

COSTAR – Family Foster Care

106.0 UNIFORM ACCOUNTING SYSTEM (UAS) CODES

UAS	DESCRIPTION	LAST UPDATE
323	Foster Home Development Funds	November 2014
501	IV-E Family Foster Care	July 2016
502	State Family Foster Care	July 2016
503	Initial TANF Family Foster Care	July 2016
504	Related Family Foster Care (State)	Sept 2016
513	Return of Runaways	Nov 2009
520	Respite	July 2016
529	Undocumented Immigrant Children in Family Foster Care	July 2016
531	Foster/Adoptive Parent Support Services - OLD	April 2015
547	Emergency Foster Care Beds	July 2009
560	IV-E Voluntary Family Foster Care	July 2016
574	IV-E Specialized Foster Care – State Approved Per Diem Waivers	July 2016
575	Voluntary Specialized FC-State Approved Per Diem Waivers	July 2016
576	Related Specialized Foster Care (State)	Sept 2016
577	IV-B Child Welfare Specialized FC State Approved Per Diem Waivers	July 2016
578	Child Welfare Specialized Foster Care Related (State) (No longer used effective July 2008)	July 2009
579	Initial TANF Specialized Foster Care State Approved Per Diem Waivers	July 2016

CLOTHING ALLOWANCES FOR ALL PROGRAMS:

EXAMPLES:

Date Client Comes Into Care	Initial Clothing can be Authorized Beginning	Annual Clothing can be Authorized for FY14
January 2013	January 2013	January 2014 – June 2014
March 2013	March 2013	January 2014 – June 2014
November 2013	November 2013	January 2014 – June 2014

FY08 – Annual Clothing – child is allowed another annual clothing allowance – July 2013– June 2014. Annual clothing must be spent by the end of the state fiscal year.

A child cannot receive initial clothing and annual clothing in the same **calendar** year that he/she enters care.

Waivers are allowed for additional clothing allowance in special circumstances.

Receipts are required for a reimbursement of clothing.

EXAMPLES OF INITIAL CLOTHING RULE:

- Child enters care on January 6, 2014, they are eligible for Initial Clothing from: **January 6, 2014 thru July 6, 2014 (full 6 months)**
- Child enters care on June 30, 2014, they are eligible for Initial Clothing from: **June 30, 2014 thru December 30, 2014 (full 6 months)**
- Child enters care on October 23, 2013, they are eligible for Initial Clothing from: **October 23, 2013 thru April 23, 2014 (full 6 months)**

Program - UAS 323 (Contract required for all services) – DO NOT USE Effective 11/1/2014

Refer to Program 531 for Coding

Program Name - Foster Home Development Funds (Permanency Cases)

109.1 UAS Code – 501

PROGRAM NAME – IV-E Family Foster Care

REFERENCES: Foster Care Services Manual: Fiscal, 1016.13, 1016.14, 1016.16, 1016.31, & 1016.45

PROGRAM PURPOSE – To pay expenditures for a child who meets the eligibility criteria for IV-E and who is placed in FFC.

COSTAR REPORTING – Reported client is generally the child. Count client in each entitlement code for which they receive services.

KEY PROGRAM OR ELIGIBILITY REQUIREMENTS – The service worker (case manager) is responsible for referring the child to the Regional Revenue Maximization Center to determine eligibility. Accounting must be notified of eligibility determination.

PAYMENT REQUIREMENTS:

A Form 526 (DFCS Foster Care Invoice) which includes the custody county name, child’s legal name, foster home name and address, and boarding county name must be completed, signed and dated by the Foster Parent for reimbursement of family foster care per diem and other expenses. Original receipts must be attached for reimbursement of clothing, supplemental supervision, medical costs and other incidentals.

Note: Use Program 504 for Unusual Medical (10a) and Restraint Devices (11)

County Directors may elect to have their Foster Care invoices submitted via one of the three options below.

- The Foster Parents will submit all foster care invoices to their DFCS County Office to be signed and dated by a county approving authority before they are provided to Region Accounting for processing.
- The Foster Parents will be allowed to submit their foster care invoices directly to Region Accounting for processing. The county’s foster care policy must include a statement that Region Accounting is authorized to process payment for county expenditures within the limits contained in the policy. Any invoice that includes a request outside of the limits of the foster care policy will be forwarded back to the appropriate DFCS office for approval before the payment will be processed.
- The Foster Parents will be allowed to submit their foster care invoices for per diem ONLY directly to Region Accounting for processing. The Foster Parents would be required to complete a separate foster care invoice for clothing, supplemental supervision, medical costs and other expenditures to their DFCS office for approval before the payment will be processed.

A form 529 must be in the Accounting Department before payment can be made unless SHINES is updated with the appropriate and accurate information.

Refer to the Field Fiscal Services Website, Foster Care Policy Section under Manuals, Financial Part 2 for additional requirements and guidelines.

UAS 501 (cont)

Effective April 1, 2005, when a child moves from one home to another, the per diem will be paid only to the foster parent at the home where the child spent the night.

EXCEPTIONS: 1) Both the primary foster parent and the respite care provider will receive a per diem payment while the child is in respite care. 2) With concurrent per diem, both the primary and the temporary providers are paid the per diem for the nights the child is with the temporary providers.

Effective July 1, 2006, a Sibling Incentive for each sibling in an approved DFCS Foster Home or a DFCS relative foster home will be paid in addition to the per diem. The sibling groups have to be groups of three or more siblings. The siblings have to be in DFCS custody to be eligible for the Sibling Incentive. (If a relative caregiver obtains legal custody of a sibling, the sibling incentive stops the following month.)

The SSCM will complete the Form 527 (Initial Authorization of Foster Care) for each child at initial placement and will add "Sib-1" to initiate payment. For siblings already in foster care, the SSCM will complete a Form 529 (Authorization of Foster Care Status Change/Termination) and add for 'Change Authorized Foster Care Per Diem Rate to "Sib-1". Restricted Funds are not used for the sibling incentives.

The Sibling Incentive continues as long as the siblings remain together; at least three or more siblings remain in the same DFCS regular foster home or relative foster home; or the sibling group achieves permanency. **Effective July 1, 2016, the foster home is paid for the days the sibling group is in their home.**

Form 527 (Initial Authorization of Foster Care) or Form 529 (Authorization of Foster Care Change/Termination) (or current information on IDS Placement Center for pilot regions) must be in the accounting department before payment to Foster Parent is made.

Special Per Diem must be confirmed in writing by the DFCS County Director and must contain the child's name, date of birth, amount approved, effective date, time frames for approval and description of the child's condition (justification). A copy of the authorization is provided to the accounting department.

UAS 501 (cont)

Supplemental Supervision – Rates must be consistent with the CAPS established rates. Only children in the custody of DFCS are eligible for supplemental supervision (In the case that the worker cannot negotiate with the regulated child care provider to reduce their rate to the DFCS’ maximum reimbursement rate, the provider’s actual rate must be reimbursed. However, informal providers will be reimbursed at the DFCS rate only. (CAPS, Appendix K, pg 8).) Case managers should complete a statement that reflects that the child is not eligible for child care under CAPS policy and send a copy to the Accounting office. If the DFCS foster parent or relative caregiver does not meet CAPS eligibility requirements, a waiver is required from the Deputy Director of Policy and Programs.

NOTE: Direct payment for clothing to local stores where “charge accounts” are set up is not permitted when federal/state funds are being used. IF needed, foster parents and relative caregivers are allowed to request an advance for clothing.

NOTE: Concurrent per diem payments for children classified for IV-E funding, now require that the “temporary” placement home be paid from IV-B funding while the primary placement home/facility receives IV-E during the absence of a child. Although both the primary and temporary placements will be paid for the night the child leaves to go to the temporary placement, only one IV-E payment may be made on behalf of the child on a single day.

NOTE: NOTE: Immigration/Legalization Cost can only be paid from Children’s Restricted Funds or Restricted Donation Funds designated as appropriate for this type expense. Per our legal department, neither Federal, State, nor County funds can be used to pay these costs.

UAS Code 501 (continued)

ALLOWABLE ENTITLEMENT CODES

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMNT
SB	Sibling Incentive (Eff. July 1, 2006)	<ul style="list-style-type: none"> Added to the monthly per diem amount for the siblings \$3.44 per day, effective 7/1/16, per sibling \$103.00 per sibling, effective 7/1/13 Must be in sibling groups of three or more
00a	Birth Certificates	Payable to Vital Records http://www.cdc.gov/nchs/w2w.htm
00b	Safety Helmets	Maximum of \$30.00
00c	Putative Father Register Search	Payable to Vital Records https://dph.georgia.gov/putative-father-registry
00d	Other	Expenses that do not fall under a designated entitlement code for 100% state funding <ul style="list-style-type: none"> Passports
01	Per Diem – Regular (See Social Services County Letter 2006-03. Form 529s are not required for individual children for the increase)	The Division’s Basic Service Rate includes Room, board, clothing replacement Allowance and medicine chest and Incidentals. Effective July 1, 2016: Child age birth through 5 \$15.27 Child age 6 through 12 \$17.26 Child age 13 and older \$19.65 Effective July 1, 2013: Child age birth through 5 \$15.04 Child age 6 through 12 \$17.00 Child age 13 and older \$19.36 NOTE: Per diem increase the month following the child’s birthday.
02	Per Diem – Special Add-on	With DFCS Director/designee’s approval, a special add-on per diem \$.50 to \$1.75 for a child whose care demands additional time and skills of the foster parent.

UAS CODE 501 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMNT
04	Initial Clothing	<p>May be purchased during the first 6 months of a child’s initial placement in care according to established amounts.</p> <p>Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over</p> <p>Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over</p> <p>July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.</p> <p>Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.</p> <p>May be a one-time expenditure or spent in increments. Exceptions granted via written waiver by County Director or Designee</p>
05	Annual Clothing	<p>May be paid as a state reimbursable item for any child in FFC (regular or relative)</p> <p>May be a one-time expenditure or spent in incremental amounts during a fiscal year</p> <p>Cannot be claimed during the calendar year that the child entered care</p> <p>Effective July 2016 – clothing allowance is an expenditure of \$415</p> <p>Effective July 2014 – clothing allowance is an expenditure of \$409</p> <p>July 2013 - Annual clothing allowance is an expenditure of \$309</p> <p>Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.</p>

UAS CODE 501 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMNT
10b	Unusual Dental	<p>Maximum funds used for Unusual Dental is \$5,000.00</p> <p>Braces are covered under this code. Case worker should obtain an official estimate of the treatment cost on the orthodontist’s letterhead. Payments, including initial up-front cost, can be paid by the orthodontist standard rate schedule. The entire orthodontic treatment cost should NOT be paid in full; this will ensure that payments are made only for services provided. The Authorization for Disbursement should request payments made directly to orthodontist, not the provider</p>
10c	Interstate Travel	<p>ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.</p>
10d	Burial	<p>Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state’s maximum amount.</p>
17	Supplemental Supervision – Less than 24 hours per day	<ul style="list-style-type: none"> • Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website. • Childcare for a child placed in a regular or relative home whose foster parents work outside the home • Childcare when the foster parent attends foster parent • A registration fee for childcare may also be included here
99	Written Waiver Item	<p>Expenditure authorized by a written waiver, e.g., non-ICPC authorized travel to place/return a child; some waivers require State Office approval.</p>

109.2 UAS Code – 502

PROGRAM NAME – State Family Foster Care

REFERENCES: Foster Care Services Manual: Fiscal, 1016.13, 1016.14, 1016.16, 1016.28, 1016.31 & 1016.45

PROGRAM PURPOSE – To charge expenditures for a child who is not eligible for IV-E and who is placed in FFC.

COSTAR REPORTING – Reported client is generally the child. Count client in each entitlement code for which they receive services.

KEY PROGRAM OR ELIGIBILITY REQUIREMENTS – The service worker (case manager) is responsible for referring the child to the Regional Revenue Maximization Center to determine eligibility. Accounting must be notified of eligibility determination.

PAYMENT REQUIREMENT

A Form 526 (DFCS Foster Care Invoice) which includes the custody county name, child's legal name, foster home name and address, and boarding county name must be completed, signed and dated by the Foster Parent for reimbursement of family foster care per diem and other expenses. Original receipts must be attached for reimbursement of clothing, supplemental supervision, medical costs and other incidentals.

Note: Use Program 504 for Unusual Medical (10a) and Restraint Devices (11)

County Directors may elect to have their Foster Care invoices submitted via one of the three options below.

- The Foster Parents will submit all foster care invoices to their DFCS County Office to be signed and dated by a county approving authority before they are provided to Region Accounting for processing.
- The Foster Parents will be allowed to submit their foster care invoices directly to Region Accounting for processing. The county's foster care policy must include a statement that Region Accounting is authorized to process payment for county expenditures within the limits contained in the policy. Any invoice that includes a request outside of the limits of the foster care policy will be forwarded back to the appropriate DFCS office for approval before the payment will be processed.
- The Foster Parents will be allowed to submit their foster care invoices for per diem ONLY directly to Region Accounting for processing. The Foster Parents would be required to complete a separate foster care invoice for clothing, supplemental supervision, medical costs and other expenditures to their DFCS office for approval before the payment will be processed.

A form 529 must be in the Accounting Department before payment can be made unless SHINES is updated with the appropriate and accurate information.

Refer to the Field Fiscal Services Website, Foster Care Policy Section under Manuals, Financial Part 2 for additional requirements and guidelines.

UAS 502 (cont)

When a child moves from one home to another, the per diem will be paid only to the foster parent at the home where the child spent the night.

EXCEPTIONS: 1) Both the primary foster parent and the respite care provider will receive a per diem payment while the child is in respite care. 2) With concurrent per diem, both the primary and the temporary providers are paid the per diem for the nights the child is with the temporary providers.

