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# How does Ohio's system of care approach support families involved with child welfare?

This jurisdictional profile of Ohio<sup>1</sup> was developed by the [Center for Health Care Strategies](#), in partnership with Casey Family Programs. It is one of a six-part series on the system of care approach, which includes an [issue brief](#), [strategy brief](#), and similar jurisdictional profiles of [New Hampshire](#), [New Jersey](#), and [Oklahoma](#).

## Background

Ohio, like many states, has struggled historically with gaps in care and coordination for children with behavioral health needs and their families due to fragmented systems and services. This lack of collaboration and access to care has led families to have to relinquish custody of their children to the state in order to access behavioral health care. This troubling dynamic has prompted Ohio to implement a system of care approach in which public agencies and entities combine forces as a network that supports children and families.

In 2019, Ohio created the Children Services Transformation Advisory Council within the state Department of Job and Family Services, [charging agencies to work together](#) through the Governor's [Children's Initiative](#) to improve care for children and families, eliminate need for custody relinquishment, and reduce the need for child welfare involvement.

## System of care governance

In July 2022, Ohio launched a specialized Medicaid managed care plan for children and older youth with complex behavioral health and multisystem needs, including those involved in the child welfare system. The Ohio Resilience through Integrated Systems and Excellence ([OhioRISE](#)), is guided by the system of care values and principles of being youth- and family-driven, community-based, and culturally and linguistically competent.

OhioRISE is overseen by the Ohio Department of Medicaid, the Governor's Children's Initiative, and Ohio's Family and Children First Cabinet Council, which includes the departments of: Mental Health and Addiction Services; Job and Family Services; Youth Services; Rehabilitation and Correction; Health; Developmental Disabilities; Education and Workforce; and Children and Youth; as well as Ohio Family and Children First, a partnership of state and local government, communities, and families.

The OhioRISE Working Board and Workgroup (formerly known as an advisory council) provides input and guides services and operations. Membership includes local leaders, county agencies, and individuals with lived experience with child welfare and behavioral health systems. Marisa Weisel, now former deputy director of strategic initiatives at the Ohio Department of Medicaid, noted that even though the initiative originated with Medicaid, it is critical to partner with other agencies that play a role supporting children and families. "OhioRISE is a great vehicle, but we want everyone in the car with us," she said.

### Key facts

- Child population (under 18): 2,578,254\*
- Child welfare administration by state or county: County
- System of care lead agency: Department of Medicaid
- Year system of care was statewide: 2022

\*Source: [The Annie E. Casey Foundation Kids Count Data Center](#)

## Strategies to support families involved with child welfare

OhioRISE eligibility includes children and older youth ages birth to 20 and their families who are eligible for Ohio Medicaid and have significant behavioral health needs as determined by the Child and Adolescent Needs and Strengths (CANS) assessment. OhioRISE offers access to a range of services for enrollees and their families, including tiered care coordination, mobile response and stabilization, intensive home-based treatment, psychiatric residential treatment, behavioral health respite, and flexible funds. Additional services such as out-of-home respite and transitional services are available through a 1915(c) Medicaid waiver, which requires that enrollees meet four eligibility requirements:

- Inpatient level of care;
- Serious emotional disturbance;
- Documented functional limitations; and
- Demonstrated need for at least one OhioRISE waiver service with a cost no more than \$15,000.

Ohio Medicaid Director Maureen Corcoran emphasized the importance of sharing the system of care framework with partners, including child welfare: "We take time with our colleagues to begin to educate them about the system of care philosophy. For example, we don't just want to build a bunch of beds, we want to develop community capacity."

The OhioRISE team created a summary on the system of care vision and values which they carry with them and reference in cross-system meetings, to help facilitate alignment. For example, when colleagues at the Department of Job and Family Services were designing Ohio's implementation of the federal Family First Prevention Services Act, they met with the OhioRISE team and shared their top priorities. In the end, the system of care values and principles helped these two groups define priorities collaboratively and reconcile discrepancies.

## System of care sustainability

Ohio's system of care approach, OhioRISE, is funded largely through Medicaid. In addition, Ohio relies on its partnerships with Centers of Excellence (COEs) in the state to train and bolster the workforce and ensure ideological sustainability of the framework. There are three COEs in Ohio: the [Child and Adolescent Behavioral Health Center of Excellence](#), which focuses on access to home and community-based services that help keep Ohio families safely together; the [Center for Innovative Practices](#), which supports community-based organizations directly; and the [Center for Evidence-Based Practices](#), which offers technical assistance through skills training, consultation, and program evaluation.

Like all Medicaid managed care plans in the state, OhioRISE reports data annually on the quality of care, access to care, and member satisfaction, through the Health Care Effectiveness Data and Information Set. OhioRISE also [tracks progress](#) toward: reducing custody relinquishment; keeping families together; reducing unnecessary hospitalizations; decreasing involvement with the juvenile justice and corrections systems; reducing out-of-home and out-of-state placements; and increasing school attendance and performance.

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<sup>1</sup> The content of this brief was informed by interviews with Maureen Corcoran, Director, Marisa Wiesel, Deputy Director, and Bridget Harrison, Deputy Director, Ohio Department of Medicaid, August 22, 2024.

Casey Family Programs is the nation's largest operating foundation focused on safely reducing the need for foster care and building Communities of Hope for children and families in the United States. By working together, we can create a nation where Communities of Hope provide the support and opportunities that children and families need to thrive. Founded in 1966, we work in all 50 states, Washington, D.C., Puerto Rico, the U.S. Virgin Islands and with tribal nations across North America to influence long-lasting improvements to the well-being of children, families and the communities where they live.

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