

**QUALIFIED INDIVIDUALS**

- 1. Will there be people working as the Qualified Individual residing in North Dakota or are they all located out of state?**

*Ascend has hired contracted clinical professionals in North Dakota to complete the CANS assessments for children with the child, families and case managers. Currently, there are 8 independent contractors for Ascend. Ascend continues to work on recruitment in the state to contract additional Qualified Individuals.*

- 2. Are the Qualified Individuals trained?**

*Yes. Ascend is contracting with professionals who are trained in the completion of the CANS. They will receive internal oversight from Ascend clinical staff who are also well-trained in the CANS assessment, NDDHS algorithm for approval or denials and the Family First regulations required of the contract with NDDHS.*

- 3. Will the Qualified Individual be making the decision to allow for the QRTP placement?**

*Yes; Ascend will make the level of care determination. The Qualified Individual will be completing the assessment as a contracted employee of Ascend with the goal to make the level of care determination. Ascend has internal quality assurance reviews and supervision provided to the North Dakota contracted Qualified Individuals from a team of experts residing in Tennessee.*

- 4. Do the Qualified Individual's rely solely on the CANS, what if a child present differently in a highly structured environment vs how they act in a lower level of care?**

*The assessment report includes the completion of the CANS, but also analysis of other supporting documentation and information submitted by the custodial case manager. In addition, determination includes interviews completed with the child, custodial case manager, family and possibly other individuals referenced by the case manager on the SFN 824.*

- 5. How quickly will the face to face meeting happen after Ascend receives the SFN 824 and supporting documentation, and how quickly will the results of the assessment be delivered?**

*The Qualified Individual will complete interviews within 5 days of the referral date. The final QRTP Assessment Report will be emailed to the case manager within 10 days of the referral date.*

- 6. Where will the face-to-face assessments take place?**

*The Ascend Qualified Individual will meet with the custodial case manager in a mutually convenient location where the child is also able to participate in the interview for assessment, likely the case manager's office or in the QRTP if already placed.*

- 7. The Qualified Individual has meeting with the facility staff and has not been interviewing the child, why is that happening?**

*The child should be interviewed as part of the CANS assessment. Ascend will be continue updating on protocol and training their Qualified Individuals to ensure consistency and accuracy across the state.*

**8. The Qualified Individual didn't speak with the case manager or other individuals noted on the SFN 824, would this be enough to submit for a reconsideration request?**

*Yes! It is the job of the Qualified Individual to contact the case manager regarding the level of care assessment. Information provided by the case manager is vital in understanding the child and areas of strengths and need.*

**9. It sounds like the Qualified Individual is high up in decision-making authority; who has the final say? Will a Qualified Individual determination always be followed, even at the expense of the child's best interest and treatment needs?**

*NDDHS has granted the Qualified Individual the authority to make decisions as a third-party (not connected to the ND child welfare system or to providers). The role of Ascend Qualified Individuals is to make a placement determination in the best interest of the child, while ensuring the least restrictive level of care. NDDHS has contracted this service and is involved in the process through Children and Family Services, Field Services and the Regional and State Review Teams. NDDHS has offered a modified appeals process if a determination denies the child be placed in a QRTP;*

- a. Reconsideration to Ascend: If information was missing from an initial request or a continued stay review, the case manager can send additional documentation to support a detailed rationale as to why this QRTP level of care is requested and why it was not previously submitted. While waiting for the results, the custodial case manager shall be working simultaneously with their local and regional review teams. Reconsideration request forms are the Ascend website: [https://maximus.com/svcs/north\\_dakota\\_ffpsa](https://maximus.com/svcs/north_dakota_ffpsa)*
- b. Managing Denials: If denial occurs after a reconsideration is requested and the case manager still believes the child requires a QRTP level of care, the case manager shall work with their local child and family team or initiate a request with the Regional Review Team.*

**10. Will the same Qualified Individual follow the life of a case or will assessors vary? Although it is possible the same Qualified Individual could assess the child more than once, that is not a priority. All contracted Qualified Individuals are well-trained and will evaluate each referred child based on the child's current strengths and needs as detailed in state algorithm.**

**11. I have staff who would like to be a contracted employee for Ascend. Is that a conflict of interest?**

*Depends. The ND Department of Human Services issued guidance to Ascend to ask preliminary questions regarding current employment to avoid conflict of interest. For example; if a current County, DJS, Tribal or Licensed Child Placing Agency staff working directly with child welfare programming (Foster Care, CPS or In Home) applies to be a Qualified Individual, they will be screened out. If an employee is a clinical therapist in the community, they would not be screened out as they do not have a direct affiliation with a public agency granted custody of a child in foster care, leaving their clinical assessment as a neutral decision. NDDHS is aware of one professional who was hired, and additional parameters have been put in place to ensure the Qualified Individuals does not complete any QRTP assessments for the region, in which they are employed by a county.*