Sibling Incentive: Effective July 1, 2006, a Sibling Incentive for each sibling in an approved DFCS Foster Home or a DFCS relative foster home will be paid in addition to the per diem. The sibling groups have to be groups of three or more siblings. The siblings have to be in DFCS custody to be eligible for the Sibling Incentive. (If a relative caregiver obtains legal custody of a sibling, the sibling incentive stops the following month.)

The SSCM will complete the Form 527 (Initial Authorization of Foster Care) for each child at initial placement and will add "Sib-1" to initiate payment. For siblings already in foster care, the SSCM will complete a Form 529 (Authorization of Foster Care Status Change/Termination) and add for 'Change Authorized Foster Care Per Diem Rate to "Sib-1". Restricted Funds are not used for the sibling incentives.

The Sibling Incentive continues as long as the siblings remain together; at least three or more siblings remain in the same DFCS regular foster home or relative foster home; or the sibling group achieves permanency. **Effective July 1, 2016, the foster home is paid for the days the sibling group is in their home.**

Form 527 (Initial Authorization of Foster Care) or Form 529 (Authorization of Foster Care Change/Termination) (or current information on IDS Placement Center for pilot regions) must be in the accounting department before payment to Foster Parent is made.

Special Per Diem must be confirmed in writing by the DFCS County Director and must contain the child's name, date of birth, amount approved, effective date, time frames for approval and description of the child's condition (justification). A copy of the authorization is provided to the accounting department.

Supplemental Supervision – Rates must be consistent with the CAPS established rates. Only children in the custody of DFCS are eligible for supplemental supervision (In the case that the worker cannot negotiate with the regulated child care provider to reduce their rate to the DFCS' maximum reimbursement rate, the provider's actual rate must be reimbursed. However, informal providers will be reimbursed at the DFCS rate only. (CAPS, Appendix K, pg 8).) Case managers should complete a statement that reflects that the child is not eligible for child care under CAPS policy and send a copy to the Accounting office. If the DFCS foster parent or relative caregiver does not meet CAPS eligibility requirements, a waiver is required from the Deputy Director of Policy and Programs.

NOTE: Direct payment for clothing to local stores where "charge accounts" are set up is not permitted when federal/state funds are being used.

UAS Code 502 (Continued)

NOTE: NOTE: NOTE: Immigration/Legalization Cost can only be paid from Children’s Restricted Funds or Restricted Donation Funds designated as appropriate for this type expense. Per our legal department, neither Federal, State, nor County funds can be used to pay these costs.

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS												
SB	Sibling Incentive (Eff. July 1, 2006)	<ul style="list-style-type: none"> Added to the monthly per diem amount for the siblings \$3.44 per day, effective 7/1/16, per sibling \$103. 00 per sibling, effective 7/1/13 Must be in sibling groups of three or more 												
00a	Birth Certificates	Payable to Vital Records http://www.cdc.gov/nchs/w2w.htm												
00b	Safety Helmets	Maximum of \$30.00												
00c	Putative Father Register Search	Payable to Vital Records https://dph.georgia.gov/putative-father-registry												
00d	Other	Expenses that do not fall under a designated entitlement code for 100% state funding <ul style="list-style-type: none"> Passports 												
01	Per Diem – Regular	<p>The Division’s Basic Service Rate includes Room, board, clothing replacement Allowance and medicine chest and Incidentals.</p> <p>Effective July 1, 2016:</p> <table> <tr> <td>Child age birth through 5</td> <td>\$15.27</td> </tr> <tr> <td>Child age 6 through 12</td> <td>\$17.26</td> </tr> <tr> <td>Child age 13 and older</td> <td>\$19.65</td> </tr> </table> <p>Effective July 1, 2013:</p> <table> <tr> <td>Child age birth through 5</td> <td>\$15.04</td> </tr> <tr> <td>Child age 6 through 12</td> <td>\$17.00</td> </tr> <tr> <td>Child age 13 and older</td> <td>\$19.36</td> </tr> </table> <p>NOTE: Per diem increase the month following the child’s birthday.</p>	Child age birth through 5	\$15.27	Child age 6 through 12	\$17.26	Child age 13 and older	\$19.65	Child age birth through 5	\$15.04	Child age 6 through 12	\$17.00	Child age 13 and older	\$19.36
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Child age birth through 5	\$15.04													
Child age 6 through 12	\$17.00													
Child age 13 and older	\$19.36													
02	Per Diem – Special Add-on	With DFCS Director/designee’s approval, a special add-on per diem \$.50 to \$1.75 for a child whose care demands additional time and skills of the foster parent.												

UAS CODE 502 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
04	Initial Clothing	<p>May be purchased during the first 6 months of a child’s initial placement in care according to established amounts.</p> <p>Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over</p> <p>Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over</p> <p>July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.</p> <p>Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.</p> <p>May be a one-time expenditure or spent in increments. Exceptions granted via written waiver by County Director or Designee</p>
05	Annual Clothing	<p>May be paid as a state reimbursable item for any child in FFC (regular or relative)</p> <p>May be a one-time expenditure or spent in incremental amounts during a fiscal year</p> <p>Cannot be claimed during the calendar year that the child entered care</p> <p>Effective July 2016 – clothing allowance is an expenditure of \$415</p> <p>Effective July 2014 – clothing allowance is an expenditure of \$409</p> <p>July 2013 - Annual clothing allowance is an expenditure of \$309</p> <p>Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.</p>

UAS CODE 502 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
10b	Unusual Dental	<p>Maximum funds used for Unusual Dental is \$5,000.00</p> <p>Braces are covered under this code. Case worker should obtain an official estimate of the treatment cost on the orthodontist’s letterhead. Payments, including initial up-front cost, can be paid by the orthodontist standard rate schedule. The entire orthodontic treatment cost should NOT be paid in full; this will ensure that payments are made only for services provided. The Authorization for Disbursement should request payments made directly to orthodontist, not the provider</p>
10c	Interstate Travel	<p>ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.</p>
10d	Burial	<p>Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state’s maximum amount.</p>
17	Supplemental Supervision – Less than 24 hours per day	<ul style="list-style-type: none"> • Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website. • Childcare for a child placed in a regular or relative home whose foster parents work outside the home • Childcare when the foster parent attends foster parent • A registration fee for childcare may also be included here
99	Written Waiver Item	<p>Expenditure authorized by a written waiver, e.g., non-ICPC authorized travel to place/return a child; some waivers require State Office approval.</p>

NOTE: Effective April 1, 2004 other Supplemental Supervision will be paid from Program 555 and 557

109.503 UAS CODE – 503**PROGRAM NAME** – Initial TANF Family Foster Care**REFERENCES:** Foster Care Services Manual: Fiscal, 1016.11, 1016.12, 1016.13, 1016.14, 1016.16, 1016.28, 1016.31, & 1016.45**PROGRAM PURPOSE** – To charge expenditures for a child when he/she first enters family foster care.

Note: This includes short-term emergency care for up to seven days. Services may continue for up to 6 months under this UAS Program Code. * However, if the child is determined eligible for IV-E, he/she should be moved to the appropriate IV-E UAS Program Code as soon as possible. Otherwise, at the end of 6 months, the child should be moved to the appropriate IV-B UAS Program Code.

***The child is reported as Initial FFC for 6 calendar months from the time he/she enters care. For example, if the child enters care in April 2006, he/she would be reported as Initial FFC THROUGH September 2006. If the child returns home in May 2006 and comes back into foster care in July 2006, the child would be reported as initial FFC THROUGH September as long as legal custody had not been returned to the parent. The child is changed to IV-B funding on October 1, 2006. If legal custody is returned to the parent and the child again enters care, then the 6-month period starts all over. Of course, if IV-E eligibility is determined, then the child is immediately changed to IV-E.**

COSTAR REPORTING – Reported client is generally the child. Count client in each entitlement code for which he/she receives services.

KEY PROGRAM OR ELIGIBILITY REQUIREMENTS – Initial services may continue for up to six months under this UAS Program Code. *However, if the child is determined eligible for IV-E, he/she should be moved to the appropriate IV-E UAS program code as soon as possible. Otherwise, at the end of the six months, the child should be moved to the appropriate IV-B UAS program code. Benefits/services charged must meet programmatic guidelines (See Foster Care Manual).

The child is reported as Initial FFC for six calendar months from the time he/she enters care.

1. For example, if the child enters care in April 2007, he/she would be reported as Initial FFC through September 2007.
2. If the child returns home in may 2007 and comes back into foster care in July 2007, the child would be reported as Initial FFC through September as long as legal custody had not been returned to the parent.
3. If legal custody is returned to the parent and the child again enters care, then the six month period starts over.
4. If the child enters care in April 2007, and is determined to be IVB eligible, IVB funding would begin October 1st, 2007.
5. If the child is determined to be IVE eligible, the child would not remain in initial for the full six months but would be changed to IVE based on the Rev Max effective dates. This will more than likely require a rerate.

UAS CODE 503 (continued)**PAYMENT REQUIREMENT**

A Form 526 (DFCS Foster Care Invoice) which includes the custody county name, child's legal name, foster home name and address, and boarding county name must be completed, signed and dated by the Foster Parent for reimbursement of family foster care per diem and other expenses. Original receipts must be attached for reimbursement of clothing, supplemental supervision, medical costs and other incidentals.

Note: Use Program 504 for Unusual Medical (10a) and Restraint Devices (11)

County Directors may elect to have their Foster Care invoices submitted via one of the three options below.

- The Foster Parents will submit all foster care invoices to their DFCS County Office to be signed and dated by a county approving authority before they are provided to Region Accounting for processing.
- The Foster Parents will be allowed to submit their foster care invoices directly to Region Accounting for processing. The county's foster care policy must include a statement that Region Accounting is authorized to process payment for county expenditures within the limits contained in the policy. Any invoice that includes a request outside of the limits of the foster care policy will be forwarded back to the appropriate DFCS office for approval before the payment will be processed.
- The Foster Parents will be allowed to submit their foster care invoices for per diem ONLY directly to Region Accounting for processing. The Foster Parents would be required to complete a separate foster care invoice for clothing, supplemental supervision, medical costs and other expenditures to their DFCS office for approval before the payment will be processed.

Accounting staff must be notified of the child entering care by either a completed form 527 or through the SHINES system.

Refer to the Field Fiscal Services Website, Foster Care Policy Section under Manuals, Financial Part 2 for additional requirements and guidelines.

When a child moves from one home to another, the per diem will be paid only to the foster parent at the home where the child spent the night.

EXCEPTIONS: 1) Both the primary foster parent and the respite care provider will receive a per diem payment while the child is in respite care. 2) With concurrent per diem, both the primary and the temporary providers are paid the per diem for the nights the child is with the temporary providers.

SIBLING INCENTIVES: Effective July 1, 2006, a Sibling Incentive for each sibling in an approved DFCS Foster Home or a DFCS relative foster home will be paid in addition to the per diem. The sibling groups have to be groups of three or more siblings. The siblings have to be in DFCS custody to be eligible for the Sibling Incentive. (If a relative caregiver obtains legal custody of a sibling, the sibling incentive stops the following month.)

UAS 503 (cont)

The SSCM will complete the Form 527 (Initial Authorization of Foster Care) for each child at initial placement and will add “Sib-1” to initiate payment. For siblings already in foster care, the SSCM will complete a Form 529 (Authorization of Foster Care Status Change/Termination) and add for ‘Change Authorized Foster Care Per Diem Rate to “Sib-1”. Restricted Funds are not used for the sibling incentives.

The Sibling Incentive continues as long as the siblings remain together; at least three or more siblings remain in the same DFCS regular foster home or relative foster home; or the sibling group achieves permanency. **Effective July 1, 2016, the foster home is paid for the days the sibling group is in their home.**

Form 527 (Initial Authorization of Foster Care) or **Form 529** (Authorization of Foster Care Change/Termination) (or current information on IDS Placement Center for pilot regions) must be in the accounting department before payment to Foster Parent is made.

Special Per Diem must be confirmed in writing by the DFCS County Director and must contain the child’s name, date of birth, amount approved, effective date, time frames for approval and description of the child’s condition (justification). A copy of the authorization is provided to the accounting department.

Supplemental Supervision – Rates must be consistent with the CAPS established rates. Only children in the custody of DFCS are eligible for supplemental supervision (In the case that the worker cannot negotiate with the regulated child care provider to reduce their rate to the DFCS’ maximum reimbursement rate, the provider’s actual rate must be reimbursed. However, informal providers will be reimbursed at the DFCS rate only. (CAPS, Appendix K, pg 8).) Case managers should complete a statement that reflects that the child is not eligible for child care under CAPS policy and send a copy to the Accounting office. If the DFCS foster parent or relative caregiver does not meet CAPS eligibility requirements, a waiver is required from the Deputy Director of Policy and Programs.

For Interstate travel expenses, a copy of “Interstate Travel Waiver” as the county’s authorization to charge the expenses for the child is attached to bills sent to accounting for payment.

NOTE: Direct payment for clothing to local stores where “charge accounts” are set up is not permitted when federal/state funds are being used.

NOTE: Immigration/Legalization Cost can only be paid from Children’s Restricted Funds or Restricted Donation Funds designated as appropriate for this type expense. Per our legal department, neither Federal, State, nor County funds can be used to pay these costs.

PUP Funds may be used to reimburse a case manager if they have to purchase some initial clothing or an approved child restraints for child(ren) that are taken into care. Codes 48h (Emergency Clothing, max \$100 per child) and 48j (Child Safety Devices (Child Restraints, max \$125 per child restraints)).

