

HEALTHY FAMILIES OREGON

414-525-0005

Authority

These rules are promulgated pursuant to ORS 417.705 through 417.797.

Stat. Auth.: ORS 417.705 - 417.797

Stats. Implemented:

Hist.: OCCF 1-2002, f. & cert. ef. 1-14-02; OCCF 2-2007, f. & cert. ef. 2-16-07 thru 8-15-07

414-525-0010

Purpose

The purpose of these rules is to assist counties in the implementation and operation of Healthy Families Oregon program services. The Healthy Families Oregon program seeks to ensure healthy, thriving children and strong, nurturing families by offering a range of voluntary and non-stigmatizing services ranging from universal basic short-term services to long-term intensive home visiting for high risk families. Healthy Families Oregon initiates these services prenatally and at the time of birth, targeting high risk families. Healthy Families Oregon services are offered until the child's third birthday and as needed during a transition period following the birthday to assure connection to other school readiness services for the family. Services follow evidence-based practices designed to achieve appropriate early childhood benchmarks, following the Healthy Families America model. These rules are the minimum standards for the establishment, operations, evaluation, and funding of Healthy Families Oregon program services under ORS 417.795.

Stat. Auth.: ORS 417.705 - 417.797

Stats. Implemented: ORS 417.705 - 417.797

Hist.: OCCF 1-2002, f. & cert. ef. 1-14-02; OCCF 1-2004, f. & cert. ef. 9-15-04; OCCF 2-2007, f. & cert. ef. 2-16-07 thru 8-15-07

414-525-0015

Program Restrictions

(1) Systems Requirements:

(a) Healthy Families Oregon services will be offered in a manner consistent with the local early childhood system planning.

(b) Healthy Families Oregon programs will collaborate with local home visiting partners within the context of the statewide home visiting system as a part of the voluntary local early childhood system, to identify and build upon existing services for families and to prioritize additional services if needed, (e.g. mental health, drug and alcohol, and early intervention). If collaboration does not effectively occur, the Department of Human Services and the Agency will provide technical assistance to promote improved collaboration.

(c) Healthy Families Oregon programs actively participate in local community efforts to implement the early childhood system of supports and services towards the achievement of desired outcomes, working to maximize the effective use of available resources and avoid duplication of services.

(d) Local contracted agencies are not required to engage in a competitive bidding process, unless required by local policy, to select program providers for Healthy Families Oregon services each biennium. Local contracting agencies may conduct a competitive or collaborative funding process when significant deficits in program operations and services are found or when changes in the stability of service delivery systems present new options for these services.

(2) Age: Children ages prenatal through three and their families.

(3) Services: Funded service include: voluntary family support services, including but not limited to screening and follow-up services such as resource referral, further assessment, and intensive home visiting provided by highly trained home visitors organized in teams and supervised by a program manager and supervisor following the Healthy Families America model.

(4) Program Requirements:

(a) New Healthy Families Oregon Programs will make progress toward full compliance with ORS 417.795 as operationalized by the Healthy Families Oregon Implementation Manual: Statewide Program Policies and Procedures. All Healthy Families Oregon programs are required to be in full compliance within one year of program start up.

NOTE: Copies of the Healthy Families America model best practice standards and of the Healthy Families Oregon Program Policy and Procedure Manual are available from the Agency.

(b) Programs will develop site specific procedure manuals to further specify local program operations. Local procedure manuals will be submitted to the Agency at intervals specified by the Agency.

(c) Participation in services provided by the Healthy Families Oregon program is voluntary. Service providers will obtain express written consent before any services are offered.

(d) Local Healthy Families Oregon programs will ensure that parents have given express written consent prior to any release of information.

(e) Healthy Families Oregon program services will not be a part of a mandated plan for families. Mandated plans include plans developed by the Department of Human Services Self Sufficiency and Child Welfare services.

(f) Local Healthy Families Oregon Programs will:

(A) Participate in the independent statewide program evaluation;

(B) Participate in statewide training for program managers, supervisors home visitors and screening staff;

(C) Participate in annual meetings and trainings for program managers ;

(D) Meet statewide and local early childhood system quality assurance standards;

(E) Participate in the Healthy Families America site self-assessment, as part of ongoing quality assurance;

(F) Ensure that voluntary home visiting services through Healthy Families Oregon are coordinated with home visiting services offered by the voluntary local early childhood system.

(5) Program Budget Requirements:

(a) All programs are required to participate in federal Medicaid (Title XIX) Administrative Claiming, following program procedures provided by the Agency.

(A) Medicaid earnings, except as described in 423-010-0023(3), must be used to maintain or expand Healthy Families Oregon program core services, as defined in the Healthy Families Oregon Program Policy and Procedure Manual.

(B) Programs will report on the use of their Medicaid (Title XIX) funds to the Agency at intervals specified by the Agency.

- (C) All program staff will attend training provided by the Agency prior to participation in Medicaid (Title XIX) Administrative Claiming and annually thereafter.
- (b) Local programs will demonstrate a 25 percent local match with at least 5% being cash or cash equivalent as part of the base operating budget of their programs. Match will be reported to the Agency at the intervals specified by the Agency. This leverage may be in any combination of cash, cash equivalent, in-kind or volunteer hours.
- (c) The local contracting agency will monitor the local Healthy Families Oregon programs to ensure fiscal and programmatic integrity.
- (d) If, for any reason, a current provider stops providing contracted services prior to the end of the contract, the local contracting agency will notify the Agency 45 days prior to signing a new provider contract so that the Agency can provide program specific training and technical assistance. The local contracting agency and the Agency may mutually agree to a notice period of less than 45 days if necessitated by specific local circumstances.
- (e) The Agency will manage the Title XIX Medicaid Administrative Claiming program in accordance with all state and federal rules and regulations.
- [Publications: Publications referenced are available from the agency.]

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Hist.: OCCF 1-2002, f. & cert. ef. 1-14-02; OCCF 1-2004, f. & cert. ef. 9-15-04; OCCF 2-2007(Temp), f. & cert. ef. 2-16-07 thru 8-15-07; Administrative correction 7-9-08