Critical Financing Strategies with System-Level Outcomes, Indicators, Data Sources, and Data Analysis Plan

I. Realignment of Funding Streams and Structures

1. Identify Types and Amounts of Behavioral Health Funding Across Systems

Financing Strategy	Outcomes	Indicators	Data Sources	Data Analysis Plan
Financing strategies to identify the types and amounts of behavioral health funding expended for children with behavioral health disorders and their families across major child-serving systems	State, tribal, and local policy makers know the types and amount of dollars that are being spent and what could potentially be spent for children's behavioral health services across child-serving systems and use this knowledge in planning and coordination of behavioral health services	 Cross-system analyses of behavioral health expenditures for children and potential untapped sources of behavioral health funding Data systems to track expenditures for children's behavioral health services Interagency mechanisms to analyze children's behavioral health expenditures across systems State, tribal, and local stakeholders are informed about children's behavioral health expenditures use information on cross-system behavioral health funding for planning and coordination purposes 	 Reports from analyses of cross-system children's behavioral health expenditures at state, tribal, and local levels Interviews with interagency entities or representatives of major child-serving systems at state, tribal, and local levels Budget and appropriations documents Quality management plan and reports Interviews with policy makers and budget office representatives at state, tribal, and local levels Interviews with advocates at state, tribal, and local levels 	Triangulation of findings to analyze how and the extent to which state, tribal, and local policy makers have and use information about the types and amounts of behavioral health dollars spent for children and adolescents across the major child-serving systems

2. Utilize Diverse Funding Streams

Financing Strategy	Outcomes	Indicators	Data Sources	Data Analysis Plan
Financing mechanisms utilize diverse funding streams from across the major child-serving systems, as well as nongovernmental sources, to support a broad array of behavioral health services and supports for children with behavioral health disorders and their families	Diverse funding sources are used to finance a broad array of children's behavioral health services and supports	 Pooled, blended, or braided funding mechanisms for children's behavioral health services across child-serving systems Evidence of financing mechanisms that utilize funding from multiple agencies and sources to finance behavioral health services and supports for children and their families Other systems (e.g., child welfare, juvenile justice, education, etc.) contribute resources (staff and/or financing) to enable them to participate in individualized service planning and delivery 	 Statutes, policy and budget documents regarding pooled, blended, or braided funding for children's behavioral health services at state, tribal, and local levels Memos of understanding (MOUs) regarding interagency financing of children's behavioral health services at state, tribal, and local levels Quality management plan and reports Interviews with policy makers, budget office representatives, and representatives from childserving agencies at state, tribal, and local levels Sample of service plans and determination with care managers or billing department how the various services and supports are paid for 	Triangulation of findings to analyze how and the extent to which diverse funding sources are utilized to support a broad array of children's behavioral health services and supports

