



RATE SHEET 2022-2023
CSA Residential Services

Provider Legal Name: Gloeckner Weber, LLC
Trade name: STARS
Billing Address: 517 Park Street
Charlottesville, VA 22902
Contact(s): Kara Gloeckner **Phone:** 434-970-1904
Residential Service Program Name: The STARS Program: *Zenith, Orion, Gemini, Phoenix*

	<u>Resident Not Medicaid Approved</u>	<u>Resident Medicaid Approved</u> (DBHDS licensed homes only)
Residential Room and Board Includes semi-private room, 3 meals per day, personal care items.	\$252.34 per day	\$252.34 per day ¹

¹Subject to change to match current Medicaid approved rates.

If this resident is eligible for Title IV-E reimbursement, please initial here to have this service billed to you as Title IV-E expenditure. _____

Residential Daily Supervision A resident-to-staff ratio as required by license 1:6 awake hours and 1:8 sleeping hours, with documented supervision checks every hour	\$146.22 per day	N/A
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If this resident is eligible for Title IV-E reimbursement, please initial here to have this service billed to you as Title IV-E expenditure and not to Virginia Medicaid. _____

Therapeutic Behavioral Services	N/A	\$146.22 per day ¹ (For Medicaid eligible) (DBHDS licensed homes only)
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<u>Total (Maintenance and Care)</u>	<u>\$398.56 per day</u>	<u>\$398.56 per day</u>
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**** Placing agencies are responsible for ensuring all paperwork is completed with CSA or FAPT for funding before youth can be placed in the program. Failure to pay for services rendered could result in immediate discharge of youth and legal action.**

*** Medicaid cannot be billed until all Medicaid requirements are met. Provider will initiate the IACCT and complete the certificate of need in cases where a youth is an emergency placement to the facility. Legal Guardian will be responsible for ensuring the IACCT is completed and a certificate of need is completed prior to admission for regular cases. Otherwise, Therapeutic Behavioral Services may be the placing party's responsibility. Whenever necessary, please ask about scholarship opportunities**

Rates effective July 1st, 2022 to June 30th, 2023

DESCRIPTION OF BUSINESS

Our overall program goal is to help youth transition back into the community whether this is with their family, a foster family, an independent living apartment situation, or on their own. The average length of stay is 6 months to 1 year. However, we have had youth stay as little as 90 days (our licensing requirement) and as long as 2-3 years. We are licensed for independent living and therefore youth can reside in the program up to their 21st birthday. While having a 20 year old in the program is more uncommon in recent years, we do often have 18 or 19 year old who are working to finish high school and prepare for the next step towards adulthood. We are community based and therefore we utilize all services and providers in the community. Our youth attend public school but there are also private day school options in the area if a youth individual education plan dictates a need for this. We utilize UVA Hospital and medical center for all medical needs as well as psychiatric services. Our youth are referred to individual counselors in the community for weekly therapy and family therapy as needed. These counselors are selected based on the youth's needs (anger management, substance use, positive decision making skills) and we ensure that they take the client's insurance to cover this cost.

Charlottesville has an extensive amount of services available and while that may seem to be a duplication of services and not providing something different, giving some distance from a home community may be helpful in redirecting a youth's path. Youth are measured on a daily basis on a behavior chart in which they earn boxes for completing basic tasks (chores, getting up in the morning, participating in daily groups, keeping their bedrooms in order, etc) and this helps the youth develop a daily routine for self-care. Residents earn weekly allowances based on completion of a daily chore they are assigned for the week. One of the chores is cooking and this resident will complete a menu and grocery list, go grocery shopping, and prepare dinner for the week for their housemates (with staff support as needed). Our program also focuses on the development of independent living skills. We utilize the Daniel Memorial Independent curriculum and residents participate in daily groups on different skills such as money management, food management, health, job skills, community resources, and housing skills. Residents are encouraged to gain employment after their first 30 days if they are of age and are required to save half of each paycheck while being given up to \$50 a week for spending money.