**12. Who will oversee the Ascend contract and the review process from NDDHS?**

*Ascend will have internal continuous quality improvement within their agency. Ascend will report to NDDHS as part of the contract. NDDHS Clinical Alignment Team will offer internal peer review to the process and will maintain ongoing communications working directly with Ascend throughout implementation (weekly meetings) and ongoing throughout the contract.*

## **PLACEMENT OPTIONS**

- 1. What should case managers do first...apply for admission into a QRTP through the facility or complete the process through Ascend?**

*The process is parallel to one another. Submit the SFN 824 and supporting documentation to both the desired QRTP/s and Ascend at the same time.*

- 2. On the SFN 824, can a worker only list one QRTP as a facility to place the child? It is possible the QRTP will deny placement and case manager will need to check with another QRTP for availability.**

*No. The case manager can list multiple QRTP facilities on the application. There is space on page 2 to indicate more than one QRTP the case manager is seeking placement from.*

- 3. If a youth who has been in foster care and previously placed in an RCCF, do the prior months count toward their placement maximum?**

*No. The placement maximums begin tracking time effective October 1, 2019.*

- 4. How does a custodian request an emergency QRTP placement?**

*The process for referring a child to a QRTP via an emergency may be expedited based on facility policy. Submit the SFN 824 and supporting documentation to the facility you are seeking placement and fax the documentation to Ascend. A QRTP can accept or deny an emergency placement based on availability.*

- 5. If Ascend is not involved in emergency placements, is the Ascend Qualified Individual approval required for emergency placement?**

*No. An emergency placement can occur prior to Ascend completing the assessment.*

- 6. What is the Ascend timeline to respond upon receiving a referral?**

*Ascend has 10 days to return an assessment report from the date of referral.*

- 7. There is a lack of placement options for children; I do not see more availability of trained foster homes to meet the needs of these children who will be denied QRTP placement?**

*You are correct. It is expected there will be a bottleneck of needed placements. NDDHS has been discussing this since the federal regulation passed on 2/9/18. County/Tribal/DJS agencies, recruitment and retention coalitions, licensed child placing agencies and facilities are all aware of the need for trained foster homes to help accommodate the lower level of care needs. ND has over 1000 foster homes; occupancy in those homes averages 68% meaning not all licensed foster homes are providing services to children in foster care. This topic must continue to be discussed at all levels.*

*Federal regulations regarding the QRTP process allow for children placed in the RCCF today to be "grandfathered" into the QRTP. This will minimize an October 1, 2019 emergent bottleneck; however, it is necessary for state and local planning to continue recruitment efforts to assist with local placements long term.*

- 8. What about foster children currently in a QRTP placement; do they need to follow the QRTP approval process?**

*Eventually. If a child is currently in a QRTP (formerly RCCF), they are grandfathered into the placement location. This means that they could remain in the facility, so long as it was licensed. Overtime, Ascend will reach out to each case manager to begin the assessment process for each current placement to ensure level of care is appropriate. Once Ascend has contacted the custodial case manager they will be requesting a new SFN 824 along with supporting documentation that will need to be provided via fax to Ascend.*

**9. Do the placement maximums for a QRTP only apply to the child's foster care program (episode in FRAME) or lifetime?**

*This applies to the current foster care episode. If a child, age 14, is in foster care for 2 years; they cannot be placed in a QRTP for more than 12 consecutive months or 18 non-consecutive months. If the public custody ends and one year later the child is removed from the home again and enters a new foster care episode, the QRTP placement maximums clock will start over.*

**10. In the past, RCCF's are viewed as different levels of care within the same level of licensure. How will this work? Example if they begin at HOTR and before transitioning home, the child is placed at Charles Hall for a couple months; will the Qualified Individual define which facility the child can be placed?**

*NDDHS will be licensing QRTP under the same licensing standards for the same level of care. The individual QRTP's will have their own programming and clinical treatment programs. The Qualified Individual cannot dictate which facility a child can be placed; their role is to determine if the QRTP level of care is appropriate. The placement maximums are specific to the QRTP level of care, not the facility. A child can be transitioned from one QRTP to another if it is determined in the best interest for their treatment. Custodial case managers granted placement and care authority can transition a child when determined necessary.*

**11. If a child transitions from one QRTP to another QRTP, will the placement maximums apply to both facilities?**

*Yes. The placement maximums are specific to the QRTP level of care, not the facility in which the child is placed. A child can be transitioned from one QRTP to another if it is determined in the best interest for their treatment.*

**12. What are the placement maximums for a QRTP?**

*It is critically important that case managers are aware of the placement maximums and recognize the importance of referring children to a QRTP if he/she is in need of treatment. Children age 13+ cannot be in a QRTP for more than 12 consecutive months or 18 non-consecutive months. For children age 12 or less, they cannot be placed in a QRTP for greater than six months. If the length of stay is greater than the federal regulation allowances, further approval from the ND Department of Human Services Executive Director, Christopher Jones is required. This process will be requested through the QRTP Clinical Alignment Team via [SRT@nd.gov](mailto:SRT@nd.gov). See policy for further information.*

