Rates Engagement & Contract Updates

Family Spirit

May 28, 2024

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Rate and Payment Methodology
Budget Development
Contract Impacts, Reporting Changes, and Invoicing
Next Steps

Objectives



Approach to Equity

- Are we ensuring that the rate process does not further marginalize communities of color and those whose first language is not English?
- Are we ensuring that BIPOC led/owned community agencies are not negatively impacted by the rate process? How will we know?
- Are we ensuring that rural communities and the agencies that serve them are not being disproportionately impacted by the rates process?

Anonymous Comment and Question Board

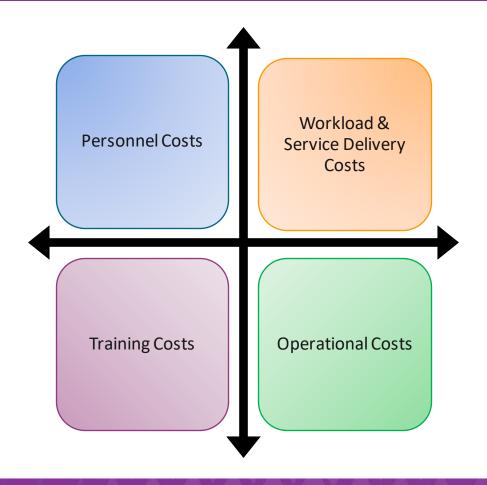
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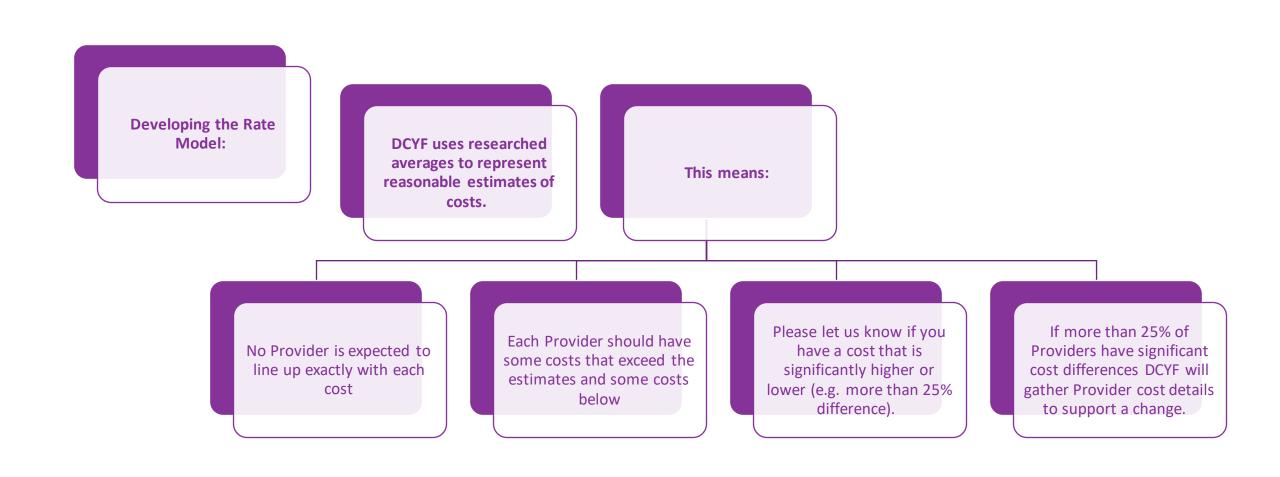


Rate = Personnel Costs + Workload & Service Delivery Costs + Operational Costs





Rate Model Context



Personnel Costs

Personnel Costs

Wages	Taxes	Benefits
Massachusetts Institute of Technology (MIT) Living Wage & Standard Occupational Code (SOC) Code	Federal	Health Insurance
Regionalized	Payroll	Personal Time Off
	Business and Occupational	Holidays
		Professional Development



Workload + Service Delivery

Workload

Model Fidelity Requirements

DCYF Requirements (non-model requirements)

Management
Training & Meetings

Caseload Ratios

Health Educator 1:14 families

Supervisor 1:5

Program Manager 1:20

PBC/CQI

Executive/Director

Administrative/data entry

Training Costs

Operational Costs

Operational Costs

Office & Utilities (Office phone, electric, internet)

Office Supplies

Insurance (property and liability)

Bookkeeping and Accounting

HR & Payroll

Staff Equipment (phones, laptops, etc.)