	Financing Strategy	Outcomes	Indicators	Data Sources	Data Analysis Plan
	Financing mechanisms to maximize the flexibility of state, tribal, and/or local funding streams and budget structures in order to use funding more flexibly to finance a broad array of children's behavioral health services and supports	Funding streams and budget structures are used flexibly to finance a broad array of children's behavioral health services and supports	 Pooled, blended, or braided funding mechanisms for children's behavioral health services across child-serving systems Ability to move dollars across budget categories (redirect funds) Ability to move dollars across fiscal years Local control of how dollars can be used to finance children's behavioral health services and supports Ability to move dollars across child-serving systems to finance behavioral health services and supports for children and their families 	 Policies, protocols, and reports regarding moving dollars across budget categories and fiscal years and across child-serving systems at state, tribal, and local levels Quality management plan and reports Interviews with administrators, budget personnel and providers from major child-serving systems at state, tribal, and local levels 	Triangulation of findings to analyze how and the extent to which funding streams and budget structures are used flexibly to finance a broad array of children's behavioral health services and supports
4.	Coordinate Cross-S	<u> </u>		P (A	
	Financing Strategy Financing mechanisms to	Outcomes Funding is coordinated across	Indicators Policies and protocols regarding cost shifting at	Data Sources Policies, reports, and protocols regarding	Data Analysis Plan Triangulation of findings to
	coordinate funding across major child serving systems at state, tribal, and local levels and to ensure coordinated service delivery to youth with co-occurring disorders and other multi-system involved populations	major child-serving systems resulting in reduced fragmentation, duplication, gaps, inefficiencies, and cost shifting Funding is coordinated to ensure more appropriate and integrated service delivery for youth with co-occurring disorders and other multi- system involved populations	 state, tribal, or local level Mechanisms to monitor cost shifting Coordinated, blended, pooled, or braided funding for children's behavioral health services and supports Purchasing collaboratives across agencies to procure services and supports Similar contracting mechanisms with providers across child-serving agencies Similar rate structures for services across child- serving systems Interagency entities at state, tribal, or local levels that address coordination of funding for children's behavioral health services Interagency expenditure plan for children's behavioral health services and supports Single plan of care for children involved with multiple child-serving systems Cross-agency plans and protocols for serving youth with co-occurring disorders and other multi-system involvement Funding for cross-agency training Funding for cross-agency assessment and service planning 	 coordination of funding for children's behavioral health services across systems at state, tribal, and local levels Rate setting, purchasing, and contracting policies, protocols, and reports relevant to cross-system coordination at state tribal, and local levels Contracts with MCOs and providers Memoranda of understanding and/or agreements across agencies Interagency expenditure plans for children's behavioral health services and supports at state, tribal, and local levels Quality management plan and reports Sample of individualized service plans for youth with co-occurring disorders and multi-system involvement Interviews with system administrators, care managers, families, and providers 	analyze how and the extent to which funding for children's behavioral health services and supports is coordinated across major child-serving systems and the extent to which appropriate integrated services are provided to youth with co-occurring disorders and other multi-system involvement

5.	Maximize Federal E	ntitlement Funding			
	Financing Strategy	Outcomes	Indicators	Data Sources	Data Analysis Plan
6.	Financing strategies to maximize federal entitlement funding (i.e., Medicaid, Title IV-E, special education)	Federal entitlement funding is used to the maximum extent to support a comprehensive array of children's behavioral health services and supports	 Medicaid state plan with a broad array of mental health services and supports Use of IV-E waiver for community-based services to prevent child placement Use of Medicaid to extent possible in lieu of child welfare, juvenile justice, or education general revenue for children's behavioral health services and supports Use of all possible Medicaid options (e.g., rehabilitation option, EPSDT, Medicaid in public schools) Increase eligibility for Medicaid (age, income, disability criteria, etc.) and S-CHIP Active outreach/enrollment efforts for Medicaid and S-CHIP Enrollment of children with emotional/behavioral problems in special education Ability to generate and secure a steady rate of state, tribal, and/or local match for Medicaid 	 State Medicaid plan Title IV-E waiver applications, progress reports, and evaluations Budget documents Plans for collaboration and joint training between mental health and child welfare at state, tribal, and local levels regarding use of entitlement funding State special education reports State Medicaid reports on penetration rates and utilization Quality management plan and reports Interviews with system managers at state, tribal, and local levels 	Triangulation of findings to analyze how and the extent to which federal Medicaid and Title IV-E entitlement funding are maximized to finance a broad array of children's behavioral health services and supports
0.	•	Outcomes	Indicators	Data Sources	Data Analysia Blan
	Financing Strategy				Data Analysis Plan
	Financing strategies to redirect service dollars from deep-end restrictive placements (e.g., inpatient hospitalization, residential treatment, juvenile detention) to home and community-based services and supports	The proportion of expenditures used for home and community-based services is increased in proportion to expenditures for restrictive services	 Home and community-based service waivers that permit redirection of funds from bed closures to community-based services Diversion of residential treatment and inpatient dollars to home and community-based services New monies directed at home and community-based services Reduced utilization of residential and inpatient services and increased utilization of home and community-based services Training and technical assistance to residential treatment centers about home and community-based alternatives Diversification of residential treatment centers to provide home and community-based services 	 Waiver applications, reports, and evaluations Policies, protocols, and reports regarding redirection of resources at state, tribal, and local levels Budget requests for new community-based services and supports at state, tribal, and local levels State, tribal, and local reports on out-of-home, out-of-state, and out-of-school placements Service utilization data Quality management plan and reports Interviews with system managers at state, tribal, and local levels 	Triangulation of findings to analyze how and the extent to which service dollars are redirected from deep-end restrictive placements to home and community-based services and supports

