**Oct 2019** 

#### 106.0 UNIFORM ACCOUNTING SYSTEM (UAS) CODES

#### UAS **DESCRIPTION** LAST UPDATE **PROGRAM NOTES** Aug 2016 323 Foster Home Development Funds - Do Not Use Effective 11-1-14 Nov 2014 Refer to Program 531 starting 11/1/14 511 **Comprehensive Child and Family Assessment** Feb 2020 518 **CCFA Wrap-Around Services** Feb 2020 521 **FFC-Prevention of Unnecessary Out-of-Home Placement** Feb 2020 State Funded Overnight Stays in Hotel for Foster Children 522 **Mar 2020** 525 Medical Exams and Records – OBSOLETE Effective 7/1/2013 **July 2013** 531 **Foster/Adoptive Parent Support Services** August 2018 532 **APS Emergency Relocation April 2015** 551 **Early Intervention and Prevention Services** Feb 2020 Family Visitation Services – Family Fusion-DO NOT USE Effect 11/1/14 Nov 2014 570 571 **Homestead Services & SAFE CARE** Feb 2020 573 Parent Aide Services & SAFE CARE Feb 2020 593 Foster, Adoptive and Relative Caregiver Recruitment, Retention and Support – NEW EFFECTIVE 11-1-2015 **August 2018 698** DISASTER **APR 2013** 772 **PSSF – Program Costs (Fulton County Only)** Aug 2008 873 C/M PSSF – Family Preservation and Support Services **Oct 2019** 874 **C/M PSSF – Family Support Services Oct 2019**

884C/M PSSF – Adoption Promotion and Post Permanency ServicesOct 2019

700 Series programs currently inactive due to lack of funds - October 2010

C/M PSSF – Time Limited Reunification Services

**PRIOR YEAR INVOICES** – Any invoices, for contracted providers, that are submitted after the payment submission deadline must receive additional approval before payment is made.

The County Director will have to send to their Regional Director for approval, who will decide if appropriate to forward on to their District Director for approval.

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#### **PROGRAM NOTES:**

Service Authorizations for Delivered Services Programs are <u>valid</u> only for the FISCAL YEAR or FEDERAL FISCAL YEAR. Field Staff should not do an SA beyond June 30<sup>th</sup> or September 30<sup>th</sup> depending on the program. If the services are going to extend beyond the fiscal year or federal fiscal year, once contracts have been awarded and the new contracts are loaded in SHINES, the Case Manager will need to do a new SA to extend the services.

Each month the providers should provide ONE invoice for each family by service programs. They should complete the state mandated Invoice, the Travel Expense Report, and attach the appropriate, approved SA for the correct billing period to the invoices before submitting them to the DFCS County office for approval.

If a provider is transporting several children in the same car, the mileage can only be claimed one time, even if for different cases.

Regional Accounting is not to process a partial invoice, if part of the invoice is wrong, the entire invoice needs to be returned to the county for correction.

The Standard Operating Procedures that the state issued in February 2016 states that the provider will have their invoices in to the offices by the 10<sup>th</sup> of the month, and the county is to have them to Regional Accounting by the 20<sup>th</sup>. Regional Accounting has 30 days to turn these invoices around, either back to the county for corrections or processed. It is imperative that the accounting staff continue to process invoices in SHINES for payments while the books are being closed in order to adhere to the 30 day contractual payment agreement. Supervisors will be able to approve the invoices on the 1<sup>st</sup> working day of the month and checks can be processed in SMILE on the 2<sup>nd</sup> working day of the month.

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)** 

**PROGRAM NAME-Comprehensive Child and Family Assessment (PERMANENCY CASES ONLY)** 

CASE MAX Fiscal Year Limit: \$15,000. Waivers will be approved in \$5000 increments. 1<sup>st</sup> level waiver will be approved by the County Director/SS Administrator or Higher Position 2<sup>nd</sup> level waiver will be approved by the Regional Director or Higher Position 3<sup>rd</sup> level waiver will be approved by the District Director or Higher Position

Please note: The waiver process is a DFCS internal process and providers do not need a copy of the waiver for payment purposes.

**REFERENCES:** Child Welfare Policy Manual Chapter 18 Support Services to Preserve or Reunify Families 10.10 CCFA Services

#### **PROGRAM PURPOSE:**

#### **Comprehensive Child and Family (CCFA) – Code 29**

To assist DFCS staff, the juvenile court, families and providers in developing case plans, making placement decisions, expediting permanency and planning for effective service intervention. A Comprehensive Child and Family Assessment is required for all **children** entering care, the family members and collaterals associated with the child. If a child has already had a completed CCFA evaluation within the last 12 months a new, formal CCFA Evaluation is not required. An updated CCFA Evaluation may be required if the child's information has changed within the 12-month period. The case manager will complete the Service Authorization/Referral form. The provider will complete the CCFA. **The provider must have a fully executed contract in the current fiscal year to perform these services.** 

**NOTE:** A Service Authorization must be completed and approved before sending a referral to the provider for services.

**COSTAR REPORTING** – Reported client may be a child depending on the type of assessment being conducted.

#### **PAYMENT REQUIREMENTS:**

CCFA approved providers have signed a DFCS contract with the State of Georgia. The provider of service must be credentialed in accordance to the code requirement listed in this manual.

Providers must submit the program invoice by the 10th of each month, a copy of the SHINES generated Service Authorization, Travel/Mileage Log and case documentation to the County DFCS offices. Regional County Contract Liaison's will review and approve for completeness and accuracy, secure the designated DFCS approving authority signature and forward to their designated accounting office.

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
		• \$850.00
		• This fee is associated with the child case/id#.
Initial Child /Family	511-29e	Compiling, Gathering, assembling all Information
Assessment		needed for a Complete CCFA
		• Must be Completed within 25 calendar days of
Consist of the first		receipt of the service authorization/referral from DFCS. If the report cannot be completed
child entering care,		within 25 calendar days, the provider must add
the family members and collaterals		a case note in the invoice packet that explains
associated with the		why the report was not timely. The case note
child regardless of		will be forwarded to case manager to be placed
location		in the file.
		• Rate includes the cost of attending any DFCS
(one-time fee only)		scheduled meeting.
		<ul> <li>Rate includes cost of facilitating Multi- Disciplinary Team (MDT) meeting.</li> </ul>
		<ul> <li>Rate includes cost of mileage and missed</li> </ul>
		appointments.
		<ul> <li>Licensed/Provisional Licensure or Master's</li> </ul>
		under supervision for licensure
		• Assessment must be signed by a Licensed
		professional if completed by a provisional
		licensed or under supervision for licensure
		individual.
		• <b>Birth Family Background Form 419</b> is mandatory for the completion of all CCFA's.
		<ul> <li>The CCFA Checklist (DFCS's approval of the</li> </ul>
		completed CCFA) is mandatory for payment
		purposes and is completed by DFCS Case
		Manager or Supervisor or Administrator
		during the MDT meeting. The provider must
		also sign the form for any CCFA you submit
		billing for. If DFCS staff does not request or participate in the MDT coordination, then the
		CCFA checklist is not required for payment
		purposes. Provider will send a case note if
		DFCS staff fails to participate in the MDT
		coordination or fails to complete the CCFA
		checklist at the MDT meeting so that payment
		<mark>can still be made.</mark>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Additional Children in Sibling	511-29f	• \$200.00
Group entering foster care		• This fee is associated with the child case/ID#.
		• Must be Completed within 25 calendar days of
Includes additional		receipt of the service authorization/referral from
children in the		DFCS. If the report cannot be completed
sibling group		within 25 calendar days, the provider must add
entering into foster		a case note in the invoice packet that explains
care, including all		why the report was not timely. The case note
family members and		will be forwarded to case manager to be placed
collaterals associated		in the file.
with each child		• Rate includes cost of mileage and missed
regardless of		appointments.
location		• Licensed/Provisional Licensure or Master's
		under supervision for licensure
(one-time fee only)		• Assessment must be signed by a Licensed
		professional if completed by a provisional
		licensed or under supervision for licensure
		individual.
Kinship Assessment	511-29j	• <b>\$500.00</b> Dor formily
Kinship Assessment	311-29j	• \$500.00 Per family
		• Must be completed within 25 calendar days of
		receipt of the service authorization/referral from DFCS. <b>If the report cannot be completed</b>
		within 25 calendar days, the provider must add
		a case note in the invoice packet that explains
		why the report was not timely. The case note
		will be forwarded to case manager to be placed
		in the file.
		<ul> <li>Rate includes cost of mileage and missed</li> </ul>
		appointments.
		• Family member or non-family member has been
		identified as a placement resource for children
		• This Assessment is completed to determine the
		appropriateness of placement resources for
		children
		• Master's Degree in Human Services with 1-
		year experience in human services or
		Bachelor's Degree in Human Services with 3
		years' experience in human services.
		May Not Be Combined with other
		assessments/evaluations

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
DESCRIPTION Update Expired CCFA (Used if Initial CCFA has been completed within 12 months)	CODE 511-29m	<ul> <li>SPECIFIC SERVICE REQUIREMENTS</li> <li>\$300.00</li> <li>Current CCFA is more than one year old</li> <li>Reviewing original CCFA and making any family updates</li> <li>Coordination of Compiling the family assessment</li> <li>Compiling, Gathering, assembling all Information needed for a Complete CCFA</li> <li>Must be completed within 25 calendar days of receipt of the service authorization/referral from DFCS. If the report cannot be completed within 25 calendar days, the provider must add a case note in the invoice packet that explains why the report was not timely. The case note will be forwarded to case manager to be placed in the file.</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
<ul> <li>Update Current CCFA – Children in a Sibling Group who are in Foster Care.</li> <li>Update a current CCFA- After submitting initial CCFA during the first 12 months child is in care.</li> <li>Providers just updates the CCFA section for the paternal family &amp; Form 419 paternal family section.</li> </ul>	511-29n	<ul> <li>\$75.00 per child/family member</li> <li>Each additional child for example if mom has a new baby after initial CCFA has been completed or a new biological father is identified within 12 months of a completed CCFA.</li> <li>Fee can be used for each additional child needed to complete the updated CCFA.</li> <li>Must be completed within 25 calendar days of receipt of the service authorization/referral from DFCS. If the report cannot be completed within 25 calendar days, the provider must add a case note in the invoice packet that explains why the report was not timely. The case note will be forwarded to case manager to be placed in the file.</li> <li>Rate includes cost of mileage and missed appointments.</li> <li>Assessment must be signed by a Licensed professional if completed by a provisional licensed or under supervision for licensure individual.</li> </ul>
Incomplete CCFA Family Assessment	511-290	<ul> <li>\$300</li> <li>Justification Must be Provided</li> <li>Rate includes cost of mileage and missed appointments.</li> <li>Code should only be used if family assessment was initiated and DFCS cancelled the referral before full completion of the CCFA. Provider must submit all completed sections within 10 days of DFCS canceling the assessment.</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Transportation/Escorting	511-56a	• \$25.00 per hour
Services for Children in foster care for medical-dental components needed to complete CCFA ONLY No Client Satisfaction Survey Required for Transportation Services		<ul> <li>This code is used solely when transporting children to and from medical or dental appointments to meet CCFA requirements.</li> <li>Hourly rate begins from the provider's residence or official business address or current location, whichever is nearer to the destination point.</li> <li>Please Note: Crisis Intervention Services are PROHIBITED during transportation</li> <li>HS Diploma/GED &amp; 1-year human services experience or a Bachelor's Degree in Human Services (does not require human services experience) &amp; transporters must take Child Safety Seat training annually.</li> <li>Wait times can be charged if a trip one-way is 3 or more hours without justification on the SA. Any other billed wait time must be on the service authorization in the justification/comment section or in an email to the provider. If the provider was notified by email that needs to be submitted with the</li> </ul>
	511 5()	invoice packet.
CCFA Mileage (Does not have to be on the service authorization for payment purposes)	511-56b	<ul> <li>Mileage Reimbursable at the state approved Rate</li> <li>Mileage is reimbursable for transporting child(ren) only for the medical &amp; dental components of the CCFA</li> <li>Travel begins from the provider's residence or official business address or current location whichever is nearer to the destination point. (full address required).</li> <li>NOTE: If a provider is completing back to back services current location may not be closest to the destination.</li> <li>NOTE: A physical address for mileage must be logged for every origin (start point) and destination (end point).</li> <li>The specific purpose for each trip must be</li> </ul>
		listed on the mileage log.

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Children's Meals During Transportation	511-56c	<ul> <li>Meals for children when in transportation status</li> <li>Original detailed receipts are required</li> <li>Clearly mark child's portion of expenditures</li> <li>Meal limits may not exceed \$28 a day (\$6 Breakfast, \$7 Lunch and \$15 Dinner)</li> </ul>
Court Appearance and/or Testimony ( <b>High Level</b> )	511-88a	<ul> <li>\$80/HR/Day May not Exceed \$640/Day</li> <li>CCFA Assessment-Invoice and a copy of subpoena must be attached for payment</li> <li>Master's/Doctoral – Licensed only</li> <li>Includes Mileage</li> </ul>
Court Appearance and/or Testimony (Low Level)	511-88b	<ul> <li>\$45/HR/Day May not Exceed \$360</li> <li>CCFA Assessment-Invoice and a copy of subpoena must be attached for payment</li> <li>Master's Degree in Human Services with 1-year experience in human services or Bachelor's Degree in Human Services with 3 years' experience in human services.</li> <li>Includes Mileage</li> </ul>
Court Appearance and/or Testimony ( <b>Moderate Level</b> )	511-88c	<ul> <li>\$65/HR/Day May not Exceed \$520/Day</li> <li>CCFA Assessment-Invoice and a copy of subpoena must be attached for payment</li> <li>Provisional Licensure or Master's Under Supervision for Licensure</li> <li>Includes Mileage</li> </ul>

#### 109.18 UAS Program 518 WRAP (CONTRACT REQUIRED FOR MOST SERVICES)

# **PROGRAM NAME – Wrap Around Services (FAMILY PRESERVATION AND PERMANENCY CASES)**

CASE MAX Fiscal Year Limit: \$15,000. Waivers will be approved in \$5000 increments. 1<sup>st</sup> level waiver will be approved by the County Director/SS Administrator or Higher Position 2<sup>nd</sup> level waiver will be approved by the Regional Director or Higher Position 3<sup>rd</sup> level waiver will be approved by the District Director or Higher Position

Please note: The waiver process is a DFCS internal process and providers do not need a copy of the waiver for payment purposes.

