



CHILDREN Initiative

Child Welfare and Health Infrastructure for Linking and Data Analysis of Resources, Effectiveness, and Needs (CHILDREN) Initiative

The CHILDREN initiative is intended to enhance the data infrastructure and analytic capacity of public child welfare and Medicaid agencies to (1) improve the delivery and oversight of services, (2) enhance the agencies' ability to monitor program spending, and (3) conduct cross-program research and evaluation of service outcomes. For this initiative the CHILDREN team will work with public child welfare and Medicaid agencies in several jurisdictions to help them develop sustainable, integrated data systems with linked child welfare and Medicaid data, which can be used to support the care coordination and oversight of prevention services and congregate care services.

The CHILDREN initiative is funded by the U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation (ASPE) and is being implemented by Mathematica.

Background

ASPE launched the CHILDREN initiative to help public child welfare and Medicaid agencies enhance their data infrastructure to support the implementation of the Family First Prevention Services Act (FFPSA; P.L. 115-123), which changed how states and tribes may use funding available through Title IV-E of the Social Security Act. FFPSA permits states and tribes to provide evidence-based parenting skills and behavioral health services (including services related to mental health and substance use disorders) to families with children who are at risk of entering foster care. States and tribes must also evaluate the effectiveness of these services, but public agencies may lack adequate data infrastructure—specifically, linked child welfare and Medicaid data—to ensure effective implementation and evaluation of these services in line with FFPSA.

FFPSA also changed the requirements for and limitations of Title IV-E reimbursements for congregate foster care placements; this created the potential for overlap between Title IV-E and Medicaid reimbursements, raising the risk of duplicate or improper payments. Public child welfare and Medicaid agencies could benefit from analyzing linked data across these programs to improve delivery and oversight of congregate foster care services for children and families, including agencies' ability to monitor program spending and use funding efficiently. Linking data across systems could also help agencies find ways to improve fiscal management and reimbursement for congregate foster care services.

Project Objectives

The CHILDREN initiative seeks to achieve four objectives:

- 1. Conduct feasibility studies.** The initiative will begin by conducting capacity assessments and feasibility studies with public child welfare and Medicaid agencies from multiple jurisdictions to determine their readiness and to assess their capacity and infrastructure to link and analyze these data. The feasibility studies will inform the identification of three to five states to participate in the later stages of the project, which will focus on enhancing states' data infrastructure and analytic capacity.
- 2. Develop data sets and data systems with linked records.** The project team will work with staff from the public child welfare and Medicaid agencies to enhance their capacity and data system infrastructure to develop linked data for children and parents or caregivers involved in both systems. The team will work with staff from each jurisdiction to create common data models, develop procedures to link Medicaid and child welfare data in their data systems, create linked data sets and related data documentation, and support the sustainability of data linking.
- 3. Conduct analysis using linked data.** The project team will provide analytic support to agencies to increase their analytic capacity and help agencies better understand and improve care coordination across child welfare and Medicaid services, ultimately to improve operations, service delivery, and outcomes for children and parents or caregivers in both systems. The team will also work with jurisdictions to develop, pilot, and implement analytic models, including predictive models, to support their program management and service delivery needs, including oversight of prevention and congregate care services.
- 4. Document challenges and lessons learned.** Throughout the initiative, the team will document and disseminate information on challenges and lessons learned, along with key insights, best practices, and recommendations. This information could be useful for other jurisdictions and stakeholders interested in linking data across public child welfare and Medicaid agencies and developing analytic models.

Participating Jurisdictions

Jurisdictions that participate in the CHILDREN initiative will receive resources and technical assistance to help them develop linked data sets and analytic models. This initiative will ultimately support jurisdictions in improving the delivery and oversight of services for children and families who are clients/beneficiaries of both child welfare and Medicaid agencies' programs, as well as enable more effective fiscal management of, and reimbursement for, these services. The CHILDREN project team will also help participating jurisdictions create plans and identify resources to ensure the sustainability of these efforts after project completion.

Project Contacts

The ASPE contacts for the CHILDREN initiative are Laura Chadwick and Emily Madden. The Mathematica project team is led by Elizabeth Weigensberg and Jason Weinstock. For more information, please contact the CHILDREN project team at CHILDREN@mathematica-mpr.com.