



## OhioRISE Realigned Service Delivery

### Next Generation of Ohio Medicaid Managed Care

*Consistent with Governor DeWine's priority and the Ohio General Assembly's commitment to prevent custody relinquishment, the OhioRISE managed care program realigns spending and invests in a package of intensive, specialized services for a targeted group of eligible youth.<sup>1</sup>*

As a part of the next generation of managed care, ODM will implement OhioRISE (Resilience through Integrated Systems and Excellence)<sup>2</sup>, a specialized managed care program for youth with complex behavioral health and multi-system needs. OhioRISE aims to shift the system of care and keep more youth and families together by creating new access to in-home and community-based services for children with the most complex behavioral health challenges. The OhioRISE program's child and family-centric delivery system recognizes the need to specialize services and support for this unique group of children and families.

### Building Provider and Service Capacity While Controlling Costs

Now, more than ever, OhioRISE and the intensive community services it envisions are desperately needed by Ohio children with complex needs and the local systems that serve them. Ohio's experience illustrates the proof over the last few years:

- The General Assembly issued the "Joint Legislative Committee on Multi-System Youth Recommendations"<sup>3</sup> report in June of 2016, including recommendations to ensure MSY safety-net funding, access to peer support services, Medicaid-reimbursable high-fidelity wraparound services, and facilitation of data collection that enables the state to track uniform metrics for the MSY population.
- H.B. 166 created the multi-system youth (MSY) custody relinquishment prevention program. To date, the program has served nearly 600 children, with Medicaid managed care organizations covering 75% of expenses. Of the funding requests submitted, 64% sought financial assistance to cover the costliest type of care to prevent custody relinquishment: residential treatment services.

**"It is the intent of this state and the general assembly that custody relinquishment for the sole purpose of gaining access to child-specific services for multi-system children and youth shall cease."**

133<sup>rd</sup> Ohio General Assembly  
House Bill 166  
ORC 121.374

<sup>1</sup> <https://www.dispatch.com/story/opinion/columns/2021/02/20/opinion-ohiorise-help-youth-behavioral-health-challenges/6477451002/>

<sup>2</sup> [OhioRISE \(Resilience through Integrated Systems and Excellence\) | Ohio Medicaid Managed Care](#)

<sup>3</sup> <http://www.oacbddd.org/clientuploads/emails/2016/PolicyBrief/160715/JointCommittee-MultiSystemYouth-Report.pdf>

- Even with the MSY program support, children are put on lengthy waiting lists for residential treatment and the state continues to fund out-of-state services for an average of 140 children at any given time. Cost for these services run as high as \$1,100 per day, per kid.”<sup>4</sup>
- Our Children’s Hospital partners report that their inpatient psychiatric beds are full, with kids waiting in emergency rooms for days to access behavioral health care – a problem solved through intensive community services that will be a part of the OhioRISE program.
- Public Children’s Services Association of Ohio (PCSAO) reports a 31% increase in the number of children in state custody.

### **Federal Child Protection Laws Emphasize Prevention Services and Community-Focused, Family-Centric Supports**

The Family First Prevention Services Act (FFPSA) of 2018 is the most significant change in child protection and Title IV-E funding in decades. It requires investing in prevention-focused services, adds requirements and additional oversight of group residential treatment for children, and enables children who are foster care candidates to remain in their communities with additional family support.

OhioRISE supports the Family First requirements and more. Enhanced OhioRISE services and the FFPSA services are being developed collaboratively; with MSY families, stakeholders, providers, sister state agencies and children’s hospital clinicians. These efforts leverage the support of local public systems, expand access to less costly community services, avoid the high costs of sending children out-of-state to receive care and constrain the use of prolonged, expensive congregate residential services to the greatest extent possible.

Additionally, OhioRISE is consistent with Governor DeWine’s priority and the Ohio General Assembly’s commitment to prevent custody relinquishment. Custody relinquishment is a heartbreaking, last resort that far too many Ohio parents face. The cost of custody relinquishment to local public children services agencies (PCSAs) depends on the level of care needed by the child and includes the cost of case management and placement.<sup>5</sup> Examples include:

- \$82,192.80 per year for a child who needs congregate residential treatment care.
- \$16,777.00 per year for a child who needs foster care.

Compare these figures to cases requiring PCSA involvement in which a child can be cared for at home, in which the average cost to PCSAs is \$651 per year.

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<sup>4</sup> Absent OhioRISE management of psychiatric residential treatment facility beds and the intensive community alternatives, Ohio might look like Pennsylvania, which would require Medicaid funding for over 1,250 psychiatric residential treatment facility beds.

<sup>5</sup> The cost indicated is the net cost for a year to the county public children services agency after subtracting federal IV-E reimbursement. Cost estimates provided by PCSAO.

Absent OhioRISE, implementation of FFPSA in Ohio would be significantly more costly and challenging for our state and local child protection system. Figure 1, on the following page, illustrates critical FFPSA requirements and Ohio Medicaid’s response to support FFPSA compliance through the OhioRISE managed care program.