	Financing Strategy	Outcomes	Indicators	Data Sources	Data Analysis Plan
	Financing strategies to support a locus of accountability for service, cost, and care management for high-need populations, (e.g., children with serious emotional disorders, children in the child welfare and juvenile justice systems)	Financing supports a locus of accountability for service, cost, and care management for high- need populations (e.g., care management entities, management service organizations) Use of risk adjustment mechanisms such as case rates, risk adjusted rates, differential capitation rates, or other risk adjustment mechanisms for high-need populations	 Financing for care management entities to serve as locus of accountability for managing care and costs for serving populations at high risk (with or without risk-based financing) Case rates for populations at high risk Risk adjusted rates for populations at high risk Differential capitation rates Other risk adjustment mechanisms 	 MCO and provider contracts, including populations and number of children covered by case rates and/or risk adjusted rates Set rates for different high-risk populations Rate setting process and supporting actuarial documentation Global budgets Utilization data Quality management plan and reports 	Triangulation of findings to analyze how and the extent to which appropriate case rates and/or risk adjusted rates are used for high-risk populations with serious behavioral health disorders
3.	•	isms to Finance Serv	vices to Uninsured and Underinsur	ed Children and their Families Data Sources	Data Analysis Plan
	Financing Strategy Financing mechanisms to support services to uninsured and underinsured children with serious behavioral health disorders and their families	Services to uninsured and underinsured children with serious behavioral health disorders and their families are financed (e.g, non- Medicaid/SCHIP eligible children, children who have exhausted their insurance coverage, uninsured children)	 System serves uninsured/underinsured children with behavioral health disorders and their families Uninsured and underinsured families do not have to relinquish custody to access behavioral health services and supports Providers offer sliding fee scales State, tribal, and/or local policies allow families to buy into Medicaid States utilize Medicaid family of one and/or TEFRA options States utilize home and community-based waivers that cover uninsured and underinsured children States, tribal, and/or localities pool, blend, or braid funding in order to serve uninsured and underinsured and underinsure children 	 Financing policies, reports, and protocols regarding the provision of services and support to uninsured and underinsures children and their families Policies, reports, and protocols regarding custody relinquishment Service utilization data reports Quality management plan and reports Interviews with providers and families 	Triangulation of findings to analyze how and the extent to which financing mechanisms support services to uninsured and underinsured children and their families
9.	=		es for Tribal Systems of Care		1
	Financing Strategy	Outcomes	Indicators	Data Sources	Data Analysis Plan
	Policies and mechanisms to ensure effective and appropriate financing strategies for tribal system of care	Effective financing for tribal systems of care are implemented	 State-tribal agreements to create financing mechanisms for tribal systems of care Coordination of federal, state, local, and tribal financing Maximization of Medicaid to fund services and supports in tribal communities 	 State-tribal agreements Plans and budgets for tribal systems of care Interviews with state and tribal leaders, families, providers Quality management plan and reports Medicaid policies and plans 	Triangulation of findings to analyze how and the extent to which effective financing strategies are implemented fo tribal systems of care

١.	Support a Broad S	Outcomes	Indicators	Data Sources	Data Analysis Plan
	Financing Strategy Financing mechanisms to support a broad array of services and supports	A broad array of services and supports is financed	 Coverage of a broad array of services and supports under Medicaid Coverage of additional services and supports through other financing sources (e.g., Title IV-E) Coverage of a broad array of home and community-based services and supports 	 State Medicaid plan Service coverage tables from HCRTP state survey to be completed by state, tribal, and local system managers Service guidelines, regulations, definitions, manuals (including Medicaid service definitions) at state, tribal, and local levels Contracts for services at state, tribal, and local levels Sample of individualized service plans Interviews with state or tribal Medicaid, mental health, child welfare, juvenile justice, substance abuse, education, primary care, and early childhood staff (e.g., Part C and Child Find) Quality management plan and reports Interviews with families, providers, and care managers 	Triangulation of findings to analyze how and the extent to which a broad array of service and supports is financed
•	Promote Individuali Financing Strategy	ized, Flexible Service	Delivery Indicators	Data Sources	Data Analysis Plan
	Financing mechanisms to promote the delivery of individualized, flexible services and supports that are family- driven and youth-guided	Financing promotes individualized, flexible services for children with behavioral health disorders and their families that are tailored to their unique needs and strengths	 Flexible funding Funding to support cross-system child and family teams that create individualized, flexible service plans for children and their families Care authorization mechanisms support individualized, flexible service delivery Medicaid and Title IV-E waivers that increase flexibility in the use of federal funds Financing mechanisms for consumer-directed services State, tribal and/or local policies and protocols that address financing to supports 	 Policies, reports, and protocols regarding the availability and use of flexible funds at state, tribal, and local levels Policies, protocols, and reports regarding the use of child and family teams for individualized service planning and delivery at state, tribal, and local levels Polices and reports regarding the authorization of services contained in individualized service plans at state, tribal and local levels Reports on claims and service utilization regarding consumer-directed services Waiver applications Quality management plan and reports Observation of child and family team meeting Sample of individualized service plans Interviews with system managers, providers, families, and care managers (related to the service plans reviewed) 	Triangulation of findings to analyze how and the extent to which financing approaches support individualized, flexibl services for children with behavioral health disorders and their families

