

**NORTH DAKOTA DEPARTMENT OF HUMAN SERVICES
BISMARCK, NORTH DAKOTA
April 4, 2016**

PI 16-29

TO: Regional Supervisors
County Social Service
Division of Juvenile Services
Tribal Social Services
PATH
Residential Child Care Facilities (RCCF's)

FROM: Kelsey Bless, Permanency Administrator

SUBJECT: Foster Care Maintenance Payments 623-05

PROGRAMS: Foster Care

EFFECTIVE: **Immediately**

RETENTION: Until Manualized

NDDHS Children and Family Services (CFS) strives to update manuals to keep policy current for the betterment of children in foster care and to ensure workers are aware of changes timely. Emphasis has been placed on ensuring the foster care manual chapters have new policy added, duplicate sections deleted, areas combined to assist in chapter navigation, etc. In addition, the viewable online policy manual has “archived” policy appearing when a reader searches for a topic. There is a technical fix in place where the online manual will only show the current policy and will omit the “archived” or previous policy from the public eye; minimizing error of staff interpreting old policy.

This PI details specific changes identified in the first half of the 623-05 “Foster Care Maintenance Payment” policy chapter. It was determined that some policy should be transferred to other manuals; for example into eligibility determination 447-10 or permanency planning 624-05. Those sections will be deleted from this manual and updated into the appropriate policy manual in the near future.

NOTE Payment related policies specific to SB 2206 “county foster care costs” are pending and will be distributed in a separate policy issuance when available.

If you have questions, please feel free to contact Kelsey Bless at 701-328-3581 or kmbless@nd.gov.

Chapter 623-05 Updates:

Foster Care Maintenance Payments Policies and Procedures 623-05-01

All concepts of this chapter apply to Title IV-E (Title IV-E of the Social Security Act), regular match, and emergency assistance foster care payments. Payments may only be issued to a licensed or approved provider who meets full compliance with licensing standards.

Prior to payments, an eligibility determination must be completed for all children in foster care to determine if they are entitled to state or federal benefits. Each of the criteria that must be considered when making this determination is discussed throughout this chapter. Most of the criteria apply to all children. The AFDC requirements of July 16, 1996 are used when determining North Dakota foster care eligibility.

Federal funds can be claimed for any child who meets certain Title IV-E eligibility requirements. County Eligibility staff will determine eligibility for the foster care program. The case manager from a county, DJS, or Tribe is responsible for obtaining the information needed to determine eligibility. Detailed policy reflecting the eligibility criteria a child must meet before eligibility can be established and Title IV-E funds claimed is found in Policy Manual Chapter 447-10 "IV-E Foster Care Eligibility".

Definitions 623-05-05 (Replace all needed definitions into one section in ABC order!)

Applicant - A parent(s), person or agency having the custody of a dependent child making application for aid for such child under the provisions of Chapter 447-10. A foster child that reaches the age of 18 years may make an application in his or her own behalf.

Correction Facility – An institution where juvenile offenders can be temporarily held and are usually under the supervision of a juvenile court. Examples include a Detention Center, Youth Correction Center, etc. A child is not considered to be in foster care and no foster care payments can be expended for a youth in a correctional placement.

Custodian or Custodial Agency - The agency to which the court has given responsibility for care, custody and control, or for placement and care of the child. This may be a county social service board, the Division of Juvenile Services, tribal social services, or the Executive Director of the North Dakota Department of Human Services.

Foster Care - Hereafter in this chapter, the general term foster care may include care in foster family homes, group homes, residential child care facilities, residential treatment centers, and psychiatric residential treatment facilities.

Foster Care Maintenance Payment - Payment to cover the cost of (and the cost of providing) food, clothing, shelter, daily supervision, school supplies, a child's personal incidentals, liability insurance with respect to a child, and reasonable travel to the child's home for visitation and reasonable travel for the child to remain in the school in which the child is enrolled at the time of placement. In residential care, reasonable costs of administration are included. In addition to maintenance payments, certain administrative and service payments are allowable. Hereafter in this chapter when the shorter terms "foster care payment" or "maintenance payments" are used, it means the foster care maintenance payment.