UAS CODE 503 (continued)

ALLOWABLE ENTITLEMENT CODES

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS												
SB	Sibling Incentive (Eff. July 1, 2006)	<ul style="list-style-type: none"> Added to the monthly per diem amount for the siblings \$3.44 per day, effective 7/1/16, per sibling \$103.00 per sibling, effective 7/1/13 Must be in sibling groups of three or more 												
00a	Birth Certificates	Payable to Vital Records http://www.cdc.gov/nchs/w2w.htm												
00b	Safety Helmets	Maximum of \$30.00												
00c	Putative Father Register Search	Payable to Vital Records https://dph.georgia.gov/putative-father-registry												
00d	Other	Expenses that do not fall under a designated entitlement code for 100% state funding <ul style="list-style-type: none"> Passports 												
01	Per Diem – Regular	<p>The Division’s Basic Service Rate includes Room, board, clothing replacement Allowance and medicine chest and Incidentals.</p> <p>Effective July 1, 2016:</p> <table> <tr> <td>Child age birth through 5</td> <td>\$15.27</td> </tr> <tr> <td>Child age 6 through 12</td> <td>\$17.26</td> </tr> <tr> <td>Child age 13 and older</td> <td>\$19.65</td> </tr> </table> <p>Effective July 1, 2013:</p> <table> <tr> <td>Child age birth through 5</td> <td>\$15.04</td> </tr> <tr> <td>Child age 6 through 12</td> <td>\$17.00</td> </tr> <tr> <td>Child age 13 and older</td> <td>\$19.36</td> </tr> </table> <p>NOTE: Per diem increase the month following the child’s birthday.</p>	Child age birth through 5	\$15.27	Child age 6 through 12	\$17.26	Child age 13 and older	\$19.65	Child age birth through 5	\$15.04	Child age 6 through 12	\$17.00	Child age 13 and older	\$19.36
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Child age birth through 5	\$15.04													
Child age 6 through 12	\$17.00													
Child age 13 and older	\$19.36													
02	Per Diem – Special Add-on	With DFCS Director/designee’s approval, a special add-on per diem \$.50 to \$1.75 for a child whose care demands additional time and skills of the foster parent.												

UAS CODE 503 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
04	Initial Clothing	<p>May be purchased during the first 6 months of a child’s initial placement in care according to established amounts.</p> <p>Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over</p> <p>Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over</p> <p>July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.</p> <p>Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.</p> <p>May be a one-time expenditure or spent in increments. Exceptions granted via written waiver by County Director or Designee</p>
05	Annual Clothing	<p>May be paid as a state reimbursable item for any child in FFC (regular or relative)</p> <p>May be a one-time expenditure or spent in incremental amounts during a fiscal year</p> <p>Cannot be claimed during the calendar year that the child entered care</p> <p>Effective July 2016 – clothing allowance is an expenditure of \$415</p> <p>Effective July 2014 – clothing allowance is an expenditure of \$409</p> <p>July 2013 - Annual clothing allowance is an expenditure of \$309</p> <p>Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.</p>

UAS CODE 503 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
10b	Unusual Dental	<p>Maximum funds used for Unusual Dental is \$5,000.00</p> <p>Braces are covered under this code. Case worker should obtain an official estimate of the treatment cost on the orthodontist’s letterhead. Payments, including initial up-front cost, can be paid by the orthodontist standard rate schedule. The entire orthodontic treatment cost should NOT be paid in full; this will ensure that payments are made only for services provided. The Authorization for Disbursement should request payments made directly to orthodontist, not the provider</p>
10c	Interstate Travel	<p>ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.</p>
10d	Burial	<p>Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state’s maximum amount.</p>
17	Supplemental Supervision – Less than 24 hours per day	<ul style="list-style-type: none"> • Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website. • Childcare for a child placed in a regular or relative home whose foster parents work outside the home • Childcare when the foster parent attends foster parent • A registration fee for childcare may also be included here
99	Written Waiver Item	<p>Expenditure authorized by a written waiver, e.g., non-ICPC authorized travel to place/return a child; some waivers require State Office approval.</p>

109.4 UAS CODE – 504**PROGRAM NAME – Related Family Foster Care – State****REFERENCES: Foster Care Services Manual: Fiscal, 1016.11, 1016.12, 1016.45****PROGRAM PURPOSE** – Used to charge expenditures for children who is currently placed in UAS Program 501, 502, 560, and 561 and incurs a service that can only be paid from 100% state funds**COSTAR REPORTING** – Reported client is generally the child. Count client in each entitlement code for which he/she receives services.**KEY PROGRAM OR ELIGIBILITY REQUIREMENTS** – Benefits/services charged must meet programmatic guidelines (See Foster Care Manual).**PAYMENT REQUIREMENT**

A Form 526 (DFCS Foster Care Invoice) which includes the custody county name, child's legal name, foster home name and address, and boarding county name must be completed, signed and dated by the Foster Parent for reimbursement of family foster care per diem and other expenses. Original receipts must be attached for reimbursement of clothing, supplemental supervision, medical costs and other incidentals.

Note: Use Program 504 for Unusual Medical (10a) and Restraint Devices (11)

County Directors may elect to have their Foster Care invoices submitted via one of the three options below.

- The Foster Parents will submit all foster care invoices to their DFCS County Office to be signed and dated by a county approving authority before they are provided to Region Accounting for processing.
- The Foster Parents will be allowed to submit their foster care invoices directly to Region Accounting for processing. The county's foster care policy must include a statement that Region Accounting is authorized to process payment for county expenditures within the limits contained in the policy. Any invoice that includes a request outside of the limits of the foster care policy will be forwarded back to the appropriate DFCS office for approval before the payment will be processed.
- The Foster Parents will be allowed to submit their foster care invoices for per diem ONLY directly to Region Accounting for processing. The Foster Parents would be required to complete a separate foster care invoice for clothing, supplemental supervision, medical costs and other expenditures to their DFCS office for approval before the payment will be processed.

A form 529 must be in the Accounting Department before payment can be made unless SHINES is updated with the appropriate and accurate information.

Refer to the Field Fiscal Services Website, Foster Care Policy Section under Manuals, Financial Part 2 for additional requirements and guidelines.

UAS Code 504 (Continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
08	In-Hospital Care	Pays for in-hospital expenses for a child in care who is not covered by Medicaid or private insurance.
10a	Unusual Medical	<p>Maximum state funds used for Unusual Medical is \$5,000.00 per fiscal year.</p> <p>Waivers: The Regional Director can approve Unusual Medical expenses for children in custody above the \$5,000.00 limit not covered by Medicaid or any other funding source;</p> <p>Examples: Treatment for head lice, glasses or contact lenses</p> <p>NOTE: If a child requires the use of a SERVICE DOG for their needs, then veterinarian cost may be paid.</p>
11	Child Restraint Devices (CRDs)	<ul style="list-style-type: none"> • Purchased in accordance with state law for a specific child from birth to eight years of age. The CRD then belongs to that child. • The CRDs are reimbursed from state funds when purchased for a specific child by the foster parent. If Agency purchases the CRD and is not for a specific child, the expense must be paid from regular operating funds. • Children age 8 and older who are small for their age, i.e., weighing under 80 pounds and/or under 4'9" in height, should use a booster seat instead of a lap/shoulder belt restraint system. • The County Director can authorize a waiver for the age requirement and to purchase a booster seat for the safety needs of a child. Copy of waiver should be sent with payment request to accounting.
99	Written Waiver Item	Expenditure authorized by a written waiver, e.g., non-ICPC authorized travel to place/return a child; some waivers require State Office approval.

109.13 UAS Code – 513

PROGRAM NAME – Return of Runaways

REFERENCES: Foster Care Services Manual: Fiscal, 1016.42

PROGRAM PURPOSE – To charge transportation expenses for a child in DFCS custody who runs away and is returned from out of state.

COSTAR REPORTING – The reported client is the child.

KEY PROGRAM OR ELIGIBILITY REQUIREMENTS – The child must be in DFCS custody to use this program funding.

PAYMENT REQUIREMENTS: All costs related to the child’s return (meals, lodging, airfare, etc) are reimbursable with state funds. Original bills and or receipts associated with transportation expenses should be sent to accounting for payments. Copies should be retained in the county office for audit trail purposes.

ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Air Faire	12a	
Lodgings	12b	
Meals	12c	
Other Costs	12d	

109.20 UAS CODE – 520

PROGRAM NAME – Foster Care Respite Care

REFERENCES: Foster Care Services Manual

PROGRAM PURPOSE:

Respite Care:

- A. Respite for family foster care providers designed to provide the caregiver a needed break from parenting for the purposes of vacation, hospitalization or any other reason that they would be unable to care for the child in their home.
- B. The County Director and/or designee must approve all respite care services and providers.
- C. Only children in DFCS approved foster homes and Private Agency foster homes are eligible for this service.
- D. The service is limited to 10 **days** per foster home within a fiscal year to be paid at the child’s current per diem rate.

NOTE: The local county DFCS Director cannot authorize additional respite days for a foster parent beyond the 10 days limit. However, they can request a state office waiver to approve respite over 10 days which would be paid with state funds.

COSTAR REPORTING

The reported client is the child. Respite care is paid to the permanent foster home provider using the child’s regular program code. Program 520 is used to pay the temporary foster home.

KEY PROGRAM OR ELIGIBILITY REQUIREMENT:

A waiver is required from the Foster Care Services Director for approval to place a child in a DFCS or CPA approved foster home into respite at a CCI. The county director/designee may approve a DFCS or CPA placed child to receive respite from either a DFCS or CPA approved foster home.

UAS CODE 520 (continued)**Respite Care**

Approved DFCS or private Foster Homes for a maximum of 10 days within a fiscal year (Private-defined as licensed/DFCS approved homes as listed in the Foster Care Manual) (10 consecutive days are not required). Foster homes must comply with the Minimum Standards for DFCS foster homes. Children who are in approved DFCS or Private Foster Homes are eligible for service.

Respite Care services will be **paid at the child's current per diem rate not to exceed 10 days in a fiscal year.**

PAYMENT REQUIREMENT

A Form 526 (DFCS Foster Care Invoice) which includes the custody county name, child's legal name, foster home name and address, and boarding county name must be completed, signed and dated by the Foster Parent for reimbursement of family foster care per diem and other expenses. Original receipts must be attached for reimbursement of clothing, supplemental supervision, medical costs and other incidentals.

County Directors may elect to have their Foster Care invoices submitted via one of the three options below.

- The Foster Parents will submit all foster care invoices to their DFCS County Office to be signed and dated by a county approving authority before they are provided to Region Accounting for processing.
- The Foster Parents will be allowed to submit their foster care invoices directly to Region Accounting for processing. The county's foster care policy must include a statement that Region Accounting is authorized to process payment for county expenditures within the limits contained in the policy. Any invoice that includes a request outside of the limits of the foster care policy will be forwarded back to the appropriate DFCS office for approval before the payment will be processed.
- The Foster Parents will be allowed to submit their foster care invoices for per diem ONLY directly to Region Accounting for processing. The Foster Parents would be required to complete a separate foster care invoice for clothing, supplemental supervision, medical costs and other expenditures to their DFCS office for approval before the payment will be processed.

Effective April 1, 2005, the "head in the bed" rule, meaning the provider only gets reimbursed for the day that the child actually spends the night in the home.

(Training for Foster Parents falls under concurrent per diem, not respite care.)

Respite Care starts with the first day the child leaves the permanent foster home. The permanent foster home will receive the regular foster care per diem and the temporary home will receive the respite care per diem (520) during the respite care. The temporary home will not receive the respite care per diem for the night the child returns to the permanent foster home.

UAS CODE 520 (continued)

Example: Child leaves permanent foster home on Monday for 4 days. Regular per diem (using the child’s regular program code) is paid for the entire month (number of days child was in home). Respite per diem (520) starts the first night the child stays in the temporary home. Because the child did not sleep at the permanent foster home, this is the first day of respite care for the foster parents. Foster parents return home on Friday and pick up child. The respite care program (520) is for 4 days (Monday through Thursday) and is paid to the temporary home. Child sleeps in permanent foster home Friday night, so the per diem is the regular per diem.

Placement Page must be updated in SHINES before payment to Foster Parent is made. SHINES should clearly state “RESPITE CARE” when child goes to respite care, and “END RESPITE CARE” when leaving respite care.

Refer to the Field Fiscal Services Website, Foster Care Policy Section under Manuals, Financial Part 2 for additional requirements and guidelines.

ALLOWABLE ENTITLEMENT CODES

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
60	Respite Care Services	Childcare, designed to provide caregiver a needed break for specified purposes as specified in respite care services not to exceed 10 days in a fiscal year.

109.29 UAS CODE – 529

PROGRAM NAME – Undocumented Immigrant Children in Family Foster Care (effective March 2006)

REFERENCES: Foster Care Services Manual: Fiscal, 1016.11, 1016.12, 1016.13, 1016.14, 1016.31, 1016.47, 1016.48, 1016.45

PROGRAM PURPOSE – To charge expenditures for a child who is an undocumented immigrant and who is placed in FFC. All immigrant children can be provided foster care services regardless to their immigration status.

COSTAR REPORTING – Reported client is generally the child. Count client in each entitlement code for which they receive services.

KEY PROGRAM OR ELIGIBILITY REQUIREMENTS - The service worker (case manager) is responsible for referring the child to the Regional Revenue Maximization Center to determine eligibility. Accounting must be notified of eligibility determination

(An undocumented immigrant child is not IV-E eligible. Expenditures are absorbed through Title IV-B, county and/or local funds.

PAYMENT REQUIREMENT

A Form 526 (DFCS Foster Care Invoice) which includes the custody county name, child's legal name, foster home name and address, and boarding county name must be completed, signed and dated by the Foster Parent for reimbursement of family foster care per diem and other expenses. Original receipts must be attached for reimbursement of clothing, supplemental supervision, medical costs and other incidentals.

Note: Use Program 504 for Unusual Medical (10a) and Restraint Devices (11)

County Directors may elect to have their Foster Care invoices submitted via one of the three options below.