	Financing Strategy	Outcomes	Indicators	Data Sources	Data Analysis Plan
	Financing mechanisms: Financing mechanisms that provide incentives to adopt and sustain evidenced-based and promising practices	Financing to support the inclusion of evidence-based and promising practices in the array of services and supports	 Fiscal incentives for the use of evidence-based Financial incentives for the use of promising practices and practice-based evidence Adequate payment for the development, training, and fidelity monitoring of evidence-based and promising practices 	 Policies, protocols, and reports regarding the development, training, and fidelity monitoring of evidence-based and promising practices at state, tribal, and local levels Provider contract provisions regarding the development, training, and fidelity monitoring of evidence-based and promising practices MCO and provider contracts ORC Macro Cultural Competence Practice Survey and Treatment Effectiveness Study Quality management plan and reports Interviews with system managers, providers, families, and youth 	Triangulation of findings to analyze how and the extent to which financing mechanisms support the adoption and sustainability of evidence-based and promising practices in the array of services and supports
4.		-	n and Intervention and Early Childl		Dete Analysia Dian
	Financing Strategy Financing mechanisms that promote and support early intervention and mental health services to young children and their families	Outcomes Financing mechanisms support the early identification of behavioral health problems and linkage with needed interventions Financing mechanisms support an array of services to young children with behavioral health services and their families	 Indicators System funds screening of high-risk populations (e.g., child welfare, juvenile justice-involved youth) Funding for Part C and Child Find programs include payment for identification and referral of behavioral health problems in young children EPSDT includes behavioral health screening Financing supports a broad array of services for young children and their families including services in natural environments (e.g., Head Start, Early Head Start, preschools, child care settings, primary care settings, etc.) Financing supports linkages between primary care and behavioral health practitioners Financing supports training and incentives for primary care practitioners to identify and refer for behavioral health problems in children Financing support consultation to natural early childhood settings Financing supports services to families not just to the identified child 	 Data Sources Plans, policies, reports, and protocols regarding screening of high-risk children and adolescents Plans, policies, reports, and protocols regarding behavioral health screening and referral for young children EPSDT policies, procedures, protocols, and reports Contracts with MCOs, providers, and primary care practitioners State Medicaid plan Policies, protocols, and reports pertaining to Part C Plans, policies, reports, and protocols regarding the array of early childhood services at state, tribal, and local levels Quality management plan and reports Interviews with system managers, providers, and families 	Data Analysis Plan Triangulation of findings to analyze how and the extent to which financing policies and strategies promote and support early intervention and mental health services to young childre and their families

III. Financing to Support Family and Youth Partnerships

1. Support Family and Youth Involvement in Policy Making

Financing Stra	gy Outcomes	Indicators	Data Sources	Data Analysis Plan
Financing mechanism support family/youth involvement in policy and system managem	family and youth participatio naking in policy making and system	 Payment for family/youth participation Supports for family/youth involvement (e.g., child care, transportation, food) Contract or payment mechanisms to a family organization for participation in policy making and system management structures and activities Family/youth participation in policy making groups Financing for the training, education, and leadership development to prepare families and youth for participation in policy making and system management 	 Policies, protocols, and reports regarding payment of stipends for family/youth participation at state, tribal, and local levels Policies, protocols, and reports regarding provision of supports for family/youth participation at state, tribal, and local levels Contracts with family organizations Quality management plan and reports Interviews with system managers, family organizations, and family members at state, tribal, and local levels 	Triangulation of findings to analyze how and the extent to which financing mechanisms are incorporated that support family/youth participation in policy making and system management structures and activities

