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Ohio's children and families deserve an authentic system of care.

Ohio MSY Custody Relinquishment Prevention Program (State Fiscal Year 2020–Present)

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Background and Legislative Origin

Joint Committee on Multi-System Youth

Established in 2016 as part of the mid-biennium budget review, tasked with examining and improving the state's response to children and youth who require services from multiple systems (e.g., child welfare, mental health, juvenile justice, developmental disabilities). Made several key recommendations including **improving cross-agency data collection and sharing** and **establishing a state-level safety-net fund,** operated by the Ohio Family & Children First (OFCF) Cabinet, accessible through county Family and Children First Councils.

SFY 18-19 Operating Budget

The budget created a new GRF line item (322422 – Multi-System Youth) with $1.0 million in each fiscal year to support youth with multi-system needs, aiming to avoid custody relinquishment and out-of-state placements. It also included language explicitly requiring data sharing among state agencies that serve multi-system youth, signaling legislative intent to address MSY issues.

SFY 20-21 Operating Budget

Included language declaring the legislature's intent to end custody relinquishment purely for service access and required the OFCF Cabinet Council to develop a comprehensive MSY Action Plan, implementing the recommendations from the 2016 Joint Legislative Committee. **Funded the Multi-System Youth (MSY) Program with an initial $6M and then $25 Million/SFY,** to be administered by the Family and Children First Cabinet
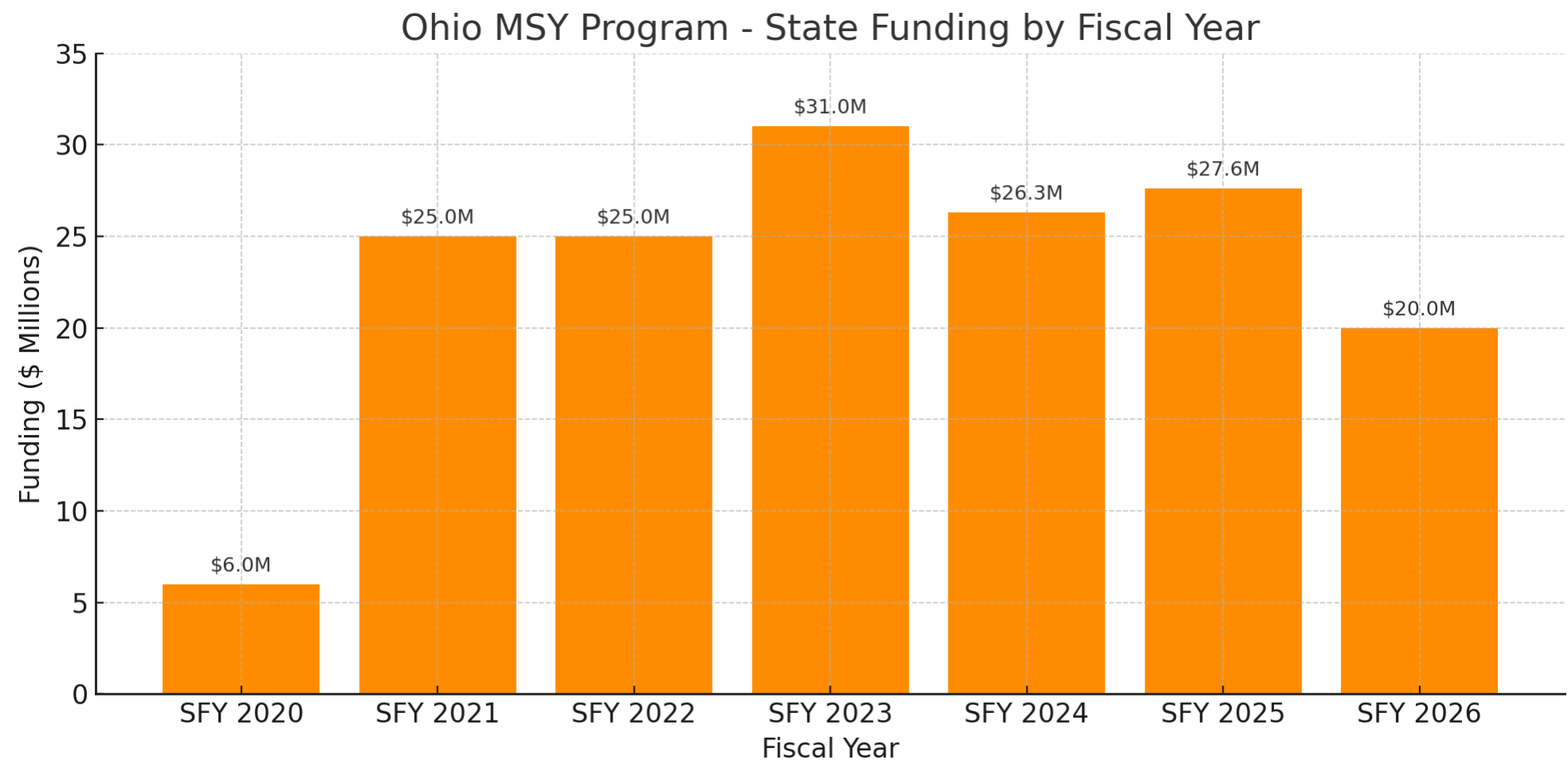
Ohio's Multi-System Youth (MSY) Program

