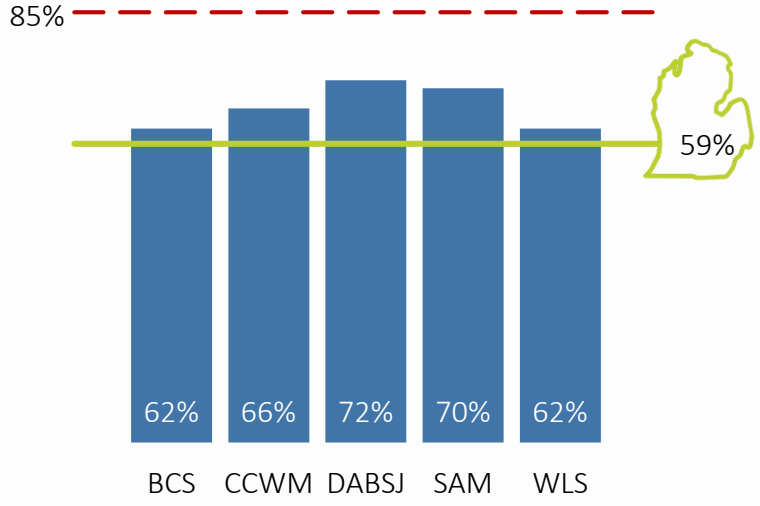
		Benchmark	FY18	FY19	Change
Service Plans 	Initial Service Plans	95%	71%	85%	14%
	Updated Service Plans	95%	89%	92%	3%
	Plan Approvals	95%	87%	91%	4%

There were no adoption disruptions between October 1, 2018 and September 30, 2019.

Worker - Parent Visits

At least 85% of parents whose children have a permanency goal of reunification shall have face to face contact by the assigned caseworker in accordance with the guidelines in FOM.

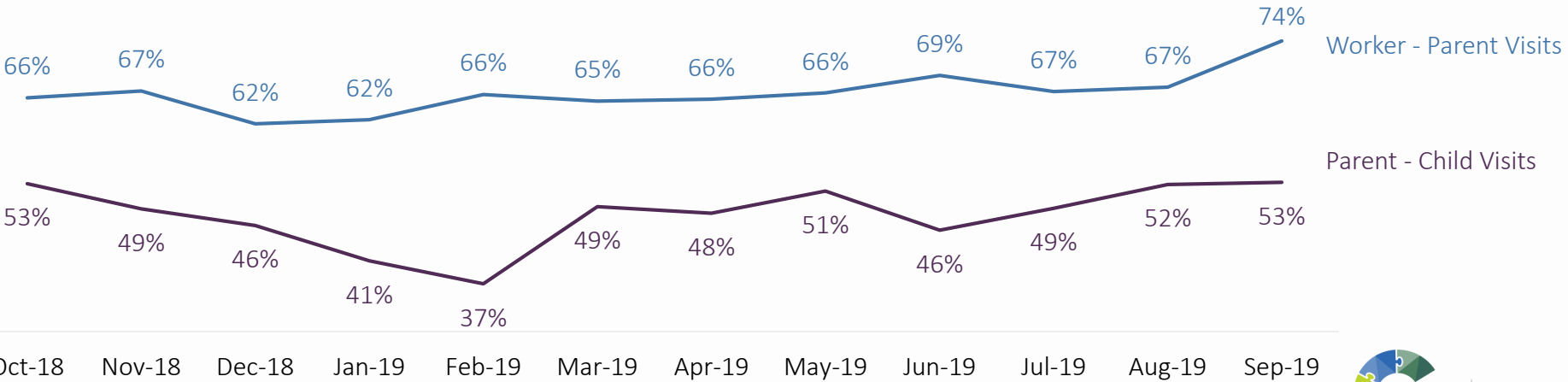
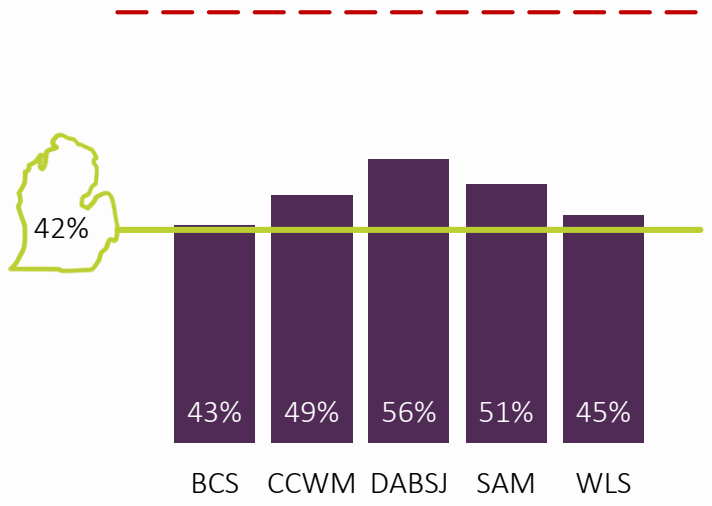
Quarter 4 Network Average is 69%



Parent - Child Visits

No fewer than 85% of children with a goal of reunification shall have visitation with their parent(s) at least weekly for youth six years old or older and at least twice per week for youth 0-5 years old.