**13. If a custodian wants to refer to only TFC level of care through PATH, and not a QRTP, will the SFN 824 have to be sent to Ascend?**

*No. The SFN 824 will be sent to the therapeutic provider agency for consideration of TFC placement. Ascend can only approve/deny QRTP level of care; no authority over placement into a TFC home.*

**14. We have a youth that was placed in another QRTP, but the parent is wanting the youth moved to a different QRTP closer to home. If the custodian agrees to move the child from one QRTP to another, would a new level of care determination (SFN 824) from Ascend need to be done?**

*No. The youth has already received an assessment completed and approved by the Qualified Individual to be placed in a QRTP. The assessment report approval is good for 90-days. So long as the youth has had the assessment completed by QI approving QRTP placement, the youth can move between facilities as needed.*

**15. If Ascend says the child is not appropriate for a QRTP due to risky behaviors, but a TFC home is willing to accept the child in a lower level of care, can we place in a TFC home?**

*Yes. Regardless of a determination from Ascend, if a lower level of care is available and willing to care for the child, that is least restrictive and planning shall occur to make that placement happen. Ascend will give recommendations on appropriate level of care. The custodian will have the ability to make a referral to TFC or a family foster home and determine the most appropriate – least restrictive placement option for the child.*

## **DOCUMENTATION**

**1. I understand we are using the initials UA, which for many of us means (Drug Test-Uranalysis Assessment), what is meant by UA?**

*The Universal Application (SFN 824).*

**2. What are the required documents outside of the application?**

*The universal application (SFN 824) is required with every referral, continued stay review (SFN 826) is required for each continued stay review. Additionally, Ascend would like to review:*

**A. Preferred:**

- a. Completed IQ testing*
- b. Psychiatric evaluation*
- c. IEP*
- d. Treatment Plan*
- e. Specialist evaluation(s)*

**B. If emergency, also submit from the QRTP:**

- a. Suicide risk assessment*
- b. Behavioral assessment*
- c. Medical assessment*

**3. What does a case manager do if we have no supporting documents (evals) due to the child just entering foster care under our custody?**

*Submit the information available and known.*

**4. When doing the initial Universal Application (SFN 824), it is likely that the date “entered into foster care” will be unknown?**

*No. The date of entry into foster care will be known, unless the child is referred through the voluntary treatment program and the child is not in public custody. The date of placement into the QRTP is more likely “To Be Determined” based on admission acceptance if the child has not been placed on an emergency.*

**5. If the youth is in a facility at the time of the assessment, will the facility also receive a copy of the Assessment Report or will that only go to the custodian/case manager/referral?**

*The custodial case manager/referral will be responsible to share the assessment report with the QRTP. NDDHS determined that the actual tool (scoring sheet) used to finalize the CANS assessment is a working document of the Qualified Individual. When a viewer of the document is not properly trained on the CANS definitions, domains and assessment criteria, the scoring sheet can easily be misunderstood. Instead, the Qualified Individual will share the assessment report with the custodial case manager.*

**6. Regarding the level of care assessment is that a requirement for the assessor (Qualified Individual), the agency with custody or the provider in which they are placed?**

*If we understand this question accurately, the QRTP assessment is completed by Ascend Qualified Individuals based on the SFN 824, supporting documentation and interviews. There was hoped to*

*have a formal level of care screening tool developed, to help guide case managers on placement however, the screening is still under consideration and when developed would be the responsibility of the case manager to complete prior to the QRTP process.*