- The Foster Parents will submit all foster care invoices to their DFCS County Office to be signed and dated by a county approving authority before they are provided to Region Accounting for processing.
- The Foster Parents will be allowed to submit their foster care invoices directly to Region Accounting for processing. The county's foster care policy must include a statement that Region Accounting is authorized to process payment for county expenditures within the limits contained in the policy. Any invoice that includes a request outside of the limits of the foster care policy will be forwarded back to the appropriate DFCS office for approval before the payment will be processed.
- The Foster Parents will be allowed to submit their foster care invoices for per diem ONLY directly to Region Accounting for processing. The Foster Parents would be required to complete a separate foster care invoice for clothing, supplemental supervision, medical costs and other expenditures to their DFCS office for approval before the payment will be processed.

UAS 529 (cont)

A form 529 must be in the Accounting Department before payment can be made unless SHINES is updated with the appropriate and accurate information.

Refer to the Field Fiscal Services Website, Foster Care Policy Section under Manuals, Financial Part 2 for additional requirements and guidelines.

When a child moves from one home to another, the per diem will be paid only to the foster parent at the home where the child spent the night. EXCEPTIONS: 1) Both the primary foster parent and the respite care provider will receive a per diem payment while the child is in respite care. 2) With concurrent per diem, both the primary and the temporary providers are paid the per diem for the nights the child is with the temporary providers.

Sibling Incentives: Effective July 1, 2006, a Sibling Incentive for each sibling in an approved DFCS Foster Home or a DFCS relative foster home will be paid in addition to the per diem. The sibling groups have to be groups of three or more siblings. The siblings have to be in DFCS custody to be eligible for the Sibling Incentive. (If a relative caregiver obtains legal custody of a sibling, the sibling incentive stops the following month.)

The SSCM will complete the Form 527 (Initial Authorization of Foster Care) for each child at initial placement and will add "Sib-1" to initiate payment. For siblings already in foster care, the SSCM will complete a Form 529 (Authorization of Foster Care Status Change/Termination) and add for 'Change Authorized Foster Care Per Diem Rate to "Sib-1". Restricted Funds are not used for the sibling incentives.

The Sibling Incentive continues as long as the siblings remain together; at least three or more siblings remain in the same DFCS regular foster home or relative foster home; or the sibling group achieves permanency. Effective July 1, 2016, the foster home is paid for the days the sibling group is in their home.

Form 527 (Initial Authorization of Foster Care) or Form 529 (Authorization of Foster Care Change/Termination) (or current information on IDS Placement Center for pilot regions) must be in the accounting department before payment to Foster Parent is made.

Supplemental Supervision – Rates must be consistent with the CAPS established rates. Only children in the custody of DFCS are eligible for supplemental supervision (In the case that the worker cannot negotiate with the regulated child care provider to reduce their rate to the DFCS' maximum reimbursement rate, the provider's actual rate must be reimbursed. However, informal providers will be reimbursed at the DFCS rate only. (CAPS, Appendix K, pg 8).) Case managers should complete a statement that reflects that the child is not eligible for child care under CAPS policy and send a copy to the Accounting office. If the DFCS foster parent or relative caregiver does not meet CAPS eligibility requirements, a waiver is required from the Deputy Director of Policy and Programs.

NOTE: Direct payment for clothing to local stores where "charge accounts" are set up is not permitted when federal/state funds are being used.

UAS CODE 529 (continued)

NOTE: NOTE: Immigration/Legalization Cost can only be paid from Children’s Restricted Funds or Restricted Donation Funds designated as appropriate for this type expense. Per our legal department, neither Federal, State, nor County funds can be used to pay these costs.

ALLOWABLE ENTITLEMENT CODES

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
SB	Sibling Incentive (Eff. July 1, 2006)	<ul style="list-style-type: none"> • Added to the monthly per diem amount for the siblings • \$3.44 per day, effective 7/1/16, per sibling • \$103. 00 per sibling, effective 7/1/13 • Must be in sibling groups of three or more
00a	Birth Certificates	Payable to Vital Records http://www.cdc.gov/nchs/w2w.htm
00b	Safety Helmets	Maximum of \$30.00
00c	Putative Father Register Search	Payable to Vital Records https://dph.georgia.gov/putative-father-registry
00d	Other	Expenses that do not fall under a designated entitlement code for 100% state funding <ul style="list-style-type: none"> • Passports
01	Per Diem – Regular	The Division’s Basic Service Rate includes Room, board, clothing replacement Allowance and medicine chest and Incidentals. Effective July 1, 2016: Child age birth through 5 \$15.27 Child age 6 through 12 \$17.26 Child age 13 and older \$19.65 Effective July 1, 2013: Child age birth through 5 \$15.04 Child age 6 through 12 \$17.00 Child age 13 and older \$19.36 NOTE: Per diem increase the month following the child’s birthday.
02	Per Diem – Special Add-on	With DFCS Director/designee’s approval, a special add-on per diem \$.50 to \$1.75 for a child whose care demands additional time and skills of the foster parent.

UAS CODE 529 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
04	Initial Clothing	<p>May be purchased during the first 6 months of a child’s initial placement in care according to established amounts.</p> <p>Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over</p> <p>Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over</p> <p>July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.</p> <p>Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.</p> <p>May be a one-time expenditure or spent in increments. Exceptions granted via written waiver by County Director or Designee</p>
05	Annual Clothing	<p>May be paid as a state reimbursable item for any child in FFC (regular or relative)</p> <p>May be a one-time expenditure or spent in incremental amounts during a fiscal year</p> <p>Cannot be claimed during the calendar year that the child entered care</p> <p>Effective July 2016 – clothing allowance is an expenditure of \$415</p> <p>Effective July 2014 – clothing allowance is an expenditure of \$409</p> <p>July 2013 - Annual clothing allowance is an expenditure of \$309</p> <p>Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.</p>

UAS Code 529 (cont)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
10b	Unusual Dental	<p>Maximum funds used for Unusual Dental is \$5,000.00</p> <p>Braces are covered under this code. Case worker should obtain an official estimate of the treatment cost on the orthodontist’s letterhead. Payments, including initial up-front cost, can be paid by the orthodontist standard rate schedule. The entire orthodontic treatment cost should NOT be paid in full; this will ensure that payments are made only for services provided. The Authorization for Disbursement should request payments made directly to orthodontist, not the provider</p>
10c	Interstate Travel	<p>ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.</p>
10d	Burial	<p>Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state’s maximum amount.</p>
17	Supplemental Supervision – Less than 24 hours per day	<ul style="list-style-type: none"> • Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website. • Childcare for a child placed in a regular or relative home whose foster parents work outside the home • Childcare when the foster parent attends foster parent • A registration fee for childcare may also be included here
99	Written Waiver Item	<p>Expenditure authorized by a written waiver, e.g., non-ICPC authorized travel to place/return a child; some waivers require State Office approval.</p>

UAS Code – 531

PROGRAM NAME – Foster Parent Development and Foster/Adoptive and ICPC Parent Support Services – Reimbursement

REFERENCES:

PROGRAM PURPOSE – Is to enable the county departments to reimburse the services required in the screening; preparation; approval; recruitment and support of foster/adoptive families. These funds include the development of contracts with qualified contractors to assist counties in facilitating IMPACT pre-service training for Foster Homes and completing ICPC or Regular Foster Home Evaluations.

Costar Reporting: Should be reported as outlined below.

Entitlement Code E1-- Count the number of ICPC or Regular Foster Home Evaluations completed.

Entitlement Code E2-- Count the number of ICPC or Regular Foster Home Evaluations partially completed.

Entitlement Code 06 (Support Services) – Reported client is the foster/adoptive/ICPC parent.

Entitlement Code 67a - For each training group, count the unduplicated number of foster parents who complete the 10-week IMPACT session.

Entitlement Code 67b - For individual session, count the unduplicated number of foster parents who complete the entire IMPACT pre-service training. Approval from the Regional Adoption Coordinator is needed to conduct 1:1 (one-on-one) trainings with these funds.

NOTE: You will still put the expenses for foster parents attending the 8 day IMPACT certification program in entitlement code 67 – but do not enter a client count on these expenses.

Entitlement Code 68 (Continued Parent Development) – Count the individual foster parents attending the Annual Adoptive and Foster Parent Association of Georgia Conference or the Foster Parent and Staff Development Institute, or the foster parent/child receiving water safety services.

KEY PROGRAM OR ELIGIBILITY REQUIREMENTS –

ACCOUNTING NOTE: Effective July 1, 2011, these services are to be paid on the Child Welfare page using the following description in all cases:

Entitlement Code E1 and E2 - ICPC or Regular Foster Home Evaluations - Name of Family (first and last name) and the date of the evaluation

UAS Code 531 (continued)

\$600.00-----per completed ICPC or Regular Foster Home Evaluation submitted

Partial rates are negotiated based on amount of work completed. Partial rates are not to exceed the above fee schedule

Entitlement Code 06 – Used to reimburse a foster/adoptive/ICPC parents for drug screens, physicals and lab tests that are required of prospective and current foster/adoptive/ICPC parents. Payment for Environmental Inspections of foster parents to Health Department is allowable. Cost incurred by the foster parent for carbon monoxide detectors and ABC rated fire extinguishers will also be reimbursed to the foster parents.

Drug Screens, physicals and lab tests (TB): These expenses **are reimbursed to the foster or adoptive or ICPC family** once the applicant has incurred the expense. However, before the applicant can be reimbursed, the results of the drug screen must be negative.

All household members over age 18 are required to be fingerprinted, and these cost are reimbursable to the foster parent, then the client should not be asked to provide payment at the time of the screening.

Entitlement code 67 –

IMPACT Trainings – Name of Provider facilitating the TRAINING, and the dates of the training

\$800.00-----**GROUP SETTING** for facilitating the complete IMPACT Pre-Service training. Note: Counties can determine payment intervals based upon the time frames of specific groups. For example, four equal payments of \$200.00 can be made.

\$500.00 -----**INDIVIDUAL (one-on-one) SETTING** for facilitating the complete IMPACT Pre-Service training for one person or family. Every effort must be made to conduct training in a group setting. Approval from a Regional Adoption Coordinator is needed to conduct one-on-one training using these funds.

- Submit a proposal which is accepted by the County Department
- Complete a Questionnaire for Determining Independent Contractor Status;
- Submit the required Form 5357 and foster parent counts prior to receiving payment.

Certification of foster/adoptive parents for IMPACT Training - In order to co-lead the 10 week IMPACT Sessions with DFCS staff, foster/adoptive parents must have successfully completed the 8 day certification program (expenses for this may be paid upon submission by the foster/adoptive parent of a completed Form 5357. Such expenses are reported under entitlement code 67.). To be eligible for the \$350 reimbursement for co-leading the 10-week IMPACT (MAPP) session, the foster/adoptive parent must do all of the following:

UAS Code 531 (continued)

- Submit a proposal which is accepted by the County Department
- Complete a Questionnaire for Determining Independent Contractor Status;
- Submit the required Form 5357 and foster parent counts prior to receiving payment.

Entitlement Code 68 covers the following:

Annual Adoptive and Foster Parent Association of Georgia Conference – Registration, travel and meal costs associated with foster parents’ attendance

OR

Foster Parent and Staff Development Institute - Registration, travel and meal costs associated with foster parent attendance. The County department will allow all foster parents who need annual continued parent development (CPD) an opportunity to attend the institute closest to their residence.

NOTE: When requested, registration fees and hotel expenses can be paid in advance for the foster parents attending the required Conferences. Foster Parents should make their own hotel reservation and complete their registration forms and submit this information to their DFCS County office. The DFCS office will approve/deny the request and submit to Regional Accounting who will issue a check to the hotel for the cost of the room for the foster parents to take with them. Accounting will also issue a check for the registration and mail it directly to the vendor with the registration form. The only cost that the foster parents will have to pay upfront is for their gas and meals. Foster Parents are required to attach all receipts for registration and hotel costs, whether paid in advance or not, when submitting Form 5357 for travel reimbursements.

NOTE: Adoptive Families are not eligible for reimbursement for the Continued Parent Development Conference or the Annual Adoptive and Foster Parent Association of Georgia Conferences.

CPR and First Aid Training/Water Safety Instructional Costs, including water safety services for either foster children or foster parents. This is to be reimbursed to the prospective and veteran foster parents.

Entitlement Code 84

Recruitment Funding Incentives - Services and activities designed to promote the development of new foster homes such as IMPACT training supplies, Booth Rental/Registration Fees; Printing of flyers, pamphlets, or inserts; Event Decorations and Supplies; and Foster Parent Recruitment Event Site Rental. The Regional maximum annual spending amount can be increased if waived by the Foster Care Services Director.

UAS Code 531 (continued)

Fingerprinting: Costs for obtaining background fingerprint checks for prospective foster/adoptive/ICPC parents, approved foster parents and other household members 18 years of age or older **is paid directly to GBI, if using LIVESCAN.** However, the results of the fingerprint check must be satisfactory in order for the family to be considered as a Foster or Adoptive or ICPC Parent. A Purchase Order is required for all client related fingerprint expenditures for Program 531.

PAYMENT REQUIREMENTS:

Fingerprints – Paid Directly to GBI

- Approved Disbursement request with applicants’ names authorizing payment, only needed if do not have a Vendor’s Invoice
- Purchase Order
- Original Invoice, approved for payment

Drug Screens, CPR, First Aid, Physicals, Lab Tests, etc. – **Reimbursement to the foster/adoptive/ICPC parents for CODES 06 or 68** or directly to a vendor to support special recruitment group processing (special initiatives) or groups of veteran foster parents for re-evaluation purposes for CODE 84 with a waiver from the Foster Care Services Director.

- Approved Disbursement request with applicants’ names authorizing payment
- Original paid receipts, approved for payment

Foster Parent and Staff Development Institute –

- Foster Parents must submit a completed Form 5357 (Bill for Services Rendered) for reimbursement of travel, lodging, meals, and conference registration. All expenditures must be reported on this Form regardless if paid in advance to the Foster Parents.
- Checks issued in advance for the hotel and/or registration are to be made payable to the vendors, not the foster parents.