**REFERENCES:** Child Welfare Policy Manual Chapter 18 Support Services to Preserve or Reunify Families 18.6 WRAP Services

Maximum spending limits \$15,000 per FAMILY per fiscal year to include:

- Crisis Intervention
- In-Home Targeted Case Management
- In-Home intensive treatment
- Transportation & Mileage
- Court Appearances
- Life Book

#### **PROGRAM PURPOSE:**

Wrap Around services are comprehensive home-based mental health treatment and case management services designed to provide critical support to Permanency or Family preservation with the intent of promoting safe and stable families and/or early reunification.

Wrap around services are used to support children placed in DFCS foster homes, reunited with birth families, or placed with relative caregivers who receive a Relative Support subsidy.

Unless otherwise specified, the duration of aftercare services provision <u>cannot exceed six (6)</u> <u>months</u>. Aftercare services must be court-ordered and may be extended up to an additional six (6) months without a waiver.

#### **COSTAR REPORTING:** The reported client is the child.

#### **PAYMENT REQUIREMENTS**:

WRAP **approved** providers have signed a DFCS wide contract with the state of Georgia and are listed on the Support Services website. The provider of service must be credentialed in accordance to the code requirement listed in this manual.

Providers must submit the program invoice by the 10th of each month, a copy of the SHINES generated Service Authorization, Travel/Mileage Log and case documentation to the County DFCS offices. Regional County Contract Liaison's will review and approve for completeness and accuracy, secure the designated DFCS approving authority signature and forward to their designated accounting office.

**NOTE:** Payments are only made from original Wraparound Invoices.

NOTE: Program 518 maximum spending limit per family, per fiscal year, excludes all costs related to emergency placements hoteling and/or supervision services.

NOTE: Payments are only made from the statewide approved original WRAP invoices.

COSTAR Reporting: Service Authorizations for hoteling services must indicate the client's name and the number of days in the client count.

Accounting Note: Payments for hoteling must be made client specific, enter the Number of Days and the beginning to ending dates.

**EMERGENCY – HOTELING and/or SUPERVISION Codes** (518-00h/518-00s/51800t/518-00m/518-00b): 518-00 codes are ONLY to be used to pay a state approved WRAP provider for costs associated with caring for a foster care child when no other placement and/or supervision is available. These costs may include, but are not limited to, hotel, meals, transportation hours, mileage, basic clothing, personal grooming items (toothbrush, soap, deodorant) and medication if needed. The provider should pay all charges, including the hotel, and be reimbursed. Original detailed receipts are required for reimbursement. An hourly rate of \$35.00 per/hr. per person supervising the child(ren) when no other placement and/or supervision is available and delivered by state approved WRAP providers. DFCS must justify the need for 2 behavioral aides by describing the child's behavior, disrupted placements, mental health diagnosis or medical condition. The caseworker and their supervisor should determine the appropriate level of assistance required from the provider to ensure safety and adequate supervision.

For any supervision services a DFCS Supervision plan along with the Universal Application or Child Passport must be provided to the contractor detailing activities for the child during the day.

For any Emergency Placement Hoteling/Supervision Cost that exceeds \$5000.00 cumulative case total) a payment approval request must be sent to the DFCS Contract Administration Billing Specialist (Dewana McKinney) for approval. The email request must have:

#### **COSTAR Section 3006**

**Subject Line:** State Hoteling/Supervision Exception Request should contain the Child's name and which Region is requesting the Exception. An example would be: **Hoteling/Supervision Over \$5000.00 Exception Request for: Sally Sue-Region 2** 

Attachments: Invoice Packets that include the invoice, all supporting receipts, mileage forms, service authorization and case notes.

**Body of the email:** The email should provide the name of the WRAP provider being used and an explanation/justification for emergency hoteling/supervision cost. This should state what efforts have been made to secure a placement for the child prior to utilizing hoteling/supervision. If more than one behavioral aide is needed you must explain why in terms of the child's behavior or medical needs. The total cost (approximate or actual) should be detailed as follows:

Hotel Cost (518-00h): Supervision Cost (518-00s): Miscellaneous Cost (518-00m): Transportation Cost (518-00t): Mileage Cost (518-00b): Total:

If a DFCS employee stays in a hotel with the child, cost incurred such as hotel, meals, transportation and miscellaneous are to be charged to Program 522.

All hoteling and/or supervision (4 or more hrs. used within 24 consecutive hours) service invoices must be on the stand-alone invoice using only the 518-00 codes

**COSTAR REPORTING for all other entitlement codes in Program 518** - Count the client in each entitlement code for the services they receive.

#### **Crisis Intervention** – Code 62

Crisis Intervention is designed to provide an immediate service to stabilize families who are experiencing a disruption or a breakdown in their normal pattern of functioning. Crisis intervention should be used to restore balance and reduce effects of the crisis in the future. This service should be used to assess the immediate situation, identify and confirm the crisis, and its impact to the individual and/or family.

Services should include, but are not limited to:

- Assessing and identifying the crisis
- Listening
- Face to face Counseling
- Development of a plan for problem solving
- Development of new coping skills
- Brief education/role playing of potential future situations
- Recommendation of community resources

Please Note: This is not used for in-home case management

#### Services in this area cannot exceed <mark>5 consecutive</mark> days.

#### In-Home Case Management – Code 71

The purpose is to provide case management assistance to families in completing the defined goals and steps of the Case Plan.

#### Services may include, but are not limited to:

- Coordinating community services
- Advocating for service provisions
- Preparing families for reunification
- Monitoring placements for safety and stability following reunification
- Basic Behavioral Management for family
- Parenting Education/Skills
- Preparing children for adoption (excluding child life histories)
- Developing and discussing life books
- Basic Methods of Discipline

#### In-Home Clinical/Therapeutic and/or Counseling Services- Code 95

The purpose is to provide therapeutic and/or clinical services for a family in preparation of the safe return of a child and/or to maintain and stabilize a child's current placement.

#### Services may include, but are not limited to:

- Drug Treatment and support services for the parent/caregiver and/or child
- Therapy and/or counseling
- Domestic violence counseling
- Anger and Stress management/counseling
- Enhanced Behavior Management for children
- Grief management, loss and/or separation issues
- Enhanced Methods of Discipline

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Emergency Hoteling and/or Supervision Mileage. Must use WRAP PROVIDER NON-CONTRACTED (Excluded from fiscal case max) (Does not have to be on the service authorization for payment purposes)	518-00b	<ul> <li>Mileage Reimbursable at the state approved Rate</li> <li>Mileage is reimbursable for transporting child(ren) only for the medical &amp; dental components of the CCFA</li> <li>Travel begins from the provider's residence or official business address or current location whichever is nearer to the destination point. (full address required).</li> <li>NOTE: If a provider is completing back to back services current location may not be closest to the destination.</li> <li>NOTE: A physical address for mileage must be logged for every origin (start point) and destination (end point).</li> <li>The specific purpose for each trip must be listed on the mileage log.</li> </ul>
Emergency <b>Hotel Cost</b> . Must use WRAP PROVIDER <b>NON-CONTRACTED</b> (Excluded from fiscal case max)	518-00h	<ul> <li>This code is ONLY to be used to pay state approved WRAP providers for the cost associated with the purchase of hotel room.</li> <li>Original hotel receipt showing a ZERO balance is required.</li> <li>This code is also used if DFCS pays for the hotel via Petty Cash, P-Card or Direct Bill, if WRAP provider is staying with the child.</li> <li>Max Rate for Hotel Room is \$150.00 per night (excluding applicable fees &amp; taxes)</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Emergency Hoteling and/or Supervision Miscellaneous Costs. Must use WRAP PROVIDER NON-CONTRACTED (Excluded from fiscal case max)	518-00m	<ul> <li>This code is ONLY to be used to pay state approved WRAP providers for the purchase of miscellaneous items for the child during hoteling or supervision services when no other placement can be found.</li> <li>Miscellaneous items are food \$28 a day (\$6 Breakfast, \$7 Lunch and \$15 Dinner), clothing (up to \$200 justification required from case manager), personal grooming items (up to \$30), and prescription medicine if required, original detailed receipts required for all expenditures</li> <li>Please be advised these are the only items that can be paid for with state funds. Any other cost must be requested on the service authorization and paid for with County Funds.</li> </ul>
Emergency Hoteling and/or Supervision (Behavioral Aide Services) Services. Must use WRAP PROVIDER NON-CONTRACTED (Excluded from fiscal case max)	518-00s	<ul> <li>\$35.00 per hour</li> <li>This code is ONLY to be used to pay state approved WRAP providers for supervision of a foster child.</li> <li>The child to staff ratio will be determined on a case by case basis by DFCS.</li> <li>HS Diploma/GED &amp; 5 years human services experience or Bachelor's Degree in Human Services (no human services experience required)</li> <li>Used only if supervision is 4 or more hrs. with 24 consecutive hours (Note: if less than 4 hours staff must use the behavior aide code 518-47e).</li> <li>A DFCS Supervision Plan along with the Universal Application or Child Passport is needed regardless of number of hours</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Emergency Hoteling and/or Supervision <b>Transportation/Escorting</b> Must use WRAP PROVIDER <b>NON-CONTRACTED</b>	518-00t	<ul> <li>\$25.00 per hour</li> <li>This code is ONLY to be used to pay state approved WRAP providers for transportation services associated with hoteling and/or supervision services when no other placement can be found.</li> </ul>
(Excluded from fiscal case max)		<ul> <li>Can be used for Court Testimony –Subpoena required for payment &amp; incudes mileage</li> <li>Mileage logs are required.</li> <li>HS Diploma/GED &amp; 1-year human services experience or a Bachelor's Degree in Human Services (does not require human services</li> </ul>
No Client Satisfaction Survey Required for Transportation Services		<ul> <li>experience) &amp; transporters must take Child Safety Seat training annually.</li> <li>The specific purpose for each trip must be listed on the mileage log.</li> <li>Wait times can be charged if a trip one-way is 3 or more hours without justification on the SA. Any other billed wait time must be on the service authorization in the justification/comment section or in an email to the provider. If the provider was notified by email that needs to be submitted with the invoice packet.</li> </ul>
Behavioral Aide	518-47e	<ul> <li>\$35.00 per hour</li> <li>HS Diploma/GED &amp; 5 years human services experience or Bachelor's Degree in Human Services (no human services experience required)</li> </ul>
		• Can be used for visitation/supervision if less than 4 hours a day (Note: 4 or more hours must be coded as 518-00s Supervision).
		• A DFCS Supervision Plan along with the Universal Application or Child Passport is needed regardless of number of hours
		<ul> <li>Can be used for Court Testimony – Subpoena required for payment &amp; incudes mileage</li> </ul>
		• Other Uses: Home visits, Basic Behavior modification, and Basic Parenting Skills, etc.

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Transportation/Escorting Services	518-56a	<ul> <li>\$25.00 per hour</li> <li>This code is used solely when transporting children or family members to appointments to</li> </ul>
Not to Be Used for Hoteling and/or Supervision (4 or more hrs. used within 24 consecutive hrs.) Services No Client Satisfaction Survey Required for Transportation Services		<ul> <li>complete WRAP services.</li> <li>Hourly rate begins from the provider's residence or official business address or current location, whichever is nearer to the destination point.</li> <li>Please Note: Crisis Intervention Services are PROHIBITED during transportation</li> <li>If transportation services are going to require 10 consecutive (non-stop) hours of driving, then the provider must provide two drivers</li> <li>Can be used for Court Testimony – Subpoena required for payment &amp; incudes mileage</li> <li>HS Diploma/GED &amp; 1-year human services experience or a Bachelor's Degree in Human Services (does not require human services experience) &amp; transporters must take Child Safety Seat training annually.</li> <li>Wait times can be charged if a trip one-way is 3 or more hours without justification on the SA. Any other billed wait time must be on the service authorization in the justification/comment section or in an email to the provider. If the provider was notified by email that needs to be submitted with the invoice packet.</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
WRAP Mileage Not to Be Used for Hoteling and/or Supervision (4 or more hrs. a day) Services (Does not have to be on the service authorization for payment purposes)	518-56b	<ul> <li>Mileage Reimbursable at the state approved Rate</li> <li>Mileage is reimbursable for transporting child(ren) only for the medical &amp; dental components of the CCFA</li> <li>Travel begins from the provider's residence or official business address or current location whichever is nearer to the destination point. (full address required).</li> <li>NOTE: If a provider is completing back to back services current location may not be closest to the destination.</li> <li>NOTE: A physical address for mileage must be logged for every origin (start point) and destination (end point).</li> <li>The specific purpose for each trip must be listed on the mileage log.</li> </ul>
Children's Meals During Transportation	518-56c	<ul> <li>Meals for children when in transportation status</li> <li>Original detailed receipts are required</li> <li>Clearly mark child's portion of expenditures</li> <li>Meal limits may not exceed \$28 a day (\$6 Breakfast, \$7 Lunch and \$15 Dinner)</li> </ul>
WRAP Missed Appointments	518-56g	<ul> <li>\$25.00 per appointment</li> <li>3 missed appointments per month with a MAX of 6 per family/case</li> <li>All missed appointments must be put in writing to the DFCS case manager within 24 hours of the missed appointment and included in the monthly documentation per client.</li> <li>DFCS Staff should add to SA for all services that pay for missed appointments</li> </ul>
Crisis Intervention ( <b>High Risk</b> )	518-62a	<ul> <li>\$80.00 per hour</li> <li>May not Exceed 5 Consecutive Days</li> <li>Additional time will need a waiver from the County Director</li> <li>Master's/Doctoral – Licensed only</li> </ul>

## ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Crisis Intervention (Lower Risk)	518-62b	<ul> <li>\$45.00 per hour</li> <li>May not Exceed 5 Consecutive Days</li> <li>Additional time will need a waiver from the County Director</li> <li>Master's Degree in Human Services with 1-year experience in human services or Bachelor's Degree in Human Services with 3 years' experience in human services.</li> </ul>
Crisis Intervention ( <b>Moderate Risk</b> )	518-62d	<ul> <li>\$65.00 per hour</li> <li>May not Exceed 5 Consecutive Days</li> <li>Additional time will need a waiver from the County Director</li> <li>Provisional Licensure or Master's under Supervision for Licensure</li> </ul>
In Home Case Management –	518-71	<ul> <li><u>Case Management Includes:</u></li> <li>Coordinating community services</li> <li>Advocating for service provisions</li> <li>Preparing families for reunification</li> <li>Monitoring placements for safety and stability following reunification</li> <li>Basic behavioral management for family</li> <li>Parenting Education/Skills</li> <li>Preparing children for adoption (excluding child life histories)</li> <li>Developing and discussing life books</li> <li>Basic methods of discipline</li> </ul>
In Home Targeted Case Management ( <b>High Risk</b> )	518-71a	<ul> <li>\$80.00 per hour</li> <li>Master's/Doctoral – Licensed only</li> </ul>
In Home Targeted Case Management ( <b>Lower Risk</b> )	518-71b	<ul> <li>\$45.00 per hour</li> <li>Master's Degree in Human Services with 1- year experience in human services or Bachelor's Degree in Human Services with 3 years' experience in human services.</li> </ul>
In Home Targeted Case Management ( <b>Moderate Risk</b> )	518-71q	<ul> <li>\$65.00 per hour</li> <li>Provisional Licensure or Master's under Supervision for Licensure</li> </ul>

