

IN-STATE PROVIDER / FACILITY – RATE LIST
State Fiscal Year 2016
Effective 7/1/2015
THERAPEUTIC FOSTER CARE ASSESSMENT
PERMANENCY AND RESPITE

The Assessment for Youth Needs service will be (30 days per service; total rate =68.88)	PFTHR Room, Board, Supervision Level 1 PTXL2 Treatment Level 2	39.83 29.05
The Assessment for Permanency service will be (30 days per service; total rate =63.96)	PTAL1 Room, Board, Supervision Level 1 PTXL2 Treatment Level 2	34.91 29.05
The Permanency service will be The Respite Service will be	PTAL1 Room, Board, Supervision Level 1 SRETF	34.91 31.18

These three services are used independently of the standard therapeutic foster care services, i.e., therapeutic foster care room, board and supervision level 2 (PFTHR) and therapeutic foster care treatment level 2 (PFTL2) for non-Medicaid placements or therapeutic foster care room, board and supervision level 1 (PFTB1) for Medicaid-approved treatment.

The **Assessment of Youth Needs** is used for youth entering the therapeutic services for the first time. This is when the needs of the child must be evaluated. The assessment level is not automatic but is a legitimate service when the placing worker and contractor agree that information needs to be gathered and the child be observed in order to make appropriate treatment decisions. The assessment service is to be authorized only in increments of 30 days. If a client is at this level, respite (SREPTF) is approved according to the therapeutic respite guidelines.

The **Assessment of Permanency** service is the step-down service. This is a transition from standard therapeutic foster care to a lesser level of therapeutic foster care (less supervision by professional staff). The Assessment of Permanency is typically for 30 days while a “Permanency Plan” is put into place with the foster family. After 30 days, the PTXL2 payment ends, and the **Permanency** service begins using only the PTAL1 code. This permanency level is NOT the Medicaid reimbursed permanency level TFC.

The **therapeutic respite** service is entered and approved on CAPS only in the event that respite care is not authorized by Medicaid as a service necessary to support the mental health treatment of the youth, or in the event a youth is otherwise ineligible for Medicaid reimbursed mental health services. SRETF is to be used in conjunction with the assessment or permanency services. The standard therapeutic foster care services PFTHR, PFTL2 or PFTB1 have respite built into the contract and daily rates. We should not use SRETF when either of the standard therapeutic services are in effect.