- Sponsored by the Ohio Family and Children First (OFCF) Cabinet, including the Ohio Departments of Children and Youth, Developmental Disabilities, Education and Workforce, Mental Health and Addiction Services, Medicaid, and Youth Services and included the following guidelines:

  - **Eligibility:** Youth at risk of relinquishment or recently relinquished (<30 days), with multi-system needs, and active care coordination

  - **Service Criteria:** Clinically necessary services in least restrictive environments; out-of-home funding requires recent CANS assessment

  - **Funder of last resort:** Exhaust all local, insurance, and federal sources before MSY funding

MSY Program Applications – Funding or TA

- Applications can be submitted for funding or for technical assistance.
    - TA applications are like raising your hand for expert guidance — no money changes hands, but they often help clarify a path forward.
    - Funding applications are used when a county is ready to secure MSY financial support for eligible services.

Feature	MSY TA Application	MSY Funding Application
Purpose	To request guidance and support on complex cases	To request financial assistance for specific service
Use Case	When a county is unsure if a youth is eligible, or how to approach a case	When a youth is confirmed eligible and specific costs need coverage
Reviewed By	State MSY team (for consultation)	State MSY team (for funding approval)
Funding Outcome	❌ No direct funding provided	✅ Results in disbursement of state MSY funds if approved
Common Situations	Unclear eligibility, systems disagreement, placement barriers	Service costs like out-of-home care, respite, wraparound
Follow-Up	Often leads to a full funding application	Requires documentation Of service need and cost