Youth are able to earn free time passes in the community after their 1st 30 days in the program as well as other privileges including a cell phone. However, we recognize that not all youth will be ready for these privileges right away and we work with legal guardians to find a balance between how to motivate the youth to work the program as well as ensuring they do not have too much freedom at once. Each resident has a case manager who is in charge of managing all services for the youth and maintaining constant contact with their guardians to provide updates on progress. Monthly reports are completed which detail the youths progress on goals, program performance, therapeutic services, educational progress, medical needs, and independent living skills development. We also provide transportation for youth to their court hearings and FAPT meetings as well as have helped with transportation for home passes when needed. We often partner with families to provide transportation one way or meet family half way if appropriate to ease this burden. There is constant communication with the key players on a youth's case and therefore we do not have formal treatment team meetings where everyone is sitting at a table. We will often have conference calls with legal guardians and youth and participate in a visit with social workers during their monthly check in to ensure everyone is on the same page. If a youth is struggling or a more formal meeting is needed, we will schedule this on an as needed basis.

We have implemented a change in services whereby each youth is given one on one time with a trusted adult staff for purposes of special time and attention towards their goals. The service has always been available for an additional fee in the past but it was only available to the children whose departments contracted for it at that time. We now believe that every youth deserves this time so we are no longer charging for it individually and have incorporated it into the daily rate. We are also a Medicaid provider and if a youth is to qualify for this, Medicaid will cover the supervision portion of their placement. We are in the process of applying for the DBHDS license to ensure we are in compliance with the changes to Medicaid in order to continue to be a Medicaid provider in our area.

Extensive training has been provided to all staff on attachment and trauma informed care. This training for staff has been composed of a group of 5 staff members at a time, meeting once a week for 3 hours for 7 weeks working through the safety and stabilization program with the instructor. As opposed to staff just attending a training and being provided the information to reference, they actively participated in the program addressing their own emotional needs and being able to develop skills to be able to handle situations and youth from a therapeutic standpoint. There are also follow up meetings with all staff who have completed the training in which we come



together with the instructor again to review the teachings and skills and be able to offer each other feedback on how to handle different situations or particular residents which may need more support. Our instructor also is available to

the case managers and program directors to provide supervision and training if we find ourselves with a challenging youth and need support in identifying strategies to help them stabilize in placement. We also can provide individual trauma education to youth as a separate service and this has been a pretty profound opportunity for some of the more challenging youth to learn how to manage their triggers and stabilize emotionally. They participate in the education program with our instructor as well as an identified staff member who acts as their support and check-in person throughout the week in the home to help them practice the skills they are developing and review any incidents or experiences they had in which they felt triggered and their response. They also practice the coping skills with youth in the facility. This program does not take the place of individual counseling but coincides with it in helping them be aware of their trauma and their reactions to it.

We believe in being social worker friendly and working together to ensure the youth is in the best placement. We strive to work with providers to maintain the youth in placement by ensuring we have provided all services and exhausted all options before considering a discharge for unsuccessful reasons. We have a reputation for being willing to try to maintain and work with youth longer than most placements will often do. It is our goal to try to help the youth understand the importance of working through their conflicts and frustrations and understanding that just because they have made a negative decision, this does mean we are going to give up on them. We try to eliminate sudden discharges unless there are serious safety issues and try to work closely with the placing agencies to get the youth safely to their next placement. There have been numerous times over the years where STARS staff has provided the transportation to a locked setting for a youth when a social worker is unable to make the trip. We also are willing to remain invested in maintaining contact and relationship with youth who have transitioned to higher settings in the case where they may be referred back to STARS after completing a more intensive program. We feel this bond is important to helping support youth in reaching their goals and being able to identify adult providers other than their social workers who will not give up on them.