## **APPROVALS**

- 1. Does the 10-calendar day turn around include the completion of the CANS assessment?**  
*Yes. The 10 days is from the date of referral receipt and includes the completion of the child assessment report (decision).*
- 2. Can a child be placed in a QRTP without Qualified Individual approval?**  
*Yes. Emergency placement into a QRTP is allowable. However, the process requires the Qualified Individual to complete the CANS assessment within 10 days of admission to allow for a formal determination for the child to remain in the QRTP.*
- 3. How long is the QRTP approval good for? For instance, if the application is sent to a facility and has been approved, but there is no opening for 30 days. Does the custodian submit to Ascend for an assessment right away or when there is an opening?**  
*Right away. Ascend will grant the initial approval for a period of 90 days. The 90 days will begin the date of placement. However, if the placement date is greater than 30 days from date of approval a new assessment must be completed.*
- 4. If Ascend recommends placement in a QRTP can a QRTP deny the child?**  
*Yes. Ascend Qualified Individual's assess for level of care into a QRTP only. Each QRTP is a private vendor, they determine which children meet their facility admissions criteria.*
- 5. Does a case manager need to wait for the Ascend approval and the Court approval before placement into a QRTP?**  
*No. A child can be approved by the Qualified Individual (QI) and placed, a child can be placed and later approved by the QI, a child can be placed and later denied by the QI. NDDHS will allow reasonable discharge planning and payment to occur not to exceed 30 days from placement. The timeframes for court approval allow up to 60 days for placement.*
- 6. When Ascend receives the Universal Application (SFN 824) and supporting documentation, do they automatically schedule a CANS assessment for that child?**  
*Yes. The assigned Ascend Qualified Individual will contact the case manager and discuss the case and plan accordingly for the completion of the assessment in order to ensure all required documentation is received and timeliness standards for completing the assessment are met.*
- 7. A child is placed in a QRTP, while placed the child is in need of a temporary psychiatric hospitalization stay. The QRTP will "take the child back" into the QRTP, does another assessment need to be completed when they return to the facility within the 14 days allowed for a QRTP "bed hold"?**  
*No. So long as the QRTP is willing to accept the child back into the placement, the 14-day bed hold can allow for reimbursement to the QRTP and a new assessment is not required.*
- 8. What is the continued review process after the initial approval for placement in a QRTP?**  
*Custodial case managers must complete the Continued Stay Review (CSR) form SFN 826. This form is completed by the custodian for all children placed in a QRTP for treatment. The continued stay review form must be completed no greater than 30 days prior to placement approval expiration and no less than 20 days before the placement approval expires. The Qualified Individual will have 10 days to review the request to continue in a QRTP. The custodian*

*is responsible to track the placement length of stay and work with the QRTP to ensure treatment progress is being made.*

- *At the three (3) and nine (9) month periods, the Continued Stay Review will be conducted via phone and a document review from Ascend.*
- *At the six (6) and 12-month reviews, Ascend will conduct in-person interviews with the custodial case manager, the youth, and any other interested and relevant parties. Ascend will coordinate and lead all interviews.*

**9. What does the paper review of the Continued Stay Review involve? Does this mean Ascend will not talk to the family or youth?**

*No. Ascend will gather as much supporting evidence as possible and then conduct phone calls to research, validate, and add context to the information provided. As a custodial case manager, you can expect to speak with a Qualified Individual at each review (3, 6, 9, 12 months). Ascend will also reach out to facility staff for CSRs.*

**10. Can children from other states be approved for admission into a ND QRTP?**

*Yes. NDAC rules (NDAC 75-03-40-34) address ICPC. ICPC must be followed for any child being placed in a QRTP from out of state. One issue a sending state will face is the judicial review process in place to meet the QRTP court review of denial or approval of the QRTP placement for the foster child in public custody. States already unless the state is already in compliance with FFPSA. If the sending state does not have a process to follow such requirements in their state courts, it would make the child ineligible for placement as ND Courts will not review cases from other jurisdictions.*

**11. If a custodian misses the expiration date of the approval, how will that effect the facility?**

*The custodial case manager is responsible to track length of stay approval periods. The QRTP may assist the custodial case manager in tracking approval periods to ensure accuracy in meeting case plan timeframes. If a child remains in a QRTP after an approval period ends, the QRTP runs the risk of non-payment.*

**12. What if the child meets the maximum length of stay in a QRTP?**

*QRTP placement is closely regulated by federal law and by the age of the child. When a child is expected to be in a QRTP for more than 12 consecutive months, 18 non-consecutive months or 6 months for a foster child under age 13, the custodial case manager must submit an SFN 826, write a summary indicating the child's needs and barriers to achieving treatment goals requiring a longer stay in the facility, provide supporting documentation of progress and discharge plans and detail the requested/estimated amount of time required to completed treatment; this information must be submitted to [SRT@nd.gov](mailto:SRT@nd.gov). The QRTP Clinical Alignment Team will review extension requests and if appropriate gain approval from the NDDHS Executive Director.*

**13. Should the QRTP Assessment Reports be given to the regional office for FRAME approval?**

*Yes. It is the responsibility of the custodial case manager to ensure that the assessment report giving approval for the QRTP level of care has been sent to the regional office to ensure timely entries into FRAME.*

## **DENIALS**

**1. Will children be allowed to stay in a QRTP if not approved by the Qualified Individual?**

*No. If not approved by the Qualified Individual, federal Title IV-E funding cannot be used. NDDHS is not proceeding with state general fund as the payment resource, rather NDDHS is supporting the federal legislation to reduce congregate care encouraging least restrictive*

*placements, while maintaining children in out of home treatment for the least amount of time necessary to meet their needs.*

**2. Who at the state will be looking at the reconsideration requests?**

*Reconsiderations requests are sent to Ascend with any additional or new documentation. If further action is required, the custodial case manager shall be working simultaneously with their local child and family team and if needed the Regional Review Team. The Regional Review Team can request the case be sent to the State Review Team, if needed.*