Quarter 4 Network Average is 48%



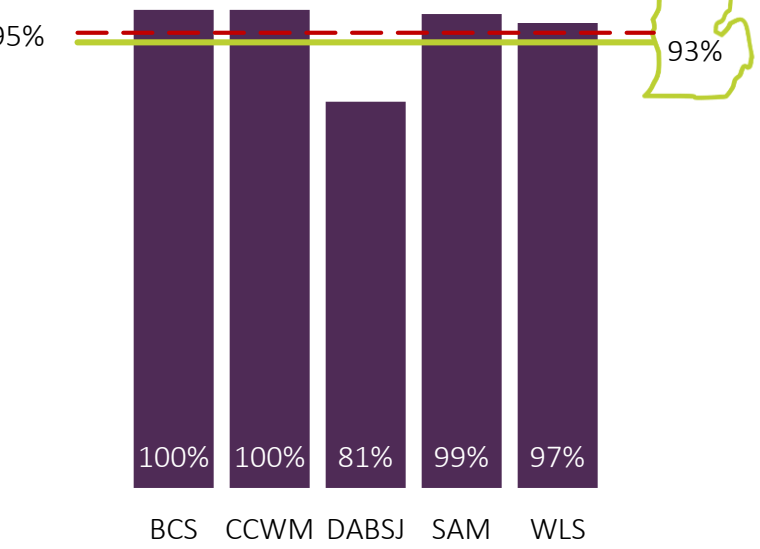
Source: MiSACWIS Social Work Contacts Timeliness Info View Report, retrieved November 4, 2019; MDHHS Children's Services Agency - MMR Scorecard statewide performance, October 2018 - September, 2019 BCS=Bethany Christian Services; CCWM=Catholic Charities West Michigan; DABSJ=DA Blodgett St John's; SAM=Samaritas; WLS=Wellspring Lutheran



Worker - Supervisor Visits

At least 95% of supervisors shall meet at least monthly with each assigned case worker to review the status and progress of each case on the worker's caseload.

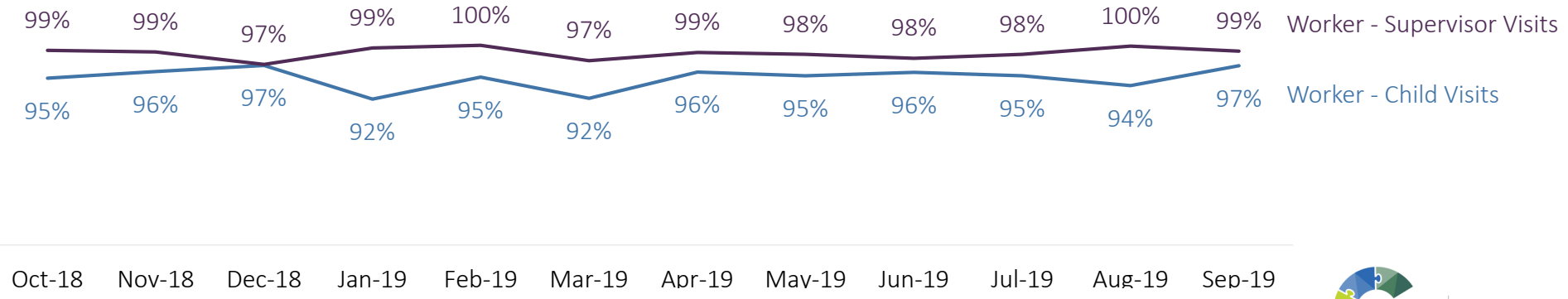
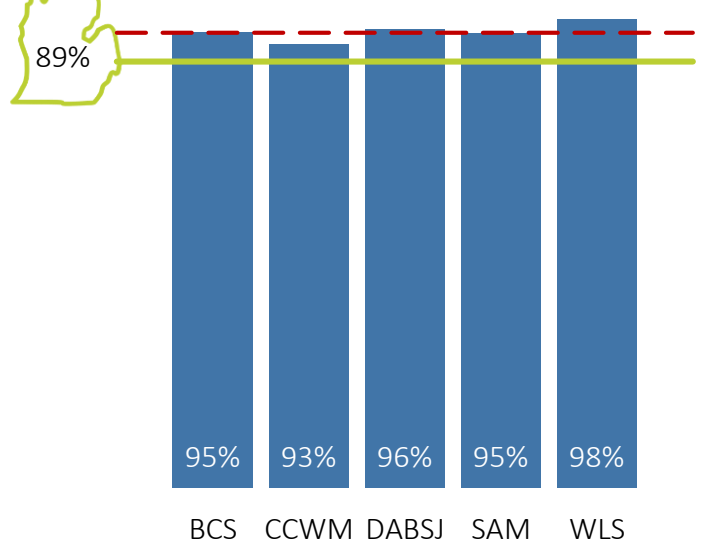
Quarter 4 Network Average is 99%



Worker - Child Visits

At least 95% of children will be visited by their assigned worker.

