									_		
		V	ORIGINAL		UPDA	TED				n. Rule No. ency rule	
	CAL ESTIMATE -2048 N		CORRECTED		SUPF	PLEMENTAL		Amendmer	nt No. if	Applicable	
_											
Subject											
Qualified residential treatment programs											
Fiscal Effect											
State: 🗆 No State Government costs 🛛 🗹 Indeterminate											
	Check columns below only if bill makes a direct appropriation						Increase Costs - May be possible to Absorb				
or affects a sum sufficient appropriation.							Within Agency's Budget 🗹 Yes 🛛 No				
□ Increase Existing Appropriation			☑ Increase Existing	☑ Increase Existing Revenues							
Decrease Existing Appropriation			□ Decrease Existing Revenues			s	□ Decrease Costs				
	Create New Appropriation			-							
	Local: I No local government costs		Indetermination	ate							
1.	□ Increase Costs		3. Increase Revenues			5. Types	Types of Local Governmental Units Affected:				
	Permissive Mandatory		Permissive		🗆 Man	datory	□Towns	🗆 Villa	ges	□ Cities	
2.	Decrease Costs		4. Decrease Revenues		□ Counties	nties 🛛 Others					
	□ Permissive □ Mandatory		Permissive		🗆 Man	datory	School Di	stricts	D WT	CS Districts	
Fund Sources Affected					Affected Ch. 20 Appropriations						
□ GPR □ FED □ PRO □PRS □ SEG □ SEG-S						-					

2021 Session

Assumptions Used in Arriving at Fiscal Estimate

DCF Chapter 61 allows DCF to certify a residential care center, group home, or shelter care facility to operate a qualified residential treatment program for children and youth (QRTP) if it determines that the facility meets federal QRTP requirements (42 USC 672 (k) (4)). There are costs associated with establishing certification, licensing, and monitoring QRTPs that can be absorbed with current staff and budget. Once established, the Department may claim additional federal reimbursement for these placements.

Federal Claiming Reimbursment

Effective September 29, 2021, federal reimbursement for the care and maintenance of a child placed in a residential care center for children and youth, group home, or shelter care facility, will only be applied for the first 2 weeks in care, unless the child is placed in a qualified residential treatment program or other federally-authorized treatment program. DCF claimed \$8.2 million in FFY 2019 and \$8.3M in FFY 2020 for Title IV-E congregate care placements. Absent these rules in place, DCF would receive significantly reduced title IV-E reimbursement on these claims. Projected claiming reimbursement totals under these rules are indeterminate due to a number of factors, including the number of QRTPs certified and number of placements across different settings.

Certification Costs

The Department anticipates that it will be able to absorb the costs to certify (DCF 61.04), review (DCF 61.05), and monitor compliance of (DCF 61.06-61.09) QRTPs using existing budget and staff. These rules are required under federal law. In turn, DCF will receive increased federal reimbursement on claims for children and youth placed in these settings (under 42 USC 672 (k) (1) and (2)).

Further, DCF 61.03 (2) requires that certified QRTPs have a registered nurse or licensed practical nurse staff and other clinical staff who meet a number of conditions. The Department has established a centralized nursing service contract to meet these required conditions using existing federal funds and GPR for SFY22 and SFY23. QRTPs certified by the Department under this chapter are able to use this nursing service to satisfy this requirement.

Long-Range Fiscal Implications

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