We feel we are more than just a group home or an independent living program. We often find ourselves becoming life long supports to the youth that we serve regardless of a good or bad outcome in the program. It is a practice that the program director/owner Kara Gloeckner meet individually with the youth prior to placement to talk about the many opportunities that could be offered. The most important part of this interview begins with the attachment between the perspective youth and the program director in order to help them feel supported at every level when in placement.

DESCRIPTION OF SERVICES

Gloeckner Weber LLC	STARS	
Treatment modality	Frequency	Staff responsible
Coordination of Psychiatric Medication Management	1 x every 6 weeks or per order	Case Managers
Individual Therapy	1 x wk or more per order	Clinical Care Director
Family Therapy	Per order	Clinical Care Director, Case Managers
Educational Support Services	5 x wk	Residential Counselor
Case Management	1 x wk	Case Managers
Psychological Assessments	1 x every 6 weeks	Clinical Care Director
Transportation	Per order	Residential Counselors
Interventions:		
Group psychotherapy	Daily	Clinical Care Director
Independence Skills Building	Daily	Residential Counselors facilitate the Daniel Memorial Curriculum
Employment	1 x wk or per order	Employment Coordinator
Emotional Regulation and Stabilization	1 x wk or per order	Residential Counselors Case Managers,
Life Skills	Daily	Residential Counselors
Social Skills	Daily	Residential Counselors
Community Group	1 x wk	Residential Counselors
Recreational Group	1 x wk	Residential Counselors
Family Activities	Daily or per order	Residential Counselors, Case Managers
Art for Meaning Group	1 x mo	Residential Counselors, Case Managers
Contracted treatment modalities		
Medication Management	1 x every 6 weeks or per order	UVA Child and Family, Region X CSB, Shenandoah Psych
Psychiatric Evaluation	1 x every 6 weeks or per order	UVA Child and Family, Region X CSB, Shenandoah Psych
Individual Therapy	1 x wk or more per order	Riverbend Counseling, CAVA, Compass, other private providers.
Trauma Therapy/Education and Skills Building	1 x wk or more per order	Project Hope, Ana Blum
Family Therapy	1 x wk or more per order	Riverbend Counseling, CAVA, Compass, other private providers.

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Educational Services	5 x wk	Elk Hill, Keys Academy, Charlottesville Public Schools, Albemarle Public Schools
Emergency Room and Hospital Services	Per order	UVA, Sentara/Martha Jefferson Hospital
Internet Safety/Awareness	1 x quarter	Charlottesville Sheriff's Department
Pharmacy	Per order	Omnicare, Top Notch
Vision	1 x every 6 mo. or per order	Dr. Bare and Associates
Dental	1 x every 6 mo. or per order	Children's Dentistry, Community Dental
Occupational Therapy/ Physical Therapy	Per order	UVA
Psychological Assessments	Annually or per order	Dr. Dan McClure
Orthopedic	Per order	UVA
Prosthetics & Orthotics	Per order	UVA
Podiatry	Per order	UVA
Endocrinology	Per order	UVA
General Pediatrics	Per order	UVA Teen Center
CSOTP	Per order	Gloria Setterlund
Parenting Education	Per order	Jefferson Area CHIP
Sexual Victimization Therapy	Per order	SARA
Substance Use/Abuse Treatment	Per order	NA, AA, First Step, Region X CSB
Equine Therapy	Per order	Charlottesville AREA Riding Therapy
LGBTQ Services	Per order	ROSEMY
Healthy Relationship Development and Responsible Sexuality	Per order	Planned Parenthood/ Making Proud Choices

Clinical Plan of Services Table

- **CAPACITY:** We can hold a maximum of 31 resident among our 4 houses. 16 females and 15 males. There is a waitlist at times but this generally is not longer than 2 weeks before placement is available.