Quarter 4 Network Average is 95%



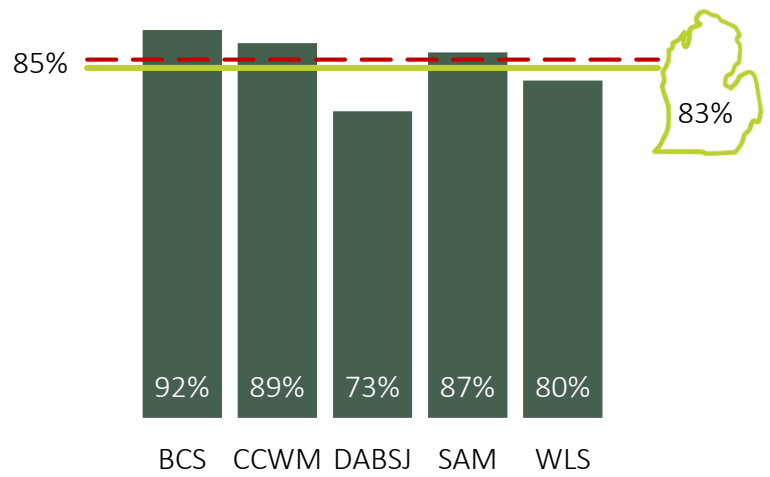
Initial Medical Exams

At least 85% of children will have an initial medical examination within 30 days of removal.

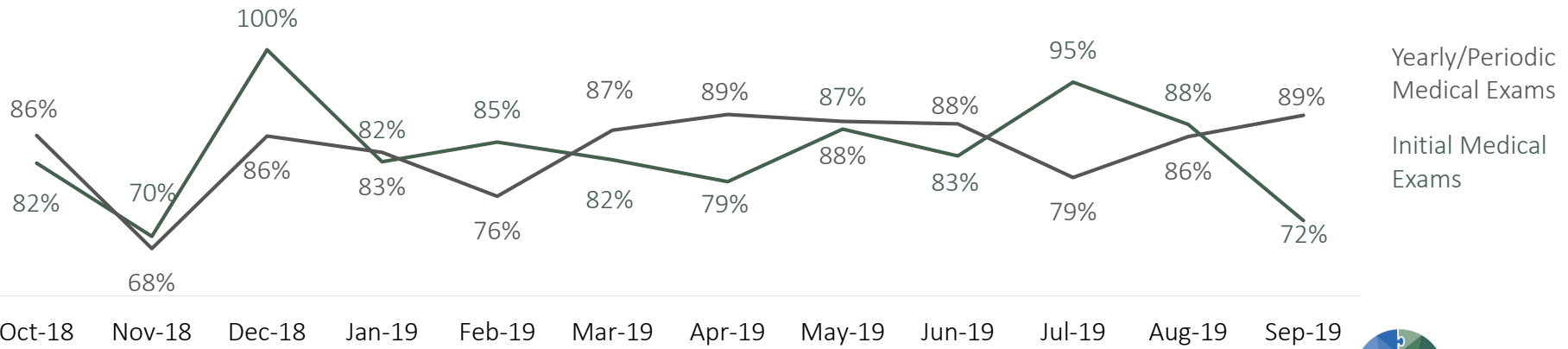
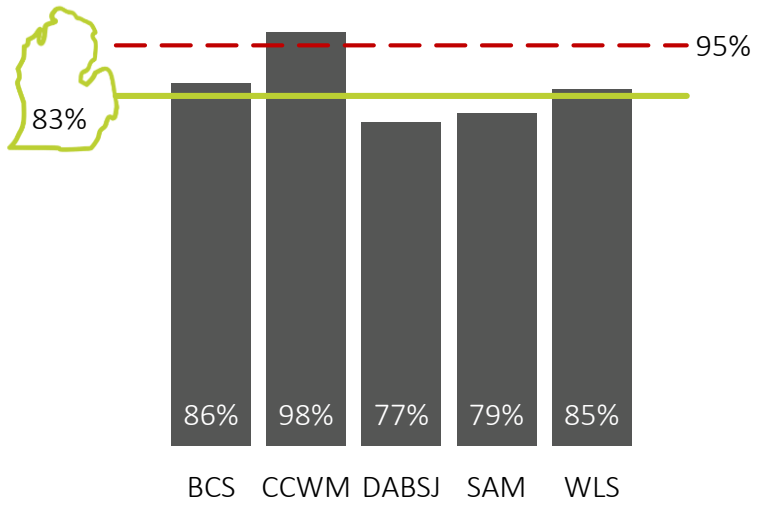
Yearly/Periodic Medical Exams

Following an initial medical examination, at least 95% of children shall receive periodic medical examinations and screenings according to the guidelines set forth by the American Academy of Pediatrics.