Family Foster Home - An occupied private residence in which foster care for children is regularly provided by the owner or lessee thereof to no more than four children. Exception: unless all the children in foster care are related to each other by blood or marriage, or unless the department approves otherwise for the placement of siblings, in which case the limitation shall not apply.

Group Home - A residence in which foster care is regularly provided for four or more, but less than thirteen unrelated children.

Irregular Payment - Reimbursement with foster care fund for fees/expenses that meet the irregular category definition and criteria incurred by a foster care provider on behalf of a foster care child. The irregular categories reimburse for expenses over and above the standard maintenance payment which covers the basic care and needs of the foster care child.

Licensed Relative Homes - A relative may request to have his or her home licensed or approved in order to receive a foster care maintenance payment. If the home meets the standards for licensure or approval and if the child(ren) in question otherwise meets all requirements of foster care, the appropriate foster care daily rate must be paid. There is a relative waiver option that can be considered for relatives only specific to non-safety related licensing compliance.

Psychiatric Residential Treatment Centers (PRTF's) - Accredited residential treatment centers that provide inpatient psychiatric services for eligible individuals under age 21. Foster youth placed in PRTF's will be processed under regular Medicaid rules. In order for Medicaid to pay for the individual's care, a certificate of need will be required.

Residential Child Care Facility- A facility other than an occupied private residence providing foster care to more than eight unrelated children, except as may be otherwise provided by rule or regulation.

Residential Treatment Center for Children- A licensed facility that provides residential treatment for mentally ill persons who are children within the meaning of NDCC section 27-20-02 or who are minors. Effective July 1, 2006, residential treatment facilities in-state and some out-of-state, that are accredited and providing inpatient psychiatric services will be referred to as Psychiatric Residential Treatment Facilities (PRTF's).

Tribal Title IV-E Foster Care Payments ND Tribal Social Service Agencies have access to Title IV-E funding through an agreement with NDDHS to receive payment on eligible Title IV-E foster care cases. Foster care payment to providers licensed or approved by the Tribe can only be made if the provider meets Department of Human Services standards or equivalent and such standards have prior approval of Department of Human Services.

Purpose of Payment 623-05-15-05

A foster care maintenance payment is to reimburse foster care providers for care, protection, and other material necessities needed for an eligible foster child.

Retroactive Payments 623-05-15-20

It is the responsibility of the custodial agency to obtain and submit the required documents for eligibility determination to the administrative county within 45 days of a foster care placement. See Policy Manual Chapter 447-10 regarding application.

Retroactive payments in excess of 90 days are not allowed. When payments cannot be made due to the custodial agency failing to provide the necessary eligibility documents timely, the custodial agency is responsible for the foster care expenditures in excess of the 90 days from the date the eligibility worker received all eligibility documentation enabling them to complete the eligibility determination.

Example: Child enters foster care on 4/1/2015. Eligibility worker does not receive all of the necessary documents to determine eligibility until 7/15/2015; 106 days after the child was placed in foster care. Counting back 90 days from 7/15/2015 will allow payments to begin on 4/17/2015. Payments for 4/1/2015 to 4/16/2015 are not payable with foster care funds and are the custodial agencies responsibility.

Payment in CCWIPS 623-05-15-30-20

FRAME will automatically upload foster care placement information into the payment authorization screen in CCWIPS.

Payment authorization is dependent on:

1. A current court order,
2. A current provider license, and
3. A timely care plan,

In state provider payments are automatically calculated based on:

1. Placement duration dates,
2. Provider licensing dates, and
3. Court order dates.

Out of state provider payments do not automatically calculate, the payment amount will need to be manually entered based on an itemized bill during the payment authorization process.

Interstate Compact Children Receiving Foster Care Payments 623-05-15-35

When a child is placed for foster care in another state the placement will be made through Interstate Compact on the Placement of Children (ICPC) and the child does not by such absence lose legal residence in North Dakota.

If parents move from North Dakota, eligibility for foster care payment with respect to residence continues in North Dakota.