- **TARGET POPULATION:**

Our youth are 13-19 years old. The following are youth acceptable for placement:

- Developmentally delayed adolescent females and males exhibiting limited coping skills, relationship skills, life skills and other aspects of adolescent development:
- Youth in need of Independent Living Skills
- CHINS
- Learning disabled who are able to function adequately in a program and environment where there is minimal direct staff supervision
- Adjustment Deficit Disorder, Attention Deficit Disorder, Bi-Polar Disorder, Depression, Eating Disorder, Generalized Anxiety Disorder, Oppositional Defiant Disorder, Personality Disorder, PTSD, Separation Anxiety Disorder
- Mild Mental Retardation (not less than full scale IQ 70)
- Youths not appropriate for foster home placement
- Pregnant teens until they become a parent (not licensed for babies)
- Youth with behaviors that can be addressed in a non-hospital, non-secure setting with the support of pharmacological and psychiatric services
- Youth who have successfully completed an approved substance abuse or sexual offender treatment program and have successfully complete a STARS Group Home assessment and orientation period

- **PROGRAM GOALS & MEASURED OUTCOMES:** The purpose is to provide a group home for developmentally disabled adolescent females and males who are in need of life skills, age appropriate independent living skills while in a safe and therapeutic environment. The program is centered on reality therapy principles and emphasizes a percentage and privilege system to help motivate the resident's growth and success.

The facility accesses services within the community for adolescents with the idea that a support system is being built while in the program, but keeping these supports when transitioning back to families or to independent living settings. The program has many general components that include education, employment, therapy, etc. However, each resident will work from a service plan that is tailored to their special needs and situations. Each adolescent will play a unique and valuable role in this family-like group, having specific responsibilities. While each resident is encouraged to stay focused on their goals, consideration for others within the home is strongly reinforced. The most progress is usually made when the group is acting cohesively. A counselor will supervise the residents while they are at the facility, but all residents have a chance to practice independence throughout the course of a day or week. The average length of stay varies according to needs with some residents living at the home for years, while others may stay only for a few months. The average contract length is six months.

- **Admission Criteria:**

a. **Acceptable Criteria – Appropriate Referrals:** Females or males, ages 13-19 years old. Anticipated length of stay of a minimum 90 days. Youth may be in foster care or a parental placement with the support of a funding agent. The following are youth acceptable for placement:

- Developmentally delayed adolescent females and males exhibiting limited coping skills, relationship skills, life skills and other aspects of adolescent development:
- Youth in need of Independent Living Skills
- CHINS
- Learning disabled who are able to function adequately in a program and environment where there is minimal direct staff supervision
- Adjustment Deficit Disorder, Attention Deficit Disorder, Bi-Polar Disorder, Depression, Eating Disorder, Generalized Anxiety Disorder, Oppositional Defiant Disorder, Personality Disorder, PTSD, Separation Anxiety Disorder
- Mild Mental Retardation (not less than full scale IQ 70)
- Youths not appropriate for foster home placement

- Pregnant teens until they become a parent (not licensed for babies)
- Youth with behaviors that can be addressed in a non-hospital, non-secure setting with the support of pharmacological and psychiatric services
- Youth who have successfully completed an approved substance abuse or sexual offender treatment program and have successfully complete a STARS Group Home assessment and orientation period

b. Exclusion Criteria – Unacceptable Referrals: Youth ages 12 or under. Youth whose initial admission would occur at age 20 (can stay until 21st birthday but must be admitted prior to 20th birthday). Youth who only need a placement for a couple of days or weeks (length of stay must be anticipated to be at least 90 days). Those not appropriate for placement are youth whose needs cannot be met by STARS staff or program, including, but not limited to those with:

- MR (below full scale IQ 70)
- Exhibiting current psychotic behaviors
- Sexual perpetrators who have not successfully completed an approved sexual offender treatment program
- Fire setters who have not completed approved treatment
- Primary treatment need is substance abuse treatment
- Youth that would not benefit from the program

a. Planned Discharge/Termination of Services Criteria: A planned discharge occurs when a foster home, relative placement, own home, independent living apartment option, or own apartment is identified for the youth and youth has shown they can maintain behaviors in the community by complying with rules in the group home, refraining from serious incidents, finishing high school, maintaining employment (if age appropriate), and developing basic life skills. If the transition is to a home placement, visits with the future caregivers is encouraged on and off unit as well as at least one to two home visits to help support transition when possible. Family therapy or participation in at least one to two sessions with youth prior to discharge is encouraged to support

transition and begin to facilitate communication about life after the group home. Graduating high school for the older youth is often a milestone associated with transition for services.