Quarter 4 Network Average is 86%



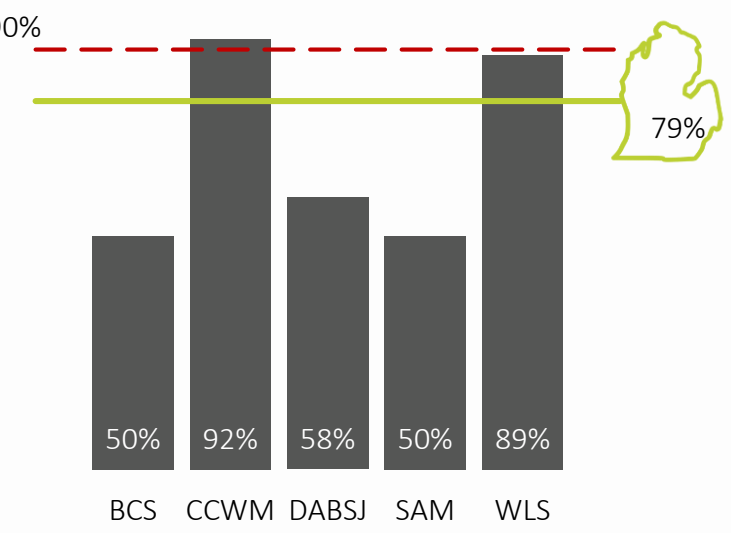
Quarter 4 Network Average 85%



Initial Dental Exams

At least 90% of children shall have an initial dental examination within 90 days of removal unless the child has had an exam within six months prior to placement or the child is less than four years of age.

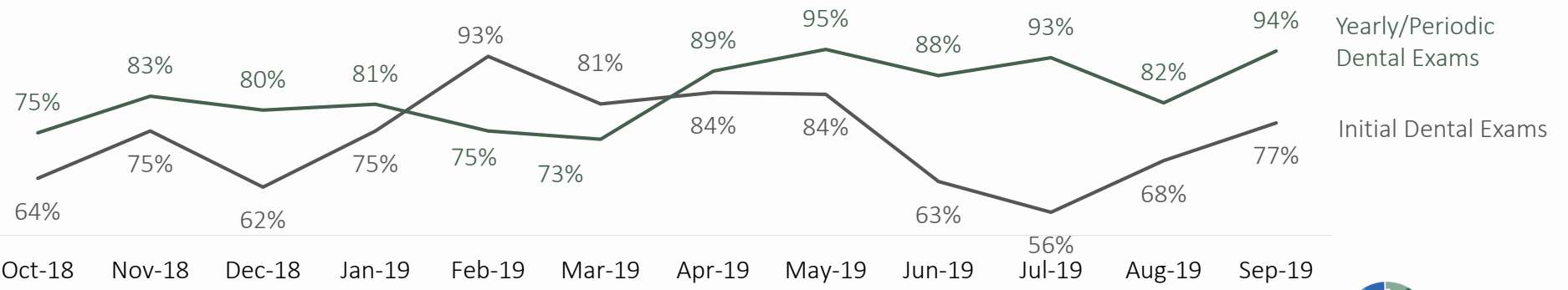
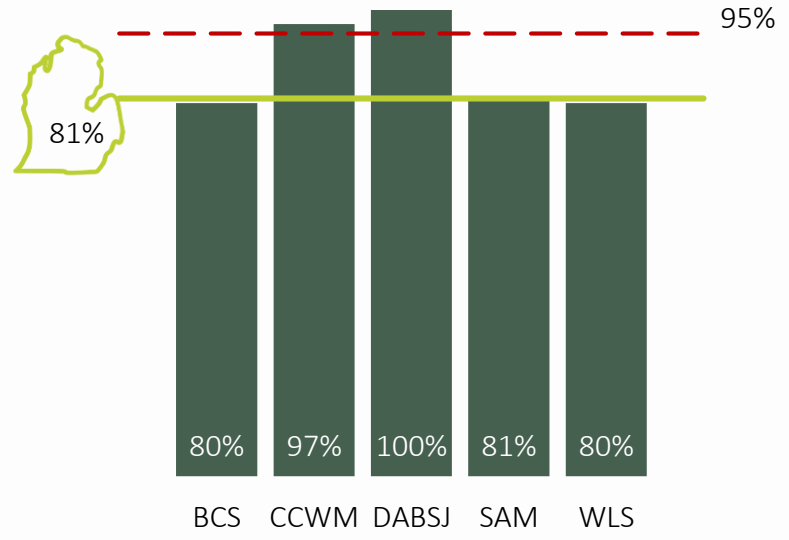
Quarter 4 Network Average is 66%



Yearly Dental Exams

At least 95% of applicable children shall have a dental examination at least every 12 months

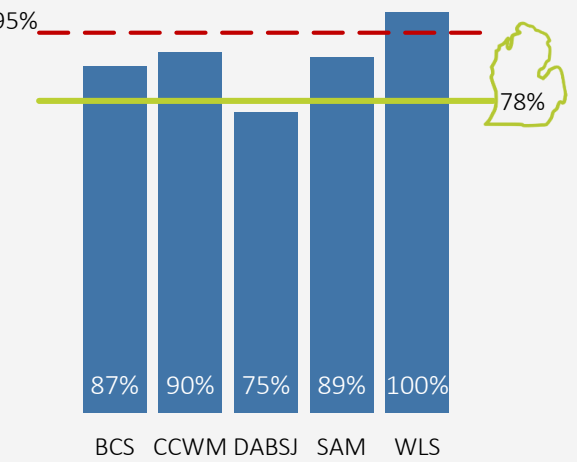
Quarter 4 Network Average is 88%



Initial Service Plans

At least 95% of children shall have an initial service plan completed within 30 days of entry into foster care and quarterly thereafter.