IMPACT Session Reimbursement/Foster Care/Adoptive Parent Reimbursement for Training

- Foster Parent completes and signs Form 5357 (Bill for Services Rendered)
- Contracts are not required

ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Completed FH Evaluations	E1	<ul style="list-style-type: none"> • Completed ICPC or Regular Foster Home Evaluation Payment - \$600.00
Partial Evaluations	E2	<ul style="list-style-type: none"> • Partial ICPC or Regular Foster Home Evaluation Payment (May Not exceed \$600.00 Limit)

UAS Code 531 (cont.)

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Support Services –		All Support Services items are reimbursement to the foster parents Reimbursement to Parent -Pay in SHINES as an Add on to the Foster Care Invoice
	06a	<ul style="list-style-type: none"> • Drug Screens
	06b	<ul style="list-style-type: none"> • Support Services – Physicals
	06c	<ul style="list-style-type: none"> • Support Services – Lab tests
DO NOT USE Effective 11/1/14	06d	<ul style="list-style-type: none"> • Fingerprint/Backgrounds checks are being moved to 531-84i, SERVICE AUTHORIZATIONS will not be done but a monthly Purchase Order is required
	06e	<ul style="list-style-type: none"> • Environmental Inspections by the Health Department for Foster Parents homes.
	06f	<ul style="list-style-type: none"> • Septic tanks pumped if required by the Health Department for Foster Parent’s homes.
	06g	<ul style="list-style-type: none"> • Additional training and IMPACT materials
	06h	<ul style="list-style-type: none"> • Carbon Monoxide Detectors • ABC Rated Fire Extinguishers
IMPACT TRAINING –		Paid to the Provider Will not be processed through SHINES
Group IMPACT Training	67a	THIS IS FOR REIMBURSING A CONTRACTOR FOR TRAINING <ul style="list-style-type: none"> • IMPACT Pre-Service Training Payment - \$800.00
INDIVIDUAL (1 to 1) IMPACT Training	67b	THIS IS FOR REIMBURSING A CONTRACTOR FOR TRAINING <ul style="list-style-type: none"> • IMPACT Pre-Service Training Payment - \$500.00
Continued Parent Development –		CODE 68 is a reimbursement to the foster parent Reimbursement to Parent -Pay in SHINES as an Add on to the Foster Care Invoice
	68a	<ul style="list-style-type: none"> • Continued Parent Development THIS IS NOT FOR ADOPTIVE FAMILIES

UAS Code 531 (cont.)

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
	68b	<ul style="list-style-type: none"> • CPR and First Aid Training (pre and post approval) • Water Safety Services
	68c	<ul style="list-style-type: none"> • Annual Adoptive and Foster Parent Conference Costs <p>THIS IS NOT FOR ADOPTIVE FAMILIES</p>
Recruitment Funding Information –	84	<p>Foster Parent promotion, recruitment and retention activities could include, but are not limited to; (Maximum of \$2000 per state fiscal year per Region unless a waived by the Foster Care Services Director.)</p> <p>Payments are to be made to the provider Will not be processed in SHINES Service Authorizations will not be done, but a Purchase Order is required</p>
	84a	\$125 - Booth Rental/Registration Fees
	84b	\$500 – Printing (photos, signs or paper items such as flyers, inserts or posters) per campaign or event
	84c	\$125 - Event Decoration and Supplies
	84d	\$300 – Foster Parent Recruitment Event Site Rental
	84e	Drug Screens
	84f	Physicals
	84g	Lab Test
	84h	CPR and First Aid
	84i	Fingerprinting payable to GBI (Live Scan) – PO is required

109.47 UAS CODE – 547

PROGRAM NAME – Emergency Foster Care Beds

REFERENCES: Foster Care Services Manual: Fiscal, 1016.17

PROGRAM PURPOSE – This program is to establish emergency placement beds to be used to place children entering foster care in emergency situations. These emergency beds should be established in areas across the state where there are no emergency shelters. This program will allow counties who do not have emergency shelters to pay for foster families and child caring institutions to develop and hold empty beds in anticipation of children coming in and needing emergency placements.

COSTAR REPORTING - The reported client is the child.

KEY PROGRAM OR ELIGIBILITY REQUIREMENT – This program is available in counties across the State without emergency shelters. The DHR Office of Planning and Budget (OPB) is to be notified when an emergency placement bed is located to ensure funds are still available. The funds for this program are limited. Therefore, only limited number of emergency beds can be approved. The DHR OPB will maintain a count and location of the beds for budgetary controls. The county Department will notify the DHR OPB budget analyst for their county before finalizing plans for emergency beds to ensure funds are available and the beds are within the authorized number. When a child is placed in a vacant bed, OPB should be notified by the County Department indicating the name of the child placed and the county. These emergency placement beds will be approved by the County Director (after determining funds are available) and will be supervised by the County Director or Supervisor. Counties with approval for these emergency beds must develop procedures to ensure that the beds are maintained in the facility for emergency placement of children entering foster care. Family Foster Homes and Institutions must meet all of the standards for approved placement homes or institutions. See rates below. Once a child is placed, the payment rate changes to the regularly approved rate for family foster care or institutional foster care.

PAYMENT REQUIREMENT: Case Manager obtains approval from a Budget Analyst that funds are available to designate emergency beds in the county. Case Manager will receive written confirmation of approved emergency beds of foster homes or institution and the effective date of approval. The confirmation is sent to accounting along with provider’s invoice for the cost of holding an emergency bed space(s).

ALLOWABLE ENTITLEMENT CODES

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
96	Family Foster Care Emergency	Rate - \$7.00 per day to maintain an open placement bed in a home
97	Institutional Foster Emergency Beds	Rate - \$25.00 per day for child caring institution to maintain an open placement bed

NOTE: An approved Waiver from State Office is needed for rates above these limits.

109.60 UAS Code - 560**PROGRAM NAME** - Voluntary Family Foster Care – IV-E**REFERENCES:** Foster Care Services Manual: Fiscal, 1016.13, 1016.14, 1016.30, 1016.41**PROGRAM PURPOSE** – To charge expenditures for a child placed in FFC care by Voluntary Placement Agreement and who is determined to be IV-E eligible. **Note:** Program 504 may be used in conjunction with this program.**COSTAR REPORTING** – Reported client is generally the child. Count client in each entitlement code in which he/she receives services.**KEY PROGRAM OR ELIGIBILITY REQUIREMENTS** – The service worker (case manager) is responsible for referring the child to the Regional Revenue Maximization Center to determine eligibility. Accounting must be notified of eligibility determination.**PAYMENT REQUIREMENT**

A Form 526 (DFCS Foster Care Invoice) which includes the custody county name, child's legal name, foster home name and address, and boarding county name must be completed, signed and dated by the Foster Parent for reimbursement of family foster care per diem and other expenses. Original receipts must be attached for reimbursement of clothing, supplemental supervision, medical costs and other incidentals.

Note: Use Program 504 for Unusual Medical (10a) and Restraint Devices (11)

County Directors may elect to have their Foster Care invoices submitted via one of the three options below.

- The Foster Parents will submit all foster care invoices to their DFCS County Office to be signed and dated by a county approving authority before they are provided to Region Accounting for processing.
- The Foster Parents will be allowed to submit their foster care invoices directly to Region Accounting for processing. The county's foster care policy must include a statement that Region Accounting is authorized to process payment for county expenditures within the limits contained in the policy. Any invoice that includes a request outside of the limits of the foster care policy will be forwarded back to the appropriate DFCS office for approval before the payment will be processed.
- The Foster Parents will be allowed to submit their foster care invoices for per diem ONLY directly to Region Accounting for processing. The Foster Parents would be required to complete a separate foster care invoice for clothing, supplemental supervision, medical costs and other expenditures to their DFCS office for approval before the payment will be processed.

A form 529 must be in the Accounting Department before payment can be made unless SHINES is updated with the appropriate and accurate information.

Refer to the Field Fiscal Services Website, Foster Care Policy Section under Manuals, Financial Part 2 for additional requirements and guidelines.

UAS 560 (cont)

When a child moves from one home to another, the per diem will be paid only to the foster parent at the home where the child spent the night.

EXCEPTIONS: 1) Both the primary foster parent and the respite care provider will receive a per diem payment while the child is in respite care. 2) With concurrent per diem, both the primary and the temporary providers are paid the per diem for the nights the child is with the temporary providers.

SIBLING INCENTIVES: Effective July 1, 2006, a Sibling Incentive for each sibling in an approved DFCS Foster Home or a DFCS relative foster home will be paid in addition to the per diem. The sibling groups have to be groups of three or more siblings. The siblings have to be in DFCS custody to be eligible for the Sibling Incentive. (If a relative caregiver obtains legal custody of a sibling, the sibling incentive stops the following month.)

The SSCM will complete the Form 527 (Initial Authorization of Foster Care) for each child at initial placement and will add “Sib-1” to initiate payment. For siblings already in foster care, the SSCM will complete a Form 529 (Authorization of Foster Care Status Change/Termination) and add for ‘Change Authorized Foster Care Per Diem Rate to “Sib-1”. Restricted Funds are not used for the sibling incentives.

The Sibling Incentive continues as long as the siblings remain together; at least three or more siblings remain in the same DFCS regular foster home or relative foster home; or the sibling group achieves permanency. **Effective July 1, 2016, the foster home is paid for the days the sibling group is in their home.**

Form 527 (Initial Authorization of Foster Care) or Form 529 (Authorization of Foster Care Change/Termination) must be in the accounting department before payment to Foster Parent is made.

Special Per Diem must be confirmed in writing by the DFCS County Director and must contain the child’s name, date of birth, amount approved, effective date, time frames for approval and description of the child’s condition (justification). A copy of the authorization is provided to the accounting department.

Supplemental Supervision – Rates must be consistent with the CAPS established rates. Only children in the custody of DFCS are eligible for supplemental supervision (In the case that the worker cannot negotiate with the regulated child care provider to reduce their rate to the DFCS’ maximum reimbursement rate, the provider’s actual rate must be reimbursed. However, informal providers will be reimbursed at the DFCS rate only. (CAPS, Appendix K, pg 8).) Case managers should complete a statement that reflects that the child is not eligible for child care under CAPS policy and send a copy to the Accounting office. If the DFCS foster parent or relative caregiver does not meet CAPS eligibility requirements, a waiver is required from the Deputy Director of Policy and Programs.

NOTE: Concurrent per diem payments for children classified for IV-E funding, now require that the “temporary” placement home be paid from IV-B funding while the primary placement home/facility receives IV-E during the absence of a child. Only one IV-E payment may be made on behalf of the child on a single day.

UAS CODE 560 (continued)

NOTE: NOTE: Immigration/Legalization Cost can only be paid from Children’s Restricted Funds or Restricted Donation Funds designated as appropriate for this type expense. Per our legal department, neither Federal, State, nor County funds can be used to pay these costs.

ALLOWABLE ENTITLEMENT CODES

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
SB	Sibling Incentive (Eff. July 1, 2006)	<ul style="list-style-type: none"> • Added to the monthly per diem amount for the siblings • \$3.44 per day, effective 7/1/16, per sibling • \$103. 00 per sibling, effective 7/1/13 • Must be in sibling groups of three or more
00a	Birth Certificates	Payable to Vital Records http://www.cdc.gov/nchs/w2w.htm
00b	Safety Helmets	Maximum of \$30.00
00c	Putative Father Register Search	Payable to Vital Records https://dph.georgia.gov/putative-father-registry
00d	Other	Expenses that do not fall under a designated entitlement code for 100% state funding <ul style="list-style-type: none"> • Passports
01	Per Diem - Regular	The Division’s Basic Service Rate includes Room, board, clothing replacement Allowance and medicine chest and Incidentals. Effective July 1, 2016: Child age birth through 5 \$15.27 Child age 6 through 12 \$17.26 Child age 13 and older \$19.65 Effective July 1, 2013: Child age birth through 5 \$15.04 Child age 6 through 12 \$17.00 Child age 13 and older \$19.36 NOTE: Per diem increase the month following the child’s birthday.
02	Per Diem – Special Add-on	With DFCS Director/designee’s approval, a special add-on per diem \$.50 to \$1.75 for a child whose care demands additional time and skills of the foster parent.

UAS CODE 560 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
04	Initial Clothing	<p>May be purchased during the first 6 months of a child’s initial placement in care according to established amounts.</p> <p>Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over</p> <p>Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over</p> <p>July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.</p> <p>Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.</p> <p>May be a one-time expenditure or spent in increments. Exceptions granted via written waiver by County Director or Designee</p>
05	Annual Clothing	<p>May be paid as a state reimbursable item for any child in FFC (regular or relative)</p> <p>May be a one-time expenditure or spent in incremental amounts during a fiscal year</p> <p>Cannot be claimed during the calendar year that the child entered care</p> <p>Effective July 2016 – clothing allowance is an expenditure of \$415</p> <p>Effective July 2014 – clothing allowance is an expenditure of \$409</p> <p>July 2013 - Annual clothing allowance is an expenditure of \$309</p> <p>Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.</p>

UAS CODE 560 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
10b	Unusual Dental	<p>Maximum funds used for Unusual Dental is \$5,000.00</p> <p>Braces are covered under this code. Case worker should obtain an official estimate of the treatment cost on the orthodontist’s letterhead. Payments, including initial up-front cost, can be paid by the orthodontist standard rate schedule. The entire orthodontic treatment cost should NOT be paid in full; this will ensure that payments are made only for services provided. The Authorization for Disbursement should request payments made directly to orthodontist, not the provider</p>
10c	Interstate Travel	<p>ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.</p>
10d	Burial	<p>Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state’s maximum amount.</p>
17	Supplemental Supervision – Less than 24 hours per day	<ul style="list-style-type: none"> • Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website. • Childcare for a child placed in a regular or relative home whose foster parents work outside the home • Childcare when the foster parent attends foster parent • A registration fee for childcare may also be included here
99	Written Waiver Item	<p>Expenditure authorized by a written waiver, e.g., non-ICPC authorized travel to place/return a child; some waivers require State Office approval.</p>

NOTE: Effective April 1, 2004 other Supplemental Supervision will be paid from Program 555 and 557 Please see these programs.

