
B. The Dawn Project — Marion County, Indianapolis, IN

Overview

The Dawn Project is a behavioral health carve out serving a subset of children in Marion County (Indianapolis, Indiana). It focuses on Marion County children who have serious emotional or behavioral disorders, are involved in multiple systems, and are in or at risk for residential placement. Dawn serves about 150 children on any given day and has served over 600 youth and their families since its inception in May 1997. The average length of stay in care is 14 months. Several state and county agencies finance the project, including the State Mental Health Agency, the state special education agency, the county child welfare agency, and the juvenile court, creating a case-rate of \$4,254 per member per month. Indiana Behavioral Health Choices (Choices), a nonprofit care management organization, acts as the managed care entity. The Dawn Project was created to integrate care for children involved in multiple systems and their families, including the child welfare, mental health, juvenile justice, and education systems, and draw on the strengths of families to reduce long-term system dependency and improve outcomes. Choices employs service coordinators, who are responsible for organizing and facilitating Child and Family Teams, which develop individualized service plans using a wraparound, strengths-based approach. The Dawn Project partners with families at all levels of the system and actively monitors quality and outcomes. It adheres to a values base that emphasizes the resiliency of children and families and their capacity for positive development when provided with family-centered, community-coordinated support.

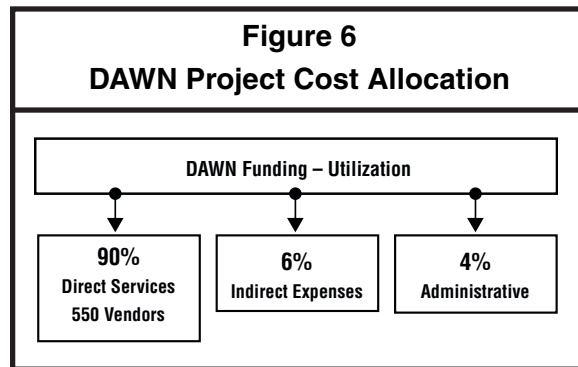
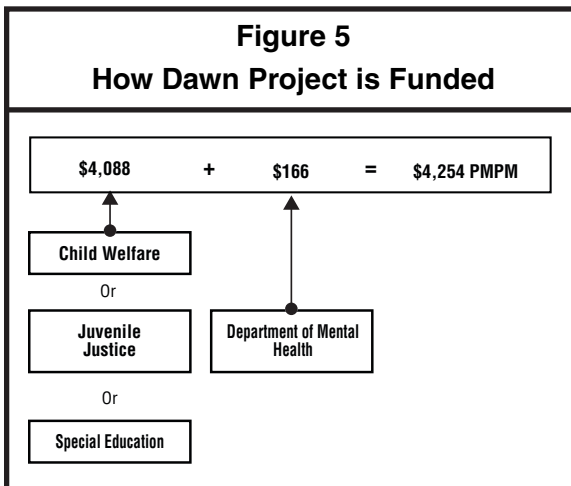
Key Design and Financing Features

- **Nonprofit Lead Agency Care Management Organization.** Indiana Behavioral Health Choices, a nonprofit entity, acts as the lead agency for managing the care of children enrolled in the Dawn Project. It employs over 26 service coordinators and case managers, who coordinate Child and Family Teams. It utilizes an extensive network of providers in the community and has developed rates for a broad array of services and supports. Like Wraparound Milwaukee, Choices utilizes a variety of managed care technologies, including case-rate financing, service authorization mechanisms, quality improvement, utilization management, and care management. In addition to the Dawn project, Choices operates a **youth emergency services** component that provides immediate in-home crisis intervention and follow-up services for children and families who come to the attention of child protective services for reasons of abuse or neglect. It also operates a **24-hour crisis counseling and in-home support program** for families struggling with children who have a history of running away or are at risk of running. Choices also operates a **school truancy prevention component**, a program serving families who are **homeless** or are at risk for homelessness, and a program serving adults who are **homeless with a co-occurring disorder of mental illness and addictions**. The Dawn Project draws on these in-house components of Choice, in addition to over 500 community providers.
- **Broad Benefit Design.** The Dawn Project covers a broad array of services and supports, which it has organized under nine major headings: (1) behavioral health services (e.g., individual and family therapy, day treatment, etc.); (2) psychiatric services (e.g., assessment, medication management); (3) mentor services (e.g., educational mentors, case aides, parent and family mentor, life coach/

independent living skills mentor, etc.); (4) placement services (e.g., residential treatment, therapeutic foster care, supported independent living, etc.); (5) respite services (e.g., crisis respite, planned respite); (6) supervision services (e.g., intensive supervision, community supervision); (7) discretionary (e.g., child care, clothing, groceries, etc.); (8) other services (e.g., camp, consultation with other professionals, team meetings, etc.); and (9) care management and service coordination. A diversified funding base and case-rate financing structure support the Dawn Project's broad, flexible benefit design.