Revised 2/18/2020

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Coordination and Facilitation of <b>Family</b> <b>Team Meetings (FTM)</b>	518-71r	<ul> <li>\$45.00 per hour</li> <li>Master's Degree in Human Services with 1- year experience in human services or Bachelor's Degree in Human Services with 3 years' experience in human services.</li> <li>FTM Certification Training Mandatory (provider staff must have attended a training on or after 9/2018)</li> <li>DFCS Staff can go to the fiscal web site and review the list of trained FTM facilitators by agency: (http://ffs.dhs.ga.gov). Please note this is an DHS Employee Intranet site so you must log in with your SOG login &amp; password.</li> </ul>
Court Appearance and/or Testimony ( <b>High Level</b> )	518-88a	<ul> <li>\$80/HR/Day May not Exceed \$640/Day</li> <li>WRAP-Invoice and a copy of subpoena must be attached for payment</li> <li>Master's/Doctoral – Licensed only</li> <li>Includes Mileage</li> </ul>
Court Appearance and/or Testimony ( <b>Low Level</b> )	518-88b	<ul> <li>\$45/HR/Day May not Exceed \$360</li> <li>WRAP-Invoice and a copy of subpoena must be attached for payment</li> <li>Master's Degree in Human Services with 1-year experience in human services or Bachelor's Degree in Human Services with 3 years' experience in human services</li> <li>Includes Mileage</li> </ul>
Court Appearance and/or Testimony ( <b>Moderate Level</b> )	518-88c	<ul> <li>\$65/HR/Day May not Exceed \$520/Day</li> <li>WRAP-Invoice and a copy of subpoena must be attached for payment</li> <li>Provisional Licensure or Master's Under Supervision for Licensure</li> <li>Includes Mileage</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
In-Home Intensive Clinical/Therapeutic Services ( <b>High Risk</b> )	518-95a	<ul> <li>\$80.00 per hour</li> <li>Services cannot exceed 6 months</li> <li>Counseling can be provided for: Individual, child, group, or family.</li> <li>A waiver is needed if services exceed 6 months from the County Director</li> <li>Masters/Doctoral Degree – Licensed Only</li> </ul>
In Home Intensive Clinical/Therapeutic Services ( <b>Moderate Risk</b> )	518-95b	<ul> <li>\$65.00 per hour</li> <li>Services cannot exceed 6 months</li> <li>Counseling can be provided for: Individual, child, group, or family.</li> <li>A waiver is needed if services exceed 6 months from the County Director</li> <li>Provisional Licensure or Master's under Supervision for Licensure</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Education Stability – Public Transportation Services. Must use WRAP PROVIDER NON-CONTRACTED	518-56d	<ul> <li>Expenditures incurred in maintaining educational stability using public transportation is appropriate as follows. These expenditures may have to be handled on a reimbursement basis due to the fact that these types of providers will not be able to bill DFCS.</li> <li>Mass Transit Services</li> <li>Van Pools</li> <li>Taxis</li> <li>The caseworker will need to provide a copy of the completed Best Interest Determination (BID) and the WRAP invoice to process payments. Caseworkers can contact epac@dhs.ga.gov with additional questions/concerns.</li> <li>HS Diploma/GED &amp; 1-year human services experience or a Bachelor's Degree in Human Services (does not require human services experience) &amp; transporters must take Child Safety Seat training annually.</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Education Stability –	518-56e	Expenditures incurred in maintaining
WRAP		educational stability using WRAP providers is
Transportation/Escorting		appropriate as follows.
Services. Must use WRAP		
PROVIDER		• Hourly rate \$25.00 (2 hours per day) may be
		more occasionally due to traffic issues,
<b>NON-CONTRACTED</b>		caseworker should approve
		• The caseworker will need to provide a copy of the
No Client Satisfaction		completed Best Interest Determination (BID) and
Survey Required for		the WRAP invoice to process payments.
<b>Transportation Services</b>		• HS Diploma/GED & 1-year human services
		experience or a Bachelor's Degree in Human
		Services (no human services experience
		required & transporters must take Child
		Safety Seat training annually.
		• Caseworkers can contact <a href="mailto:epac@dhs.ga.gov">epac@dhs.ga.gov</a>
		with additional questions/concerns.
		• Wait times can be charged if a trip one-way
		is 3 or more hours without justification on
		the SA. Any other billed wait time must be
		on the service authorization in the
		justification/comment section or in an email
		to the provider. If the provider was notified
		by email that needs to be submitted with the
		invoice packet.

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Education Stability –	518-56f	Expenditures incurred in maintaining
WRAP Mileage		educational stability using WRAP providers is
Services. Must use WRAP		appropriate as follows.
PROVIDER		• Mileage at state approved rate no more
		than 120 miles per day
NON-CONTRACTED		• Travel begins from the provider's residence
		or official business address or current
(Does not have to be on the		location whichever is nearer to the
service authorization for		destination point. (full address required).
payment purposes)		<b>NOTE:</b> If a provider is completing back to
		back services current location may not be
		closest to the destination.
		• The caseworker will need to provide a copy of
		the completed Best Interest Determination
		(BID) and the WRAP invoice to process
		payments.
		• NOTE: A physical address for mileage must
		be logged for every origin (start point) and
		destination (end point).
		• The specific purpose for each trip must be listed on the mileage log.
		Caseworkers can contact <u>epac@dhs.ga.gov</u> with
		additional questions/concerns.
Preventive Family Support	518-86a	\$45.00 per hour (Max \$500 per case)
Services. Must use WRAP		This service is available for Counties/Regions
PROVIDER		who have over 35 cases on their backlog for
		Family support services and Investigations
NON-CONTRACTED		Combined
		This Rate Includes:
		Assessment of the Family
		Documentation
		• Staffing with the DFCS Supervisor
		Staffing Requirements:
		Master's Degree in Human Services with
		1-year experience in human services or
		Bachelor's Degree in Human Services
		with 3 years' experience in human
		services.

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Preventive Family Support	518-86b	
– Mileage		• Mileage Reimbursable at the state approved Rate
Must use a WRAP		• Mileage is reimbursable for transporting
PROVIDER		child(ren) only for the medical & dental components of the CCFA
NON-CONTRACTED		• Travel begins from the provider's residence or official business address or current location
(Does not have to be on the		whichever is nearer to the destination point.
service authorization for		(full address required).
<mark>payment purposes)</mark>		<b>NOTE:</b> If a provider is completing back to
		back services current location may not be
		closest to the destination.
		• NOTE: A physical address for mileage must be
		logged for every origin (start point) and
		destination (end point).
		The specific purpose for each trip must be listed
		on the mileage log.

#### 109.21 UAS Program 521-PUP (CONTRACT FOR CERTAIN SERVICES REQUIRED)

**PROGRAM NAME – FFC- Prevention of Unnecessary Out-of-Home Placement (PUP)** (Family Preservation, Family Support, Investigations, Permanency or Adoptions)

CASE MAX Fiscal Year Limit: \$15,000. Waivers will be approved in \$5000 increments. 1<sup>st</sup> level waiver will be approved by the County Director/SS Administrator or Higher Position 2<sup>nd</sup> level waiver will be approved by the Regional Director or Higher Position 3<sup>rd</sup> level waiver will be approved by the District Director or Higher Position

Please note: The waiver process is a DFCS internal process and providers do not need a copy of the waiver for payment purposes.

**REFERENCES** Child Welfare Policy Manual Chapter 18 Support Services to Preserve or Reunify Families 18.3 PUP Services

#### **PROGRAM PURPOSE:**

The goal of PUP services is to reduce risk factors contributing to child maltreatment to ensure the protection and safety of a child. PUP services include, but not limited to emergency housing/financial assistance, temporary childcare services, counseling, emergency transportation needs and psychiatric/psychological testing, drug screens, and substance abuse assessments, domestic violence assessments, sexual abuse assessments, and parental fitness.

They are provided as a support service among others as part of the safety or case plan in an open Family Preservation or Permanency case. Imminent risk of placement or readiness for reunification of the children must be clearly documented in the case record.

#### Speech and Hearing Evaluations (age 4-17 and Adults) - Code 09

To provide an assessment for non-Medicaid eligible and/or private insurance children, birth parents, foster parents, and/or caregivers. Birth parents are eligible when a permanency plan of reunification is the goal or when other permanency plans may need to be selected. Services must be conducted by a certified technician or certified audiologist.

**COSTAR REPORTING** – Reported client is the family of a child in imminent risk of placement or a child in foster care that is in readiness for reunification. Count clients in each entitlement code for which they receive services.

**KEY PROGRAM OR ELIGIBILITY REQUIREMENTS** – Services may only be authorized once per fiscal year. In addition:

 Must be an open Family Preservation, Family Support, Investigations, Permanency or Adoption cases. The case Manager documents one of the two conditions:

 (A) Risk of Imminent Placement
 (B) Immediate Reunification

#### **PAYMENT REQUIREMENTS:**

Providers must submit the program invoice by the 10th of each month, a copy of the SHINES generated Service Authorization, Travel/Mileage Log and case notes (counseling and only for assessments/evaluations not competed within the defined time line)), drug screening results, evaluations/assessments to the County DFCS offices. Regional County Contract Liaison's will review and approve for completeness and accuracy, secure the designated DFCS approving authority signature and forward to their designated accounting office.

Non-contracted services require the original invoices with receipts. In most cases, PUP expenditures are made directly to the provider. However, funds may be reimbursed directly to a family if the SSCM has given the client prior approval, receipts must be provided. The County Director or their Supervisory designee authorizes each PUP expenditure.

When paying rent, a letter/invoice with address and telephone number from the company or individual who is renting the location is needed. Paying utilities requires a bill (original only) or a letter from the utility company. Bill is paid **<u>DIRECTLY</u>** to the **utility company**. Deposits for rent or utilities should include a letter notifying payee that the deposit should be returned to DFCS.

#### **PROHIBITED PUP SERVICES**:

- Payment of consumer credit debt
- Purchase of trailers or down payment on trailers, trailer lot, or homes
- Legal services for separation, divorce,
- Custody modification or modification of visitation
- Purchase or down payment on vehicles
- Repairs on rental property
- Traffic fines/Court costs
- Ongoing sexual abuse offender counseling for an adult (cost is paid by offender)

**Safety/Enrichment Activities:** Per Foster Care Policy, a child must be 3 years old or older for a family to be reimbursed for swimming lessons. However, if it is determined in the best interest of the child, the caseworker can ask the director for a county level waiver.

**Drug Screening:** Missed or Unannounced Appointments or refusal to complete a drug screening test: It is permissible for the provider to charge \$25 for a missed or unannounced appointment or refusal in the event the client misses an appointment or client is not home for an unannounced visits or refuses to complete a drug test. The missed (scheduled or unannounced) appointment maximum is 6 times per family (up to 3 per month) and a maximum of 3 per family for drug refusals.

**MILEAGE:** It is permissible for a provider performing counseling services and in-home drug screens to be reimbursed for travel to get to and from their appointment. A specific purpose must be listed for all trips.

**Criminal Background Checks/Fingerprinting:** Cases that require background fingerprint checks for clients not in DFCS custody are **paid directly to GBI**, if using LIVESCAN. A Purchase Order is required for all client related fingerprint expenditures for Program 521. These charges are not going to be processed in SHINES.

NOTE: If the fingerprinting cost is mandatory and will be reimbursed to the client, then the client should not be asked to provide payment at the time of the screening.