109.74 UAS Code - 574

PROGRAM NAME – IV-E Specialized Foster Care State Approved Per Diem Waivers (State)

REFERENCES: Foster Care Services Manual: Fiscal, Section 1016.13, 1016.14, 1016.30, 1016.41

PROGRAM PURPOSE – To pay expenditures for an IV-E eligible child in DFCS family foster care who requires a STATE OFFICE special written waiver for per diem (per diem above the basic state rate and above the \$1.75 more which can be authorized by the County Director).

COSTAR REPORTING – Reported client is generally the child. Count client in each entitlement code for which he/she receives services.

KEY PROGRAM OR ELIGIBILITY REQUIREMENTS – The service worker (case worker) is responsible for referring the child to the Regional Revenue Maximization Center to determine eligibility. Accounting must be notified of eligibility determination.

PAYMENT REQUIREMENT

A Form 526 (DFCS Foster Care Invoice) which includes the custody county name, child's legal name, foster home name and address, and boarding county name must be completed, signed and dated by the Foster Parent for reimbursement of family foster care per diem and other expenses. Original receipts must be attached for reimbursement of clothing, supplemental supervision, medical costs and other incidentals.

Note: Use Program 576 for Unusual Medical (10a) and Restraint Devices (11)

County Directors may elect to have their Foster Care invoices submitted via one of the three options below.

- The Foster Parents will submit all foster care invoices to their DFCS County Office to be signed and dated by a county approving authority before they are provided to Region Accounting for processing.
- The Foster Parents will be allowed to submit their foster care invoices directly to Region Accounting for processing. The county's foster care policy must include a statement that Region Accounting is authorized to process payment for county expenditures within the limits contained in the policy. Any invoice that includes a request outside of the limits of the foster care policy will be forwarded back to the appropriate DFCS office for approval before the payment will be processed.
- The Foster Parents will be allowed to submit their foster care invoices for per diem ONLY directly to Region Accounting for processing. The Foster Parents would be required to complete a separate foster care invoice for clothing, supplemental supervision, medical costs and other expenditures to their DFCS office for approval before the payment will be processed.

A form 529 must be in the Accounting Department before payment can be made unless SHINES is updated with the appropriate and accurate information.

Refer to the Field Fiscal Services Website, Foster Care Policy Section under Manuals, Financial Part 2 for additional requirements and guidelines.

UAS 574 (cont)

When a child moves from one home to another, the per diem will be paid only to the foster parent at the home where the child spent the night

EXCEPTIONS: 1) Both the primary foster parent and the respite care provider will receive a per diem payment while the child is in respite care. 2) With concurrent per diem, both the primary and the temporary providers are paid the per diem for the nights the child is with the temporary providers.

Note: If a child/youth in a RBWO placement and visits overnight with siblings placed in a DFCS foster home, a basic level per diem may be paid to the DFCS foster home using concurrent per diem.

Form 527 (Initial Authorization of Foster Care) or **Form 529** (Authorization of Foster Care Change/Termination) (or current information on IDS Placement Center for pilot regions) must be in the accounting department before payment to Foster Parent is made.

Special Per Diem must be confirmed in writing by the DFCS County Director and must contain the child's name, date of birth, amount approved, effective date, time frames for approval and description of the child's condition (justification). A copy of the authorization is provided to the accounting department.

Supplemental Supervision – Rates must be consistent with the CAPS established rates. Only children in the custody of DFCS are eligible for supplemental supervision (In the case that the worker cannot negotiate with the regulated child care provider to reduce their rate to the DFCS' maximum reimbursement rate, the provider's actual rate must be reimbursed. However, informal providers will be reimbursed at the DFCS rate only. (CAPS, Appendix K, pg 8).) Case managers should complete a statement that reflects that the child is not eligible for child care under CAPS policy and send a copy to the Accounting office. If the DFCS foster parent or relative caregiver does not meet CAPS eligibility requirements, a waiver is required from the Deputy Director of Policy and Programs.

For Interstate travel expenses, a copy of "Interstate Travel Waiver" as the county's authorization to charge the expenses for the child is attached to bills sent to accounting for payment.

NOTE: Direct payment for clothing to local stores where "charge accounts" are set up is not permitted when federal/state funds are being used.

NOTE: Concurrent per diem payments for children classified for IV-E funding, now require that the "temporary" placement home be paid from IV-B funding while the primary placement home/facility receives IV-E during the absence of a child. Only one IV-E payment may be made on behalf of the child on a single day.

Effective July 1, 2006, a Sibling Incentive for each sibling in an approved DFCS Foster Home or a DFCS relative foster home will be paid in addition to the per diem. The sibling groups have to be groups of three or more siblings. The siblings have to be in DFCS custody to be eligible for the Sibling Incentive. (If a relative caregiver obtains legal custody of a sibling, the sibling incentive stops the following month.)

UAS CODE 574 (continued)

The SSCM will complete the Form 527 (Initial Authorization of Foster Care) for each child at initial placement and will add “Sib-1” to initiate payment. For siblings already in foster care, the SSCM will complete a Form 529 (Authorization of Foster Care Status Change/Termination) and add for ‘Change Authorized Foster Care Per Diem Rate to “Sib-1”. Restricted Funds are not used for the sibling incentives.

The Sibling Incentive continues as long as the siblings remain together; at least three or more siblings remain in the same DFCS regular foster home or relative foster home; or the sibling group achieves permanency. **Effective July 1, 2016, the foster home is paid for the days the sibling group is in their home.**

NOTE: NOTE: Immigration/Legalization Cost can only be paid from Children’s Restricted Funds or Restricted Donation Funds designated as appropriate for this type expense. Per our legal department, neither Federal, State, nor County funds can be used to pay these costs.

ALLOWABLE ENTITLEMENT CODES

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
SB	Sibling Incentive (Eff. July 1, 2006)	<ul style="list-style-type: none"> • Added to the monthly per diem amount for the siblings • \$3.44 per day, effective 7/1/16, per sibling • \$103.00 per sibling, effective 7/1/13 • Must be in sibling groups of three or more
00a	Birth Certificates	Payable to Vital Records http://www.cdc.gov/nchs/w2w.htm
00b	Safety Helmets	Maximum of \$30.00
00c	Putative Father Register Search	Payable to Vital Records https://dph.georgia.gov/putative-father-registry
00d	Other	Expenses that do not fall under a designated entitlement code for 100% state funding <ul style="list-style-type: none"> • Passports
01	Per Diem - Regular	The Division’s Basic Service Rate includes Room, board, clothing replacement Allowance and medicine chest and Incidentals. Effective July 1, 2016: Child age birth through 5 \$15.27 Child age 6 through 12 \$17.26 Child age 13 and older \$19.65 Effective July 1, 2013: Child age birth through 5 \$15.04 Child age 6 through 12 \$17.00 Child age 13 and older \$19.36 NOTE: Per diem increase the month following the child’s birthday.
02	Per Diem –	With DFCS Director/designee’s approval, a special add-on per diem \$.50 to \$1.75 for a child whose care demands additional time and

	Special Add-on		skills of the foster parent.
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UAS CODE 574 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
04	Initial Clothing	<p>May be purchased during the first 6 months of a child’s initial placement in care according to established amounts.</p> <p>Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over</p> <p>Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over</p> <p>July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.</p> <p>Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.</p> <p>May be a one-time expenditure or spent in increments. Exceptions granted via written waiver by County Director or Designee</p>
05	Annual Clothing	<p>May be paid as a state reimbursable item for any child in FFC (regular or relative)</p> <p>May be a one-time expenditure or spent in incremental amounts during a fiscal year</p> <p>Cannot be claimed during the calendar year that the child entered care</p> <p>Effective July 2016 – clothing allowance is an expenditure of \$415</p> <p>Effective July 2014 – clothing allowance is an expenditure of \$409</p> <p>July 2013 - Annual clothing allowance is an expenditure of \$309</p> <p>Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.</p>
10b	Unusual Dental	<p>Maximum funds used for Unusual Dental is \$5,000.00</p> <p>Braces are covered under this code. Case worker should obtain an official estimate of the treatment cost on the orthodontist’s letterhead. Payments, including initial up-front cost, can be paid by the orthodontist standard rate schedule. The entire orthodontic treatment cost should NOT be paid in full; this will ensure that payments are made only for services provided. The Authorization for Disbursement should request payments made directly to orthodontist, not the provider</p>

UAS CODE 574 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
10c	Interstate Travel	ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.
10d	Burial	Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state's maximum amount.
17	Supplemental Supervision – Less than 24 hours per day	<ul style="list-style-type: none"> • Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website. • Childcare for a child placed in a regular or relative home whose foster parents work outside the home • Childcare when the foster parent attends foster parent • A registration fee for childcare may also be included here
99	Written Waiver Item (Per Diem Only)	<ul style="list-style-type: none"> • Additional per diem above rate in 01 and 02 which has been approved via State Office Written Waiver • Other expenditures authorized by a waiver such as non-ICPC authorized travel to place or return a child • Some waivers require state office approval

109.75 UAS Code - 575

PROGRAM NAME - Voluntary Specialized Foster Care State Approved Per Diem Waivers

REFERENCES: Foster Care Services Manual: Fiscal, Section 1016.13, 1016.14, 1016.30, 1016.41

PROGRAM PURPOSE – To charge expenditures for an IV-E eligible child placed in Family Foster Care by Voluntary Placement Agreement who requires a STATE OFFICE special written waiver for per diem (per diem above the basic state rate and above the \$1.75 more which can be authorized by the County Director).

COSTAR REPORTING – Reported client is generally the child. Count client in each entitlement code for which he/she receives services.

KEY PROGRAM OR ELIGIBILITY REQUIREMENTS – The services worker (case manager) is responsible for referring the child to the Regional Revenue Maximization Center to determine eligibility. Accounting must be notified of eligibility determination.

PAYMENT REQUIREMENT

A Form 526 (DFCS Foster Care Invoice) which includes the custody county name, child's legal name, foster home name and address, and boarding county name must be completed, signed and dated by the Foster Parent for reimbursement of family foster care per diem and other expenses. Original receipts must be attached for reimbursement of clothing, supplemental supervision, medical costs and other incidentals.

Note: Use Program 576 for Unusual Medical (10a) and Restraint Devices (11)

County Directors may elect to have their Foster Care invoices submitted via one of the three options below.

- The Foster Parents will submit all foster care invoices to their DFCS County Office to be signed and dated by a county approving authority before they are provided to Region Accounting for processing.
- The Foster Parents will be allowed to submit their foster care invoices directly to Region Accounting for processing. The county's foster care policy must include a statement that Region Accounting is authorized to process payment for county expenditures within the limits contained in the policy. Any invoice that includes a request outside of the limits of the foster care policy will be forwarded back to the appropriate DFCS office for approval before the payment will be processed.
- The Foster Parents will be allowed to submit their foster care invoices for per diem ONLY directly to Region Accounting for processing. The Foster Parents would be required to complete a separate foster care invoice for clothing, supplemental supervision, medical costs and other expenditures to their DFCS office for approval before the payment will be processed.

Special Per Diem must be confirmed in writing by the DFCS County Director and must contain the child's name, date of birth, amount approved, effective date, time frames for approval and description of the child's condition (justification). A copy of the authorization is provided to the accounting department.

UAS 575 (cont)

A form 529 must be in the Accounting Department before payment can be made unless SHINES is updated with the appropriate and accurate information.

Refer to the Field Fiscal Services Website, Foster Care Policy Section under Manuals, Financial Part 2 for additional requirements and guidelines.

Note: If a child/youth is in a RBWO placement and visits overnight with siblings placed in a DFCS foster home, a basic level per diem may be paid to the DFCS foster home using concurrent per diem.

When a child moves from one home to another, the per diem will be paid only to the foster parent at the home where the child spent the night

EXCEPTIONS: 1) Both the primary foster parent and the respite care provider will receive a per diem payment while the child is in respite care. 2) With concurrent per diem, both the primary and the temporary providers are paid the per diem for the nights the child is with the temporary providers.

Form 527 (Initial Authorization of Foster Care) or Form 529 (Authorization of Foster Care Change/Termination) (or current information on IDS Placement Center for pilot regions) must be in the accounting department before payment to Foster Parent is made.

Supplemental Supervision – Rates must be consistent with the CAPS established rates. Only children in the custody of DFCS are eligible for supplemental supervision (In the case that the worker cannot negotiate with the regulated child care provider to reduce their rate to the DFCS' maximum reimbursement rate, the provider's actual rate must be reimbursed. However, informal providers will be reimbursed at the DFCS rate only. (CAPS, Appendix K, pg 8).) Case managers should complete a statement that reflects that the child is not eligible for child care under CAPS policy and send a copy to the Accounting office. If the DFCS foster parent or relative caregiver does not meet CAPS eligibility requirements, a waiver is required from the Deputy Director of Policy and Programs.

Effective July 1, 2006, a Sibling Incentive for each sibling in an approved DFCS Foster Home or a DFCS relative foster home will be paid in addition to the per diem. The sibling groups have to be groups of three or more siblings. The siblings have to be in DFCS custody to be eligible for the Sibling Incentive. (If a relative caregiver obtains legal custody of a sibling, the sibling incentive stops the following month.)

The SSCM will complete the Form 527 (Initial Authorization of Foster Care) for each child at initial placement and will add "Sib-1" to initiate payment. For siblings already in foster care, the SSCM will complete a Form 529 (Authorization of Foster Care Status Change/Termination) and add for 'Change Authorized Foster Care Per Diem Rate to "Sib-1". Restricted Funds are not used for the sibling incentives.

The Sibling Incentive continues as long as the siblings remain together; at least three or more siblings remain in the same DFCS regular foster home or relative foster home; or the sibling group achieves permanency. **Effective July 1, 2016, the foster home is paid for the days the sibling group is in their home.**

UAS 575 (cont)

For **Interstate travel** expenses, a copy of “Interstate Travel Waiver” as the county’s authorization to charge the expenses for the child is attached to bills sent to accounting for payment.