**3. What happens if a child is denied QRTP placement and foster homes are unavailable?**

*The role of Ascend is to determine an approval or denial into a QRTP. If a lower level of care is recommended for the child, the custodian is responsible to seek placement for the child. Partnering within the region or statewide coalitions to locate a foster home may be warranted. Federal legislation specifically indicates that a QRTP cannot be utilized in the absence of family foster homes.*

**4. If a child is placed as an emergency QRTP placement and does not meet QRTP level of care; are those clients eligible for the aftercare programming for six months by the QRTP?**

*No. The federal regulation remains silent allowing states to further define. NDAC 75-03-40 states a child “admitted for treatment”, so if the Qualified Individual assessment is complete and the child is not eligible for further QRTP placement, NDDHS licensing rules do not require six-month aftercare program for the emergency placements not admitted for treatment at a QRTP.*

**5. What if the QRTP provider does not believe the child’s treatment is complete and the Qualified Individual has not extended the approval through the continued stay review (SFN 826) process?**

*NDDHS has granted the Ascend Qualified Individual the authority to make decisions as third-party verification regarding placement determination in the best interest of the child, while ensuring the least restrictive level of care. If the custodial case manager disagrees with the denial for continued placement, the case manager can submit a reconsideration request to Ascend with new or additional documentation supporting their rationale within 10 days of the denial.*

**6. Will in-state denials be necessary from all ND QRTP’s in order to place out of state?**

*Yes. North Dakota state policy must be followed; meaning before seeking out of state residential placement, in-state QRTP facilities must deny the child for admission. The Ascend QRTP process is only available in North Dakota and the 11 other states who have implemented FFPSA will have a different QRTP process. The current list of approved out of state facilities do not meet QRTP level of care at this time, however, remain eligible for placement as they are approved by the Title I-VE state plan. The list of approved facilities can be found on the CFS website.*

**7. What if the QRTP placement is denied and the Court does not agree with the Qualified Individual?**

*If a QRTP is denied, ND Juvenile Courts will not take further action unless further questions remain regarding the case. The Juvenile Court Director or designee has the authority to seek information from the custodial case manager before finalizing their decision. Any party can request a review hearing for the case to be heard. The Juvenile Court administrative process will accept the denial and place the assessment report on file.*

**8. What happens to a child that is currently in care and effective 10/01/19 is assessed and denied for QRTP level of care? What does the facility do in that case?**

*If a child who is placed in a QRTP is determined not to meet the QRTP level of care, the custodial case manager will need to locate alternate placement arrangements. The facility shall assist in*

*discharge planning to support in the transition as discharge planning is a required treatment activity that must begin upon placement.*

## **COURT PROCESS**

### **1. How will Ascend notify the Court?**

*Ascend will email the QRTP Assessment Report and completed SFN 824 to Tribal Court (if applicable). Ascend will e-file the Assessment Report and completed SFN 824 to the State Juvenile Court. E-Filing with ND State Courts, Ascend will:*

- a. Use the child's court file # provided on the SFN 824*
- b. Submit the SFN 824 Universal Application and QRTP Assessment Report; and*
- c. Must code/file it under "QRTP Assessment"*

### **2. How will the court know the child has been moved after a denial?**

*The case manager can notify the courts. In addition, the state Juvenile Court Directors are provided a weekly list of QRTP entries and exits, as well as receive notification when a placement change occurs in FRAME. Case managers are encouraged to update placement history in FRAME as soon as possible to ensure accuracy in location, timeliness in payments, etc.*

### **3. Does the court have the authority to place a child into QRTP level care if Ascend Qualified Individual determines a child does not qualify for that level of care?**

*If a QRTP is denied, ND Juvenile Courts will not take further action. However, any party can request a review hearing for the case to be heard. The Juvenile Court administrative process will accept the denial and place the QRTP Assessment Report on file.*

### **4. Will the court approval need to be the same day as placement?**

*No. The timing of placement is up to the case manager and other members of the youth's team. The case manager must submit the universal application and supporting information to Ascend if placement is the QRTP. Federal guidance allows up to 60 days for court approval; ND Juvenile Court has shorter timeframes and will be alerted when the Assessment Report is e-filed. At that time, the court will review and provide a letter indicating approval or denial.*

### **5. Court process was mentioned for approval, does the assessor testify in these proceedings or is it the case manager only?**

*If a denial from Ascend occurs and a party to the case requests a review hearing, it is possible the Ascend Qualified Individual could be subpoenaed to detail rationale as to why the QRTP denial occurred. The option to request a review hearing is available to any party to the case.*

### **6. Who is training the judges on FFPSA level of care regs/hearings that may be required?**

*ND Court Improvement Program (CIP) did invite Casey Family Programs to Grand Forks for initial training for judges. Children and Family Services is working with CIP to continue to educate judges, states attorneys and other court personnel. More training to come.*