When North Dakota is the receiving state in an Interstate Compact placement and the child is placed with a licensed family foster home in North Dakota, the sending agency must reimburse the provider at a rate consistent with North Dakota's foster care prevailing reimbursement rate.

When North Dakota is placing (sending) a child in another state through Interstate Compact, North Dakota will reimburse the provider in the receiving state at the receiving state's prevailing rate, not the North Dakota rate. ICPC approval is necessary prior to making any foster care payments.

Foster care funds cannot be used to fund an unlicensed provider or a placement that does not meet ICPC compliance/approval from Children & Family Services. For more information, see the ICPC Manual Chapter 619-01.

Payment Eligibility Requirements 623-05-15-40

Foster care payment is available to any foster child under 21 years of age who:

1. Is determined eligible based on the AFDC eligibility criteria;
2. Is under the custody of a public agency, and
3. Resides with a licensed provider.

Child Support Referrals 623-05-15-45-05

County Social Service Boards (Administrative County) must submit a child support referral on each parent whose child is in foster care. There are two exceptions to making a child support referral. A referral will not be made against either parent;

1. If one of both parents receive a subsidized adoption payment on behalf of a child in foster care, or
2. If the child's placement was short-term. For purposes of this exception, "short-term" is defined as follows:
 - a. The child exited the placement by the time the referral would be sent, and
 - b. The child was in the placement for 60 days or less.

Both criteria a and b must be met in order for the referral to be eliminated (i.e., not made). If the child is in placement at the time of referral, a referral is made regardless of the amount of time the child has been in placement.

Special circumstances may also apply when submitting the referral; those include:

1. DA = Donor Assisted Conception
2. OT = Other special circumstances reason
3. SP = Single parent adoption

4. TR = Terminated Parental Rights

The Department of Human Services uses automated systems to transmit and receive referrals. Child support referrals must be completed and transmitted in CCWIPS. The referral information sent to the Child Support Division is used to establish paternity, locate the absent parent(s), and establish and enforce a support order. The referral may be transmitted by the County Social Service Board to Child Support at any time following placement, but is required to be transmitted at the time of initial payment authorization.

Once a child support referral is in an open status, child support collected on behalf of the child will automatically be allocated to the North Dakota Department of Human Services to offset the amount expended for foster care while the child is in a paid placement. When a child's placement is closed/ended, the child support referral will revert to "close pending" and remain in a monitor status until the child's foster care program is closed or a new placement is entered.

Excess Child Support Payments:

The legal custodian will be sent any child support collected that is in excess of the foster care expenditures for any month in which the child was in a paid placement. In months in which a child transitions between paid and non-paid placements, the collected amount in excess of the foster care expenditures for that month will be sent to the custodial agency. The custodial agency should verify with the Administrative county and Child Support the reason for the direct payment to the agency. Several circumstances will impact how the money is allocated:

1. Foster child is placed in an unpaid or unlicensed family setting:
 - a. Child support received by the custodian. Custodian should determine how to re-allocate the money to best meet the needs of the child.
2. Foster child is placed with a licensed provider (family, therapeutic home, group home, residential child care facility):
 - a. The online child support referral system shall reallocate funds automatically, however if an custodial agency receives a child support check on behalf of a child, they must;
 - i. Identify if a provider has been paid.
 - ii. Identify if the funds are "excess" and should be directed into a savings account for the child.
 - iii. Only if a provider has not been paid, then the custodial agency must complete a SFN 827 and send the check to NDDHS Fiscal Administration detailing how to reallocate the funds.

Foster child in a Psychiatric Residential Treatment Facility (PRTF). This is a medical placement:

1. Identify if the PRTF has been paid;

2. Custodial agency must work with the Administrative county to ensure the PRTF has been paid based on ND Medicaid policy.

Child & Family Team Meeting Reports 623-05-15-60

The custodial case manager is responsible for co-facilitating the initial Child & Family Team meeting within 30 days of placement and must prepare and enter the initial case plan into FRAME. Child and Family Team Meetings are done on a quarterly basis.