2. Support Family and Youth Involvement and Choice in Service Planning and Delivery **Financing Strategy** Outcomes Indicators Data Sources Data Analysis Plan · Families receive support to participate in · Policies, protocols, and reports regarding use of Triangulation of findings to Financing mechanisms that Financing supports support family/youth families/youth as full partners child/family team meetings (e.g., transportation, flexible funds at state, tribal, and local levels analyze how and the extent to involvement and choice in in service planning and child care, peer supports) which financing mechanisms · Policies, protocols, and reports regarding service planning and delivery delivery so that families/youth support the full involvement of · Policies regarding consumer-directed funding consumer-directed funding mechanisms at state, families/youth in service have a lead role in configuring mechanisms for services (e.g., vouchers) tribal, and local levels the service planning team, planning and delivery and allow • Policies, protocols, and reports regarding Use of flexible funds identifying their needs and families choice in services, consumer and family choice of services and · Ability of child and family teams to use resources strengths; choosing supports, supports, and providers providers to provide services and supports desired by services, and providers ; setting families/youth · Policies, protocols, and reports regarding the use goals; and identifying outcome of resources by child and family service planning · Payment of family and youth advocates to assist indicators teams at state, tribal, and local levels and support families/youth in service planning · Policies, protocols, and reports regarding payment process of family advocates to assist families in the service · Families and youth know that they have a choice planning process at state, tribal, and local levels of services/providers and other supports for families to participate in • Families and youth are given information child and family team meetings, such as child care regarding service and provider options Observation of child and family team service · Consumer and family-operated services planning meeting · Training of providers in partnering with families • Examples of information given to families and youth regarding service and provider options System of Care Practice Reviews • Quality management plan and reports · Interviews with families, youth, providers, and care managers

8.	Support Services a		-		
	Financing Strategy	Outcomes	Indicators	Data Sources	Data Analysis Plan
	Financing mechanisms for services to families and other caregivers in addition to the identified child	Financing allows families and other caregivers to receive services and supports to address their role as caregivers, in addition to service provision to the identified child	 Medicaid policies allow services to families in addition to the identified child Financing mechanisms (other than Medicaid) support services and support for families/caregivers in addition to the identified child Families report that their needs as caregivers are addressed Funding of a family organization to provide services, such as peer support, education, information, respite, advocacy, etc. Linkage of services to family members through adult mental health, child welfare and substance abuse systems 	 Medicaid policies regarding services to families/caregivers Other policies, protocols, and reports regarding services and supports to families/caregivers at state, tribal, and local levels Claims/utilization data reports Sample of individualized service plans Quality management plan and reports Interviews with system managers, providers, family organization representatives, and families 	Triangulation of data to analyze how and the exter to which financing mechanisms allow familie and other caregivers to receive services and supports in addition to th identified child
V.			nguistic Competence and Reduce		
	Financing Strategy	Outcomes	Indicators	Data Sources	Data Analysis Plan
	Financing mechanisms to support a system of culturally and linguistically diverse providers, specialized services for culturally and linguistically diverse populations, and to reduce racial/ethnic disparities in care	Financing to support culturally and linguistically competent services and to reduce ethnic and racial, and disparities in access and quality of care	 Financing mechanisms for specialized services to culturally/linguistically diverse populations Financial incentives for culturally and linguistically competent providers Financing mechanisms to support outreach to culturally/linguistically diverse populations Financing mechanisms to support nontraditional providers and services and natural helpers Analysis of service utilization and expenditures by culturally and linguistically diverse populations Funding for a cultural competence coordinator at state, tribal, and/or local levels 	 Demographic data State Medicaid plan Policies, protocols, and reports regarding culturally and linguistically diverse providers Policies, protocols, and reports regarding specialized services for culturally and linguistically diverse populations Service utilization and expenditure reports Contracting policies Quality management plan and reports Interviews with system managers, cultural competence coordinators, providers, families, and culturally diverse community organizations 	Triangulation of findings to analyze how and the extent to which financing mechanisms support culturally and linguistically competent services and reduce ethnic, racial and geographic disparities in access to care
2.	Reduce Geographic	Disparities in Acc	ess		
	Financing Strategy	Outcomes	Indicators	Data Sources	Data Analysis Plan
	Financing mechanisms to reduce disparities in care in underserved geographic areas	Financing to reduce disparities in access to care to underserved geographic areas	 Financing mechanisms to provide services in underserved geographic areas Financial incentives for providers to work in underserved geographic areas Financing mechanisms to support nontraditional providers and services and natural helpers Analysis of service utilization and expenditures by geographic areas Use of technology such as telemedicine, e-therapy, etc. to 	 State Medicaid plan Policies, reports, and protocols regarding services in underserved geographic areas Service utilization and expenditure reports MCO and provider contracts Workforce development plans Quality management plan and reports Interviews with system managers, providers, 	Triangulation of findings to analyze how and the extent to which financing mechanisms address reduction in geographic disparities in access and quality of care