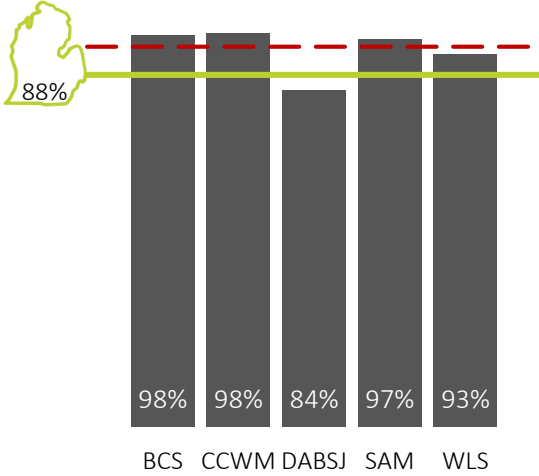
Quarter 4 Network Average is 88%



Updated Service Plans

At least 95% of children shall have a service plan updated quarterly.

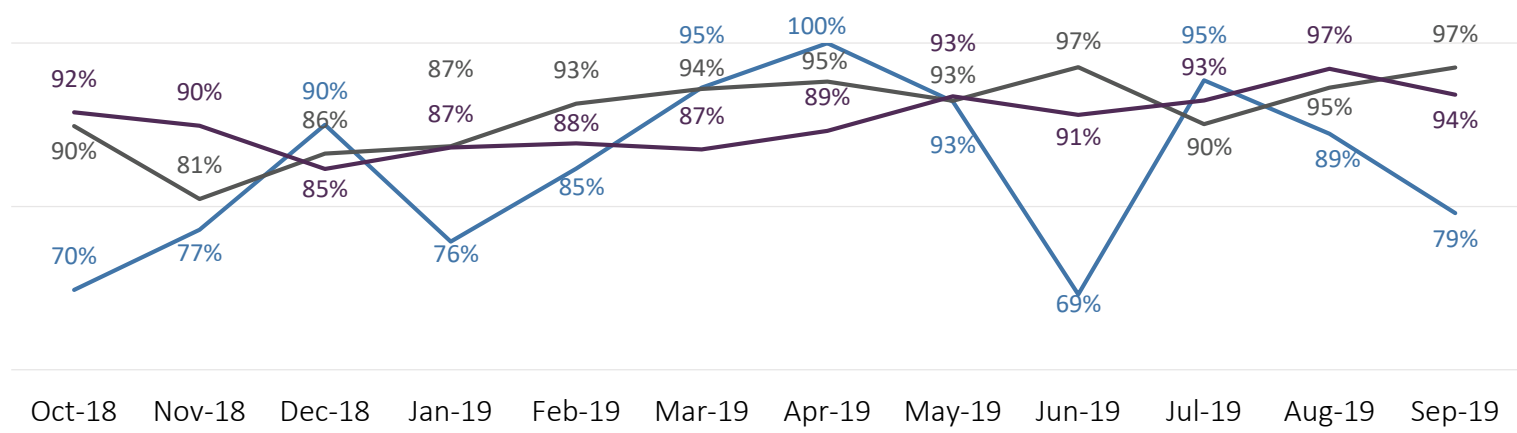
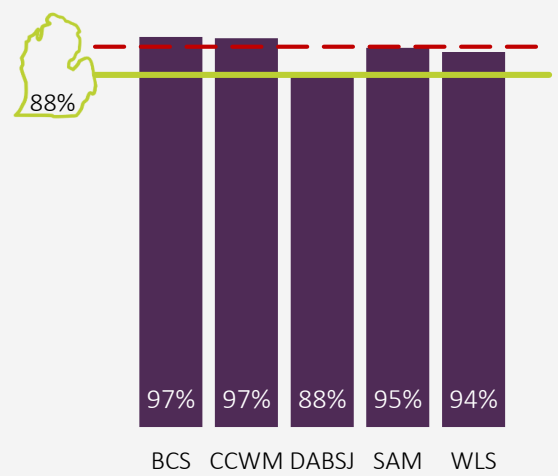
Quarter 4 Network Average is 94%



Plan Approvals

At least 95% of children shall have a case service plan approved within 14 days of case worker submission to the supervisor for review.