Approval of irregular payments and the foster care maintenance rate for an out of state placement should be documented in the Child & Family Team Meeting notes. The case manager must provide the eligibility worker with a copy of the Child & Family Team Meeting notes in order for authorization of such payments to occur.

Voluntary Parental Placement 623-05-15-65

NDDHS Children & Family Services does not participate in payment for voluntary placements when a public agency does not have care, custody, and control of the child. If voluntary treatment is a desire of the family, the families are to be redirected to the NDDHS Behavioral Health Division Voluntary Treatment program.

Division of Juvenile Services (DJS) Foster Care Payments 623-05-15-75

The DJS representative is responsible for:

1. Providing the Application for Assistance (SFN 641) on behalf of the foster child(ren);
2. Notifying the Eligibility Worker timely of any placement changes (SFN 45); and
3. Closing a placement timely when a child exits foster care.

Matching Symbols 623-05-15-90

Match symbols are a result of the eligibility determination for the child made by following Policy Manual Chapter 447-10. Every foster care payment must have a match symbol identified in order to authorize payment.

FOSTER CARE	SYMBOL	SOURCE OF FUNDS FOR MAINTENANCE
Federal Matching	FM	Federal participation with 100% state sharing of non-federal funds (same as former AFDC formula)
Federal Matching Non-reimbursable (Title IV-E eligible/not reimbursable)	FN	75%100% state
Federal Matching Indian	NA	Federal participation and 100% state funds for

		non-federal share
Emergency Assistance (10/1/1999)	EA	75% federal and 25% state
Regular	RM	25% county; 75%100% state
Regular Match Indian	NR	100% state

The payment system has additional codes (SA, SF, SR, SN) if the child is in receipt of sub-adopt payments. Please see Policy Manual Chapter 617-05.

FM/ FN Match Symbol 623-05-15-95

When a child is Title IV-E eligible and not in receipt of SSI, the match symbol of “FM” must be used in the payment authorization.

When a child is Title IV-E eligible and is in receipt of SSI, s/he is Title IV-E eligible, but is non-reimbursable “FN” due to the receipt of SSI. If SSI is received during the month the child is in a paid placement, a match symbol of “FN” must be used for payment authorization.

Example: Mom with 2 children, one child receives SSI. Mom and other child are in receipt of TANF benefits. Child with SSI is placed in foster care. The SSI is more than the cost of care, in turn the county continues to receive the SSI payment. In this example, the foster child is Title IV-E eligible, however not reimbursable due to the continued receipt of the SSI and the proper match code in this example would be "FN."

NA/NR Match Symbol 623-05-15-100

The NA and NR match symbols are limited to the ten counties of financial responsibility as noted in Policy Manual Chapter 447-10. These match symbols apply to any Native American foster child whose parent(s) lived on the reservation at the time the child entered foster care.

The “NR” code should only be used in cases when:

1. There is a secondary placement of an “NA” Federal Matching Indian case, or
2. DJS has custody of Native American foster child whose parents lived on the reservation at the time and the child is not IV-E eligible.

A child under tribal custody who is coded Native American Federal Match “NA” will lose Title IV-E eligibility when s/he turns 18 years of age and will not graduate prior to age 19. The case must be closed as of the last day of the month in which s/he turns 18. At this point, the tribe becomes financially responsible for the case.

If a Title IV-E tribal youth ages out of North Dakota foster care, he/she is eligible to remain in or return to 18+ Continued Foster Care.

Payment - General Principles 623-05-20-05

All foster care standard maintenance payments must be authorized the last week of the month prior to the scheduled standard check write. NDDHS has an established payment schedule for various programs. The calendar of payment dates is sent to all foster care providers the end of each calendar year, showing which date of the month the foster care standard maintenance payment will be issued from NDDHS and either mailed or direct deposited into the account of the provider.