V. Financing to Improve the Workforce and Provider Network for Behavioral Health Services to Children and their Families

1. Support a Broad, Diversified, Qualified Workforce and Provider Network

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	Financing Strategy	Outcomes	Indicators	Data Sources	Data Analysis Plan
	Financing mechanisms to support and develop a broad, diversified, qualified workforce and provider network to provide services and supports to children with behavioral health disorders and their families	Financing supports a broad, diversified, qualified workforce and broad provider network, including traditional and nontraditional providers and natural helpers	 Financing to support workforce development activities including workforces analyses, recruitment and retention strategies, pre and inservice training, etc. Financial incentives to attract providers that reflect the racial and ethnic composition of the target population at state, tribal, and local levels Financing mechanisms for payment of nontraditional providers and natural helpers Financial incentives to attract providers to the geographic areas of greatest need Financing strategies to support training and development of workforce skills, knowledge, and attitudes Medicaid certification of diverse types of providers and programs Use of qualified provider panels providing extensive provider array 	 Plans, policies, reports, and protocols regarding workforce development, training, and capacity building Financing policies, reports, and protocols regarding incentives for racially and ethnically diverse providers at state, tribal, and local levels Financing policies, protocols, and reports regarding payment of nontraditional providers and natural helpers at state, tribal, and local levels MCO and provider contracts MCO credentialing policies Medicaid provider certification policies Performance-based contracts Composition of provider networks Protocols for contracting with and payment of nontraditional providers at state, tribal, and local levels 	Triangulation of findings to analyze how and the extent to which financing mechanism support a broad, diverse provider network
	Financing Strategy	Outcomes	Indicators	Data Sources	Data Analysis Plan
	Financing mechanisms that support adequate payment rates for providers	Providers receive adequate payment rates to allow for the provision of quality services and supports	 Rates allow providers to participate in child and family service planning teams Rates allow providers to work with families in addition to the identified child Rates allow providers to coordinate services with other child serving agencies and systems Rates allow providers to serve children and families in homes, schools, and other locations in 	 Policies and payment rates for MCOs and providers at state, tribal, and local levels Policies, protocols, and reports regarding rate incentives to deliver home and community-based services at state, tribal, and local levels Rate setting process and supporting actuarial documentation Quality management plan and reports 	Triangulation of findings to analyze how and the extent to which providers receive adequate payments rates to support the provision of quality service and supports

	the community	 Interviews with system managers and providers 	
	 Rates encourage the delivery of home and community-based services 		
	 Rates are sufficient to enable providers to develop, sustain, and grow quality home and community-based services and supports, including evidence-based and promising practices Rates are sufficient to allow providers to recruit and retain professional and paraprofessional staff Mechanisms for providers to demonstrate the cost of care and to request amended rates 		

