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**Rosie D. News Stories June 2016**

**Court Seeks Sustainable Framework for the Future of the Remedial Service System**

In a nod toward the future, US District Court Judge Michael Ponsor called upon the parties at the June 8, 2016, status conference to create a sustainable framework for each of the remedial services – “a self-sustaining mechanism to ensure the effectiveness and efficacy of the program.”  He asked the parties to start with mobile crisis intervention (MCI) services, and suggested this model could serve as a template for the other remedial services.

The parties have agreed that MCI is being implemented in accordance with the *Rosie D* Judgment and the agreed-upon disengagement criteria.  But like all services, it must be subject to reporting and monitoring to ensure children and youth in crisis are being assessed in community settings and not in emergency departments.

Judge Ponsor ordered the defendants to circulate a draft of an MCI sustainability framework to the plaintiffs by August 1st, setting forth standards of effectiveness that address issues such as staffing, wait-times and data on community-based encounters and inpatient admissions.  The draft, he suggested, should explain the steps the Commonwealth is taking “to monitor the ongoing effectiveness of the program over time.” The plaintiffs have until August 19 to provide feedback to the defendants on the draft document.  Both parties are expected to discuss the MCI sustainability framework in their next report to the Court, due in September.  The Court proposed that the MCI framework could serve as a sustainability prototype for the other components of the remedial system once they “mature” and meet the agreed-upon disengagement criteria.

**Court Asks Parties to Provide Status Update on All Disengagement Criteria**

After reviewing the [**defendants’**](http://www.rosied.org/EmailTracker/LinkTracker.ashx?linkAndRecipientCode=sIAvYqgPb73SmxXMGCU1quuDELqXdXAaZJyP3YNWcgKhP6T7%2flXCPQ%2fix6tJmQ6V5dZXxECdHEitk7tWt07HDSQh3AGwRECHT%2bYdRk57ios%3d) and [**plaintiffs**’](http://www.rosied.org/EmailTracker/LinkTracker.ashx?linkAndRecipientCode=6C6yhkdEemxTIGRkMqAC55G9JF2OxWcvauITwlhiEXDkrqHoziKSjRrPydf7qmSo0WGiF8oqQg%2b6PT4GcoRkfTeaDhCqSPTY%2bM%2bGL8b2d0w%3d) status reports, the Court expressed concern that the pathway to disengagement had become obscured by various delays, and failure to implement specific action steps to fulfill agreed-to disengagement in a timely manner.  Judge Ponsor asked the parties to review all outstanding disengagement criteria on all the remedial services, in order to determine “where we’ve come…where we’re going ... [and] what needs to be done.”  The defendants were directed to provide their status update by July 31, and the plaintiffs by August 19, 2016.

He alluded to the Court’s eventual disengagement when there is no longer need for active judicial oversight, but pointed out that any violation of the remedial order will prompt a filing of noncompliance from the plaintiffs “or their heirs,” and added, “The Court will never sign off completely.”

**New “Enhanced” Outpatient Therapy Service Slated for October Implementation Date**

In an attempt to address the plaintiffs’ longstanding concerns about the failure of outpatient therapy to provide adequate service coordination for children with SED and their families, the state agreed to create Enhanced Outpatient Services (EOS), as described in the plaintiffs’ special [**Report on Care Coordination**](http://www.rosied.org/EmailTracker/LinkTracker.ashx?linkAndRecipientCode=%2bKBzy3X8PlSKrQ8E8URFlYs18Jmjh4vMcbch%2f1WDpVh6oZ36hY4AMA7JwlMsAxJKjnBmduYtikM4N4Lbe51by5KA8YH0XUyZ9i0g1CIvMo4%3d).  Under EOS, which is slated to be operational by October 1, 2016, MassHealth will pay a higher rate of reimbursement to outpatient therapists who assume service coordination responsibilities for SED youth.

At the last status conference on June 8th, Judge Michael Ponsor ordered the plaintiffs to draft and circulate a proposed court order regarding the creation of EOS by August 1st. The plaintiffs always have maintained that youth with SED -- especially those who receive other remedial services, are served by multiple providers or involved with state agencies -- should receive service coordination through the remedial services developed under the *Rosie D.* Judgment, specifically, Intensive Care Coordination (ICC) or In-Home Therapy (IHT).

Under the plaintiff’s design – which the state represents has been accepted by MassHealth – EOSproviders will be responsible for service planning and monitoring, collateral contacts, face-to-face meetings and case consultations with caregivers, remedial service providers, and as warranted, state agency staff.  In turn, EOS providers will be reimbursed for all care coordination activities at a rate comparable to individual therapy.

Atty. Gen. Daniel Hammond told the Court about plans to “incentivize and coach” outpatient therapists about EOS, which he said presages “a cultural change among providers.”

According to Hammond, EOS is the result of the parties’ collaborative approach to address longstanding problems with care coordination and outpatient therapy.  Children served in outpatient therapy – not a remedial service created under the *Rosie D.* Judgment – were not getting “anywhere near the same level of care coordination” as children in ICC or IHT.

On behalf of the plaintiffs, Attorney Steven Schwartz expressed hope that EOS will be an effective mechanism to provide care coordination for SED youth, but said, “We remain skeptical.”