Quarter 4 Network Average is 94%



Updated Service Plans
Plan Approvals
Initial Service Plans

Source: MiSACWIS Caseworker Service Plan Timeliness Info View Report, retrieved November 4, 2019; MDHHS Children's Services Agency - MMR Scorecard statewide performance, October 2018 - September, 2019

BCS=Bethany Christian Services; CCWM=Catholic Charities West Michigan; DABSJ=DA Blodgett St John's; SAM=Samaritas; WLS=Wellspring Lutheran Services



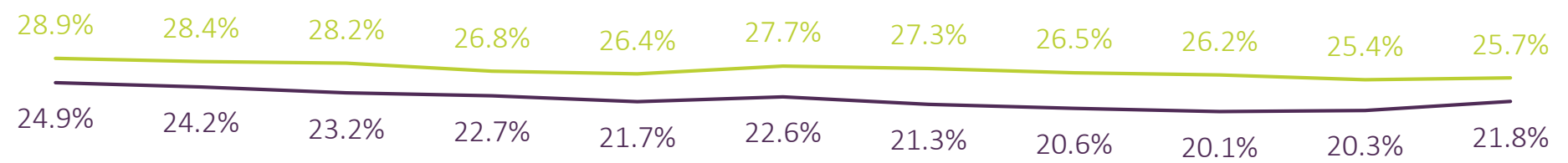
Performance Outcomes

State of Michigan

WMPC

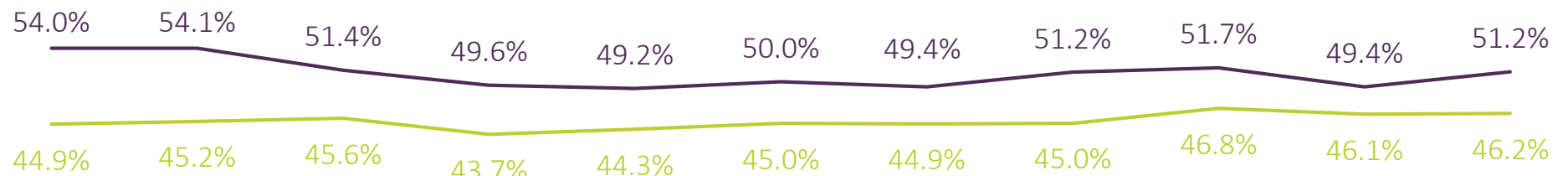
Permanency in 12 months (higher is better)

National Standard: 40.5%



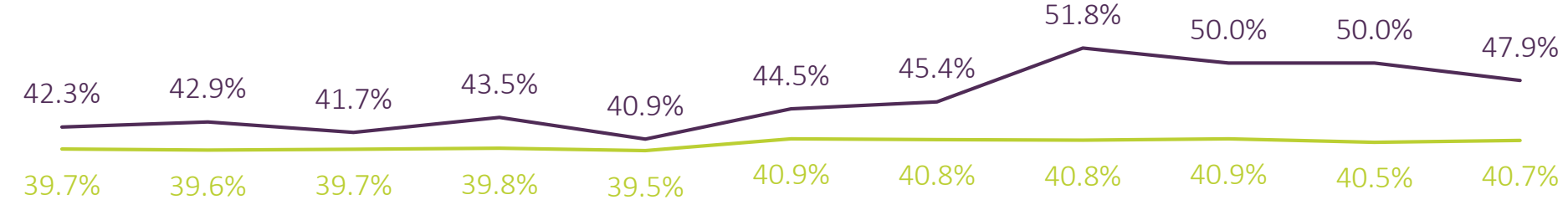
Permanency in 12-23 months (higher is better)

National Standard: 43.6%



Permanency in 24+ (higher is better)