VI. Financing for Accountability

1. Incorporate Utilization and Cost Management Mechanisms

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Outcomes	Indicators	Data Sources	Data Analysis Plan
Service utilization and system costs are monitored and managed	 Service utilization data are available and used by system managers, policy makers, and care managers Costs of services are tracked at the service delivery and system management levels System tracks outliers, i.e., high utilizers of services System tracks utilization and cost by population (e.g., children in the child welfare and juvenile justice systems) Care managers play a role in utilization and cost management Incentives and/or sanctions associated with utilization and cost management 	 Policies, reports, and protocols regarding service utilization Utilization review protocols MCO and provider contracts regarding utilization and cost monitoring, incentives, and sanctions Interviews with system managers, data and evaluation staff, care managers, and families Policies, reports, and protocols regarding custody relinquishment Service utilization data reports Quality management plan and reports Interviews with providers and families 	Triangulation of findings to analyze how and the extent to which financing mechanisms support services to uninsured and underinsured children and their families
			Data Analysis Plan
Financing policies and strategies are evaluated to ensure that they support system of care goals (i.e., broad service array, home and community-based care, individualized/flexible services, family/youth partnerships, cultural competence, interagency coordination, etc.) Financing policies and	 Ongoing assessment of financing policies and strategies to ensure that they support system of care goals Ongoing assessment of financing policies and strategies to support continuous quality improvement Cost-benefit data on systems of care Family involvement in evaluation of financing policies and strategies 	 Plans and protocols for the evaluation of financing policies and strategies Reports of evaluations of financing policies and strategies Quality management plans and reports Cost-benefit data reports on systems of care Interview with system managers, evaluators, family organization representatives, and families 	Triangulation of findings to analyze how and the extent to which financing policies and strategies are evaluated to ensure that they support system of care goals and continuous quality improvement
	Service utilization and system costs are monitored and managed Policies to Ensure tl Outcomes Financing policies and strategies are evaluated to ensure that they support system of care goals (i.e., broad service array, home and community-based care, individualized/flexible services, family/youth partnerships, cultural competence,	Service utilization and system costs are monitored and managed • Service utilization data are available and used by system managers, policy makers, and care managers • Costs of services are tracked at the service delivery and system management levels • Sorvice utilization and cost by population (e.g., children in the child welfare and juvenile justice systems) • Care managers play a role in utilization and cost management • Incentives and/or sanctions associated with utilization and cost management POlicies to Ensure that they Support System of Care G Outcomes Indicators Financing policies and strategies are evaluated to ensure that they support system of care goals (i.e., broad service array, home and community-based care, individualized/flexible services, family/youth partnerships, cultural competence, • Ongoing assessment of financing policies and strategies to support continuous quality improvement	Service utilization and system costs are monitored and managed • Service utilization data are available and used by system managers, policy makers, and care managers • Policies, reports, and protocols regarding service utilization • Costs of services are tracked at the service delivery and system management levels • Utilization review protocols • System tracks outiliers, i.e., high utilizers of services • System tracks utilization and cost by population (e.g., children in the child welfare and juvenile justice systems) • Interviews with system managers, data and evaluation staff, care managers, and families • Cotre managers play a role in utilization and cost management • Care managers play a role in utilization and cost management • Policies, reports, and protocols regarding utilization and cost monitoring, incentives, and stanctions • Delicies to Ensure that they Support System of care goals (i.e., broad strategies are evaluated to ensure that they support system of care goals (i.e., broad strategies to esure that they support system of care goals (i.e., broad strategies to esure that they support system of care goals (i.e., broad strategies to support of care goals • Ongoing assessment of financing policies and strategies to esure that they support system of care goals • Plans and protocols for the evaluation of financing policies and strategies • Cost-benefit data on systems of care individualized/Hexible services, family/youth partnerships, cultural compretence, • Cost-benefit data on systems of care • Reports of evaluations of financing policies and strategies • Cost-benefit data on systems of care <td< td=""></td<>

3. Support Leadership, Policy, and Management Infrastructure for Systems of Care

Financing Strategy	Outcomes	Indicators	Data Sources	Data Analysis Plan
Financing strategies supports leadership, policy and management infrastructure for systems of care	Policy and management infrastructure exists at state, local, and tribal levels to support systems of care	 Financing supports interagency entities for policy making and management of systems of care and state, tribal, and local levels Funding for identified leaders at the state, tribal, and local system levels who are dedicated to and have designated responsibilities for building and sustaining systems of care Funding for leadership development, including family and youth leaders, for systems of care 	 Plans, policies, protocols, and reports regarding funding for interagency policy and management entities Plans, policies, protocols, and reports regarding leadership development for state, tribal, and local system of care leaders Budget and expenditure plans and reports Staffing and organizational charts Quality management plan and reports 	Triangulation of findings to analyze how and the extent to which financing policies and strategies support leadership, policy and management infrastructure for systems of care