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Domestic Violence Assessment	521-29a	<ul> <li>\$850.00</li> <li>Licensed/Provisional Licensure or Master's under supervision for licensure</li> <li>Should only be used if the child/family is non-eligible for Peach Care or Private Health Insurance.</li> <li>Rate includes mileage and missed appointments.</li> <li>Assessment must be signed by a Licensed professional if completed by a provisional licensed or under supervision for licensure individual.</li> <li>Must be completed within 25 business days of receipt of the service authorization/referral from DFCS. If the report cannot be completed within 25 business days, the provider must add a case note in the invoice packet that explains why the report was not timely. The case note will be forwarded to case manager to be placed in the file.</li> <li>Can be combined with a Parental Fitness &amp; Substance Abuse Assessments Only (850.00 for the 1<sup>st</sup> and 450.00 each for any other combined assessments.</li> <li>If assessments are combined all assessment names need to be in the report title and must have separate sections &amp; recommendation. DFCS determines if assessments are combined.</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
DESCRIPTION         Parental       Fitness         Assessment	CODE 521-29c	<ul> <li>SPECIFIC SERVICE REQUIREMENTS</li> <li>\$850.00</li> <li>Licensed or Provisional Licensure or Master's under supervision for licensure</li> <li>Should only be used if the child/family is non-eligible for Peach Care or Private Health Insurance.</li> <li>Rate includes mileage and missed appointments.</li> <li>Assessment must be signed by a Licensed professional if completed by a provisional licensed or under supervision for licensure individual.</li> <li>Must be completed within 25 business days of receipt of referral/service authorization. If the report cannot be completed within 25 business days, the provider must add a case note in the invoice packet that explains why the report was not timely. The case note will be forwarded to case manager to be placed in the file.</li> <li>Can be combined with a Parental Fitness &amp; Substance Abuse Assessments Only (850.00 for the 1<sup>st</sup> and 450.00 each for any other combined assessments.</li> <li>If assessments are combined all assessment names need to be in the report title and must have separate sections &amp; recommendation. DFCS determines if assessments are combined.</li> </ul>
Psycho-Sexual Abuse Evaluation	521-29d	<ul> <li>\$850.00</li> <li>Licensed Psychologist only</li> <li>Should only be used if the child/family is non-eligible for Medicaid, Peach Care or Private Health Insurance.</li> <li>Rate includes mileage and missed appointments.</li> <li>Must be completed within 25 business days of receipt of referral/service authorization. If the report cannot be completed within 25 business days, the provider must add a case note in the invoice packet that explains why the report was not timely. The case note will be forwarded to case manager to be placed in the file.</li> <li>May Not Be Combined with other assessments/evaluations</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Substance Abuse Assessment	521-29e	<ul> <li>\$850.00</li> <li>Master's or higher degree in Human Services and Licensed or Provisional Licensed or Master's Degree under Supervision for Licensure or Bachelor's degree with Certified Addiction Counselor 2 (CAC2) certification.</li> <li>Should only be used if the child/family is non-eligible for Medicaid, Peach Care or Private Health Insurance.</li> <li>Rate includes mileage and missed appointments.</li> <li>Assessment must be signed by a Licensed professional if completed by a provisional licensed or under supervision for licensure individual or CAC2 certified or higher equivalent substance abuse/addition certification.</li> <li>Must be completed within 25 business days of receipt of referral/service authorization. If the report cannot be completed within 25 business days, the provider must add a case note in the invoice packet that explains why the report was not timely. The case note will be forwarded to case manager to be placed in the file.</li> <li>Can be combined with a Parental Fitness &amp; Substance Abuse Assessments Only (850.00 for the 1<sup>st</sup> and 450.00 each for any other combined assessments.</li> <li>If assessments are combined all assessments are combined.</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Trauma	521-29f	• \$400.00
Assessments	521-271	<ul> <li>\$400.00</li> <li>Licensed or Provisional Licensure or Master's under supervision for licensure</li> <li>Should only be used if the child/family is non-eligible for Medicaid, Peach Care or Private Health Insurance.</li> <li>DFCS staff must complete the eform and send to Amerigroup to initiate services.</li> <li>Amerigroup (Medicaid) will assign to one of their Medicaid providers to complete.</li> <li>Rate includes mileage and missed appointments.</li> <li>Assessment must be signed by a Licensed professional if completed by a provisional licensed or under supervision for licensure individual.</li> <li>Must be completed within 25 business days of receipt of referral/service authorization. If the report cannot be completed within 25 business days, the provider must add a case note in the invoice packet that explains why the report was not timely. The case note will be forwarded to case manager to be placed in the file.</li> <li>May Not Be Combined with other assessments/evaluations</li> </ul>
Bonding/Attachmen t Assessment	521-29h	<ul> <li>\$600.00</li> <li>Licensed or Provisional Licensure or Master's under supervision for licensure</li> <li>Should only be used if the child/family is non-eligible for Peach Care or Private Health Insurance.</li> <li>Assessment must be signed by a Licensed professional if completed by a provisional licensed or under supervision for licensure individual.</li> <li>Rate includes mileage and missed appointments</li> <li>Must be completed within 25 business days of receipt of referral/service authorization. If the report cannot be completed within 25 business days, the provider must add a case note in the invoice packet that explains why the report was not timely. The case note will be forwarded to case manager to be placed in the file.</li> <li>May Not Be Combined with other assessments/evaluations</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Counseling ( <b>High Risk</b> )	521-50a	<ul> <li>\$80.00 per hour</li> <li>Counseling can be provided for: Individual, child, group, or family.</li> <li>Master/Doctoral Degree- Licensed only</li> <li>Cannot be done while providing transportation services.</li> </ul>
Counseling ( <b>Moderate Risk</b> )	521-50b	<ul> <li>\$65.00 per hour</li> <li>Counseling can be provided for: Individual, child, group, or family.</li> <li>Master/Doctoral Degree - Provisional Licensure or Master's under Supervision for Licensure</li> <li>Cannot be done while providing transportation services.</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Drug and Alcohol Screen Collection Only – Hair Follicle	521-51a	<ul> <li>\$65.00 per service</li> <li>Collects and submits sample to Averhealth Labs</li> <li>High School Diploma/GED</li> <li>Drug Screen Collection Training/Certification</li> </ul>
If the only hair sample that can be obtained is pubic hair, then it can only be performed by the same sex/gender as the client.		
The Service Authorization must be sent to the drug screen collection agency within 8 hours of the request as the collected specimen is only good for testing purposes 24 hrs. after collection and the Service authorization must be sent to the Drug Screen Collection agency via encrypted email (put DHSENCRYPT in the subject line of the email).		

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Drug and Alcohol	521-51b	• \$45.00 per service
Screen Collection Only		• Collects and submits sample to Averhealth Labs
-		High School Diploma/GED
<b>T</b> T •		Drug Screen Collection Training/Certification
Urine		
All collections must		
be directly		
observed.		
All services must be		
completed by the		
same sex/gender as		
the client.		
The Service		
Authorization must		
be sent to the drug		
screen collection		
agency within 8		
hours of the request		
as the collected		
specimen is only		
good for testing		
purposes 24 hrs.		
after collection and		
the Service authorization must		
be sent to the Drug		
Screen Collection		
agency via		
encrypted email		
(put		
DHSENCRYPT in		
the subject line of		
the email).		

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Drug and Alcohol	521-51c	• \$45.00 per service
Screen Collection Only		• Collects and submits sample to Averhealth Labs
-		High School Diploma/GED
		Drug Screen Collection Training/Certification
Oral		
TheServiceAuthorizationmust		
be sent to the drug		
screen collection		
agency within 8		
hours of the request		
as the collected		
specimen is only		
good for testing		
purposes 24 hrs.		
after collection and		
the Service		
authorization must		
be sent to the Drug		
Screen Collection		
agency via		
encrypted email		
(put		
DHSENCRYPT in the subject line of		
the subject line of the email).		
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DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Paternity Testing/DNA Testing	521-51e	<ul> <li>\$22.00 maximum per service</li> <li>Laboratory Corporation of America Holdings (LabCorp) should only be used for this service)</li> </ul>
Court Appearance & Testimony- for Drug Screens Collection Only or Lab Analysis Services	521-51g	<ul> <li>\$35/HR/Day May not Exceed \$360</li> <li>WRAP-Invoice and a copy of subpoena must be attached for payment</li> <li>Master's Degree in Human Services with 1-year experience in human services or Bachelor's Degree in Human Services with 3 years' experience in human services.</li> <li>Includes Mileage</li> </ul>
Drug Screen Collection Only Refusal	521-51h	<ul> <li>\$25 per appointment</li> <li>Max 3 per family/case</li> <li>All drug screen refusals must be put in writing to the DFCS case manager within 24 hours of the missed appointment and included in the monthly documentation per client.</li> </ul>
Missed Scheduled or Non-Scheduled Drug Screen Collection Only Appointments	521-51i	<ul> <li>\$25 per appointment</li> <li>3 missed appointments per month per person referred</li> <li>Max 6 per family/case</li> <li>All missed scheduled or non-scheduled appointments must be put in writing to the DFCS case manager within 24 hours of the missed appointment and included in the monthly documentation per client.</li> <li>DFCS Staff should add to SA for all services that pays for missed appointments</li> </ul>
Drug Screen Collection Only Mileage (Does not have to be on the service authorization for payment purposes)	521-51j	<ul> <li>Mileage Reimbursable at the state approved Rate</li> <li>Mileage is reimbursable for transporting child(ren) only for the medical &amp; dental components of the CCFA</li> <li>Travel begins from the provider's residence or official business address or current location whichever is nearer to the destination point. (full address required).</li> <li>NOTE: If a provider is completing back to back services current location may not be closest to the destination.</li> <li>NOTE: A physical address for mileage must be logged for every origin (start point) and destination (end point).</li> <li>The specific purpose for each trip must be listed on the mileage log.</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Averhealth		\$49.95
	521-51k	
Urine - 7 Panel		Urine 7 Panel Includes: Marijuana, Cocaine, Opiates, PCP,
Drug Screening		Amphetamines, Benzodiazepines, & Barbiturates
(Lab Analysis		Helpful Tip: Staff needs to complete 1 service authorization if
<b>Only</b> )		Averehealth is used for both the collection and lab analysis. If
		another drug screen collection agency is used (other than
Averhealth SA		Averhealth as they are a drug screen collection agency as well affective $7/(10)$ then 2 SA2s will need to be completed: 1 for
must be emailed via		effective 7/1/19) then 2 SA's will need to be completed: 1 for Averhealth services and 1 for the drug screen collection agency.
encryption		Avernearth services and 1 for the drug screen conection agency.
(DHSENCRYPT in		
the subject line) to		
georgiadfcs@averh		
ealth.com		
		\$51.95
Averhealth	521-511	
	(lower	Urine 12 Panel Includes: Marijuana, Cocaine, Opiates, PCP,
Urine - 12 Panel	case L)	Amphetamines, Benzodiazepines, Barbiturates, Methadone,
Drug Screening		Propoxyphene, ETG, Methamphetamines including Ecstasy/MDA, &
(Lab Analysis		Oxycodone/Percocet
Only)		Helpful Time Staff moods to complete 1 comise outbouisting if
(inty)		Helpful Tip: Staff needs to complete 1 service authorization if Averehealth is used for both the collection and lab analysis. If
		•
Averhealth SA		another drug screen collection agency is used (other than Averhealth as they are a drug screen collection agency as well
must be emailed via		effective 7/1/19) then 2 SA's will need to be completed: 1 for
encryption		Averhealth services and 1 for the drug screen collection agency.
(DHSENCRYPT in		invertieuten services und i for the unug serven concetion agency.
th subject line) to		
georgiadfcs@averh		
ealth.com		

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Averhealth Hair Follicle - 7 Panel	521- 51m	<b>\$54.95</b> Hair Follicle 7 Panel Includes: Marijuana, Cocaine, Opiates, PCP,
Drug Screening		Amphetamines, Methamphetamines including Ecstasy/MDA, and Benzodiazepines
(Lab Analysis Only) Averhealth SA must be emailed via encryption		Helpful Tip: Staff needs to complete 1 service authorization if Averehealth is used for both the collection and lab analysis. If another drug screen collection agency is used (other than Averhealth as they are a drug screen collection agency as well effective 7/1/19) then 2 SA's will need to be completed: 1 for Averhealth services and 1 for the drug screen collection agency.
(DHSENCRYPT in the subject line) to georgiadfcs@averh ealth.com		
Averhealth	521-51n	\$54.95
Oral Fluid - 6 Panel Drug Screening		<u>Oral Fluid 6 Panel Includes:</u> Amphetamines, Benzodiazepines, Cannabinoids, Cocaine, Opiates, PCP
(Lab Analysis Only)		Helpful Tip: Staff needs to complete 1 service authorization if Averehealth is used for both the collection and lab analysis. If another drug screen collection agency is used (other than Averhealth as they are a drug screen collection agency as well
Averhealth SA must be emailed via		effective 7/1/19) then 2 SA's will need to be completed: 1 for Averhealth services and 1 for the drug screen collection agency.
encryption (DHSENCRYPT in the subject line) to		
georgiadfcs@averh ealth.com		

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Averhealth Urine - Synthetic Cannabinoids Stimulants Drug Screening (Lab Analysis Only) Averhealth SA must be emailed via encryption (DHSENCRYPT in the subject line) to georgiadfcs@averh ealth.com	521-510	\$69.95 Synthetic Cannabinoids Panel Includes: A urine panel comprised of over 40 synthetic cannabinoid metabolites, including substances such as Spice, K2, etc. Must Be Court Ordered or CPS Case Specific Allegation Helpful Tip: Staff needs to complete 1 service authorization if Averehealth is used for both the collection and lab analysis. If another drug screen collection agency is used (other than Averhealth as they are a drug screen collection agency as well effective 7/1/19) then 2 SA's will need to be completed: 1 for Averhealth services and 1 for the drug screen collection agency.
Averhealth Urine - Synthetic Stimulants Drug Screening (Lab Analysis Only) Averhealth SA must be emailed via encryption (DHSENCRYPT in the subject line) to georgiadfcs@averh ealth.com	521-51p	\$74.95 Synthetic Stimulant Panel Includes: A urine panel comprised of over 60 synthetic stimulant metabolites, including substances such as Bath Salts, Flakka, etc. Must Be Court Ordered or CPS Case Specific Allegation Helpful Tip: Staff needs to complete 1 service authorization if Averehealth is used for both the collection and lab analysis. If another drug screen collection agency is used (other than Averhealth as they are a drug screen collection agency as well effective 7/1/19) then 2 SA's will need to be completed: 1 for Averhealth services and 1 for the drug screen collection agency.

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Averhealth	521-51q	\$74.95
Avernealth	521-51q	Synthetic Kratom Panel Includes: A urine panel comprised of
Urine - Kratom Drug Screening		Mitragynine and 7 Hydroxymitragynine
C		Must Be Court Ordered or CPS Case Specific Allegation
(Lab Analysis Only)		Helpful Tip: Staff needs to complete 1 service authorization if Averehealth is used for both the collection and lab analysis. If another drug screen collection agency is used (other than
Averhealth SA must be emailed via		Averhealth as they are a drug screen collection agency as well effective 7/1/19) then 2 SA's will need to be completed: 1 for
encryption (DHSENCRYPT in		Averhealth services and 1 for the drug screen collection agency.
the subject line) to		
georgiadfcs@averh ealth.com		

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Psychological	521-54a	• \$850.00
Evaluation		Licensed Psychologist only
		• Should only be used if the child/family is non-eligible for
		Medicaid, Peach Care or Private Health Insurance or
		denied by Amerigroup
		<ul> <li>Case managers are responsible for initiating services</li> </ul>
		through an Amerigroup provider. The Amerigroup
		provider should submit a request to complete the
		Psychological evaluation. If Amerigroup denies the
		<mark>Amerigroup provider should provide a copy of the</mark>
		denial to the DFCS case manager. The Case manager
		should not proceed with a PUP approved provider
		before beginning the Amerigroup process.
		Rate includes mileage and missed appointments.
		• Must be completed within 25 business days of receipt of
		referral/service authorization. If the report cannot be
		completed within 25 business days, the provider must
		add a case note in the invoice packet that explains why
		the report was not timely. The case note will be
		forwarded to case manager to be placed in the file.
		• If a child is not in Foster Care or a bio-parent is not
		Medicaid eligible or has private insurance to cover the
		cost , then the psychological must be medically necessary
		(therapist or trauma assessment states it is needed) and court ordered.
		May Not Be Combined with other
		assessments/evaluations

ALLOWABLE EN		
DESCRIPTION Neuro-	CODE 521-54b	SPECIFIC SERVICE REQUIREMENTS
Psychological	521-540	<ul><li>\$1900.00</li><li>Must Be Court Ordered</li></ul>
Evaluation		
Lvaluation		• Must be pre-approved by the Regional or District Director
		<ul> <li>Licensed Psychologist/Neuropsychologist only</li> </ul>
		• Should only be used if the child/family is non-eligible for Medicaid, Peach Care or Private Health Insurance or denied by Amerigroup.
		<ul> <li>Case managers are responsible for initiating services</li> </ul>
		<mark>through an Amerigroup provider. The Amerigroup</mark>
		provider should submit a request to complete the
		Psychological evaluation. If Amerigroup denies the
		Amerigroup provider should provide a copy of the denial to the DFCS case manager. The Case manager
		should not proceed with a PUP approved provider
		before beginning the Amerigroup process.
		• Rate includes mileage and missed appointments.
		• Must be completed within 25 business days of receipt of referral/service authorization. If the report cannot be completed within 25 business days, the provider must add a case note in the invoice packet that explains why the report was not timely. The case note will be forwarded to case manager to be placed in the file.
		May Not Be Combined with other
		assessments/evaluations
Psychiatric	521-54c	• \$850.00
Evaluation		MD/Psychiatrist only
		• Should only be used if the child/family is non-eligible for
		Medicaid, Peach Care or Private Health Insurance.
		Rate includes mileage and missed appointments.
		• Must be completed within 25 business days of receipt of referral/service authorization. <b>If the report cannot be</b>
		completed within 25 business days, the provider must
		add a case note in the invoice packet that explains why
		the report was not timely. The case note will be
		forwarded to case manager to be placed in the file.
		May Not Be Combined with other
		assessments/evaluations

