

Juvenile Justice Substance Use Disorder Service Delivery System

Idaho Department of Juvenile Corrections

District Plan Guidelines

Overview:

The Idaho Department of Juvenile Corrections, in partnership with Idaho Counties, Tribes and the judiciary, is dedicating funds appropriated to IDJC to support the need for community-based, substance use disorder treatment for juveniles involved in the justice system. By passing these funds through to counties and tribes, administered locally through SUDS Committees, this project is intended to provide timely screening, as well as professional level assessment, community based treatment and recovery support services for juveniles.

Partnership with counties and tribes provides the best opportunity to identify and authorize appropriate levels of service for juveniles in the justice system that need SUD treatment and support. County and tribal juvenile justice personnel and managers are in the best position to prioritize the utilization of these very limited resources.

The Department utilizes a Managed Services Contractor, known as BPA Health, to maintain a network of skilled providers and standardized services available for referral and authorization throughout the state of Idaho.

With respect to juveniles involved in the county/IDJC SUD system, county/tribal probation officers, through their respective District Committees structures, will assume the responsibility of screening and determining service needs for clients. IDJC will be responsible for managing that system within the appropriation provided.

Additionally in this SUD system, all BPA Health network treatment providers are required to utilize an Electronic Health Record (EHR), called WITS, to enter treatment records and submit client claims. IDJC staff will process these claims payments internally in order to maximize efficiency and minimize administrative costs.

In order to participate and to assure that required standards are met, counties/tribes that wish to utilize SUDS funding must have a comprehensive plan for managing SUD services approved by IDJC. IDJC's acceptance of the plan submitted will constitute the terms of an agreement for planned use of the funds in that county/tribe. This district plan is intended to outline the district's use of funds, treatment needs, and specific regional structure of the team.

District SUDS Plan Guidelines:

The IDJC District Liaisons and SUDS Program Staff are available to assist the counties/tribes with development of a comprehensive SUD services plan. The following guidelines are established to provide structure and accountability for use of State General Fund dollars. All District Plans should contain the following:

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I. Maximizing Funds and Minimizing Service Gaps for Juveniles

A. District Plans for arranging and overseeing SUD treatment services for juveniles in the justice system must maximize the utilization of the appropriated funds for services and support for juveniles and their families.

B. The plan should specifically address the strategies used to accomplish this objective and any administrative costs must be fully described and justified. Administrative costs cannot duplicate services already covered by IDJC, BPA Health and treatment providers.

C. Counties/Tribes are encouraged to use BPA Health network providers when possible in order to reduce the administrative costs of billing and data collection. However, if counties/tribes can identify ways to use other qualified providers, these opportunities should be fully described in the plan submitted. Standard intake and authorization tools will be required to ensure payment is approved for these providers. Additionally, clinical oversight and quality assurance measures must be thoroughly described and approved in the plan.

D. Counties/Tribes should consult with the judiciary to make specific plans to manage access to services funded through this source so as to avoid widening the net to the point that appropriated funding cannot cover the costs of providing the planned services. This includes managing the costs of services associated with 20 - 520 (i) orders. The department cannot supplement funding of this project from other sources.

E. It is imperative that the District Committee established to oversee this project is empowered by the participating counties to make the hard decisions necessary about services available and about priorities for access to those services, including managing the lengths of stay within the various levels of service authorized.

II. Standards of Practice

A. IDJC encourages counties, and tribes to implement services that meet the needs of their individual communities, which includes being innovative with service delivery options. However, there are standards of best practice adopted by the Idaho Behavioral Health Cooperative (IBHC) agencies, as well as compliance with state statutes and rules that must be maintained. At minimum the plan submitted by the counties/tribes must assure that the following standards are met in all aspects of the proposed juvenile justice SUD service delivery system:

B. SUD screening and assessment of need to determine clinical eligibility for services and to build service plans must include use of the **GAIN assessment** and screening tools.

C. SUD treatment services at any level of care must be addressed within the context of a **comprehensive treatment plan** which at the least identifies and provides for necessary recovery support services.

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D. SUD residential and non-residential treatment services must be delivered by providers verified as qualified by meeting established **IDHW licensing and certification** rules.

E. BPA Health network providers should be used if possible but in no case may the **cost of services** provided by a qualified provider not a part of the BPA Health network exceed the costs established in the **IDJC rate matrix**. Lower costs may not be achieved by lowering the quality or frequency of the service.

F. Providers employed by or contracted with the county/tribe or providers utilized outside of the BPA Health network to provide SUD services may be paid directly if this arrangement was included and approved in the plan submitted to IDJC and, in this case, intake and authorization tools shall be transmitted directly to IDJC for data collection purposes. **Additional data collection elements** may be required for oversight and management of the services provided to juveniles with state funding dollars.

G. The District Plan submitted by the counties/tribes must plan to provide services within the **established levels of care**.

H. If the counties/districts choose to provide services outside of the BPA Health provider network, those services must include only those practices recognized as **evidence based or best practice**.

I. If the counties/tribes choose to provide services outside of the BPA Health provider network the plan must include strategies to establish and verify that the provider meets all necessary qualifications and must include plans to monitor the provider's performance. Provider performance reports similar in scope to those provided by BPA Health must be available.

1. Allowable Costs and Activities:

a) *Allowable costs must clearly relate to one or more of the Levels of Care outlined above or must constitute a service necessary to support recovery from SUD, such as transportation.*

2. **Unallowable Costs include:**

a) *Costs for prevention and other services not directly related to the client's substance use disorder are not covered under this funding stream.*

• *Examples:*

- Clothing and other Personal items including hygiene supplies
- Vehicle or equipment purchase
- Food and beverages
- School supplies
- Medications

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J. The District Committee must have an approved District Plan prior to payment for services being paid. The plan should be updated as frequently as changes occur, but at the least, updated every 3 years.

III. Sections Required in District Plans

A. The plan submitted by the counties/tribes must specifically address how each of the following will be managed for the district:

1. District Accountability and Oversight Committee

a) Please describe the District Committee structure and operations. This should include information on the following:

- (1) Members
- (2) Authority
- (3) Decision-making Protocol
- (4) Meeting Schedule
- (5) Problem-solving Protocol

2. Operational Protocols for SUDS Funding Utilization:

a) Please describe how the district will operate and authorize the funding:

- (1) Process for consistently identifying juveniles who need services/initial screening
 - (a) Risk Assessment Tools used*
- (2) Identifying funding sources for services (Medicaid, JJ SUDS, private insurance)
- (3) Required Forms
 - (a) JJ SUDS Authorization Form*
 - (b) JJ SUDS Release of Information*
 - (c) Other district forms*
- (4) Service Provider Network: specify any non-BPA Health Network Providers
- (5) Rates for Services
- (6) Services Authorization and Approval Process
- (7) Service Planning and Continuous Case Management
- (8) Payment for Services

3. District SUDS Committee Approval

- a) Verification/certification statement*
- (1) Signature of authorizing party
 - (2) Date of revision/submission

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