Cost of Trainings (external trainings)

Books, Toys and Cultural Materials

Recruitment Employment Ads

Recruitment Materials

General Operations

Operational Costs

Training Costs



Family Spirit Case Rate

Case Rate

\$11,241

VS

Family Spirit
Current Average Cost per
Family

\$8,035



Direct Billables

Direct Billables 19% of slot budget

Model Fees (affiliate fees)

Model Training & Certification Fees

Travel

Mileage for home visits

Travel costs for model training

Travel costs for HVSA meetings

Screening Tools

Data Systems Fees, as applicable

Budget-Based direct reimbursement with supporting documentation.

Payment Methodology

Current Payment Methodology

Cost Reimbursement

Detailed Annual Budget

Each month, Providers invoice and are paid allowable, allocable costs incurred in delivery of the services outlined in the contract.

Supporting documentation for each expense is submitted with the invoice

NEW Payment Methodology

HYBRID CASE RATE: Monthly Payme	Direct Billables	
Capacity	Service	Budget-Based
(35%) per slot	(65%) per slot	



Fiscal Year 25 LIA Contract Impacts

Payment Methodology Implementation Schedule

NEW

Month	Jul 24	Aug 24	Sept 24	Oct 24	Nov 24	Dec 24
Payment Basis	Slot Based + Direct Billables	Slot Based + Direct Billables	Slot Based + Direct Billables	Capacity + Service Delivery + Direct Billables	Capacity + Service Delivery + Direct Billables	Capacity + Service Delivery + Direct Billables

Contract/Budget Development

- DCYF developing modified PCQ and Budget worksheet to support contract
 - Funded slots
 - Staffing plan
 - Budget for Direct Billables
- New invoicing method aligned with rate implementation
 - July-September (Slot Rate)
 - October-June (Hybrid Case Rate)
- Updated reporting to align with rates billing

Contract/Budget Development

- 1. PCQ: Confirm caseload numbers, staffing and service area
- 2. Direct Billables Budget Worksheet supports LIA in determining the direct billables payments point(s) and establishes the budget cap
 - Model Fees and other associated model costs
 - Model Training Fees
 - Travel for home visits & model training
 - Screening tools
- 3. Incorporated into SOW and Budget

SFY25
Anticipated
Statement of
Work
Changes

Definitions

Reordering

Staffing

Assessments and Screening in Home Visits

Data submission to DOH for those not using Visit Tracker

CQI and Technical Assistance

Financial clarifications

Publicity Suggested Language

Reporting updates

Concrete Goods coming later in FY25

Updating Definitions – Active Engagement (Section 1)

Active Engagement = Active/Visited + Active/Encountered

- Tracking engagement monthly (no longer quarterly)
- Active engagement 2 separate components to be tracked <u>separately</u>
 - Visited Family = Received model defined home visit during the reporting month
 - Encountered Family = Received an encounter but no home visit during the reporting month

Re-Ordering Sections

Participants: Slots,
Service Area, Priority
Populations, Focus
Populations – Section 4

Outreach, Recruitment, Enrollment and Retention combined – Section 6

New Performance Award Section – Section 13

Staffing: Standardized Caseload – (Section 4)

- •Family Spirit 1.0 FTE Health Educators caseload = 14 families
- •Your FY25 Slots will be calculated using your currently funded FTE count (as presented in your FY24 PCQ, whether positions were vacant or filled)
 - •If your current funded caseload is above that standard caseload, on July 1, 2024, your contract slots will be reduced to align with the standard. Over time, you'll reduce family participation through attrition.
 - •If your current funded caseload is lower than the standard caseload, your contract slots will increase when your contract moves into rates, and over a realistic time frame you will ramp up the number of families served.



