

Aftercare

Aftercare services must be provided for each child who received residential services contracted by MDHHS. Aftercare services must continue for a duration of six months post discharge and must be provided to children who are discharged into a community setting. Aftercare services are not required to be provided if the child received residential services for 14 days or less, or if the independent initial assessment determines that the child should be serviced in the community and that child is discharged from residential services care within 30 days of entry.



Note

Community setting does not include adult foster care, shelter, hospital, detention, jail, or discharge to another CCI.

Service Levels

Level 1:

The child has services being provided by Community Mental Health (CMH), a Prepaid Inpatient Health Plan (PIHP), or other services approved by the MDHHS foster care or juvenile justice program office.

- Assess the child and family for any needs that are not being covered through community-based services and coordinating with the primary caseworker/agency to ensure the appropriate referrals are made.
- Participate in CMH wraparound services meetings or other treatment team meetings, if appropriate. Maintain regular, minimum of monthly, contact with the CMH or other service provider for updates on the child.
- Ensure initial contact with the child/family is completed within five business days of discharge from the facility.
 - Two contacts must be made within the first 30 days post discharge.
 - One contact per month must be made for the remaining months

Level 2:

The child does not have services provided by CMH, another plan or service approved by MDHHS foster care or juvenile justice program office.

- Assess the child and family for any needs that are not being covered through community-based services and coordinating with the primary caseworker/agency to ensure the appropriate referrals are made.
- Provide crisis on-call services.
- Provide therapeutic/psychiatric services as identified by the child's treatment plan. Telehealth may be used for this service.
- Offer activities, classes, or other programs for the child and the family to participate in.

Job Aid: Residential Aftercare Requirements

- Assess the need for CMH or other community-based services and assist with facilitating services.
- Ensure initial face to face contact with the child/family is made within five business days of discharge from the facility.
 - Face to face contact must be made weekly for the first 30 days post discharge.
 - Face to face contact must be made twice a month for the second month post discharge.
 - Face to face contact must be made monthly for the remaining months.
 - Face to face contacts may be made by the FTC or therapist.

Aftercare Reports

The residential provider must complete MDHHS-5931, Residential Aftercare Report, at 30, 90 and 180 days after a child's discharge from the facility. All reports must include any clinical assessments and treatment goals. The reports are due to the primary caseworker/agency no more than 15 days after completion. Case contacts must be entered into MiSACWIS within 5 days of completion.

Click the following link to access the Residential Aftercare Report under the Residential Care and Residential Care-Juvenile Justice headings: [MDHHS-5931 Residential Aftercare Report](#)

Billing

The residential provider shall be paid for Aftercare services provided as specified in the RFCAN or JJ contract.

The residential provider must submit an invoice monthly to the child's primary caseworker/agency. The invoice must be on agency letterhead and contain the following:

- Child's first and last name.
- Child's MiSACWIS person ID (PID).
- Dates that the aftercare services were provided.
- Level of aftercare provided.

If aftercare levels change during a billing period, the dates for the specific levels must be clearly indicated.

Radius and subcontracting

For families living outside a 90-mile radius from the facility, the residential provider may subcontract or partner with another agency who is in the family's community. If the family is outside of the 90-mile radius and services are subcontracted, the subcontractor is responsible for completing the MDHHS-5931, Residential Aftercare Report and completing required contacts. The subcontractor may complete the case contacts in MiSACWIS or on the MDHHS-5931. That is to be agreed upon between the provider and the subcontractor. If the subcontractor will be entering contacts in MiSACWIS, they need to submit a DSA request for access under the organization they are subcontracting with and need to be assigned to the case in MiSACWIS. The subcontractor needs to complete a DIT-0928, Contractor Security Agreement. The completed form must be emailed to MDHHS_Application_Security@michigan.gov, after the user has entered their request for

Job Aid: Residential Aftercare Requirements

MiSACWIS access in DSA. In the email to application security, they need to specify they are sending the 928 and provide in the email their name (first and last) as well as the DSA request ID #.

The residential provider is responsible for ensuring the required services are being provided and the aftercare residential report and case contacts are completed. If the subcontractor is not entering case contacts in MiSACWIS, it is the responsibility of the residential provider to enter them in the system.

Out of State

Aftercare is not required for children who are discharged to a community placement out of state or move to a community placement out of state during the six-month aftercare period. Services or activities to ensure a smooth transition are encouraged and providers can bill for the associated aftercare level while providing those services.