NOTE: Direct payment for clothing to local stores where “charge accounts” are set up is not permitted when federal/state funds are being used.

NOTE: Concurrent per diem payments for children classified for IV-E funding, now require that the “temporary” placement home be paid from IV-B funding while the primary placement home/facility receives IV-E during the absence of a child. Only one IV-E payment may be made on behalf of the child on a single day.

NOTE: NOTE: Immigration/Legalization Cost can only be paid from Children’s Restricted Funds or Restricted Donation Funds designated as appropriate for this type expense. Per our legal department, neither Federal, State, nor County funds can be used to pay these costs.

UAS Code – 575 (continued)

ALLOWABLE ENTITLEMENT CODES

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS												
SB	Sibling Incentive (Eff. July 1, 2006)	<ul style="list-style-type: none"> Added to the monthly per diem amount for the siblings \$3.44 per day, effective 7/1/16, per sibling \$103.00 per sibling, effective 7/1/13 Must be in sibling groups of three or more 												
00a	Birth Certificates	Payable to Vital Records http://www.cdc.gov/nchs/w2w.htm												
00b	Safety Helmets	Maximum of \$30.00												
00c	Putative Father Register Search	Payable to Vital Records https://dph.georgia.gov/putative-father-registry												
00d	Other	Expenses that do not fall under a designated entitlement code for 100% state funding <ul style="list-style-type: none"> Passports 												
01	Per Diem - Regular	<p>The Division’s Basic Service Rate includes Room, board, clothing replacement Allowance and medicine chest and Incidentals.</p> <p>Effective July 1, 2016:</p> <table> <tr> <td>Child age birth through 5</td> <td>\$15.27</td> </tr> <tr> <td>Child age 6 through 12</td> <td>\$17.26</td> </tr> <tr> <td>Child age 13 and older</td> <td>\$19.65</td> </tr> </table> <p>Effective July 1, 2013:</p> <table> <tr> <td>Child age birth through 5</td> <td>\$15.04</td> </tr> <tr> <td>Child age 6 through 12</td> <td>\$17.00</td> </tr> <tr> <td>Child age 13 and older</td> <td>\$19.36</td> </tr> </table> <p>NOTE: Per diem increase the month following the child’s birthday.</p>	Child age birth through 5	\$15.27	Child age 6 through 12	\$17.26	Child age 13 and older	\$19.65	Child age birth through 5	\$15.04	Child age 6 through 12	\$17.00	Child age 13 and older	\$19.36
Child age birth through 5	\$15.27													
Child age 6 through 12	\$17.26													
Child age 13 and older	\$19.65													
Child age birth through 5	\$15.04													
Child age 6 through 12	\$17.00													
Child age 13 and older	\$19.36													
02	Per Diem – Special Add-on	With DFCS Director/designee’s approval, a special add-on per diem \$.50 to \$1.75 for a child whose care demands additional time and skills of the foster parent.												

UAS CODE 575 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
04	Initial Clothing	<p>May be purchased during the first 6 months of a child’s initial placement in care according to established amounts.</p> <p>Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over</p> <p>Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over</p> <p>July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.</p> <p>Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.</p> <p>May be a one-time expenditure or spent in increments. Exceptions granted via written waiver by County Director or Designee</p>
05	Annual Clothing	<p>May be paid as a state reimbursable item for any child in FFC (regular or relative)</p> <p>May be a one-time expenditure or spent in incremental amounts during a fiscal year</p> <p>Cannot be claimed during the calendar year that the child entered care</p> <p>Effective July 2016 – clothing allowance is an expenditure of \$415</p> <p>Effective July 2014 – clothing allowance is an expenditure of \$409</p> <p>July 2013 - Annual clothing allowance is an expenditure of \$309</p> <p>Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.</p>

UAS CODE 575 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
10b	Unusual Dental	<p>Maximum funds used for Unusual Dental is \$5,000.00</p> <p>Braces are covered under this code. Case worker should obtain an official estimate of the treatment cost on the orthodontist's letterhead. Payments, including initial up-front cost, can be paid by the orthodontist standard rate schedule. The entire orthodontic treatment cost should NOT be paid in full; this will ensure that payments are made only for services provided. The Authorization for Disbursement should request payments made directly to orthodontist, not the provider</p>
10c	Interstate Travel	<p>ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.</p>
10d	Burial	<p>Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state's maximum amount.</p>
17	Supplemental Supervision – Less than 24 hours per day	<ul style="list-style-type: none"> • Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website. • Childcare for a child placed in a regular or relative home whose foster parents work outside the home • Childcare when the foster parent attends foster parent • A registration fee for childcare may also be included here
99	Written Waiver Item (Per Diem Only)	<ul style="list-style-type: none"> • Additional per diem above rate in 01 and 02 which has been approved via State Office Written Waiver • Other expenditures authorized by a waiver such as non-ICPC authorized travel to place or return a child • Some waivers require state office approval

109.76 UAS Code - 576

PROGRAM NAME - Specialized Foster Care Related Expenses (State)

REFERENCES: Foster Care Services Manual: Fiscal, Section 1016.11, 1016.12, 1016.43

PROGRAM PURPOSE – Used to charge additional expenditures for children who have a State Office written waiver and are paid from programs 574, 575 or 577 and incurs a service that can only be paid from 100% state funds.

COSTAR REPORTING – Reported client is generally the child. Count client in each entitlement code in which he/she receives services.

KEY PROGRAM OR ELIGIBILITY REQUIREMENTS – Benefits/services charged must meet programmatic guidelines (see Foster Care Manual).

PAYMENT REQUIREMENT

A Form 526 (DFCS Foster Care Invoice) which includes the custody county name, child's legal name, foster home name and address, and boarding county name must be completed, signed and dated by the Foster Parent for reimbursement of family foster care per diem and other expenses. Original receipts must be attached for reimbursement of clothing, supplemental supervision, medical costs and other incidentals.

County Directors may elect to have their Foster Care invoices submitted via one of the three options below.

- The Foster Parents will submit all foster care invoices to their DFCS County Office to be signed and dated by a county approving authority before they are provided to Region Accounting for processing.
- The Foster Parents will be allowed to submit their foster care invoices directly to Region Accounting for processing. The county's foster care policy must include a statement that Region Accounting is authorized to process payment for county expenditures within the limits contained in the policy. Any invoice that includes a request outside of the limits of the foster care policy will be forwarded back to the appropriate DFCS office for approval before the payment will be processed.
- The Foster Parents will be allowed to submit their foster care invoices for per diem ONLY directly to Region Accounting for processing. The Foster Parents would be required to complete a separate foster care invoice for clothing, supplemental supervision, medical costs and other expenditures to their DFCS office for approval before the payment will be processed.

Special Per Diem must be confirmed in writing by the DFCS County Director and must contain the child's name, date of birth, amount approved, effective date, time frames for approval and description of the child's condition (justification). A copy of the authorization is provided to the accounting department.

A form 529 must be in the Accounting Department before payment can be made unless SHINES is updated with the appropriate and accurate information.

UAS CODE 576 (continued)

Refer to the Field Fiscal Services Website, Foster Care Policy Section under Manuals, Financial Part 2 for additional requirements and guidelines.

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
08	In-Hospital Care	Pays for in-hospital expenses for a child in care who is not covered by Medicaid or private insurance.
10a	Unusual Medical	<p>Maximum state funds used for Unusual Medical is \$5,000.00 per fiscal year</p> <p>Waivers: The Regional Director can approve Unusual Medical expenses for children in custody above the \$5,000.00 limit not covered by Medicaid or any other funding source;</p> <p>Examples: Treatment for head lice, glasses or contact lenses</p> <p>NOTE: If a child requires the use of a SERVICE DOG for their needs, then veterinarian cost may be paid.</p>
11	Child Restraint Devices (CRDs)	<ul style="list-style-type: none"> • Purchased in accordance with state law for a specific child from birth to eight years of age. The CRD then belongs to that child. • The CRDs are reimbursed from state funds when purchased for a specific child by the foster parent. If Agency purchases the CRD and is not for a specific child, the expense must be paid from regular operating funds. • Children age 8 and older who are small for their age, i.e., weighing under 80 pounds and/or under 4'9" in height, should use a booster seat instead of a lap/shoulder belt restraint system. • The County Director can authorize a waiver for the age requirement and to purchase a booster seat for the safety needs of a child. Copy of waiver should be sent with payment request to accounting.
99	Written Waiver Item	Expenditure authorized by a written waiver, e.g., non-ICPC authorized travel to place/return a child; some waivers require State Office approval.

109.77 UAS Code - 577

PROGRAM NAME – IV-B Child Welfare Specialized Foster Care State Approved Per Diem Waivers (state)

REFERENCES: Foster Care Services Manual: Fiscal, Section 1016.13, 1016.14, 1016.27, 1016.30, 1016.41

PROGRAM PURPOSE – To charge expenditures for a child who is not eligible for IV-E who is placed in DFCS Family Foster Care and who requires a **State Office** special written waiver for per diem (per diem above the basic state rate and above the \$1.75 more which can be authorized by the County Director).

COSTAR REPORTING – Reported client is generally the child. Count client in each entitlement code for which he/she receives services.

KEY PROGRAM OR ELIGIBILITY REQUIREMENTS – The service worker (case worker) is responsible for referring the child to the Regional Revenue Maximization Center to determine eligibility. Accounting must be notified of eligibility determination.

PAYMENT REQUIREMENTS

A Form 526 (DFCS Foster Care Invoice) which includes the custody county name, child's legal name, foster home name and address, and boarding county name must be completed, signed and dated by the Foster Parent for reimbursement of family foster care per diem and other expenses. Original receipts must be attached for reimbursement of clothing, supplemental supervision, medical costs and other incidentals.

Note: Use Program 576 for Unusual Medical (10a) and Restraint Devices (11)

County Directors may elect to have their Foster Care invoices submitted via one of the three options below.

- The Foster Parents will submit all foster care invoices to their DFCS County Office to be signed and dated by a county approving authority before they are provided to Region Accounting for processing.
- The Foster Parents will be allowed to submit their foster care invoices directly to Region Accounting for processing. The county's foster care policy must include a statement that Region Accounting is authorized to process payment for county expenditures within the limits contained in the policy. Any invoice that includes a request outside of the limits of the foster care policy will be forwarded back to the appropriate DFCS office for approval before the payment will be processed.
- The Foster Parents will be allowed to submit their foster care invoices for per diem **ONLY** directly to Region Accounting for processing. The Foster Parents would be required to complete a separate foster care invoice for clothing, supplemental supervision, medical costs and other expenditures to their DFCS office for approval before the payment will be processed.

UAS 577 (cont)

Special Per Diem must be confirmed in writing by the DFCS County Director and must contain the child's name, date of birth, amount approved, effective date, time frames for approval and description of the child's condition (justification). A copy of the authorization is provided to the accounting department.

A form 529 must be in the Accounting Department before payment can be made unless SHINES is updated with the appropriate and accurate information.

Refer to the Field Fiscal Services Website, Foster Care Policy Section under Manuals, Financial Part 2 for additional requirements and guidelines.

Note: If a child/youth is in a RBWO placement and visits overnight with siblings placed in a DFCS foster home, a basic level per diem may be paid to the DFCS foster home using concurrent per diem.

Supplemental Supervision – Rates must be consistent with the CAPS established rates. Only children in the custody of DFCS are eligible for supplemental supervision (In the case that the worker cannot negotiate with the regulated child care provider to reduce their rate to the DFCS' maximum reimbursement rate, the provider's actual rate must be reimbursed. However, informal providers will

be reimbursed at the DFCS rate only. (CAPS, Appendix K, pg 8.) Case managers should complete a statement that reflects that the child is not eligible for child care under CAPS policy and send a copy to the Accounting office. If the DFCS foster parent or relative caregiver does not meet CAPS eligibility requirements, a waiver is required from the Deputy Director of Policy and Programs.

Effective July 1, 2006, a Sibling Incentive for each sibling in an approved DFCS Foster Home or a DFCS relative foster home will be paid in addition to the per diem. The sibling groups have to be groups of three or more siblings. The siblings have to be in DFCS custody to be eligible for the Sibling Incentive. (If a relative caregiver obtains legal custody of a sibling, the sibling incentive stops the following month.)

The SSCM will complete the Form 527 (Initial Authorization of Foster Care) for each child at initial placement and will add "Sib-1" to initiate payment. For siblings already in foster care, the SSCM will complete a Form 529 (Authorization of Foster Care Status Change/Termination) and add for 'Change Authorized Foster Care Per Diem Rate to "Sib-1". Restricted Funds are not used for the sibling incentives.

The Sibling Incentive continues as long as the siblings remain together; at least three or more siblings remain in the same DFCS regular foster home or relative foster home; or the sibling group achieves permanency. **Effective July 1, 2016, the foster home is paid for the days the sibling group is in their home.**

NOTE: NOTE: Immigration/Legalization Cost can only be paid from Children's Restricted Funds or Restricted Donation Funds designated as appropriate for this type expense. Per our legal department, neither Federal, State, nor County funds can be used to pay these costs.