### **7. What will the state Juvenile Court QRTP review look like?**

*The ND Juvenile Court administrative review process will require a Juvenile Court Director to complete and file a QRTP review document in the clerk of court file. There should not be any specific language of the FFPSA QRTP approval/denial process in the actual court order. The approval/denial document will be filed with the court and copies provided to relevant parties/counsel/lay GAL.*

**8. Due to FFPSA, do the court orders now require custodians to specify the QRTP level of care because of the court review?**

*No. The actual court order should continue to offer placement and care authority and flexibility to the custodial agency. Title IV-E federal foster care regulations prohibit specifying a provider in a court order. Case managers will want to ensure the affidavit offers flexibility regarding level of care to move the child when appropriate without going back to court for permission to place or discharge a child from a placement.*

*Court Order Eligible Example: “The court grants County/Human Service Zone the placement and care responsibility for the child. It is known to the court and the court agrees the child requires a temporary residential treatment placement until goals are met and the child can be transitioned to a lower level of care. When treatment goals are met, the agency has the authority to transition the child accordingly.”*

- *This language in a court order would be eligible for payment to the provider*

*Court Order Ineligible Example: “The court agrees the child requires a QRTP treatment placement at Home on the Range”*

- *This language in a court order would be ineligible for payment to the provider*

**9. Do the Courts need to review the actual CANS Assessment in order to provide the administrative court review?**

*No. FFPSA regulations state the courts shall “consider” the assessment, determination, and documentation made by the Qualified Individual conducting the assessment. Given the CANS assessment is coded by numbers and completed based on information obtained in interviews and child files, the actual assessment tool can be very confusing. However, the assessment report detailing the assessment findings will be greatly beneficial. If a professional is interested in learning more about the CANS tool “Standard\_CANS Comprehensive 2.0”, it is available for viewing online: <https://praedfoundation.org/general-manuals-cans/>*

**10. Can you clarify the difference between the QRTP decision vs the court order that gives custody and placement rights to the public agency?**

*NDCC 27-20 grants care, custody and control of a child to a public agency. The agency has the authority to seek placement options to best meet the needs of the child. The flexibility in court orders granting placement and care authority allows custodians to move a child quickly and efficiently from one provider to another without going back into a court hearing. The QRTP approval requirement by a Qualified Individual is a federal mandate (FFPSA PL 115-123) to restrict congregate/residential placements as ongoing options to children in foster care. The QRTP level of care was required by federal government as a short term intensive, trauma informed treatment option to support case planning and child needs. The two levels of authority are separate; custodial case managers can decide where a child is placed and if a QRTP is selected, then a Qualified Individual must determine if the child meets that level of care.*

## **QRTP BILLING**

**1. Are QRTPs still able to bill targeted case management (TCM)?**

*Yes. ND Medicaid has updated the policy related to billing Targeted Case Management (TCM). Policy: <https://www.nd.gov/dhs/services/medicalserv/medicaid/docs/targeted-case-management-child%20welfare.pdf>. FAQs are attached to the policy for your reference.*

A. **TRAINING:** *An online course entitled, “Medicaid Targeted Case Management: Child Welfare” (Code 24012) is available to state employees through PeopleSoft.*

B. *For nonstate employees who don’t have access to PeopleSoft, Here is the link to the TCM: <https://www.cnd.nd.gov/STLPCatalog/325/DHS-WIDE/MedicaidTCMB/story.html>*

*C. If you have additional questions, feel free to reach out to Krista Fremming at [krfremming@nd.gov](mailto:krfremming@nd.gov), DHS-Medical Services.*

- 2. Are all QRTPs IV-E funded only? I'm asking because if that is the case then only a small portion of my case load would be eligible as only 25% of my clients are Title IV-E. This will leave a large portion of my caseload non-billable if placed in a QRTP, correct?**

*No. The ND Title IV-E State Plan indicates that ND foster care rules and policy will follow federal Title IV-E regulations for all licensed providers, regardless of the eligibility determination of the child. If the child is IV-E eligible, great. However, a foster child who is determined EA eligible and paid for with EA funds is also allowed to be placed in a QRTP and follow the QRTP process with Ascend.*

- 3. During the Ascend on-site trainings in November there was discussion about funding and services available to children and families in the community; are they Family First prevention funds? How do we access them?**

*No. This funding is not from the Title IV-E prevention plan. Family First funding is not free flowing; the prevention plan has not been submitted/approved by the federal government and the prevention funding is isolated to very specific evidence-based service delivery (Healthy Families, substance abuse and mental health related well supported evidence based programming). The funding discussed in the context of Field Services and Behavioral Health services of the future; Dr. Etherington detailed future options NDDHS Divisions are working on to create a crisis response team and access to services and funding after January 2020.*