MSY Program – Funding Over Time

Ohio MSY Program - State Funding by Fiscal Year

Funding ($ Millions) by Fiscal Year:
- SFY 2020: $6.0M
- SFY 2021: $25.0M
- SFY 2022: $25.0M
- SFY 2023: $31.0M
- SFY 2024: $26.3M
- SFY 2025: $27.6M
- SFY 2026: $20.0M
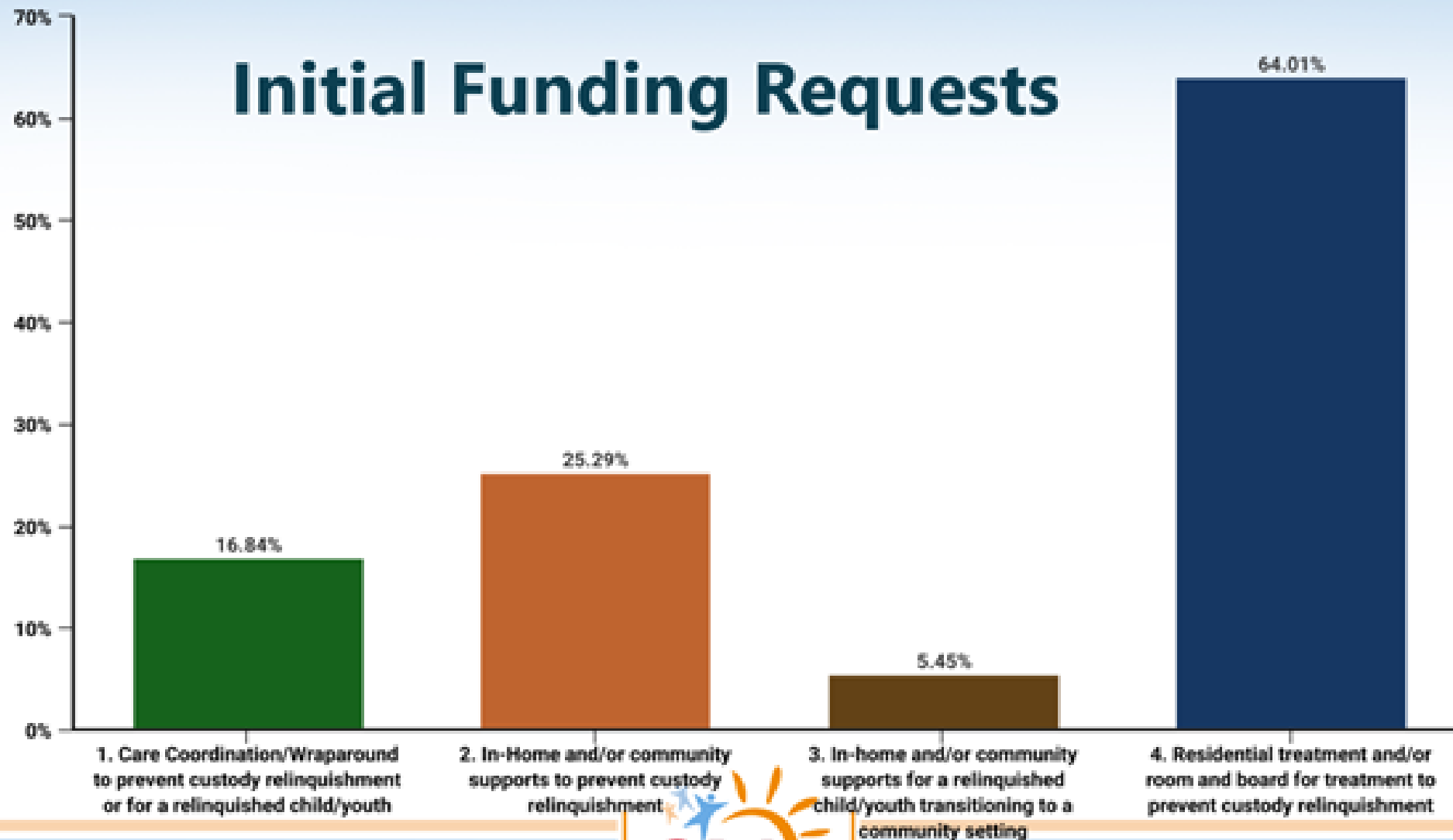
Changes in MSY Program Structure

- Initially, MSY funding was primarily administered by local Family and Children First Councils.

  o Councils were responsible for reviewing and submitting all applications and coordinating local wrap around teams.

  o State rules required inter-agency collaboration but did not offer Medicaid reimbursement.