When a child moves from one home to another during a month, payment should be made to each home for the day of the move. This is an exception to the general rule that prohibits overlapping payments. An overlap of payments for discharge and placement dates is not allowed when a child is moved to a different level of facility care within an umbrella agency; i.e. when a child moves from Dakota Boys Ranch PRTF to Dakota Boys Ranch RCCF. Example the foster care maintenance payment cannot start until the next day:

	Start Date	End Date
DBGR – PRTF	1/1/03	6/14/03
DBGR – RCCF	6/15/03	

Features of the CCWIPS system are:

1. Providers will receive one payment during the regular monthly check write, for all children placed in their care.
2. The monthly payment will be accompanied by a remittance advice showing each segment of every payment included for each child's care.
3. The main check write will be the second to the last working day each month, with the opportunity to issue weekly supplemental payments as needed.
4. All maintenance payments will be paid at a daily rate. This means that payment amounts will vary from month to month. The remittance advice accompanying the payment will provide a detailed explanation.
5. County social services, Division of Juvenile Services, and Regional Human Service Centers are responsible for entering court order, placement, provider and care plan information into FRAME and CCWIPS in order to generate a payment to the applicable provider.
 - a. A full payment will calculate when a court order, provider license, placement date, and care plan is current for the payment month.
 - b. A partial payment will calculate when a court order, provider license, or placement date expires or ends prior to the last day of the payment month.
 - c. No payment will calculate when a court order, provider license, placement ends, or no current care plan in place prior to the payment month.
 - d. Over or under payments may occur when additional information is entered, which effect the payment calculation. Once all information has been updated, a payment may be issued during the next supplemental check write.
6. Questions about the timeliness or amount of a foster care payment will be directed to the county office responsible for processing the payment.
7. Questions regarding subsidized adoption payments can be directed to the central office, CFS Adoption Administrator.

8. Deductions from foster care maintenance payments cannot be withheld from unpaid obligations incurred by the foster care provider on behalf of the foster child, such as child care, etc. Such obligations are the responsibility of the foster care provider.
9. Providers are encouraged to set up direct deposit to receive maintenance payments more quickly (typically within 24 working hours of the date in which NDDHS issues payment). If a provider chooses to get a paper check sent in the mail, NDDHS is not responsible for timeliness of the US Postal Service.
 - a. Direct Deposit information can be sent to CFS. A provider must show verification by providing a bank direct deposit form or a voided check indicating the bank routing number and account number. The provider should indicate if the account is savings or checking and also if they are an subsidized adoption or a foster care provider.

Remitting Overpayments/Reimbursements 623-05-20-15

Any payment to the state for foster care refunds and reimbursements must be submitted to NDDHS/Fiscal Administration with a completed credit form, SFN 827. The client name and foster care case number must be included to ensure proper credit.

Example One: County worker receives a check from the facility for reimbursement of care costs by BC/BS. This would be entered as accounts receivable in CCWIPS and coded as other income as per CCWIPS User Manual. The county would then send the BC/BS payment to the NDDHS Fiscal Administration office for credit towards the overpayment.

Example Two: The child in foster care receives monthly income of Social Security Survivors benefits. This would be entered as income for the child and the amount of care costs forwarded to the NDDHS Fiscal Administration office to be credit towards the care costs. Keep in mind, any money in excess of the care costs will be handled as per Policy Manual Chapter 447-10. Refer to the CCWIPS User Manual for procedures regarding accounts receivable.

Recoupment of Foster Care Overpayments 623-05-20-20

CCWIPS has the ability to recoup overpayments from foster care providers for amounts due to the Department. The payment system has the ability to automatically subtract any debits (such as the overpayment) to that provider for any foster child. The procedure for overpayment recoupment is as follows:

1. Overpayments made to **foster care providers** are recouped in CCWIPS the month following the month the overpayment is set up in the payment system, assuming that any foster child is residing in the home and/or a payment is being made to that **provider**. This direct recoupment is a central office, CFS, function only.
 - a. **CCWIPS can only recoup from the standard check write. For providers where a placement continues and an overpayment has occurred, CFS will set up the auto-recoupment specific to that provider. Payment authorization must be made after the last supplemental check write and before the standard check write in order for the auto-recoupment to process that month.**

2. If no payment is due to the foster care provider in the month following the month the overpayment is set up, the county collects the overpayment from the foster care provider and sends the overpayment remittance to NDDHS Fiscal Administration with a completed credit form (SFN 827).
3. NDDHS Fiscal Administration will age unresolved balances and at the three month point will bill the financially responsible county dollar for dollar. Indian county cases in need of overpayment reimbursement will be reviewed and handled on a case-by-case basis.

