

# Family First Prevention Services Act (FFPSA)

## Fact Sheet

- 1. Services are available to a candidate for foster care, who is defined as a child identified in a prevention plan as being at imminent risk of entering foster care, and their parents and kin caregivers. Additionally, pregnant and parenting foster youth are also eligible for services.**
- 2. Services must meet general practice requirements, and be rated as a promising, supported, or well-supported practice. Services must be provided under a treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma and in accordance with recognized principles of a trauma-informed approach and trauma-specific interventions to address trauma's consequences and facilitate healing (section 471(e)(4)(B) of the Act).**
- 3. Initial list of programs/services will be provided and modified on a rolling basis and must fall under the categories:**
  - Mental Health Services
  - Substance Abuse Prevention & Treatment Services
  - In-Home Parent Skill-Based Programs
- 4. There are 12 services/programs under evaluation with the Federal Prevention Clearinghouse.**
  - Mental Health Services**  
Parent-Child Interaction Therapy and Trauma Focused-Cognitive Behavioral Therapy, Multisystemic Therapy, and Functional Family Therapy.
  - Substance Abuse Treatment & Prevention Services**  
Families Facing the Future, Motivational Interviewing, Multisystemic Therapy, and Methadone Maintenance Therapy.
  - In-Home Parent Skill-Based Programs**  
Nurse-Family Partnership, Healthy Families America, and Parents as Teachers.
- 5. The state may provide services to or on behalf of a child for a 12-month period beginning on the date the child is identified in a prevention plan as a candidate for foster care or a pregnant and parenting foster youth in need of services. The services can be offered for additional and contiguous 12-month periods with a redetermination and documentation in the prevention plan that the child or youth continues to meet the requirements to receive services.**
- 6. The prevention plan for candidates must: identify the foster care prevention strategy for the child so that the child may remain safely at home, live temporarily with a kin caregiver until reunification can be safely achieved, or live permanently with a kin caregiver; specify in advance the services or programs to be provided to or on behalf of the child to ensure the success of that prevention strategy; and comply with other requirements HHS establishes (section 471(e)(4)(A)(i) of the Act).**
- 7. For pregnant/parenting foster youth, the prevention plan must be included in the child's case plan; specify in advance the services or programs to be provided to or on behalf of the youth to ensure that the youth is prepared (in the case of a pregnant foster youth) or able (in the case of a parenting foster youth) to be a parent; describe the foster care prevention strategy for any child born to the youth; and comply with other requirements that HHS establishes (section 471(e)(4)(A)(ii) of the Act).**
- 8. For Tribes with IV-E agreements, the state may submit a 5-year plan identifying services for this population; Tribes must meet all requirements applicable to the IV-E program.**

## Family First Prevention Services Act (FFPSA) of 2018

### Summary of Provisions

FFPSA was passed as part of the Bipartisan Budget Act of 2018 (P.L. 115-123). The law includes new preventive service options and requirements for foster care placement settings. It amends existing provisions within Title IV-B and IV-E of the Social Security Act, as well as reauthorizes several existing programs through 2021.

**Part I, Prevention Activities**, is comprised of three optional provisions to states and tribes to potentially expand the types of prevention services offered and able to be claimed through Title IV-E. Beginning October 1, 2019, the first provision allows states to offer prevention services including evidence-based, trauma-informed mental health, substance use, and in-home parenting services for up to a 12-month period and at 50% Federal Financial Participation (FFP) to eligible candidates including children, parents, relatives, and parenting or pregnant youth. Part I also provides 50% FFP for Kinship Navigator services, which must also be evidence-based and trauma-informed. Both sections require the services provided to meet certain evidence-based criterion and evaluations determined by the U.S. Department of Health and Human Services (HHS). Lastly, Part I provides states with the option to develop and claim IV-E for youth placed with parents in residential family-based substance abuse (SA) treatment facilities for up to a 12-month period.

**Part II, Enhanced Support under IV-B**, is comprised of two sections aimed to expand existing programs authorized under Promoting Safe and Stable Families (PSSF). The first section eliminates time limits for family reunification services for a child removed from a home and also allows for services to be provided once a child returns home for up to 15 months. The second also requires entities, typically non-profit providers and universities, opting into the Regional Partnership Grants (RGPs) aimed to reduce substance use in families, to partner with state child welfare agencies and state agencies administering the Substance Abuse and Treatment Block Grants, or with the Juvenile Court or Administrative Office of the Court when appropriate.

The remaining section requires the use of the national electronic case transfer system, also known as the National Electronic Interstate Compact Enterprise (NEICE), when placing children across state lines required by the Interstate Compact for the Placement of Children by Federal Fiscal Year (FFY) 2027. In California, most counties are already participating at this time.

**Part III, Miscellaneous**, entails several provisions including one that changes the name and purpose of Title IV-E to explicitly reference the new optional prevention services provisions. This Part also provides HHS the authority to develop new licensing standards for relative foster family homes by October 1, 2018, of which states have until

April 1, 2019 to comply. This section also provides for additions to the Statewide Plan to Prevent Child Abuse and Neglect Fatalities by incorporating steps taken to compile information regarding fatalities and toward development of a comprehensive statewide plan.

**Part IV, Ensuring the Necessity of Placement that is Not in a Foster Family Home,** includes new provisions aimed to reduce the utilization of congregate care through defining new non-foster family home placement settings and providing for new payment limitations beyond the newly specified settings in most circumstances. New licensing and accreditation requirements, as well assessment and documentation requirements, are included for a qualified residential treatment program, one of these specified settings. Additional provisions expand the utilization of criminal and child abuse and neglect checks to all adults working within child care institutions. Part IV also provides for assurances by states to develop protocols to prevent inappropriate diagnoses and also requires the Secretary to report on youth placed in settings that are not FFHs.

**Part V, Continuing Support for Child and Family Services,** amends the purpose of Promoting Safe and Stable Families (PSSF) to include supporting and retaining foster families as a primary goal. It also authorizes grants up to \$8 million dollars over a five period for states to utilize to meet this purpose. Through Part V, several existing Title IV programs were reauthorized through FFY 20201 at existing spending levels, including This section also reauthorizes several Title IV provisions within Stephanie Tubbs Jones Child Welfare Services Program (IV-B, subpart 1), PSSF (IV-B, subpart 2), Discretionary Grants, Monthly Caseworker Visits and RGPs, and the Court Improvement Program. Finally, this Part renames the John H. Chafee Foster Care (Chafee) Independence Program to the Chafee Program for Successful Transition to Adulthood. Chafee is also repurposed to optionally expand services to youth ages 14-23. Additionally, the Education Training Vouchers are able to be provided to youth up to age 26.

**Part VII, Technical Corrections,** authorizes HHS to develop data exchange standards over the next two years for child welfare automated systems. Part VII also amends the IV-B state plan to include steps taken to address the developmental needs of all vulnerable children under age 5.

**Part VIII, Ensuring States Reinvest Savings Resulting from Increase to Adoption Assistance,** provides for the delay in the de-link of AFDC eligibility for adoption assistance payments to children ages zero to age 2. The provision also provides for states to report on how they reinvest the savings accrued from the de-link to the GAO.