- b. **Early Discharge/Termination of Services Criteria:** The STARS program will try to work with all youth to maintain in placement and coordinate with DSS regarding services if placement is not working out. The program will attempt to provide a two weeks notice to discharge for all youth in which termination of services is being requested. However, if youth are presenting a clear and present danger to themselves or others, a request for a more immediate discharge may occur. Youth who are aggressive towards staff or peers frequently and without provocation, youth who are going AWOL on a daily basis, youth who engage in sexually inappropriate behaviors without regards for safety of themselves or others are likely to have discharge requested very quickly to ensure their safety. Youth with continued substance use issues or frequent acute hospitalizations for self-harm behaviors and safety concerns will also be a request for discharge if there behaviors are not able to be managed by services in the community. Any attempts to engage in property destruction in regards to fire-starting behaviors is immediate removal from the program.

- **PRE-PLACEMENT AND/OR ADMISSION PROCESS:** Referrals can be made 24 hours a day, 7 days a week. To contact the admission coordinator for referrals which are not immediate, the best times are Monday through Friday from 8-5pm. The current contact for this is Amanda Roy, who is one of the Program Directors. She can be reached at 434-970-1904 or via email at aroy@thestarsprogram.com. We like to set up assessments if time allows for the referral and this can often happen within 2-3 days of referral and sometimes immediately. Once an assessment is completed, we are able to let legal guardians know the day of the assessment or next day about if the person is accepted and if a bed is available, we can place them right away. There are also cases where a youth can come immediately following an assessment if they are approved for placement. Special consideration is given for admission dates especially around the start and end of the school year to try to best ensure the youth will not be delayed in starting school or be unable to enroll and participate in an education plan due to end of year testing. There are 7 forms which must be completed for placement at the time of admission:

- Application for STARS
- Placement agreement
- Permission to obtain medical care
- Release of information
- Permission for immunizations
- Notice of Human Rights

- Immediate enrollment for youth in foster care (for youth who will attend public school)
- Notice of Student Receiving Foster Care Services & Request for Best Interest Determination Participation Form (for youth who will attend public school)

If youth is still in the care of their parents but an agency is assisting in placement, then the agency may completed the application but all other forms needs to be signed by the legal guardian and are needed at time of placement.

A legal guardian checklist is also provided for all referrals which indicate a request for additional information (copy of birth certificate, insurance card, court documents, social history, etc). Any paperwork that can be provided to help ensure proper services are in place for the youth is appreciated.

If an assessment has been scheduled for the youth, we would like to have the application, last report from their current placement, a recent psychological evaluation, and last foster care review before attending the assessment. This is not required but helpful to ensuring we are being thorough during the assessment.

If we are going to be applying for Medicaid to cover the supervision portion of a youth's stay in our DBHDS homes, we will need a new certificate of need and completion of the IACCT process prior to admission. If the youth is going to be considered an emergency placement at admission into our DBHDS homes, provider will initiate the IACCT and complete the certificate of need. If the youth is IV-E or being placed in the DSS licensed homes then these items are not needed.