ALLOWABLE ENTI	TLEMENT	CODES
DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
DESCRIPTIONPUPServicesMileage -ForCounselingServices only(Not to Be UsedforDrugorDNAScreening/Testingornon-contractedservices)(Does not haveto be on theserviceauthorizationforpaymentpurposes)PUP Services -MissedAppointments- For	CODE 521-56a 521-56e	<ul> <li>SPECIFIC SERVICE REQUIREMENTS</li> <li>Mileage Reimbursable at the state approved Rate</li> <li>Mileage is reimbursable for transporting child(ren) only for the medical &amp; dental components of the CCFA</li> <li>Travel begins from the provider's residence or official business address or current location whichever is nearer to the destination point. (full address required).</li> <li>NOTE: If a provider is completing back to back services current location may not be closest to the destination.</li> <li>NOTE: A physical address for mileage must be logged for every origin (start point) and destination (end point).</li> <li>The specific purpose for each trip must be listed on the mileage log.</li> <li>25.00 per appointment</li> <li>3 missed appointments per month with a MAX of 6 per family/case</li> </ul>
Counseling Services only (Not to Be Used for Drug or DNA Screening/Testing or non-contracted services)		<ul> <li>All missed appointments must be put in writing to the DFCS case manager within 24 hours of the missed appointment and included in the monthly documentation per client.</li> <li>DFCS Staff should add to SA for all services that pays for missed appointments</li> </ul>
Court Appearance and/or Testimony ( <b>High</b> ) (Not to Be Used for Drug Screening or DNA Testing or non- contracted services)	521-88a	<ul> <li>\$80/HR/Day May not Exceed \$640/Day</li> <li>PUP-Invoice and a copy of subpoena must be attached for payment</li> <li>Master's/Doctoral – Licensed only</li> <li>Includes Mileage</li> </ul>

## ALLOWABLE ENTITLEMENT CODES

Revised 2/18/2020

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Court Appearance and/or Testimony (Low) ((Not to Be Used for Drug Screening or DNA Testing or non- contracted services)	521- 88b	<ul> <li>\$45/HR/Day May not Exceed \$360</li> <li>PUP-Invoice and a copy of subpoena must be attached for payment</li> <li>Master's Degree in Human Services with 1-year experience in human services or Bachelor's Degree in human services with 3 years of experience in human services</li> <li>Includes Mileage</li> </ul>
Court Appearance and/or Testimony ( <b>Moderate</b> ) (Not to Be Used for Drug Screening or DNA Testing or non- contracted services)	521-88c	<ul> <li>\$65/HR/Day May not Exceed \$520/Day</li> <li>PUP-Invoice and a copy of subpoena must be attached for payment</li> <li>Provisional Licensure or Master's Under Supervision for Licensure</li> <li>Includes Mileage</li> </ul>

## UAS Code 521 (continued) (NON-CONTRACTED SERVICES)

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Criminal Background Checks NON- CONTRACTED	521-06d	<ul> <li>Support Services – Criminal Background Checks (GBI) for NON-DFCS custody clients</li> <li>Payments may be directly to the Provider, PO# is required if the service is client related. The SSCM will attach a copy of the PO to the invoice when submitting for processing.</li> </ul>
Speech Evaluation NON- CONTRACTED	521-09a	<ul> <li>\$200-\$600</li> <li>Must be conducted by a certified technician or audiologist</li> <li>•</li> </ul>
Hearing Evaluation NON- CONTRACTED	521-09b	<ul> <li>\$200-\$600</li> <li>Must be conducted by a certified technician or audiologist</li> </ul>
Emergency Housing/Financial Assistance NON- CONTRACTED Mortgage Expenses	521-48a 521-48b	<ul> <li>Past due rent, current rent and up to 3 months future rent can be paid once per family per fiscal year.</li> <li>Rent/Deposit paid directly to leasing agent.</li> <li>Deposit must be returned to DFCS</li> <li>Documentation of the family's plan indicating how they will maintain the changes after the provision of PUP services.</li> <li>A mortgage payment can be made if all PUP criteria have been met.</li> </ul>
NON- CONTRACTED		<ul> <li>Documentation of the family's plan indicating how they will maintain the changes after the provision of PUP services</li> <li>Mortgage expenses paid directly to mortgage company or bank</li> </ul>
Utility Expenses NON- CONTRACTED	521-48c	<ul> <li>Past utility bills, current utility bills and up to 3 months future utility bills may be paid directly to utility company once per family per fiscal year.</li> </ul>
Utility Deposits NON- CONTRACTED	521-48d	<ul> <li>Utility deposits may be paid directly to utility company once per fiscal year.</li> </ul>
Home Repairs (Minor) NON- CONTRACTED	521-48e	<ul> <li>Minor home repairs max of \$1500.00</li> <li>Family must <u>own</u> the home.</li> <li>Provider invoice required for payment</li> <li>Pest Inspections and Treatment</li> </ul>

## UAS Code 521 (continued) (NON-CONTRACTED SERVICES)

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Legal Expenses (Guardianship) NON- CONTRACTED	521-48f	<ul> <li>Minor legal services max of \$500.00 (one-time fee) for guardianship of child</li> <li>Documentation required</li> </ul>
Emergency Furniture NON- CONTRACTED	521-48g	<ul> <li>Emergency funds for household furniture after all other community resources have been exhausted.</li> <li>Range \$100.00-\$1000.00 Maximum</li> <li>Please note: Receipt of purchase required and Payment to provider only</li> </ul>
Emergency Clothing NON- CONTRACTED	521-48h	<ul> <li>Emergency Clothing (Uniforms) for child after all other community resources have been exhausted.</li> <li>\$100.00 maximum per child</li> <li>Please note: Receipt of purchase required.</li> </ul>
Birth/Death Certificates NON- CONTRACTED	521-48i	<ul> <li>\$45 MAX for birth/death certificates needed to provide services to a Family Preservation or Permanency Cases. Payable to Vital Records <u>http://www.cdc.gov/nchs/w2w.htm</u></li> </ul>
Child Safety Devices NON- CONTRACTED	521-48j	<ul> <li>Can only be used to reimburse a case manager who must purchase child safety devices (child restraints) for child(ren) upon initial intake.</li> <li>Max of \$200.00 per child restraint</li> </ul>
Medical Exams	521-48k	Cost associated with obtaining medical records on Non- DFCS custody children

ALLOWABLE ENTI DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Emergency Day Care Services NON- CONTRACTED	521-49	<ul> <li>Emergency temporary day care for children under 13 years of age or up to age 18 if physically or mentally disabled</li> <li>Service Authorization Unit Rates must be within the Child Care Maximum Reimbursement Rates established</li> <li>Maximum of 6 months childcare services per child per</li> </ul>
		<ul> <li>fiscal year</li> <li>Please note: Justification required and Payment to service provider only</li> </ul>
Emergency Meals and Lodging NON- CONTRACTED	521-56b	<ul> <li>May not exceed \$300.00 per occurrence</li> <li>Justification required</li> </ul>
Emergency Gasoline/Public Transportation NON- CONTRACTED	521-56c	<ul> <li>May not exceed \$100.00 per family per fiscal year</li> <li>Justification required</li> </ul>
Emergency Vehicle Repair NON- CONTRACTED	521-56d	<ul> <li>May not exceed maximum of \$500.00 per fiscal year per family</li> <li>Receipt of purchase required and Payment to provider only</li> </ul>
Safety/Enrichment Activities [DFCS FOSTER CARE CHILDREN ONLY] NON- CONTRACTED	521-80	<ul> <li>Enrichment programs promote the well-being of children by providing them with an experience that draws out their fullest potential and talents. Enrichment activities are often geared towards an educational experience that focuses on high abilities such as gifted programs and can span across the arts, humanities, and sciences. They help bolster academics and social interactions for children. These extra-curricular activities can include, but are not limited to: <ul> <li>Dance Classes</li> <li>Art classes</li> <li>Sports</li> <li>Band</li> <li>Advanced Reading or Math courses</li> </ul> </li> <li>Funding for this service can also include purchase of materials needed for these classes (i.e. instruments, uniforms and equipment, supplies, etc.)</li> <li>Must be under 14 and available for all children in DFCS custody regardless of placement (FC, relative, CPA)</li> <li>ILP Program may have funds available if youth is over age 14.</li> <li>Maximum \$500.00 per child per fiscal year</li> <li>Afterschool Care may have programs available</li> </ul>

#### 109.22 UAS Code - 522

PROGRAM NAME - State Funded - Overnight Stays in Hotels for Foster Children

REFERENCES: Foster Care Services Manual: Fiscal, 1016.11, 1016.12, 1016.47, 1016.48

**PROGRAM PURPOSE** – Is to pay for the cost of overnight accommodations for a child and caseworker when placement arrangements cannot be made.

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

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

#### **PAYMENT REQUIREMENT:**

An email approval from both the Regional Director and District Director are required for payment (Code 00).

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Overnight Stay in Hotels	00	<ul> <li>Overnight stays in hotels for children in state custody when unable to locate a provider that will accept the child. Costs include lodging and meals for DFCS staff and child.</li> </ul>

#### 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 Regular Foster Home Evaluations completed.

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

Entitlement Code E5-- Count the number of ICPC Foster Home Evaluations completed.

Entitlement Code E6-- Count the number of ICPC Foster Home Evaluations partially completed

**Entitlement Code E7** – Count the number of Foster Home Evaluations completed; include the first and last name of the primary parent and date the evaluation was completed.

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

**Entitlement Code 29b** Count the number of Family Evaluations Completed for Relative Adoptions; include the first and last name of the primary caregiver and the date the evaluation was completed.

Entitlement Code 67a - For each training group, count the unduplicated number of foster parents who complete the10-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 Resource Development Lead 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 one time 5-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 –**

#### UAS Code 531 (continued)

# **Entitlement Code E1, E2 (Foster Home Evaluations and E5, E6 (ICPC Home Evaluations)** - Name of Family (first and last name) and the date of the evaluation

\$700.00-----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 29b -** Family Evaluation for Relative Adoption – Name of Family (first and last name) and the date of the evaluation

\$350-----per completed Family Evaluation for Relative Adoption Submitted

#### Entitlement code 67 -

# <u>IMPACT Trainings</u> – Name of Provider facilitating the TRAINING, and the dates of the training

\$950.00 ------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 \$237.50 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 Resource Development Lead 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.

#### UAS Code 531 (continued)

<u>Certification of foster/adoptive parents for IMPACT Training</u> - In order to co-lead the 10 week IMPACT Sessions with DFCS staff, foster/adoptive parents must have successfully completed the one-time 5-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:

- 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

#### <u>OR</u>

**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 can be reimbursed to the prospective and veteran foster parent, or paid directly to the vendor on behalf of the prospective and veteran foster parents.

#### UAS Code 531 (continued)

#### **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 Caregiver Recruitment and Retention Unit Director.

*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 reevaluation purposes for CODE 84. A waiver for the payment for groups <u>of less than five</u> must be obtained from the Caregiver Recruitment and Retention Unit Manager. Payment to the vendor for groups of five or more can be approved by the Regional Resource Development Team Lead.

- 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

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Foster Home		This is a contractual service, so must have a contract
Evaluations	E1	and a yearly PO.
Completed		<ul> <li>Completed and accepted with no further edits needed a Regular Foster Home Evaluation within 6 weeks</li> <li>Rate includes cost for transportation and mileage</li> <li>Contractors paid \$700 per Foster Home Evaluation.</li> <li>Evaluations must be completed per Child Welfare Policy Chapter 14</li> </ul>
Partial Foster		This is a contractual service, so must have a contract
Homes Completed	E2	<ul> <li>and a yearly PO.</li> <li>Partial or incomplete assessments rates are negotiated based upon the amount of work completed</li> <li>At minimum, contractors must provide documentation collected , written summations, any contracts-including preliminary assessments</li> <li>Partial Rates are not to exceed above fee schedule</li> </ul>
ICPC Home		This is a contractual service, so must have a contract
Evaluations Completed	E5	<ul> <li>and a yearly PO.</li> <li>Completed and accepted with no further edits needed a Regular Foster Home Evaluation within 6 weeks</li> <li>Rate includes cost for transportation and mileage</li> <li>Contractors paid \$700 per Foster Home Evaluation.</li> <li>Evaluation.</li> <li>Evaluations must be completed per Child Welfare Policy Chapter 14</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Partial ICPC Home Evaluations	E6	<ul> <li>This is a contractual service, so must have a contract and a yearly PO.</li> <li>Partial or incomplete assessments rates are negotiated based upon the amount of work completed</li> <li>At minimum, contractors must provide documentation collected, written summations, any contracts-including preliminary assessments</li> <li>Partial Rates are not to exceed above fee schedule</li> </ul>
Foster Home Evaluation & Gathering of Attachments & Verifications	E7	<ul> <li>This is a contractual service, so must have a contract and a yearly PO.</li> <li>Completed and accepted with no further edits needed a Regular Foster Home Evaluation within 6 weeks</li> <li>Includes gathering of Verifications &amp; attachments</li> <li>Rate includes cost of transportation and mileage</li> <li>Contractors paid \$850 per Foster Home Evaluation/Packet</li> <li>Evaluations must be completed per Child Welfare Policy Chapter 14</li> </ul>
Family Evaluation for Relative Adoptions	29b	<ul> <li>Completed and accepted with no further edits needed a Family Evaluation for Relative Adoption within 30 days of receipt of the service authorization/referral from DFCS</li> <li>Rate includes cost for transportation and mileage</li> <li>Contractors paid \$350 per Family Evaluation Relative Adoption Packet</li> <li>Evaluation must be completed per Child Welfare Policy Chapter 14</li> </ul>
Support Services –		Support Services items are paid by reimbursement to the foster parent, or paid directly to the vendor on behalf of the foster parentsReimbursement to Parent -Pay in SHINES as an Add on to the Foster Care Invoice