National Standard: 30.3%



Oct-18 Nov-18 Dec-18 Jan-19 Feb-19 Mar-19 Apr-19 May-19 Jun-19 Jul-19 Aug-19

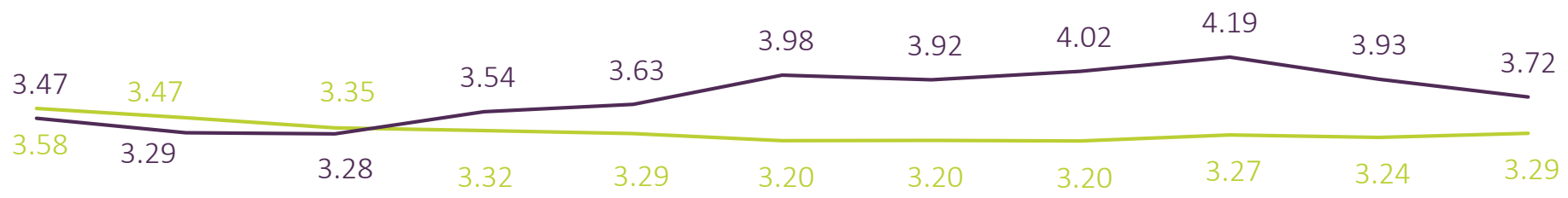
Performance Outcomes

State of Michigan

WMPC

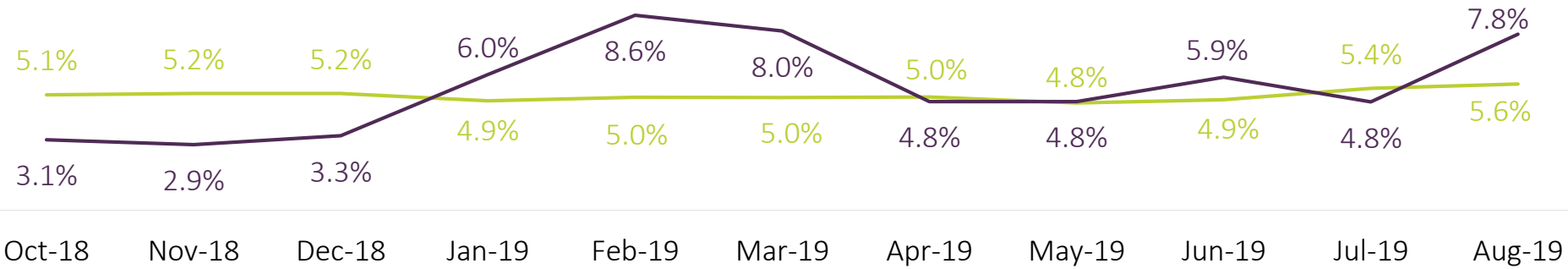
Stability (lower is better)

National Standard: 4.12



Re-entry (lower is better)

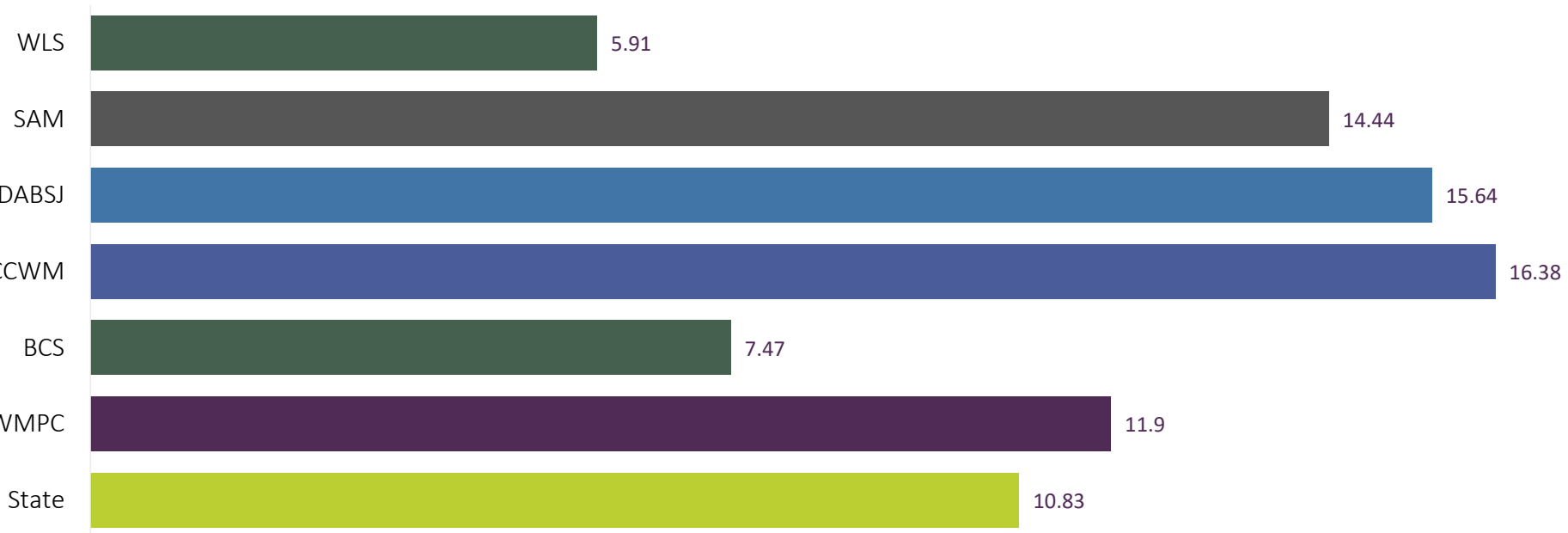
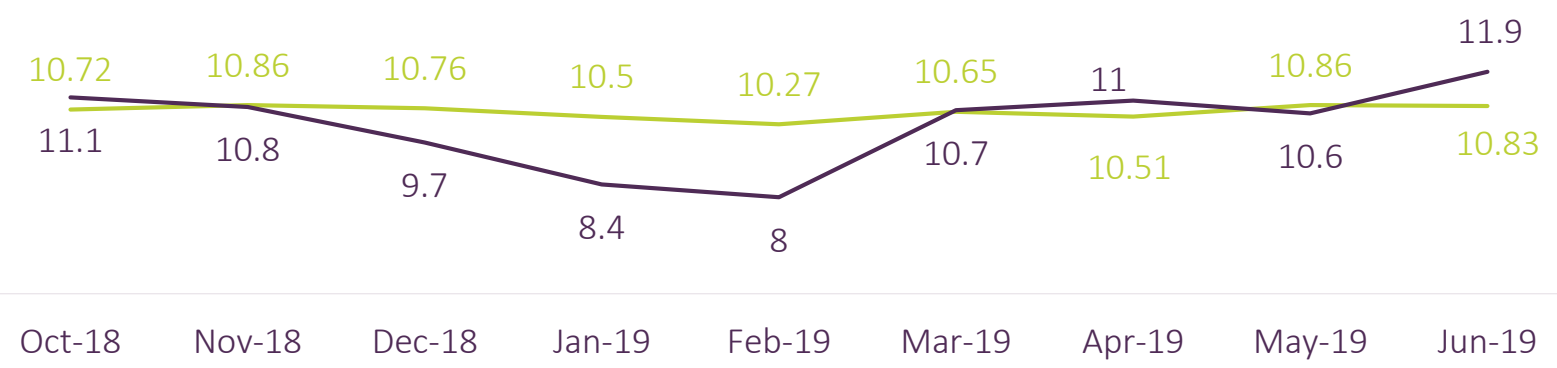
National Standard: 8.3%