Collections:

If recoupment from a foster care provider cannot be accomplished, NDDHS will work to collect the overpayment through a collection agency. If the agency does collect the overpayment from the provider, the money will be paid to NDDHS and the CCWIPS payment record will be adjusted accordingly. If the collection agency holds the account for six years and does not have success in collecting the overpayment, state law requires the collection agency to return the account to NDDHS.

NDDHS can make the determination to close the CCWIPS foster care overpayment if the account was returned to NDDHS from a collection agency after six years and the overpayment amount does not exceed a value approved by Fiscal Administration.

Payment Rates 623-05-20-25

The family foster care rates are reviewed and revised annually, based on legislative action. The standard family foster care maintenance rate includes the cost of (and the cost of providing) food, clothing, shelter, daily supervision, school supplies, a child’s personal incidentals, and liability insurance with respect to a child.

The family foster care maintenance rate is computed by month and includes an amount for clothing and incidentals. The rates effective July 1, 2015:

CHILD AGE	BASIC RATE	CLOTHING AND INCIDENTALS	COMPUTED MONTHLY (30 days)
0 - 4 Years	\$720.32	\$55.00	\$775.32
5 - 12 Years	\$823.79	\$65.00	\$888.79
13+	\$900.06	\$75.00	\$975.06

FC Maintenance Payments are made using the daily rate times the number of days in care.

CHILD AGE	COMPUTED MONTHLY (30 days)	PAID DAILY
0 - 4 Years	\$775.32	\$25.49
5- 12 Years	\$888.79	\$29.22
13+	\$975.06	\$32.06

To the above rates the County Social Service Board may, on the basis of individualized need, add the cost of irregular items allowed in foster care maintenance.

Absences from Placement 623-05-20-30

Placement for 14 days or less under a plan which meets the approval of the custodian, and the intention is for the child to return to that same provider, there will be no reduction in the standard maintenance payment. Foster care payments cannot be made if the child is absent from the primary placement for more than 14 days.

An absence that extends past the 14th day will require a change in placement. For example; a child has a primary placement in a foster home, they become hospitalized. The case manager will enter a secondary placement of hospitalization. Once the 14th day passes, the primary and secondary placements must be closed and the “Non-foster care” hospitalization will become the primary placement.

Trial Home Visits 623-05-20-31 (NEW SECTION)

Foster care maintenance payments are not made when a child is placed on a trial home visit.

Placement Approvals 623-05-20-32 (NEW SECTION)

The regional supervisor must approve all placements when a child is placed in a;

- Therapeutic Foster Home,
- Group Home or Residential Child Care Facility, or
- Psychiatric Residential Treatment Facility

The approval request must be submitted by the case manager via the Group/Therapeutic/PRTF Placement Request in FRAME. To avoid payment issues, **each** provider with whom the child is placed requires an approval and the placements must be entered in the appropriate date sequence in FRAME.

The custodial case manager should provide the eligibility worker the SFN 45 – “Notice of Change” form each time a change occurs with the case, this will ensure payment is correctly authorized to each provider and will assist in avoiding overpayments.

Maintenance Rate - Therapeutic Foster Care 623-05-20-35

1. ND Therapeutic Providers:
 PATH-ND (Professional Association of Treatment Homes)
 1202 Westrac Dr S, Suite 100
 Fargo, ND 58103
 Phone: 701-280-8545

Billing Address:
 PATH ND
 Rice Creek Professional Building
 5985 Rice Creek Pkwy, Suite 202
 Shoreview, MN 55126

PATH Maintenance Rates (July 1, 2015) Payments are made using the daily rate times the number of days in care.