### **PRTF/ LEVEL OF CARE**

- 1. Is there any differences with the QRTP process and the Certificate of Need?**

*Yes. The Certificate of Need (CON) process and the QRTP approval are not linked at this time.*

- 2. Is there future plans where this process will be able to be used for PRTF placements as well? This seems like it could be a great opportunity to streamline the process along the full continuum.**

*Currently, the two level of care determinations and approval processes are separate. However, there is internal discussion about how or if the contracted vendor, Ascend, could assist North Dakota in streamlining the process and identifying efficiencies.*

- 3. A youth is placed in an out of state PRTF, in attempting to get the youth back to ND, PRTF's in state are not willing to look at the youth due to lateral transfers, what can I do?**

*Lateral transferences will be considered. Custodial case managers must contact Debbie Baier-Medical Services (701-328-4864) regarding case logistics.*

- 4. Can you explain if the PRTF's are moving upstream with QRTP as we review CANS assessment, Qualified Individual, continuum of care, etc.?**

*Children and Family Services, Behavioral Health Division, Field Services and Medical Services met to review the contracted vendor, Ascend. We could not make decisions in isolation; the full continuum of care for child welfare clients was reviewed and will continue to be discussed from the highest level of psychiatric hospital, to PRTF, QRTP, TFC treatment foster care, and to the lowest/least restrictive level of care; a family setting. NDDHS will continue to meet internally to review QRTP and PRTF placements. The full continuum is a topic of conversation and efforts to best meet the needs of children will continue.*

- 5. What if a PRTF is recommended? If Ascend is already making that decision, how will that impact the CON process; can we use the QRTP assessment for CON?**

*No. At this time, the traditional PRTF application process for CON approval will continue. However, if PRTF is recommended, a case manager must know a recommendation is not a formal approval but, the QRTP Assessment Report along with the CON required paperwork can be submitted.*

- 6. Why does Ascend keep recommending a PRTF? It is our understanding, if the case has not had two prior placements the child will not meet the CON at a PRTF.**

*Lateral transfers will be considered. We recommend you speak with Debbie Baier at Medical Services regarding case logistics.*

- 7. I have a youth who was recommended PRTF level of care through the Ascend process. The youth was referred to the PRTF's in ND however, they are stating that in order to be referred to the PRTF two less restrictive settings must be tried, is this accurate?**

*There is nothing in the ND Administrative Code that indicates this is true. PRTF level of care is based on medical necessity.*

### **VOLUNTARY TREATMENT PROGRAM (VTP)**

- 1. Do Voluntary Treatment Program clients qualify for QRTP placement?**

*Federal regulations do not prohibit "private pay" clients from entering a QRTP, however Title IV-E reimbursement is not allowable. The VTP policies and procedures need to be followed as required by the NDDHS - Behavioral Health Division. The QRTP assessment process must not begin without prior authorization of the NDDHS VTP program administration.*

- 2. In the cases of Voluntary Treatment Program, will the Partnership worker be the referral source seeking approval?**

*No. If the Partnership worker is actively involved in the voluntary placement of a child, it is reasonable to allow for the Partnership worker to assist the parent in completing the SFN 824 requirements. The parent is the custodian and shall complete the paperwork as required.*

### **OTHER QRTP RELEVANT TOPICS**

- 1. Will there be formal CFS foster care policy issued regarding ND QRTP process?**

*Yes. NDDHS was waiting to issue the formal policy in efforts to minimize policy amendments upon going live on October 1, 2019. It is reasonable to expect the policy will be issued by the end of December 1, 2019.*

- 2. Who will be seeking the placement when a child is no longer eligible for QRTP and the decision to be placed in a different level of care is warranted?**

*If a child does not meet the QRTP level of care; the public agency with custody or authorized agency case managing the child is responsible to identify and locate a placement. A North Dakota QRTP is not responsible to locate a new placement for the child, but shall assist with proper discharge planning to the new placement.*

- 3. Will there still be foster care Child and Family Team Meetings?**

*Yes. The foster care Child and Family Teams will continue to support the child and work together to ensure the most appropriate care and support for the child and their family. These meetings are required at least quarterly.*