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
	06a	Drug Screens
	06b	<ul> <li>Support Services – Physicals</li> <li>Physicals for Relative Care parents</li> </ul>
	06c	• Support Services – Lab tests
DO NOT USE Effective 11/1/14	06d	• Fingerprint/Backgrounds checks are being moved to 531-84i, SERVICE AUTHORIZATIONS will not be done but a yearly Purchase Order is required
	06e	• Environmental Inspections by the Health Department for Foster Parents homes.
	06f	• Septic tanks pumped if required by the Heath Department for Foster Parent's homes.
	06g	• Additional training and IMPACT materials
	06h	Carbon Monoxide Detectors
	06i	<ul> <li>ABC Rated Fire Extinguishers</li> <li>Pest Inspection and Treatments (lice and bed bugs would be included in this category)</li> </ul>
IMPACT		Paid to the Provider
TRAINING –		Will not be processed through SHINES Purchase Order from SMILE is required.
Group IMPACT Training	67a	<ul> <li>This is a contractual service, so must have a contract and a yearly PO.</li> <li>IMPACT Pre-Service Training Payment - \$950.00</li> </ul>
INDIVIDUAL (1 to 1) IMPACT Training	67b	<ul> <li>This is a contractual service, so must have a contract and a yearly PO.</li> <li>Must be pre-approved by Resource Development Lead</li> </ul>
		• IMPACT Pre-Service Training Payment - \$500.00

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
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
		Note: Caregivers are required to attach all receipts for registration and hotel costs, whether paid in advance or not, when submitting Form 5357 for travel reimbursements.
	68a	Continued Parent Development     THIS IS NOT FOR ADOPTIVE FAMILIES
	68b	<ul> <li>CPR and First Aid Training (pre and post approval)</li> <li>Water Safety Services</li> </ul>
	68c	Annual Adoptive and Foster Parent Conference Costs THIS IS NOT FOR ADOPTIVE FAMILIES
Recruitment Funding Information –	84	Foster Parent promotion, recruitment and retention activities could include, but are not limited to; (Maximum of \$2000 per state fiscal year per Region unless waived by the Caregiver Recruitment and Retention Unit Director.)
		An ADPOR, Purchase Order, approved Critical Supply Request Form, if applicable, and Event Form is required in order to process payment.
		Payments are to be made to the provider Will not be processed in SHINES Service Authorizations will not be completed
	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)
		Purchase Order is required

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
	84j	Pest Inspection and Treatments (lice and bed bugs
		would be included in this category)

#### 109.532 UAS Code - 532

#### **PROGRAM NAME** – APS Emergency Relocation, Effective 7/1/1999

**PROGRAM PURPOSE** - The APS Emergency Relocation Program is designed to be a resource to aid victims of Adult Abuse, Neglect, or Exploitation (A/N/E) in Georgia. To be eligible for participation in this program, an elderly or disabled adult must be receiving services from the Division of Aging's Adult Protective Services unit and these funds are needed to remedy or prevent abuse, neglect or exploitation.

The purpose of this program is used to remove a client from a dangerous situation that may be temporary or permanent when the client may not be eligible for other available resources and/or who do not have sufficient monies/resources to pay for their own emergency need or care.

Funds from this program can be used to provide, but not limited to, the following necessities.

- Food
- Shelter, Personal Care Homes, Motels/Hotels
- Clothing
- Personal Items
- Medical/Vision/Dental Services
- Prescriptions, medications, medical supplies
- Adaptive equipment for the disabled (limited)
- Transportation and moving expenditures (limited)
- Other possible usages could be for Vermin infestations, but must be medically related, weather radios, minor home repairs that represent a safety risk to the client
- Overdue bills for rent, power bills, gas bill or water bill (payments with ERF cannot exceed 2 consecutive months)

**COSTAR REPORTING:** Reported client is the adult. Clients should be counted in every entitlement code for which the client receives services.

#### **KEY PROGRAM AND ELIGIBILITY REQUIREMENTS**

Client eligibility is determined based on the following criteria,

- Be receiving APS services and who is elderly, disabled (18 or older) and who is the subject of abuse, neglect, or exploitation
- Need relocation/change from dangerous situation for safety or risk reduction
- Client deemed in danger if services are not made available
- Community resources cannot be mobilized in a timely manner or are insufficient to protect the health and safety of the client
- Client does not have necessary resources to purchase needed services or goods

#### **109.532** UAS Code – 532 (cont)

Based on the criteria above, the client may receive up to **\$600.00** in benefits if they remain in their current location or **\$1,000.00** in benefits if they have to be physically relocated. Approval by an APS supervisor for all benefits up to \$1,000 is required.

Expenditures over \$1000 up to \$3000 maximum per 12 month period may be requested by the APS Supervisor for approval by their District Managers.

A waiver for expenditures that will exceed \$3,000.00 for a client may be granted, but must be approved by one of the following, **Bryan Hay, APS Field Operations Manager or Barbara Pastirik, APS Section Director.** 

The office of Public Guardianship (PGO) may also on occasion send request for ERF funds. If you have any questions, you can contact, Carleton Coleman, Field Operations Manager at 706-565-2680. The invoices may come in from a caseworker and their supervisor but should always have one of the following signing off as the approving authority, Sonya Walker, Deanna Mosley, Angie Tompkins or Carleton Coleman.

NOTE: The approved waiver should be attached to the check request sent to regional accounting.

These funds are available for 12 months from the time the first ERF payment request is approved.

#### **PAYMENTS REQUIREMENTS:**

Case Manager should request a Purchase Order as appropriate according to state policy.

APS Case Manager completes the APS Emergency Relocation Fund approval Form (APS ERF Form #1). APS Case Manager and/or Supervisor should approve the form for processing.

The APS ERF Form is completed per individual request and all original receipts and original invoices must be attached. Payments are NOT to be made to the client or DHS staff, but directly to the vendor.

APS workers will send all payment request/authorization directly to their respective regional accounting office for processing.

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
03	Emergency Shelter Costs	<ul> <li>Relocation to Personal Care Home/Long-Term Care Facility</li> <li>Other Emergency Shelter Options such as short term housing in non-Long Term Care Facilities</li> </ul>

## UAS Code 532 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
14	Emergency Food, Clothing/Personal Needs/Utilities	<ul> <li>Food (nothing edible in home, client has special dietary needs or food supplements) or Meals (short term)</li> <li>Clothing &amp; Personal Items - clean, well fitted clothes and shoes, necessary toiletries (soap, toilet paper), and other essentials (towel, sheet, blanket)</li> <li>Utilities for Electric, Gas and Water - one-time deposits for new service or reconnection (no more than 2 months delinquent), and repairs to household appliances (stoves, refrigerators)</li> </ul>
15	Emergency Medical Needs	<ul> <li>Medical, vision, and dental services to meet immediate health/safety concerns due to lack of funds or insurance</li> <li>Prescriptions or non-prescription medications needed by client due to lack of funds, insurance, or co-payment</li> <li>Medical supplies/adaptive equipment needed by client to meet basic health or safety needs – help with the purchase, rental, or repair of equipment or supplies such as, but not limited to: glasses, dentures, hearing aids and batteries, bath aids, prosthetic devices, chucks, adult briefs/Depends, cane, walker, portable toilet, air mattress, disposable medical supplies</li> </ul>

## UAS Code 532 (continued)

CODE	DESCRIPTION	SPECIFIC SERVICE REQUIREMENTS
18	Other Emergency Needs	<ul> <li>Transportation to move client to a healthy and safe placement, or to transport the client to necessary services</li> <li>Moving expenses</li> <li>Environmental needs related to living situation which may include needs such as pest extermination (roaches, ants, rodents, fleas, spiders, etc.), and heavy cleaning that has to be done to restore a safe environment and/or establish services to ensure health and safety</li> <li>Translator services required to communicate with caseworker for investigation/assessment and planning. Need to investigate the use of DHS Employees or LEPSI services first.</li> <li>Natural Disasters such as ice storm, heat waves, tornadoes, or floods to relocate them from a dangerous situation.</li> </ul>

109.51 UAS Program – 551 Early Intervention (CONTRACT REQUIRED FOR ALL SERVICES)

CASE MAX Fiscal Year Limit: \$1,000.

One Waiver can be approved for \$250 by the County Director or Regional Director.

Please note: The waiver process is a DFCS internal process and providers do not need a copy of the waiver for payment purposes.

**PROGRAM NAME - Early Intervention and Preventive Services (FAMILY PRESERVATION, FAMILY SUPPORT, SCREEN OUTS AND UNSUBSTANTIATED REPORTS)** 

**REFERENCES:** Child Welfare Policy Manual Chapter 18 Support Services to Preserve or Reunify Families 18.1 Early Intervention Services

**PROGRAM PURPOSE** – This program is designed to provide Community-Based Prevention and Early Intervention activities to afford children a safe, stable and supportive family setting by promoting the well-being of the family. Services are designed to build on and increase the strength and stability of families, increase parent confidence and competence in their parenting abilities and enhance family functioning to prevent child abuse and neglect. The provider must have a fully executed contract in the current fiscal year to perform these services.

**COSTAR REPORTING** – Reported client is the head of the family unit and children remain in the home.

**KEY PROGRAM OR ELIGIBILITY REQUIREMENTS** – Families eligible for these services are in order of priority:

- Families in which abuse or neglect has been substantiated.,
- Families in which abuse and/or neglect has been screened out or unsubstantiated. Services to Priority 2 Families (cases unsubstantiated or screened out) would be voluntary in nature. Note: Maximum of 15 visits only.

#### PAYMENT REQUIREMENTS

Providers must submit the program invoice by the 10<sup>th</sup> of each month, a copy of the SHINES generated Service Authorization, Travel/Mileage Log and case documentation to the County DFCS offices. Regional County Contract Liaison's will review and approve for completeness and accuracy, secure the designated DFCS approving authority signature and forward to their designated accounting office.

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Prevention/Early Intervention Services [CONTRACT REQUIRED] Home Visits	551-79	This program provides Community-Based Prevention and Early Intervention activities to afford children a safe, stable and supportive family setting by promoting the well-being of the family. The provider should provide intensive home visitation services, case management and referral services only. Max per family is \$1000, excluding mileage• \$45 per hour
	551-79b	<ul> <li>Behavioral Modification/Management</li> <li>Budgeting Skills</li> <li>Communication Skills</li> <li>Environmental Safety</li> <li>Parenting Education/Skill building</li> <li>Master's Degree in Human Services with 1-year experience in human services or Bachelor's Degree in Human Services.</li> </ul>
Early Intervention <b>Mileage</b> (Does not have to be on the service authorization for payment purposes)	551-79d	<ul> <li>Mileage Reimbursable at the state approved Rate</li> <li>Mileage is reimbursable for transporting child(ren) only for the medical &amp; dental components of the CCFA</li> <li>Travel begins from the provider's residence or official business address or current location whichever is nearer to the destination point. (full address required).</li> <li>NOTE: If a provider is completing back to back services current location may not be closest to the destination.</li> <li>NOTE: A physical address for mileage must be logged for every origin (start point) and destination (end point).</li> <li>The specific purpose for each trip must be listed on the mileage log.</li> </ul>
Early Intervention Missed Appointments	551-79f	<ul> <li>\$25.00 for missed appointment (max 2) for Early Intervention services</li> <li>DFCS Staff should add to SA for all services that pays for missed appointments</li> </ul>

109.71 UAS Program – 571 Homestead (CONTRACT REQUIRED FOR ALL SERVICES)

**PROGRAM NAME – Homestead (FAMILY PRESERVATION AND PERMANENCY CASES)** 

CASE MAX Fiscal Year Limit: \$15,000. Waivers will be approved in \$5000 increments. 1<sup>st</sup> level waiver will be approved by the County Director/SS Administrator or Higher Position 2<sup>nd</sup> level waiver will be approved by the Regional Director or Higher Position 3<sup>rd</sup> level waiver will be approved by the District Director or Higher Position

Please note: The waiver process is a DFCS internal process and providers do not need a copy of the waiver for payment purposes.

**REFERENCES:** Child Welfare Policy Manual Chapter 18 Support Services to Preserve or Reunify Families 18.5 Homestead Services

<u>**PROGRAM PURPOSE**</u> – To assure safety for children with Family Preservation or Permanency cases that are at-risk of unnecessary foster care or ready for reunification by providing the following services:

- Counseling and Kinship Assessment
- Intensive in-home counseling to maintain and stabilize a child's permanency
- Prepare for the safe return of a child to caretaker from who removed
- In-home or court ordered assessments to prevent unnecessary foster care placement
- Expedite reunification

**COSTAR REPORTING** – Reported client is the head of the family unit. Count client in each entitlement code for which he/she receives services.

**KEY PROGRAM AND ELIGIBILITY REQUIREMENTS** – Families with an active Social Services case are eligible to receive Homestead and Relative/Non-Relative Services per fiscal year. All services are to be completed within 180 days. The provider must have a fully executed contract in the current fiscal year to perform these services.

#### **PAYMENT REQUIREMENTS:**

Providers must submit the program invoice by the 10th of each month, a copy of the SHINES generated Service Authorization, Travel/Mileage Log and case documentation to the County DFCS accuracy, secure the designated DFCS approving authority signature and forward to their designated accounting office.