LEVEL OF CARE OFFERED BY THE	DAILY RATE	MONTHLY RATE
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THERAPUETIC PROVIDER		(30 days)
Therapeutic Treatment PATH provides case management	\$108.18	\$3,245.40
Step Down (Regular PATH) PATH provides case management	\$66.23	\$1,986.90
County (Flow Through) Sibling placement – Custodian provides case management to the child.	Family Foster Care Maintenance Rate (Based on Child Age)	Varied

The custodian and the child's team will evaluate the child's progress to determine the appropriate level of care. If placement in the PATH Step Down option is appropriate, the custodian and PATH will sign the needed documentation at the Child & Family Team meeting. The custodial case manager will be responsible to notify the county eligibility worker of any changes.

The therapeutic level of care (treatment, step down, county) rate must be the first of the month. It will not be possible to pay for a partial month of care.

BILLING:

The PATH billing office will send a separate bill for each child monthly. The county should receive the bill on or around the 12th of the month. Eligibility workers must wait for the bill prior to authorizing payments. The payment amount is not automatically calculated by the payment system and will require manual input. The bill should be kept in the foster care eligibility file.

- If PATH has a placement and also has an overpayment. Eligibility must wait to authorize the standard maintenance payment until the last week of that month, after the last supplemental check write and prior to the standard check write in an effort to auto-recoup the provider overpayment.

PAYMENTS

Therapeutic and Step-Down/PATH Regular Foster Care:

The amount billed is based on the number of days in placement, not to exceed the number of days in the month. Reimbursement of overlapping days of placement from one therapeutic provider to another is not allowed.

- Example: A child changes placement from one therapeutic home to another on the 3rd of the month, only one therapeutic provider can be reimbursed for the 3rd.
- Secondary placements in a therapeutic home when a child is in a primary therapeutic placement are not reimbursable.
- The monthly bill from the agency must provide an itemization of each placement with each provider. If the bill contains multiple providers, each provider must have an approved placement in FRAME and payment authorization must be made to each provider based on the billed dates and amount specific to that provider. Do not authorize a lump sum payment to only one provider if multiple placements exist during the billing cycle.

Irregular payments: Only two irregular payment options are allowed for Therapeutic and Step-Down/PATH Regular Foster Care:

- Travel for foster parents to transport to a school in which the youth is enrolled at the time of placement, payment code 53, and
- If the foster child has their own child (not in public agency custody) 'parent/infant' payment, code 71.

NOTE: CCWIPS will only allow irregular payment authorization for codes 53 and 71 for a licensed therapeutic provider.

County (Flow Through) Placements:

The county (flow through) rate is billed by PATH to the county monthly. The rate billed is based on the ND family foster care maintenance rate specific to the child's age.

Irregular Payments for county (flow through) placements are allowed and the same policy applies to county (flow through) placements in a therapeutic home as it does for county family foster care placements. The rate does not include irregular payments and PATH will not bill for approved irregular expenses. The reimbursement of receipts is handled through the county as follows:

1. All irregular payments must be approved as set forth in policy and should be documented in the Child and Family Team Meeting notes.
2. Case manager must provide the eligibility worker with documentation of the approved irregular expenses.
3. The receipts are emailed/faxed/mailed by the PATH foster care provider to a designated PATH worker and/or county case manager.
4. The county case manager should provide the eligibility worker with a copy of the receipts and the PATH worker will provide the PATH billing office with a copy of the receipts (unless other arrangements have been made between the PATH worker and the County case managers in regard to distribution of the receipts).
5. PATH **DOES NOT** bill the irregular expenses for PATH county (flow through) placements to the county. They will only bill the standard rate for care. It is the responsibility of the county to reimburse the irregular payments to PATH. In turn, PATH will reimburse the foster parents the amount of payment received from the county to cover the irregular expenses; hence "flow through".
6. If PATH's billing office has questions regarding the amount received over and above the standard foster care rate, the county worker will be contacted for clarification.

