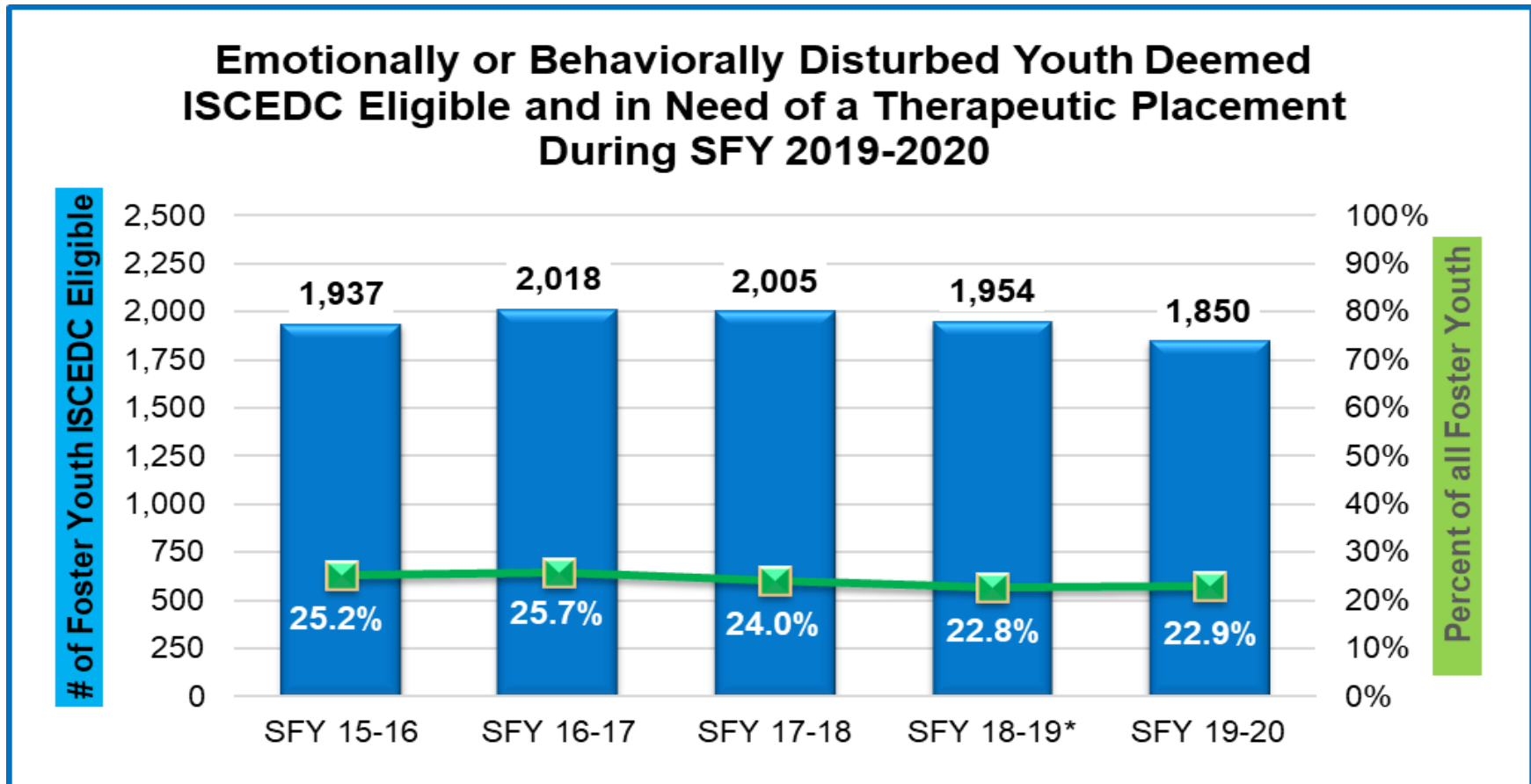


The graph below tracks the number of children and youth who have been deemed ISCEDC Eligible and in need of therapeutic placement. Local interagency staffing teams identify the foster children who have significant **emotional or behavioral issues**, causing them to need a therapeutic placement and special services paid with **ISCEDC funds** (funds provided from several state agencies).

In addition to the ISCEDC Eligible youth reported below, managed treatment services were provided for the following youth requiring special services, paid through “Special Needs” funds (explanation of each category provided on the following page): **47** Youth receiving “Post-Legal Adoption Services”; **143** “Medically Complex” Children; **139** Additional youth with various special needs



Data: SCDSS - Office of Child Health and Well-Being (effective July 2020)

Design: SCDSS - Accountability, Data, and Research Division

**During SFY 2019-2020 - Additional Youth (Who Were Not ISCEDC Eligible)
Received Specialized Care through “Special Needs” Funding and Managed Treatment Services**

“Special Needs” funding provides managed treatment services for youth who are not ISCEDC eligible but still have unique circumstances requiring more than routine foster care, service coordination, and/or provider training to help the youth achieve their highest level of functionality. Often the special treatment services needed and provided by the therapeutic foster parent(s) are not Medicaid reimbursable; in such situations, the agency pays higher per diem rates to “pay” for the treatment provided by the family.

47 Youth receiving “Post-Legal Adoption Services”

Post-Legal Adoption Services are available for any youth adopted through DSS who has recurring behavioral problems, to the point of requiring intensive case management and service coordination. Historically most of the Post-Legal youth have been former foster youth served under the ISCEDC umbrella. However, former foster youth who never were approved for ISCEDC services and/or were served in one of the “Special Needs” populations may also qualify for Post-Legal Adoption Services.

143 “Medically Complex” Youth

“Medically Complex” youth have moderate to severe medical or physical problems. Medical Treatment Foster Home Services (MTFHS) are provided for these medically complex children through either long-term individualized care or for shorter placements. Although MTFHS are primarily medical in orientation, they may include related treatment and personal care services for youth who also have moderate to severe physical or developmental disabilities. Treatment foster parents are specially recruited and trained in medical or personal care interventions designed to meet the individual needs of the youth. Although the preference is for these clinical treatment services to be provided within a structured and supportive foster home setting, at times “Medically Complex” youth may require hospitalization or placement in a treatment facility for extended periods of time.

159 Additional Youth Receiving Special Services

The youth receiving special services are between the ISCEDC eligible and medically complex youth, i.e. they don’t meet criteria for either, but cannot live in a regular foster home because they need many supports to function daily. This category includes, but is not limited to, youth with

- Severe developmental delays, but without a behavioral health diagnosis (thus not ISCEDC eligible) and without a complex medical diagnosis (thus not “Medically Complex”).
- Autism, which is classified as a developmental disorder; unless the youth has other substantial health issues for which there is no cure, he does not meet the “Medically Complex” criteria, and unless there is a separate diagnosed mental health or behavioral issue, he does not meet the ISCEDC criteria.
- Other intellectual disabilities, but without an accompanying behavioral health diagnosis (thus not ISCEDC eligible) and without a complex medical diagnosis (thus not “Medically Complex”).
- Behavioral/mental health issues above the norm (but not severe enough to be ISCEDC approved), who are approved for “Difficulty of Care” increased board payments to compensate the foster parents for the extra investment required in raising the youth.

Data: SCDSS - Office of Child Health and Well-Being (effective July 2020)

Design: SCDSS - Accountability, Data, and Research Division