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Kinship Assessment	571-29a	<ul> <li>\$500.00 Per family</li> <li>Must be completed within 25 business days of receipt of the service authorization/referral from DFCS. If the report cannot be completed within 25 business days, the provider must add a case note in the invoice packet that explains why the report was not timely. The case note will be forwarded to case manager to be placed in the file.</li> <li>Rate includes cost of mileage and missed appointments</li> <li>For Family member or non-family member that has been identified as a placement resource for children</li> <li>This Assessment is completed to determine the appropriateness of placement resources for children</li> <li>Master's Degree in Human Services with 1-year experience in human services.</li> <li>May Not Be Combined with other assessments/evaluations</li> </ul>
Bonding/Attachment Assessment	571-29e	<ul> <li>\$600.00</li> <li>Licensed/Provisional Licensure or Master's under supervision for licensure</li> <li>Should only be used if the child/family is non-eligible for Peach Care or Private Health Insurance.</li> <li>Assessment must be signed by a Licensed professional if completed by a provisional licensed or under supervision for licensure individual.</li> <li>Rate includes mileage and missed appointments</li> <li>Must be completed within 25 business days of receipt of referral/service authorization. If the report cannot be completed within 25 business days, the provider must add a case note in the invoice packet that explains why the report was not timely. The case note will be forwarded to case manager to be placed in the file.</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Behavioral Aide	571-47a	<ul> <li>\$35.00 per hour</li> <li>HS Diploma/GED &amp; 5 years human services experience or Bachelor's Degree in Human Services (no human services experience required)</li> </ul>
		<ul> <li>Can be used for visitation/supervision if less than 4 hours a day within a 24 hr. time frame (Note: 4 or more hours must be coded as 518-00s Supervision).</li> </ul>
		• A DFCS Supervision Plan along with the Universal Application or Child Passport is needed regardless of number of hours
		Can be used for Court Testimony – Subpoena required for payment & incudes mileage
		• Other Uses: Home visits, Basic Behavior modification, and Basic Parenting Education/Skills, etc.
Homestead Services Missed Appointments	571-56a	<ul> <li>25.00 per appointment</li> <li>3 missed appointments per month with a MAX of 6 per family/case</li> <li>All missed appointments must be put in writing to the DFCS case manager within 24 hours of the missed appointment and included in the monthly documentation per client.</li> <li>DFCS Staff should add to SA for all services that pays for missed appointments</li> </ul>

ALLOWABLE ENTITLE DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Homestead Services Mileage (Does not have to be on the service authorization for payment purposes)	571-56b	<ul> <li>Mileage Reimbursable at the state approved Rate</li> <li>Mileage is reimbursable for transporting child(ren) only for the medical &amp; dental components of the CCFA</li> <li>Travel begins from the provider's residence or official business address or current location whichever is nearer to the destination point. (full address required).</li> <li>NOTE: If a provider is completing back to back services current location may not be closest to the destination.</li> <li>NOTE: A physical address for mileage must be logged for every origin (start point) and destination (end point).</li> <li>The specific purpose for each trip must be listed on</li> </ul>
Transportation/Escorting Services	571-56c	<ul> <li>the mileage log.</li> <li>\$25.00 per hour</li> <li>This code is used solely when transporting children or family members to appointments to complete</li> </ul>
No Client Satisfaction Survey Required for Transportation Services		<ul> <li>WRAP services.</li> <li>Hourly rate begins from the provider's residence or official business address or current location, whichever is nearer to the destination point.</li> <li>Please Note: Crisis Intervention Services are PROHIBITED during transportation</li> <li>If transportation services are going to require 10 consecutive (non-stop) hours of driving, then the provider must provide two drivers</li> </ul>
		<ul> <li>Can be used for Court Testimony – Subpoena required for payment &amp; incudes mileage</li> <li>HS Diploma/GED &amp; 1-year human services experience or a Bachelor's Degree in Human Services (does not require human services experience) &amp; transporters must take Child Safety Seat training annually.</li> <li>Wait times can be charged if a trip one-way is 3 or more hours without justification on the SA. Any other billed wait time must be on the service authorization in the justification/comment section or in an email to the provider. If the provider was notified by email that needs to be submitted with the invoice packet.</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Therapy/Counseling ( <b>High Risk</b> )	571-61h	<ul> <li>\$80.00 per hour</li> <li>Master's/Doctoral – Licensed only</li> <li>Counseling can be provided for: Individual, child, group, or family.</li> </ul>
Therapy/Counseling ( <b>Moderate Risk</b> )	571-61i	<ul> <li>\$65.00 per hour</li> <li>Provisional Licensure or Master's under Supervision for Licensure</li> <li>Counseling can be provided for: Individual, child, group, or family.</li> </ul>
Crisis Intervention ( <b>High Risk</b> )	571-62a	<ul> <li>\$80.00 per hour</li> <li>A disruption or breakdown in a person's or family's normal or usual pattern of functioning. A crisis cannot be resolved by a person's customary problem-solving resources/skills.</li> <li>Services Cannot Exceed 5 Consecutive Days</li> <li>Additional time will need a waiver from the County Director</li> <li>Master's/Doctoral – Licensed only</li> </ul>
Crisis Intervention ( <b>Moderate Risk</b> )	571-62b	<ul> <li>\$65.00 per hour</li> <li>A disruption or breakdown in a person's or family's normal or usual pattern of functioning. A crisis cannot be resolved by a person's customary problem-solving resources/skills.</li> <li>Services Cannot Exceed 5 Consecutive Days</li> <li>Additional time will need a waiver from the County Director</li> <li>Provisional Licensure or Master's under Supervision for Licensure</li> </ul>

109.73 UAS Code – 573 Parent Aide (PA) (CONTRACT REQUIRED FOR ALL SERVICES)

# PROGRAM NAME – Parent Aide Services (FAMILY PRESERVATION AND PERMANENCY CASES)

CASE MAX Fiscal Year Limit: \$15,000. Waivers will be approved in \$5000 increments. 1<sup>st</sup> level waiver will be approved by the County Director/SS Administrator or Higher Position 2<sup>nd</sup> level waiver will be approved by the Regional Director or Higher Position 3<sup>rd</sup> level waiver will be approved by the District Director or Higher Position

Please note: The waiver process is a DFCS internal process and providers do not need a copy of the waiver for payment purposes.

**REFERENCES**: Child Welfare Policy Manual Chapter 18 Support Services to Preserve or Reunify Families 18.4 Parent Aide Services

**PROGRAM PURPOSE**- This program is designed to provide Community–Based Prevention activities to afford children a safe, stable and supportive family setting by promoting the well-being of the family. Services include parenting education and training, and are designed to build on and increase the strength and stability of families, increase parent confidence and competence in their parenting abilities, and enhance family functioning to prevent child abuse and neglect.

#### **Parent Aide Services**

- Behavioral Management
- Budgeting Skills
- Communication Skills
- Environmental Safety
- Parenting Education/Skills

The goal of the program is ensuring the safety, well-being, and permanency of children.

**COSTAR REPORTING** – Reported client is the head of the family unit and children remain in the home.

**KEY PROGRAM OR ELIGIBILITY REQUIREMENTS** – Families with an active Social Services case are eligible to receive Parent Aide Services per fiscal year. All services are to be completed within 180 days (unless this requirement is waived by the DFCS). Order of Priority is as follows:

- 1. Families in which abuse or neglect has been substantiated, or have an open Permanency Case but there has been a determination that there is low risk for a repeat incidence
- 2. Families for which abuse and/or neglect has been unsubstantiated and/or there is no open permanency case. Services to priority 2 families would be voluntary in nature.

#### **PAYMENT REQUIREMENTS:**

Providers must submit the program invoice by the 10th of each month, a copy of the SHINES generated Service Authorization, Travel/Mileage Log and case documentation to the County DFCS Offices. Regional County Contract Liaison's will review and approve for completeness and accuracy, secure the designated DFCS approving authority signature and forward to their designated accounting office.

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Behavioral Aide	<mark>573-47a</mark>	<ul> <li>\$35.00 per hour</li> <li>HS Diploma/GED &amp; 5 years human services experience or Bachelor's Degree in Human Services (no human services experience required)</li> </ul>
		• Other Uses: Home visits, Basic Behavior modification, and Parenting Education/Skills, etc.
		<ul> <li>This code cannot be used for any visitation or supervision services.</li> </ul>
		<ul> <li>Supervision code (4 or more hour in a 24- hour period) is 518-00s</li> </ul>
		<ul> <li>Visitation code (Less than 4 hours in a 24- hour period) is 518-47e</li> </ul>
Parent Aide Missed Appointments		<ul> <li>25.00 per appointment</li> <li>3 missed appointments per month with a MAX of 6 per family/case</li> </ul>
	573-56a	• All missed appointments must be put in writing to the DFCS case manager within 24 hours of the missed appointment and included in the monthly documentation per client.
		<ul> <li>DFCS Staff should add to SA for all services that pays for missed appointments</li> <li>Can only be used for Behavioral Aide Services 573-47a.</li> </ul>

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Parent Aide Services Mileage (Does not have to be on the service authorization for payment purposes)	573-56b	<ul> <li>Mileage Reimbursable at the state approved Rate</li> <li>Mileage is reimbursable for transporting child(ren) only for the medical &amp; dental components of the CCFA</li> <li>Travel begins from the provider's residence or official business address or current location whichever is nearer to the destination point. (full address required).</li> <li>NOTE: If a provider is completing back to back services current location may not be closest to the destination.</li> <li>NOTE: A physical address for mileage must be logged for every origin (start point) and destination (end point).</li> <li>The specific purpose for each trip must be listed on the mileage log.</li> </ul>
Printed Material	573-72b	<ul> <li>\$40.00 (per person referred)</li> <li>Parenting skills Materials</li> <li>One-time charge per person only</li> </ul>
Child Care Cost	573-72f	<ul> <li>\$150 per child (one-time fee per child)</li> <li>Provide childcare services to parents participating in Group Parenting classes</li> <li>Attendance sheets required</li> <li>HS Diploma/GED &amp; Certification in CPR &amp; First Aide (both due every two years).</li> <li>CPR/First Aide must either be taken in person or online with Red Cross or American Heart Association within 60 days of staff approval by DFCS Contract Administration Unit.</li> </ul>

# UAS Code 573 (continued) (CONTRACT REQUEST FOR ALL SERVICES)

# ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Group or Individual	573-72g	• \$350 per adult (one-time fee per adult)
Parenting Class		• Provider must provide a minimum of 10 Hours of group or individual parenting sessions
		Attendance sheets required
		Bachelor's Degree or Higher in human services
		and 5 years' experience in
		training/presentations one on one or groups.
		Please note that this fee (350.00) covers ten sessions so
		if a client stops coming at some point during the 10
		sessions you cannot bill for missed appointments.

#### UAS Code - 593 - NEW EFFECTIVE November 1, 2015

# **PROGRAM NAME – Foster, Adoptive and Relative Caregiver Recruitment, Retention and Support**

#### **REFERENCES:**

**PROGRAM PURPOSE** – To support efforts to recruit, train, retain and provide support services for foster, adoptive and relative caregivers. These funds include paying qualified contractors to facilitate IMPACT pre-service training and completing foster or adoptive home evaluations and Relative Care Assessments.

**NOTE:** UAS 593 is a special state-funded allocation for support of caregivers that is meant to enhance funding already in place (such as UAS 531). Some entitlements are the same or similar to other UAS codes. Utilize this funding code once funds are exhausted in the primary service code (i.e...use UAS 593, 29j for RCAs once regional allocations in UAS 511 29j are spent). In order to track spending and outcomes from this special allocation it is important to track it separately and thus UAS 593 was created.

Costar Reporting: The reported client is the foster, adoptive and relative caregivers.

**Entitlement Code 06**—Caregiver Support services—Count the number of children placed, name of the caregiver and type of caregiver (relative or foster).

**Entitlement Code E1**-- Count the number of Foster Home Evaluations completed; include the first and last name of the primary parent and date the evaluation was completed.

**Entitlement Code E2**-- Count the number of partially completed Foster Home Evaluations; include the first and last name of the primary parent and date the evaluation was completed.

**Entitlement Code E7** – Count the number of Foster Home Evaluations completed; include the first and last name of the primary parent and date the evaluation was completed.

**Entitlement Code 29a** – Count the number of Family Evaluations for Relative Adoption Completed; include the first and last name of the primary caregiver and the date the evaluation was completed.

**Entitlement Code 29j**-- Count the number of Relative Caregiver Assessments completed; include the first and last name of the primary parent and date the evaluation was completed.

**Entitlement Code 67a** - For each IMPACT training group, name of provider, count the unduplicated number of foster parents who complete the entire IMPACT course and date the course was completed.

**Entitlement Code 67b** - For 1:1 IMPACT courses, count the unduplicated number of foster parents who complete the entire IMPACT course. Approval from the Resource Development Lead is needed to conduct 1:1 (one-on-one) trainings with these funds.

**Entitlement Code 68a --** (Continued Parent Development) – Count the number of individual caregivers attending the Annual Adoptive and Foster Parent Association of Georgia Conference or Regional Summits or other trainings.

**Entitlement Code 84**—Recruitment and Retention Funding (Note: Maximums noted in UAS 531 do not apply.)

#### KEY PROGRAM OR ELIGIBILITY REQUIREMENTS -

**Entitlement Code 06**—Caregiver Support services--As funding is available, provides **up to \$599** in emergency cash assistance per state fiscal year to caregivers (foster, relative or fictive kin) to defray costs associated with initial placement of child(ren) into a foster or relative placement. Service may also be requested if during an existing placement the caregiver has a financial hardship such as a job loss. This is designed to be an emergency service not a routine benefit. If the caregiver requests payment of a cost to a vendor, verification of the expense must be provided in the form of an invoice from the vendor prior to payment. If the caregiver is requesting assistance for purchases related to a child at the time of placement (ie, clothing, beds, etc.) the caregiver must provide receipts from purchases made with the funding received. The request for assistance must be approved by the Resource Development Team lead. The RD Team Leader must include a written statement regarding the need for assistance that supports an existing and/or impending hardship on behalf of the caregiver along with the request.

#### **Entitlement Code E1: Foster (E1) Home Evaluations**

Provides payment for DFCS foster home evaluations completed by a qualified contractor.

Contractors are paid \$700.00 per completed Foster Home Evaluation. The rate includes cost for transportation and mileage. Evaluations must be completed following the policy outlined in Child Welfare Policy Chapter 14.

#### Entitlement Code E2: Foster (E2) Home: Partially Completed

Provides payment for DFCS foster home evaluations completed by a qualified contractor where the evaluation was only partially completed. Partial or incomplete assessment rates are negotiated based upon the amount of work completed. At a minimum, contractors must provide any documentation collected and a written summation of any contacts including any preliminary assessments. Depending on the amount and quality of the contacts, the summation may range from a statement to a detailed narrative and payments should be made accordingly.

Partial rates are not to exceed the above fee schedule of \$700.00.

# Entitlement Code E7: Foster (E7) Home Evaluations and Gathering of Attachments & Verifications

Provides payment for DFCS foster home evaluations and Gathering of Attachments & Verifications completed by a qualified contractor.

Contractors are paid \$850.00 per completed Foster Home Evaluation Packet. The rate includes cost for transportation and mileage. Evaluations must be completed following the policy outlined in Child Welfare Policy Chapter 14.

#### **Entitlement Code 29a: Family Evaluation for Relative Adoption**

Provides payment for a written Family Evaluation for a relative for the purpose of adoption completed by a qualified contractor. Contractors are paid \$350 per completed evaluation. Evaluations must be completed following the policy outlined in Child Welfare Policy Chapter 14.12. Evaluations must be completed within 30 days of receipt of the referral from DFCS. The rate includes cost for transportation and mileage.

#### Entitlement Code 29j: Relative Care Assessments

Provides payment for relative/fictive kin Relative Care Assessments completed by a qualified contractor. Contractors are paid \$350.00 per completed Assessment. Evaluations must be completed following the policy outlined in Child Welfare Policy Chapter 10. Assessments must be completed within 25 days of receipt of the referral from DFCS. The rate includes cost for transportation and mileage.

**Entitlement code 67a and 67b: IMPACT Training Facilitation** – Provides payment for qualified contractors facilitating IMPACT training.

\$950.00-----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 \$237.50 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 Resource Development Lead is needed to conduct one-on-one training using these funds.