- 4. Will there be a specific e-mail that all referrals are sent to and/or specific contacts for each region?**  
*No. Referrals must be faxed to 877-431-9568. To submit an application for review to Ascend, a custodial case manager will fax the information to the Ascend home office in Franklin, TN. Ascend will coordinate with the in-state Qualified Individuals to complete the interviews and assessment timely.*
- 5. A case manager is wanting to bring the child back to North Dakota from out of state facility, can Ascend complete the child assessment via Skype, FaceTime or telephone call?**  
*Yes. Very innovate “tele-med” or virtual options to consider.*
- 6. If the client does not agree with the recommendations forwarded by the Qualified Individual, can the client’s preferences be given priority, which would be consistent with adopting a client centered approach to care?**  
*No. The determination of appropriate level of care is not equivalent to the comfortability and desire of a child preference to remain in a QRTP. Residential settings are intended to be limited in nature for all children in foster care and encouraging congregate care settings when no longer required for treatment is not supported by the federal government or NDDHS.*
- 7. QRTPs were told that we would be trained on the CANS, is this still going to happen?**  
*Not at this time. The initial goal was to ensure clarity and understanding of as many professionals engaged in QRTP placements statewide. However, as QRTP implementation has begun it is clear NDDHS has to pilot the process and ensure the CANS is the accurate and appropriate tool. Training volumes of case managers, court and facility staff was not feasible prior to October 1, 2019. As the assessment and analysis of the QRTP continues and if formal training of the CANS assessment is determined necessary, NDDHS will consider expanding this resource beyond Ascend and the NDDHS clinical teams.*
- 8. Is FFPSA only done in North Dakota?**  
*No. North Dakota is one of the 11 states that has moved forward with QRTP status across the nation implementing FFPSA. Most states requested a waiver to delay implementation until 2021. The 11 states are Alaska, Arkansas, DC, Kansas, Kentucky, Maryland, Nebraska, North Dakota, Utah, Virginia and West Virginia.*
- 9. A youth has been in a TFC home for over a year, the youth has escalated, and mental health deteriorated. The youth had a placement disruption and no other TFC or family foster home placements were willing to accept. The youth was denied for a QRTP and recommended TFC, however no family foster homes are willing to accept the child for placement. Can I submit for a reconsideration to Ascend to speak with the youth’s prior foster parents to gain a better understanding of behaviors exhibited in the foster home?**  
*Yes. The custodial case manager shall ensure all individuals that should be interviewed for the assessment report are on the SFN 824. It is also the responsibility of the custodial case manager to inform the foster parents a Qualified Individual contracted by Ascend will be contacting them. This would be helpful for the Qualified Individual completing the assessment to better understand behaviors and mental health problems that they were unable to control in the home.*

**10. If a prior foster parent has been identified as a collateral source for QRTP level of care, will their need to be a release of information in place? PATH particularly states all releases of information are invalid after discharge.**

*The custodial case manager should inform the foster parents they are being used as a collateral source for a QRTP, a release of information can be used, if necessary, to obtain specific information about the child regardless of current placement.*

**11. As a provider who is accepting emergency placement of a child into a QRTP, can I fax the medical assessment, suicide assessment and behavior assessment directly to Ascend?**

*There is no opposition to the QRTP faxing assessments completed onsite directly to Ascend, however the custodial case manager should also have a copy of those documents.*

**12. Does a child who is being referred to a QRTP must have a mental health diagnosis?**

*A child who has been referred to the QRTP process and does not have mental health diagnosis, but who has been displaying symptoms or the presence of mental health diagnosis would be considered for referral to a QRTP. This could be due to child not having a diagnostic assessment completed at this time. The assessment completed by the Qualified Individual would also indicate the presence of condition a mental health diagnosis and the need for a full diagnostic assessment.*

**13. Specific treatment models such as the sex offender program which is approximately 12-18 months that are expected to exceed placement how will these programs be handled?**

*These treatment models will be looked at on a case by case basis, to ensure that continuation in a QRTP remains the appropriate level of care. Approvals that go past placement maximums must be submitted to through the State Review Team email and will be provided to the QRTP Clinical Alignment Team to determine if appropriate for the Executive Director of the North Department of Human Services to grant the extension.*

**14. I am a DJS worker and I have open case with the youth, but the youth is not in FRAME and they do not have a Foster Care FRAME number, what do I put on the 824?**

*DJS cases are handled a bit differently. Put N/A for the FRAME number until it is determined if the child qualifies of the treatment placement, which will open their FRAME case per foster care policy for a DJS client.*

**15. I referred a youth to a QRTP. The youth was denied due to only needing chemical dependency treatment; however, outpatient chemical dependency treatment has been tried before and was not successful. The youth was denied for the QRTP level of care and recommendation was made for outpatient treatment addiction services, there is no outpatient treatment in the area for this youth, is this a reconsideration request?**

*This is not an appropriate reconsideration request. If a youth is solely in need of outpatient addiction treatment and does not have other areas of need, a QRTP would not be appropriate for the child. It would be beneficial for the case manager to work with their agency along with the local resources to seek what can be put in place to assist in proper placement with access to outpatient resources to get the child to treatment.*

**16. When bringing children back from out of state; QRTPs are hesitant in taking children because there is no mental health infrastructure in North Dakota. There are no services to sustain these placements.**

*When QRTP's are hesitant to take children, we ask that you reach out to the department. NDDHS Senior Management continues to review and plan for services to be implemented to serve children*

*in the state of ND. There are mobile crisis units in every region in the state and will respond to every facility starting January 1,2020. More information to come.*