Model-Required Assessments
Perinatal Mental Health for Home Visitors
Data Custom Data

HVSA Orientations, Leadership Orientations

Home Visitor Readiness (Safety)

DV Assessment and Response, Safety Planning with Families

HVSA Required Screenings and Assessments

Data System, Data Requirements

CQI

HVSA Webinars and Meetings, including Biannual Training and Learning Supports Staffing: Required
Training/Meetings
- Specified
(Section 4)

All HVSA (at least one program lead; DCYF approval for more than 2 staff)

For those not in Visit Tracker: Monthly Data Submission (Section 9)

- Work with DOH to create the systems for monthly data sharing
- Beginning July 1, submit monthly data to DOH over MFT
- Impact
 - All LIAs will have the same schedule of data submission
 - More timely tracking of active engagement and aligned measures
 - Shorter turnaround times for data dashboards and other data products
 – dashboards will be more "current"

CQI (Section 10) and Technical Assistance (Section 11)

Alignment of CQI work with Technical Assistance Plan

- Level of CQI Coaching will Align with TA Coaching
- CQI to focus on family engagement if LIA is below 85%

Submit TA Plan developed with Start Early to DCYF with November Monthly Report

 Continue to report on progress on TA Plan in Quarterly Progress Reports

Assessments and Screening – Specified (Section 7)

- Depression Screening
- Well-Child Visits
- Parent Child Interaction
- Early Language and Literacy Activities
- Child Developmental
 Screening
- Intimate Partner Violence Screening
- Breastfeeding
- Seeking consent for data matching on interactions with Child Protective Services

Financial Clarifications (Section 12)

Track funding sources
uniquely within financial
systems; no comingling with
funding sources outside of
the HVSA (not new, just
clarified)

Federally recognized indirect rate increases to 15% on October 1, 2024.

Performance Award Section moved into new Section 13 (no changes)

Fair Wage: Agreement to pay, on average, the home visitor wage used to build the rate model (may need to phase in over time)

Financial/Rates(Section 12) - Monthly Invoicing

- Service Families Actively Engaged: by Active/Visited and Active/Encountered;
- Capacity (TBD)
- Direct Billables Payment with backup detailing expenses
 - Model Fees and other associated model costs
 - Model Training Fees
 - Travel for home visits, model training
 - Data system fee
 - Screening tools
- Performance Awards (no change)
- Backup
 - Service Verified with PSRS Monthly Enrollment Report Active/Visited + Active/Encountered Counts
 - Capacity TBD
 - Direct Billables detailed summary of expenses in these categories as produced by your fiscal system

Publicity/Acknowledgement of Funding (Section 13)

- Added suggested language to press releases, reports, publicity
 - All: This program is supported in part by funding from the Washington State Department of Children, Youth & Families.
 - TANF funded: This program is supported in part by funding from the Washington State Department of Children, Youth & Families and the Department of Social and Health Services.
 - MIECHV funded: This program is supported in part by funding from the Washington State Department of Children, Youth & Families through their HRSA MIECHV grant.

Reporting Changes (PSRS)

Monthly Reporting on Active Engagement (Active/Visited and Active/Encountered, separate)

Monthly details of Home Visitor and Supervisor Staffing (no longer quarterly)

Outreach Plan moved out of PCQ and into Q1 Report

Monthly specifics on community and systems engagement (no longer quarterly)

More streamlining of monthly and quarterly reports –sharing in July Office Hours

Fall Amendment Concrete Goods TBD

• Plan for Concrete Goods in the Fall (direct billable) - TBD



Invoicing

Next Steps

- Follow Ups
 - PCQ and Budget
 - Reporting Updates
 - Invoicing
 - Timeline

LIA Completes "Rates" PCQ/Budget

Confirm Funded Slots → Identify the maximum "draw

down" of funds for service rate

Confirm Service Area

Confirm Staffing Plan

Develop Direct Billables Budget

DCYF Develops Contract Statement of Work

DCYF Routes Contract for Approvals and LIA Signatures

DCYF Executes Contract



Reflections

- Reflections and Discussion
 - Overall reflections
 - What more information is needed to build understanding?
 - Can we set a next meeting date now?



THANK YOU!!