- **FOR OUT-OF-HOME PLACEMENT SERVICES ONLY:**

- DO YOU ACCEPT EMERGENCY ADMISSIONS? ☒ YES ☐ NO
- DO YOU ACCEPT AFTER HOUR EMERGENCY ADMISSIONS/PLACEMENTS? ☒ YES ☐ NO
- IF YES, PLEASE OUTLINE THE PROCESS:

- i. We accept emergency placements 24 hours a day, 7 days a week if a bed is available and they meet initial criteria (male or female ages 13-19, anticipated length of stay is at least 90 days, IQ is 70 or above, no history of fire starting behaviors, no current psychosis, no history of inappropriate sexual behaviors which has been addressed in an inpatient setting (unless ordered for outpatient services.)
- ii. All after hour referrals should be called to 434-970-1904. A staff member will assist you and reach out to the on-call staff on duty to help with the referral.
- iii. Referring agent would contact the group home and provide the information known about the youth. Staff will need to know if the individual is male or female, age, and current behaviors as well as if they have any history of exclusion behaviors known at that time. The referring agent must be intending to place youth in program for at least 90 days. If placement is only needed for a few days or a few weeks between placement, we are not an appropriate placement option for youth.
- iv. For emergency placements, we require the placement agreement and permission to obtain medical care be completed for placement. The application does not need to be completed fully but the 1st page should be completed with the basic information and point of contact on the case in case anything is to happen during the first 24 hours of placement. This is required to place youth. All other admission paperwork including a completed application is required to be sent within 24-48 hours of placement. If the youth has been in care for a while, additional documents will be required within 72 hours of placement. If they are new to care, staff will work with DSS to obtain the required documents during the 1st 30 days of placement.

• **FOR COMMUNITY-BASED SERVICES ONLY: Not Applicable**

a. **DO YOU ACCEPT EMERGENCY REFERRALS?** _____ YES _____ NO

b. **DO YOU ACCEPT AFTER HOUR EMERGENCY REFERRALS?**

_____ YES _____ NO

a. **IF YES, PLEASE OUTLINE THE PROCESS:**

- i. *What are the hours for acceptance and receiving of client?*
- ii. *What is your contact information for emergency referrals after hours?*
- iii. *What is the actual referral process for emergencies?*

iv. *What are the documents that you absolutely require?*

TREATMENT PLAN/ SERVICE PLAN PROCESS: There are monthly treatment team meetings with youth and their case manager. Legal guardians are invited to participate via phone or in person and other important team members including probation officers, CASA workers, GALs, and family members who are active in the youth's life and placement. If a youth is struggling or a more formal meeting is needed, we will schedule this on an as needed basis. Our staff will attend or participate in all court hearings, required social worker visits, required family partnership meetings or team decision making meetings, and FAPT meetings as requested by the legal guardian. Case managers are available every day Monday through Friday for phone calls or emails to ensure constant updates with legal guardians, GALs, probation officers, CASA workers, family members (if approved by legal guardian to have access to the information) and any other necessary service providers.

Case managers utilize the goals of the FAPT team, requests by the legal guardians or courts, and prior service plans from their last placement as appropriate to make a current service plan to ensure the goals are consistent and working towards the same result. This is why documentation of prior services is so helpful to ensure consistency and treatment and what goals may still need to be achieved in a community setting.

NATURAL SUPPORTS: Our program is supportive of family involvement and helping the youth maintain any relationships with positive family members or past providers as identified appropriate by the legal guardian. Residents may utilize phone calls, write letters, and have visits (on or off unit as appropriate). Family members are invited to attend or participate via phone in treatment team meetings if they are the direct support for the youth and this is determined appropriate. Residents are allowed to attend church services in the community after 30 days if they would like and staff works with them on identifying options for them. During their first 30 days, some youth will attend church with staff if they would like to help build their support system. We often find ourselves becoming life long supports to the youth that we serve regardless of a good or bad outcome in the program. It is a practice that the owner Kara Gloeckner meet individually with the youth prior to placement to talk about the many opportunities that could be offered. The most important part of this interview begins with the attachment between the perspective youth and the program director in order to help them feel supported at every level when in placement.