- **Interagency Governance.** The Dawn Project utilizes a cross-system governing and oversight body for the Dawn Project, called the Dawn Project Consortium. It is comprised of the payor agencies, families, referring agencies, the managed care entity (i.e., Choices), advocates, and additional representatives from the public schools. The Consortium meets monthly. At the service-delivery level, Child and Family Teams work across agencies to integrate school plans, court orders, probation requirements, and mental health plans into one coordinated plan that is manageable for families.
- **Partnership with Families.** One of the Dawn Project's first initiatives was to establish a family support group, which over time has developed into a family support organization, Families Reaching for Rainbows, the Marion County chapter of the national Federation of Families for Children's Mental Health. The organization provides support and advocacy for families enrolled in Dawn and also provides general advocacy, information, and education for families in Marion County. Family members participate as partners on Child and Family Teams and, as noted above, also serve on the governance body for the Dawn Project.
- **Service Coordination and Clinical Management.** Children are referred to the Dawn Project from the child welfare, juvenile probation, or special education systems based on established eligibility criteria (i.e., child has a serious emotional disorder and is in or at risk for residential treatment or hospitalization). A child's enrollment in Dawn activates assignment to a **Service Coordinator** who organizes and facilitates a **Child and Family Team**. This team, comprised of the child, family members, other natural supports, and relevant providers and agencies, develops a services plan that draws on the child's and the family's strengths and integrates action steps across life domains (e.g., school, home, etc.). Every service plan also contains a clearly defined crisis plan that includes 24-hour response and clearly-defined roles for team members, including family members and youth. The Dawn Project has the philosophy that "families don't fail, plans do", so it aggressively manages service plans by having teams meet monthly. Service Coordinators carry very small caseloads (1:8). They are able to authorize funds for agreed upon services. They are supported by Indiana Behavioral Health Choices clinical management software, called **The Clinical Manager (TCM)**, which has integrated clinical and fiscal data capabilities. TCM maintains the following information: consumer demographics; comprehensive intake assessment information; family/team member data; contact management; medication management; education/health/placement histories; treatment planning information, including needs and problems, goals and outcomes, interventions and strategies, authorizations, and strengths and supports; cost approval and analysis data; and claims adjudication.

- Extensive Provider Network.** The Dawn Project utilizes over 500 vendors, and has established rates for an extensive array of services. Residential, group, and foster care programs that it uses are licensed by the child welfare agency in Marion County. The provider network encompasses both clinical treatment services and informal support services.
- Training.** Training is a key component of the Dawn Project. Service Coordinators receive initial and ongoing training. Dawn uses a training format in which service coordinators, supervisors, and managers receive 90 minutes per week of training covering a variety of topics to support and enhance performance. In addition, supervisors participate in meetings/trainings with Choice management every two weeks. Family members are involved both as recipients of trainings and as trainers. Trainings are also available to providers in the network.
- Case-Rate Financing and Flexible Funds.** As noted earlier, the Dawn Project is financed by several state and county agencies, whose dollars support a case-rate of \$4,254 per member per month (the project started with a case-rate of \$4,130; it increased by 2% after three years of implementation). **Figures 5 and 6** show how Dawn is funded and its cost allocation breakdown.



The case-rate structure and Dawn’s internal financial management structure allow for flexible funding of services and supports, with service coordinators having access to **flexible dollars** in a quick turnaround mode.

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- **Outcomes Monitoring.** The Dawn Project Consortium created an Outcomes Committee to develop a set of performance indicators for the Dawn Project. Current outcome measures include the following:
 1. improved child and family functioning, including improved school functioning, improved records with the child welfare and juvenile justice systems, improved records for community supervision for Department of Corrections youth, improved CAFAS scores, progress on service coordination plans, and fewer days in out of home placement;
 2. increased family autonomy, measured by a decrease in the number of paid providers and a Caregiver Strain Questionnaire;
 3. parents/families feel more effective, as measured by a Family Assessment Device;
 4. commitment of caregivers to the plan of care, measured by team meeting attendance;
 5. services meet the real needs of the child and family, measured by narrative reports based on service coordinator focus groups;
 6. decreased cost per child; and
 7. child and family receive cost-effective services.

In addition to monitoring outcomes for clinical and financial accountability to guide project management and service coordinators, an interdisciplinary team of researchers, partnering with family members, providers, and administrators is implementing a comprehensive evaluation plan. The Evaluation Study focuses on six general areas: (1) profile of Dawn project participants; patterns and costs of service use; (2) dynamics of service coordination teams; effectiveness; family involvement; and (3) system level functioning. Cost data to date indicate that the Dawn project, at a cost of \$4,130 per child per month is less costly to Marion County than standard treatment at a cost of \$6,017 per child, and that clinical functioning of children enrolled in Dawn improves between enrollment and six months. The cost differential appears to be related to reduced reliance on residential treatment in the Dawn Project. In addition, the management mechanisms in place at the Dawn Project have reduced significantly double and duplicate billings for services rendered.

- **Management Information System.** The Dawn Project is supported by a customized management information system that provides real time clinical and cost information. The system supports Service Coordinators in making quick plan adjustments as needed and in readily accessing flexible funds. It also supports the outcomes monitoring process and Evaluation Study.