- In **July 2022**, Ohio launched **OhioRISE (Resilience through Integrated Systems and Excellence)** — a new specialized Medicaid managed care program designed for multi-system youth with complex behavioral health needs.

  o Care coordination shifted to OhioRISE's Care Management Entities (CMEs)
    - FCFCs AND CMEs are now able to submit applications, significantly increasing access to the MSY funds

  o Allowed Medicaid reimbursement for wraparound and in-home services.

Initial Uses of MSY Funding

- Although access to MSY funds has significantly expanded, the uses remain generally the same (with the exception of Medicaid-covered services).
  - Crisis stabilization (respite, emergency room-to-home transitions).
  - Placement support when youth risk placement due to behavioral or emotional crises.
  - Transitions out of congregate care into home-based wraparound services.
- Current state data detailing MSY funding specifics is not readily accessible. However, early state reports and county self-reporting show some clear application/service trends:

County	Time Period	Applications	Use of Funds
Cuyahoga	SFY 2023	18	Residential stabilization for dual-diagnosis youth
Franklin	SFY 2023	32	In-home therapy, respite, transitional housing
Hamilton	SFY 2022-2023	12	Peer mentorship and stabilization support
Lucas	SFY 2022-2023	15	Emergency foster respite during family crisis
Summit	SFY 2022-2023	20	Wraparound for youth transitioning from group care

OhioRISE System Transformations

- **Monetizing Previously Non-Reimbursed Services**
  - Services historically funded by MSY, such as in-home treatment, respite, and stabilization—are now Medicaid-reimbursable through OhioRISE.
  - Coverage includes Intensive Home-Based Treatment (IHBT), behavioral health respite, and Primary Flex Funds up to $1,500 annually
- **MRSS: The First Responder Service Added**
  - Mobile Response and Stabilization Services (MRSS) offers 24/7 crisis response within 60 minutes for youth up to age 21—now integrated under OhioRISE
  - Delivered by certified MRSS providers, reimbursed via Medicaid, with prior authorization required beyond six weeks
- **Care Coordination & Tiered Supports**
  - OhioRISE defines three tiers of care coordination (Intensive, Moderate, Limited), tailored to youth needs post-CANS assessment

- MSY funds now act as a safety net, not primary funders, enabling sustainable Medicaid coverage over time.
- OhioRISE provides structural reinforcement: data tracking, consistent assessment (CANS), and expanded services networks.
- MRSS ensures immediate crisis intervention, vital for preventing emergency placements or custody relinquishment.

MSY Program Successes

High Utilization Rate
Most Ohio counties have successfully accessed MSY funds. The implementation of OhioRISE and the expansion of the program to CMEs significantly increased the number of youth accessing the funds.

Preventing Custody Loss
Advocates and families have praised the program, describing it as the culmination of five years of efforts that allow families to avoid giving up custody to access care.

Policy & Infrastructure Growth
Formal adoption of high-fidelity wraparound, enhanced behavioral health coordination via OhioRISE, and improved interagency collaboration. Additional state funding opportunities have been shaped by lessons learned.

MSY Program Ongoing Concerns/Issues

Funding Stability & Sufficiency
Uncertainty beyond current SFY; current state budget cuts (H.B. 96) reduce funds from ~$28 million to $20 million annually.

Delayed Approvals for Immediate/Urgent Needs
A majority of these funds are being spent on residential placements that are urgent in nature. Agencies and families are unable to accommodate funding/approval delays.

Temporary, Not Permanent
MSY is designed for short-term, acute needs (~90 days), not as a long-term funding source. Care teams must secure sustainable supports. Long-term funding options remains unsolved.

Uneven Access
Counties vary in local resources and capacity; some programs rely heavily on MSY as a safety net, exposing disparities.

Policy and Future Outlook

- OhioRISE integration: Stabilization services via Medicaid expected to reduce custody triggers

- Ongoing priorities: Program stability, improved data collection and analysis, increased peer supports, equitable access

- Advocacy asks: Secure stable annual funding ≥$30 million, increase administrative supports, streamline application processes and formalize long-term funding mechanisms.