How to Authorize the Irregular Payments for PATH County (flow through) placements in CCWIPS:

- The amount of the receipt(s) must be added to the standard maintenance payment amount.
- CCWIPS allows only two irregular payment codes to PATH providers - codes 53 and 71. Therefore, irregular payments will require a payment adjustment of the monthly standard payment.
- Irregular payments for code 53 - transportation to school and code 71 – parent/infant care, must be authorized separately and on the irregular payment screen.

Refer to CCWIPS User manual for technical assistance related to entering PATH-ND foster care payments on the CCWIPS system.

Medicaid eligibility must be determined prior to referral of a child to PATH-ND. The treatment (rehabilitation) amount may be paid by Title XIX, or some other resource. Rehabilitation costs

CANNOT BE PAID THROUGH FOSTER CARE.

Rates & Payment to ND Foster Care Group Homes/ Residential Child Care Facilities (RCCF's) 623-05-20-40

NDDHS, as a purchaser of services, will establish a daily rate per NDAC 75-03-15, "Rate Setting for Providers of Services to Foster Children Group Home and Residential Child Care Facilities", for all licensed/approved North Dakota RCCF's.

RCCF maintenance rates include resident room and board, food, care, clothing, personal supplies, education, recreation, child service related transportation, medical expenses outside of child insurance coverage, liability insurance coverage, utilities, etc.

Reimbursement may be available for eligible families to facilitate reunification efforts. Funding may be provided to cover the costs of the family expenses, meals, lodging, occasionally mileage, or commercial transportation as outlined in the irregular payment categories. North Dakota will reimburse allowable travel expenses to the facility with consideration of actual costs, not to exceed state per diem rates. Costs will be reimbursed based on North Dakota in-state rates, even if travel is to another state facility. Commercial transportation will be reimbursed at the actual rate. The facility and custodial case manager are expected to seek the lowest possible rate when commercial transportation is required.

For foster care billing purposes, these costs are considered a reunification cost and entered as an irregular payment in CCWIPS, Category 50, Code 52. Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments in the payment system.

Verification of expenditures are required and must be retained for audit purposes.

ND Daily Maintenance Rates -- Group and Residential Child Care Facilities

Group Home and Residential Child Care Facilities	EFFECTIVE DATE	DAILY RATE
Charles Hall Youth Services P.O. Box 1995, Bismarck, ND 58502-1995	07-01-15	(F) 268.54
Dakota Boys Ranch Assn. – Minot Campus Box 5007, Minot, ND 58702-5007	01-01-16	(F) 310.36
Dakota Boys Ranch Assn. – Fargo Youth Home 1641 31 st Ave S, Fargo, ND 58103	01-01-16	(F) 310.36
Eckert Youth Homes Box 2291, Williston, ND 58802	07-01-15	(F) 307.58
Harmony House 406 4th Avenue, Devils Lake, ND 58301	01-01-16	(F) 152.96

Home on the Range 16351 I-94, Sentinel Butte, ND 58654-9500	04-01-15	(F) 313.82
Kay's Place 1325 17 th Ave SW, Minot, ND 58701	01-01-16	(F) 325.82
Prairie Learning Center 7785 St. Gertrude Ave, Raleigh, ND 58564-4103	07-01-15	(F) 248.91
Pride HOPE Home PO Box 4086, Bismarck, ND 58501	01-01-15	(F) 335.89
Serenity Christian Homes 1111 Prairie Parkway, West Fargo, ND 58078	04-16-15	(F) 256.69
Lake Oahe Group Home Standing Rock Nation* P.O. Box 176, Fort Yates, ND 58538	04-01-16	(F) 181.43
*Approved facility for a tribe.	D Desk Rate F Final Rate	

Out-of-State Placements in Foster Care Group Home or Residential Child Care Facility 623-05-20-50

An itemized bill is required from the out of state facility for all North Dakota foster children placed out of state following the ICPC approval. The eligibility worker must manually enter the standard maintenance payment into the payment system upon receipt of the bill. A copy of the bill must be retained in the foster care eligibility file.

– Ongoing Reimbursability 623-05-20-65

Ongoing foster care maintenance payments require:

- A licensed/approved provider,
- A valid court order, and
- Quarterly Child & Family Team meeting notes