UAS CODE 577 (continued)

ALLOWABLE ENTITLEMENT CODES

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS												
SB	Sibling Incentive (Eff. July 1, 2006)	<ul style="list-style-type: none"> Added to the monthly per diem amount for the siblings \$3.44 per day, effective 7/1/16, per sibling \$103.00 per sibling, effective 7/1/13 Must be in sibling groups of three or more 												
00a	Birth Certificates	Payable to Vital Records http://www.cdc.gov/nchs/w2w.htm												
00b	Safety Helmets	Maximum of \$30.00												
00c	Putative Father Register Search	Payable to Vital Records https://dph.georgia.gov/putative-father-registry												
00d	Other	Expenses that do not fall under a designated entitlement code for 100% state funding <ul style="list-style-type: none"> Passports 												
01	Per Diem – Regular	<p>The Division’s Basic Service Rate includes Room, board, clothing replacement Allowance and medicine chest and Incidentals.</p> <p>Effective July 1, 2016:</p> <table> <tr> <td>Child age birth through 5</td> <td>\$15.27</td> </tr> <tr> <td>Child age 6 through 12</td> <td>\$17.26</td> </tr> <tr> <td>Child age 13 and older</td> <td>\$19.65</td> </tr> </table> <p>Effective July 1, 2013:</p> <table> <tr> <td>Child age birth through 5</td> <td>\$15.04</td> </tr> <tr> <td>Child age 6 through 12</td> <td>\$17.00</td> </tr> <tr> <td>Child age 13 and older</td> <td>\$19.36</td> </tr> </table> <p>NOTE: Per diem increase the month following the child’s birthday.</p>	Child age birth through 5	\$15.27	Child age 6 through 12	\$17.26	Child age 13 and older	\$19.65	Child age birth through 5	\$15.04	Child age 6 through 12	\$17.00	Child age 13 and older	\$19.36
Child age birth through 5	\$15.27													
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Child age 13 and older	\$19.65													
Child age birth through 5	\$15.04													
Child age 6 through 12	\$17.00													
Child age 13 and older	\$19.36													
02	Per Diem – Special Add-on	With DFCS Director/designee’s approval, a special add-on per diem \$.50 to \$1.75 for a child whose care demands additional time and skills of the foster parent.												

UAS CODE 577 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
04	Initial Clothing	<p>May be purchased during the first 6 months of a child’s initial placement in care according to established amounts.</p> <p>Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over</p> <p>Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over</p> <p>July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.</p> <p>Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.</p> <p>May be a one-time expenditure or spent in increments. Exceptions granted via written waiver by County Director or Designee</p>
05	Annual Clothing	<p>May be paid as a state reimbursable item for any child in FFC (regular or relative)</p> <p>May be a one-time expenditure or spent in incremental amounts during a fiscal year</p> <p>Cannot be claimed during the calendar year that the child entered care</p> <p>Effective July 2016 – clothing allowance is an expenditure of \$415</p> <p>Effective July 2014 – clothing allowance is an expenditure of \$409</p> <p>July 2013 - Annual clothing allowance is an expenditure of \$309</p> <p>Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.</p>

UAS CODE 577 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
10b	Unusual Dental	<p>Maximum funds used for Unusual Dental is \$5,000.00</p> <p>Braces are covered under this code. Case worker should obtain an official estimate of the treatment cost on the orthodontist’s letterhead. Payments, including initial up-front cost, can be paid by the orthodontist standard rate schedule. The entire orthodontic treatment cost should NOT be paid in full; this will ensure that payments are made only for services provided. The Authorization for Disbursement should request payments made directly to orthodontist, not the provider</p>
10c	Interstate Travel	<p>ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.</p>
10d	Burial	<p>Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state’s maximum amount.</p>
17	Supplemental Supervision – Less than 24 hours per day	<ul style="list-style-type: none"> • Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website. • Childcare for a child placed in a regular or relative home whose foster parents work outside the home • Childcare when the foster parent attends foster parent • A registration fee for childcare may also be included here
99	Written Waiver Item	<ul style="list-style-type: none"> • Additional per diem above rate in 01 and 02 which has been approved via State Office Written Waiver • Other expenditures authorized by a waiver such as non-ICPC authorized travel to place or return a child • Some waivers require state office approval

109.79 UAS Code 579

PROGRAM NAME - Initial Specialized Foster Care State Approved Per Diem Waiver

REFERENCES: Foster Care Services Manual: Fiscal, 1016.13, 1016.14, 1016.27, 1016.31, 1016.41

PROGRAM PURPOSE – To charge expenditures when a child is first placed in SFC and who requires a State Office written waiver for per diem (per diem above the basic state rate and above the \$1.75 more which can be authorized by the County Director). Note: This includes short-term emergency care for up to seven days.

KEY PROGRAM OR ELIGIBILITY REQUIREMENTS – Benefits/services charged must meet programmatic guidelines (See Foster Care Manual)

Services may continue for up to 6 months under this UAS Program Code. * However, if the child is determined eligible for IV-E, he/she should be moved to the appropriate IV-E UAS Program as soon as possible. Otherwise, at the end of 6 months, the child should be moved to the appropriate IV-B UAS Program Code.

The child is reported as Initial FFC for six calendar months from the time he/she enters care.

6. For example, if the child enters care in April 2007, he/she would be reported as Initial FFC through September 2007.
7. If the child returns home in May 2007 and comes back into foster care in July 2007, the child would be reported as Initial FFC through September as long as legal custody had not been returned to the parent.
8. If legal custody is returned to the parent and the child again enters care, then the six month period starts over.
9. If the child enters care in April 2007, and is determined to be IVB eligible, IVB funding would begin October 1st, 2007.
10. If the child is determined to be IVE eligible, the child would not remain in initial for the full six months but would be changed to IVE based on the Rev Max effective dates. This will more than likely require a rerate.

*The child is reported as Initial SFC State Approved Per Diem Waiver for 6 calendar months from the time he/she enters care. For example, if the child enters care in April 2004, he/she would be reported as Initial SFC State Approved Per Diem Waiver THROUGH September 2004. If the child returns home in May 2004 and comes back into care in July 2004, the child would be reported as initial SFC State Approved Per Diem Waiver through September as long as legal custody had not been returned to the parent and as long as the programmatic waiver remained in place. If legal custody is returned to the parent and the child again enters care, then the 6-month period starts all over. Of course, if IV-E eligibility is determined, then the child is immediately changed to IV-E.

COSTAR REPORTING – Reported client is generally the child. Count client in each entitlement code for which he/she receives services.

UAS 579 (cont)**PAYMENT REQUIREMENT**

A Form 526 (DFCS Foster Care Invoice) which includes the custody county name, child's legal name, foster home name and address, and boarding county name must be completed, signed and dated by the Foster Parent for reimbursement of family foster care per diem and other expenses. Original receipts must be attached for reimbursement of clothing, supplemental supervision, medical costs and other incidentals.

Note: Use Program 576 for Unusual Medical (10a) and Restraint Devices (11)

County Directors may elect to have their Foster Care invoices submitted via one of the three options below.

- The Foster Parents will submit all foster care invoices to their DFCS County Office to be signed and dated by a county approving authority before they are provided to Region Accounting for processing.
- The Foster Parents will be allowed to submit their foster care invoices directly to Region Accounting for processing. The county's foster care policy must include a statement that Region Accounting is authorized to process payment for county expenditures within the limits contained in the policy. Any invoice that includes a request outside of the limits of the foster care policy will be forwarded back to the appropriate DFCS office for approval before the payment will be processed.
- The Foster Parents will be allowed to submit their foster care invoices for per diem ONLY directly to Region Accounting for processing. The Foster Parents would be required to complete a separate foster care invoice for clothing, supplemental supervision, medical costs and other expenditures to their DFCS office for approval before the payment will be processed.

Special Per Diem must be confirmed in writing by the DFCS County Director and must contain the child's name, date of birth, amount approved, effective date, time frames for approval and description of the child's condition (justification). A copy of the authorization is provided to the accounting department.

A form 529 must be in the Accounting Department before payment can be made unless SHINES is updated with the appropriate and accurate information.

Refer to the Field Fiscal Services Website, Foster Care Policy Section under Manuals, Financial Part 2 for additional requirements and guidelines.

When a child moves from one home to another, the per diem will be paid only to the foster parent at the home where the child spent the night

EXCEPTIONS: 1) Both the primary foster parent and the respite care provider will receive a per diem payment while the child is in respite care. 2) With concurrent per diem, both the primary and the temporary providers are paid the per diem for the nights the child is with the temporary providers.

Form 527 (Initial Authorization of Foster Care) or Form 529 (Authorization of Foster Care Change/Termination) (or current information on IDS Placement Center for pilot regions) must be in the accounting department before payment to Foster Parent is made.

UAS 579 (cont)

Supplemental Supervision – Rates must be consistent with the CAPS established rates. Only children in the custody of DFCS are eligible for supplemental supervision (In the case that the worker cannot negotiate with the regulated child care provider to reduce their rate to the DFCS’ maximum reimbursement rate, the provider’s actual rate must be reimbursed. However, informal providers will be reimbursed at the DFCS rate only. (CAPS, Appendix K, pg 8).) Case managers should complete a statement that reflects that the child is not eligible for child care under CAPS policy and send a copy to the Accounting office. If the DFCS foster parent or relative caregiver does not meet CAPS eligibility requirements, a waiver is required from the Deputy Director of Policy and Programs.

For Interstate travel expenses, a copy of “Interstate Travel Waiver” as the county’s authorization to charge the expenses for the child is attached to bills sent to accounting for payment.

NOTE: Direct payment for clothing to local stores where “charge accounts” are set up is not permitted when federal/state funds are being used.

NOTE: Concurrent per diem payments for children classified for IV-E funding, now require that the “temporary” placement home be paid from IV-B funding while the primary placement home/facility receives IV-E during the absence of a child. Only one IV-E payment may be made on behalf of the child on a single day.

Effective July 1, 2006, a Sibling Incentive for each sibling in an approved DFCS Foster Home or a DFCS relative foster home will be paid in addition to the per diem. The sibling groups have to be groups of three or more siblings. The siblings have to be in DFCS custody to be eligible for the Sibling Incentive. (If a relative caregiver obtains legal custody of a sibling, the sibling incentive stops the following month.)

The SSCM will complete the Form 527 (Initial Authorization of Foster Care) for each child at initial placement and will add “Sib-1” to initiate payment. For siblings already in foster care, the SSCM will complete a Form 529 (Authorization of Foster Care Status Change/Termination) and add for ‘Change Authorized Foster Care Per Diem Rate to “Sib-1”. Restricted Funds are not used for the sibling incentives.

The Sibling Incentive continues as long as the siblings remain together; at least three or more siblings remain in the same DFCS regular foster home or relative foster home; or the sibling group achieves permanency. **Effective July 1, 2016, the foster home is paid for the days the sibling group is in their home.**

NOTE: Immigration/Legalization Cost can only be paid from Children’s Restricted Funds or Restricted Donation Funds designated as appropriate for this type expense. Per our legal department, neither Federal, State, nor County funds can be used to pay these costs.

PUP Funds may be used to reimburse a case manager if they have to purchase some initial clothing or an approved child restraints for child(ren) that are taken into care. Codes 48h (Emergency Clothing, max \$100 per child) and 48j Child Safety Devices (Child Restraints, max \$125 per child restraints)).

UAS CODE 579 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
SB	Sibling Incentive (Eff. July 1, 2006)	<ul style="list-style-type: none"> • Added to the monthly per diem amount for the siblings • \$3.44 per day, effective 7/1/16, per sibling • \$103.00 per sibling, effective 7/1/13 • Must be in sibling groups of three or more
00a	Birth Certificates	Payable to Vital Records http://www.cdc.gov/nchs/w2w.htm
00b	Safety Helmets	Maximum of \$30.00
00c	Putative Father Register Search	Payable to Vital Records https://dph.georgia.gov/putative-father-registry
00d	Other	Expenses that do not fall under a designated entitlement code for 100% state funding <ul style="list-style-type: none"> • Passports
01	Per Diem – Regular	The Division’s Basic Service Rate includes Room, board, clothing replacement Allowance and medicine chest and Incidentals. Effective July 1, 2016: Child age birth through 5 \$15.27 Child age 6 through 12 \$17.26 Child age 13 and older \$19.65 Effective July 1, 2013: Child age birth through 5 \$15.04 Child age 6 through 12 \$17.00 Child age 13 and older \$19.36 NOTE: Per diem increase the month following the child’s birthday.
02	Per Diem – Special Add-on	With DFCS Director/designee’s approval, a special add-on per diem \$.50 to \$1.75 for a child whose care demands additional time and skills of the foster parent.

UAS Code 579 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
04	Initial Clothing	<p>May be purchased during the first 6 months of a child’s initial placement in care according to established amounts.</p> <p>Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over</p> <p>Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over</p> <p>July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.</p> <p>Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.</p> <p>May be a one-time expenditure or spent in increments. Exceptions granted via written waiver by County Director or Designee</p>
05	Annual Clothing	<p>May be paid as a state reimbursable item for any child in FFC (regular or relative)</p> <p>May be a one-time expenditure or spent in incremental amounts during a fiscal year</p> <p>Cannot be claimed during the calendar year that the child entered care</p> <p>Effective July 2016 – clothing allowance is an expenditure of \$415</p> <p>Effective July 2014 – clothing allowance is an expenditure of \$409</p> <p>July 2013 - Annual clothing allowance is an expenditure of \$309</p> <p>Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.</p>

UAS Code 579 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
10b	Unusual Dental	<p>Maximum funds used for Unusual Dental is \$5,000.00</p> <p>Braces are covered under this code. Case worker should obtain an official estimate of the treatment cost on the orthodontist’s letterhead. Payments, including initial up-front cost, can be paid by the orthodontist standard rate schedule. The entire orthodontic treatment cost should NOT be paid in full; this will ensure that payments are made only for services provided. The Authorization for Disbursement should request payments made directly to orthodontist, not the provider</p>
10c	Interstate Travel	<p>ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.</p>
10d	Burial	<p>Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state’s maximum amount.</p>
17	Supplemental Supervision – Less than 24 hours per day	<ul style="list-style-type: none"> • Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website. • Childcare for a child placed in a regular or relative home whose foster parents work outside the home • Childcare when the foster parent attends foster parent • A registration fee for childcare may also be included here
99	Written Waiver Item	<ul style="list-style-type: none"> • Additional per diem above rate in 01 and 02 which has been approved via State Office Written Waiver • Other expenditures authorized by a waiver such as non-ICPC authorized travel to place or return a child • Some waivers require state office approval