Resilience through  
Integrated Systems and Excellence

**A specialized managed care organization (MCO) with expertise in providing services for the most complex multi-system youth**



**Specialized MCO**

ODM will procure a special type of MCO – a prepaid inpatient health plan (PIHP) – to ensure financial incentives and risks are in place to drive appropriate use of high quality behavioral health services.



**Shared Governance**

OhioRISE features multi-agency governance to drive toward improving cross-system outcomes – we all serve many of the same kids and families.



**Coordinated and Integrated Care & Services**

OhioRISE brings together local entities, schools, providers, health plans, & families as a part of our approach for improving care for enrolled youth.



**Prevent Custody Relinquishment**

OhioRISE will utilize a new 1915c waiver to target the most in need and vulnerable families and children to prevent custody relinquishment.

FFPSA Requirements	OhioRISE Support for FFPSA Compliance
Prevent the need for a child to be taken into the child protection system by providing “prevention” community services to kids and their parents	<ul style="list-style-type: none"> <li>○ One key aim of OhioRISE is to develop the services and workforce to provide intensive community services for MSY, which will help prevent out of home placement</li> <li>○ Use of a specialty managed care plan for OhioRISE will help assure statewide access to services for children in Medicaid who are at risk of entering custody</li> <li>○ OhioRISE waiver services designed to prevent child protection custody for children with extensive behavioral health needs</li> <li>○ OhioRISE includes three levels of care coordination, including high fidelity wraparound</li> </ul>
To be eligible for federal funding, FFPSA prevention services provided to children and their parents must use “evidence-based practices.” ODJFS must submit a “prevention plan” listing the benefits that can be covered in Ohio.	<ul style="list-style-type: none"> <li>○ Required OhioRISE services include multi-systemic therapy and functional family therapy; both designated by ODJFS as priority FFPSA services. Services are being developed in alignment to assure equal access to high quality care, regardless of payment source.</li> <li>○ OhioMHAS-procured a Center of Excellence (COE), which will support OhioRISE and FFPSA providers by providing technical assistance and training, including helping them bill Medicaid</li> </ul>
Children receiving residential treatment must meet “level of care” requirements to maintain federal funding; children who don’t meet a residential level of care may need to be served in community environments	<ul style="list-style-type: none"> <li>○ Often, it’s difficult to locate providers and services to serve children in community environments. The OhioRISE managed care plan will be responsible for developing the exact types of services kids need to prevent placement in, as well as be discharged from, residential treatment.</li> </ul>
Qualified Residential Treatment Program (QRTP) standards: federal child protection funds for residential treatment can only be used in settings that meet new QRTP standards	<ul style="list-style-type: none"> <li>○ OhioRISE funded behavioral health services will be available as part of QRTP residential care</li> <li>○ OhioRISE will carefully manage the development of a more intensive level of care, psychiatric residential treatment facility beds.</li> </ul>

**Figure 1:** OhioRISE Features that Support FFPSA

Specialized services for OhioRISE will cost an additional \$130M in SFY 2022 and \$265M in SFY 2023. This realignment and investment in an appropriate service delivery model will drive better long-term outcomes for children and youth, prevent custody relinquishment, facilitate compliance with the federally mandated FFPSA and Medicaid requirements, and reduce financial burden for state and local programs and services such as county developmental disability boards, children services enforcement agencies, and the department of rehabilitation and corrections.

For a complete analysis of the administrative costs and savings of OhioRISE and other components of the Next Generation of Medicaid Managed Care, ODM has prepared a white paper which can be found here: [SFY 22-23 ODM Next Gen Procurement Fiscal Impact](#).

## Conclusion

Experience has shown us that kids with the most complex, multi-system needs require a very different type of care coordination and specialized services. Both the DeWine Administration and the General Assembly have acknowledged the need by adopting several recommendations from “The Joint Legislative Committee on Multi-System Youth” and creating the Multi-System Youth Custody Relinquishment Fund.

The growing evidence of need combined with requirements to meet federal FFPSA criteria support the call for a specialized managed care organization (MCO) that brings expertise in serving the most complex, multi-system youth. OhioRISE is the state’s best tool to meet the needs of Ohio’s children and families, to ensure access to transformative health services and to control costs. Building the required provider workforce and service capacity is the key! Working together across agencies, local entities, schools, providers, and health plans, OhioRISE can help families avert the trauma of custody relinquishment and provide the next generation of Ohio’s children with the opportunity to thrive.

**“OhioRISE will uplift our state’s most vulnerable children and families by creating integrated systems of care...Addressing these issues related to access and availability of care will greatly improve health, behavioral and emotional outcomes for these children and teens to enable them to grow into healthy, resilient adults.”**

**Nick Lashutka, President and CEO, Ohio Children’s Hospital Association**