Performance Outcomes

Maltreatment in Care (lower is better)

National Standard: 8.5%

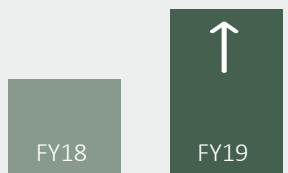


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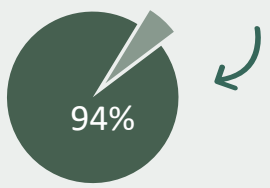
FY2019 Network Contract Measures

Community Placements

The percentage of days WMPC network children placed in community-based foster care in the most family-like setting increases by 3% from the previous year.



The percentage of days WMPC network children placed in community-based foster care in the most family-like setting will meet or exceed 94%.



88%

of days WMPC network children were placed in community settings. This is a 2% increase from FY18.

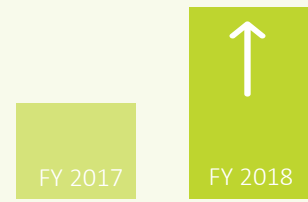


Source: Mindshare Incentive One Dashboard, retrieved 11/05/19.

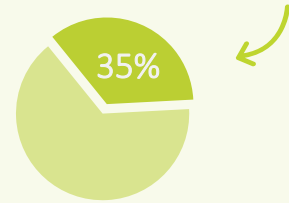
Relative Placements

Achieve either of the following goals:

The percentage of days children placed in relative care increases by 6% from the previous year.



At least 35% of days all children served by the WMPC network are in relative care each year.

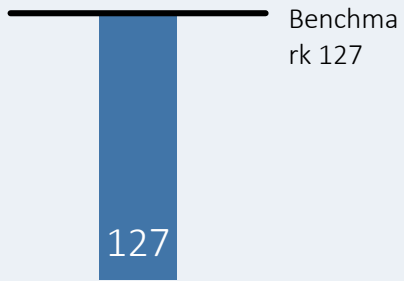


38% of all days children served by the WMPC network were in relative care. This is a 4% increase from FY18.

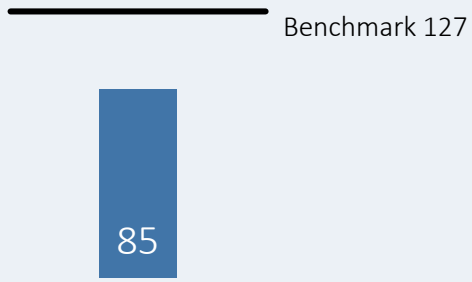
Source: Mindshare Incentive Three Dashboard, retrieved 11/05/19.

FY2019 Network Contract Measures

Licensed Foster Homes



The WMPC network will license the number of foster homes required to **meet or exceed their benchmark** for total number of licensed homes as determined by the Kent County AFPRR licensing calculator.

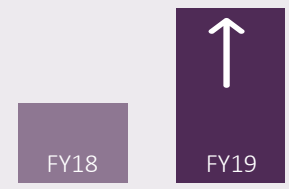


The WMPC network has not met their goal of licensing 127 homes, as of August 2019.

Source: MDHHS Non-Related Foster Home Dashboard, selected timeframe 10/18 – 9/30/2019
 *Five homes were licensed in Kent County outside the WMPC network

Worker-Parent Contacts

Case workers' timely, monthly face-to-face contacts with parents of children who have a permanency goal of reunification increase by **12%** from the previous year.



At least **85%** of the possible monthly face-to-face contacts occur within the time frame.



66%

of case workers' timely, monthly face-to-face contacts with parents of children who have a permanency goal of reunification were completed in FY19. This is a 3% increase from FY18.



Source: MiSACWIS Social Work Contacts InfoView Report, selected timeframe 10/1/18-9/30/19, retrieved 10/22/19.