Entitlement code 68a – Caregiver (foster, adoptive and relative) Trainings covers the following:

Annual Adoptive and Foster Parent Association of Georgia Conference, Regional Summits, Other Conferences and Trainings – Registration, travel and meal costs associated with foster parents' attendance

**NOTE:** When requested, registration fees and hotel expenses can be paid in advance for the caregiver attending training and conferences. Caregivers 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 caregivers 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 caregiver will have to pay upfront is for their gas and meals. Caregivers are required to attach all receipts for registration and hotel costs, whether paid in advance or not, when submitting Form 5357 for travel reimbursements.

- Caregivers 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 Caregivers.
- Checks issued in advance for the hotel and/or registration are to be made payable to the vendors, not the caregivers.

**Entitlement Code 84a thru 84d --Recruitment Funding Incentives** - Services and activities designed to promote the development of new foster homes such as foster parent recruitment incentives, Booth Rental/Registration Fees; Printing of flyers, pamphlets, or inserts; Event Decorations and Supplies; and Foster Parent Recruitment Event Site Rental. Must be in support of the Regional Recruitment and Retention Plan and approved by the Regional Resource Development Lead. Spending must be reported in the subsequent quarterly recruitment and retention report. Individual purchases of items, or spending on any individual event, in excess of \$5,000 under this entitlement code must be approved by the Director of the Caregiver Recruitment and Retention Unit.

#### NOTE: Purchase of gift cards are prohibited.

**Entitlement Code 84j** — **Retention Activities** - Services, supports and activities designed to promote the retention of caregivers including foster care and adoption month events. Must be in support of the Regional Recruitment and Retention Plan and approved by the regional resource development lead worker. Spending must be reported in the subsequent quarterly recruitment and retention report.

## ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Caregiver	06	This is designed to be an emergency service and <b>NOT</b>
Support Services		as a routine benefit. <b>Based on availability of funds.</b> Provides up to \$599 in emergency cash assistance per state fiscal year to foster caregivers (foster or relative or
		fictive kin) to defray costs associated with initial placement of child(ren) into a foster or relative placement
		• Service may also be requested if during an existing placement the caregiver has a financial hardship, such as job loss.
		The request for assistance must be approved by the Resource Development Team Lead. The RD Team Leader must include a written statement regarding the need for assistance that supports an existing and/or impending hardship on behalf of the caregiver along with the request. Receipts are required.
		These are emergency payments which will be made in SMILE, an ADPOR is acceptable. May or may not have an invoice available depending on the needs being served.
Foster Home		This is a contractual service, so must have a contract
Evaluations Completed	E1	<ul><li>and a yearly PO.</li><li>Completed and accepted with no further edits</li></ul>
		needed a Regular Foster Home Evaluation within 6 weeks
		<ul> <li>Rate includes cost for transportation and mileage</li> <li>Contractors paid \$700 per Foster Home</li> </ul>
		Evaluation.
		• Evaluations must be completed per Child Welfare Policy Chapter 14

# ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Partial Foster Homes Completed	E2	<ul> <li>This is a contractual service, so must have a contract and a yearly PO.</li> <li>Partial or incomplete assessments rates are negotiated based upon the amount of work completed</li> <li>At minimum, contractors must provide documentation collected , written summations, any contracts-including preliminary assessments</li> <li>Partial Rates are not to exceed above fee schedule</li> </ul>
Foster Home Evaluation & Gathering of Attachments & Verifications	E7	<ul> <li>This is a contractual service, so must have a contract and a yearly PO.</li> <li>Completed and accepted with no further edits needed a Regular Foster Home Evaluation within 6 weeks</li> <li>Includes gathering of Verifications &amp; attachments</li> <li>Rate includes cost of transportation and mileage</li> <li>Contractors paid \$850 per Foster Home Evaluation/Packet</li> <li>Evaluations must be completed per Child Welfare Policy Chapter 14</li> </ul>
Family Evaluation For relative Adoption	29a	<ul> <li>This is a contractual service, so must have a contract and a yearly PO.</li> <li>Contractors paid \$350.00 per family</li> <li>Must be completed and accepted with no further edits needed within 30 days of receipt of the referral from DFCS.</li> <li>Rate includes cost for transportation and mileage</li> <li>Evaluations must be completed per Child Welfare Policy Chapter 14.</li> </ul>

# ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Relative Care Assessments	29j	<ul> <li>SPECIFIC SERVICE REQUIREMENTS</li> <li>This is a contractual service, so must have a contract and a yearly PO.</li> <li>Contractors paid \$350.00 per family</li> <li>Must be completed and accepted with no further edits needed within 25 days of receipt of the referral from DFCS.</li> </ul>
		• Rate includes cost for transportation and mileage
Group - IMPACT Training	67a	<ul> <li>This is a contractual service, so must have a contract and a yearly PO.</li> <li>Facilitation of the IMPACT Pre-Service Training</li> <li>Counties can determine payment intervals</li> <li>\$950.00 per completed IMPACT Pre-Service Training</li> </ul>
Individual (one-on- one) IMPACT Training	67Ъ	<ul> <li>This is a contractual service, so must have a contract and a yearly PO.</li> <li>Must be pre-approved by Resource Development Lead</li> <li>\$500.00 per family</li> </ul>

# ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Caregiver (foster, adoptive and relative) Trainings	68a	<ul> <li>Annual Adoptive and Foster Parent Association of Georgia Conference, Regional Summits, Other Conferences and Training         <ul> <li>Registration, travel and meal costs associated with foster parent's attendance</li> </ul> </li> </ul>
		• If requested-registration fees and hotel expenses can be paid in advance for the caregiver attending training and conferences.
		• Caregivers to complete own hotel reservation/registration forms and submit to DFCS County office.
		• County DFCS will either approve/deny then submit to Regional Accounting.
		• Regional Accounting will issue check and mail directly to vendor w/registration form.
		• Upfront cost to caregiver-gas and meals
		<ul> <li>Note: Caregivers are required to attach all receipts for registration and hotel costs, whether paid in advance or not, when submitting Form 5357 for travel reimbursements.</li> <li>Caregivers must submit a completed Form 5357 (Bill for Services Rendered) for reimbursement</li> </ul>
		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.

# ALLOWABLE ENTITLEMENT CODES

development lead worker. Services, supports an activities designed to promote the retention of caregivers including foster care and adoption me events -Spending must be reported in the subsequent quarterly recruitment and retention report.         An ADPOR, Purchase Order, approved Critical Supply Request Form, if applicable, and Event F is required in order to process payment.         •       Foster parent recruitment incentives         •       Booth rental/Registration fees         •       Printing flyers, pamphlets and/or inserts         •       Foster Parent Recruitment Event Site Re         •       Must be in support of the Regional Recruitment and Retention Plan         •       Purchase of gifts cards are prohibited.         •       Must be approved by the regional resource development lead worker         Individual purchases of items, or spending on an individual event, in excess of \$5,000 under this entitlement code must be approved by the Direct of the Caregiver Recruitment and Retention Unititlement code must be approved by the Direct of the Caregiver Recruitment and Retention Unititlement code must be approved by the Direct of the Caregiver Recruitment and Retention Unititlement code must be approved by the Direct of the Caregiver Recruitment and Retention Unititlement code must be approved by the Direct of the Caregiver Recruitment and Retention Unititlement code must be approved by the Direct of the Caregiver Recruitment and Retention Unititlement code must be approved by the Direct of the Caregiver Recruitment and Retention Unititlement code must be approved by the Direct of the Caregiver Recruitment and Retention Unititlement code must be approved by the Direct of the Caregi	ental y
84a Booth Rental/Registration Fees	
84b Printing (photos, signs or paper items such as fl	yers,
inserts or posters) per campaign or event	- /
84c Event Decoration and Supplies	
84d Foster Parent Recruitment Event Site Rental	
84j         Retention Funding Incentives.	

#### 109.698 UAS Program 698

#### PROGRAM NAME – Disaster Benefits (Client Related)

#### **Program Purpose**

These programs are designed to provide immediate and long term assistance to individuals and families following a State or Federal declared disaster. A majority of these services will be made available following a disaster and can be accessed once a Disaster Service Center (DRC) has been opened in conjunction with a State and Federal declared disaster.

#### **Background History**

In 1950, Congress passed the Federal Disaster Relief Act (Public Law 81-875), authorizing the President to provide supplementary Federal assistance when a Governor requested help and the President approved the request by declaring a major disaster. Federal disaster assistance would "supplement the efforts and available resources of the State and local governments." In other words, the act made it clear that the

Federal government would not function as the first-line provider of emergency assistance and disaster response and recovery. It would *support* State and local governments—not *supplant* them.

Today, the Robert T. Stafford Act gives the Federal government its authority to provide response and recovery assistance in a major disaster. The Stafford Act identifies and defines the types of occurrences and conditions under which disaster assistance may be provided. Under the law, the declaration process remains a flexible tool for providing relief where it is needed.

#### **Disaster Services**

In many disasters, individuals, families, and small businesses suffer the most devastating damage. The following Federal programs could be made available to assist them.

#### 1. Providing Food to Affected Individuals and Families

- a. The Food and Nutrition Service is an agency within the U.S. Department of Agriculture (USDA) that oversees two major disaster assistance programs:
  - i. Food coupons
  - ii. Food commodities.
- b. Assistance in purchasing food is available through the Disaster Food Stamp. Program.
- c. After national-level approval by the Food and Nutrition Service of the USDA, the responsible State and/or local social services agency would provide disaster food stamps to eligible households, who would apply through the local social services office.

#### 2. Disaster Housing Assistance

- a. The Federal government can make funds available to restore homes to a safe, sanitary, and functional condition.
- b. Homeowners must prove they owned and occupied the home at the time of the damage and that damage was disaster-related.
- c. The Disaster Housing Program can provide funds to be used in renting a place to live.
- d. Renters must prove that they lived in the disaster damaged house.

#### **109.698** UAS Code – 698 (cont)

e. Homeowners or renters who can prove they suffered financial hardship as a result of the disaster and cannot pay their rent or mortgage may also qualify for financial help to make those payments.

#### 3. Disaster Loans for Individuals and Businesses

- a. Disaster victims whose property is damaged or destroyed by a disaster may be able to receive a loan from the Federal government to help with repairs. Even without a Presidential declaration of disaster, the Small Business Administration (SBA) may provide disaster assistance in the form of low interest loans to qualified individuals and businesses.
- b. To receive an SBA loan, applicants must demonstrate their ability to repay the loan. Disaster loans may be made available to homeowners to repair or replace homes or personal property.
- c. Renters also may be eligible for loans to repair or replace personal property damaged by the disaster.

#### 4. Housing Assistance

- a. The Federal government can make funds available to homeowners and renters for one or more of the following types of housing assistance:
  - i. Rental Assistance
  - ii. Repair Assistance
- iii. Replacement Assistance
- iv. Permanent Housing Construction

#### 5. Other Needs Assistance

- a. Is a FEMA/State cooperative venture that assists disaster victims with disaster-related serious needs and necessary expenses that have no other source of government, private, or insurance assistance available. Assistance is provided for various personal property losses when the applicant has been denied by SBA for a disaster assistance loan or provided a loan insufficient to cover the disaster-related losses.
- b. Covered items are
  - i. Household items, furnishings, and appliances.
- ii. Clothing.
- iii. Tools or specialized clothing and equipment required by an employer.
- iv. Moving and storage of personal items to prevent further damage.
- v. Privately owned vehicles.
- vi. Flood insurance coverage for a 3-year period.

#### 6. Assistance for Farmers and Ranchers

a. Agencies of the U.S. Department of Agriculture can give assistance to farmers and ranchers even without a major disaster declaration by the President. The Farm Service Agency (FSA) Emergency Conservation Program (ECP) helps fund repair of fencing, debris removal, or restoration of damaged land by grading and shaping. During a drought, ECP also provides emergency water assistance, both for livestock and for existing irrigation systems for orchards and vineyards.

#### **109.698** UAS Code – 698 (cont)

- b. The FSA also can make emergency management (EM) loans in counties included in a Presidential disaster declaration or by the Secretary of Agriculture as disaster area or quarantine area.
- c. EM loans may be made to farmers and ranchers who:
  - i. own or operate land in a designated disaster area
  - ii. are established family farm operators with sufficient farming and ranching experience
  - iii. are citizens or permanent residents of the U.S.
  - iv. have suffered at least a 30% loss in crop production or a physical loss to livestock and livestock products, real estate, or chattel property
  - v. have an acceptable credit history
  - vi. are unable to receive credit from commercial sources
  - vii. Provide collateral to secure the loan, and have repayment ability.

# 7. Disaster Unemployment Assistance

- a. The Disaster Unemployment Assistance (DUA) program provides unemployment benefits and reemployment services to individuals who have become unemployed because of major disasters and who are not eligible for other unemployment compensation programs.
- b. All unemployed individuals must register with the State's employment services office before they can receive DUA benefits.

#### 8. Internal Revenue Service (IRS) Counseling Services

a. The IRS provides counseling on how to prepare or amend returns to include casualty loss deductions. Certain casualty losses may be deducted on Federal income tax returns through an immediate amendment to the previous year's return.

#### 9. Legal Services

- a. Low-income individuals who need legal assistance due to a disaster may be eligible for free legal consultation and services.
- b. This type of assistance may be provided by the Young Lawyers Division of the American Bar Association, the State Bar Association, or the State's Attorney.

#### **10. Social Security Benefits**

a. The Social Security Administration (SSA) does not offer special disaster benefits. However, in a disaster, it is important that those who depend on Social Security checks continue to receive them, even though they may be displaced from their homes.

#### 11. Assistance to Veterans

- a. Medical assistance.
- b. Burial assistance.
- c. Priority in acquiring VA-owned properties if you are displaced in a disaster.
- d. Health care supplies and equipment, drugs, medicine, and other medical items.
- e. Temporary use of housing units owned by the VA.

#### **109.698** UAS Code – 698 (cont)

#### 12. Crisis Counseling

- a. Immediate services program:
  - i. Provides screening, diagnostic, and counseling techniques, as well as outreach services
- b. Regular services program
  - i. Provides funding for crisis counseling, community outreach, and consultation and education services to assist people affected by the disaster up to 9 months from the date of the declaration.

#### 13. Cora Brown Fund

- a. This fund is used to assist victims/survivors in presidentially declared disasters with disaster related needs not met elsewhere.
- b. Potential recipients do not need to apply for this assistance; rather, they are identified by FEMA representatives with assistance from other Federal, State, local, and voluntary relief agencies. Assistance that can be provided by the Cora Brown Fund includes:
  - i. disaster-related home repair and rebuilding,
  - ii. health and safety measures,
- iii. assistance to self-employed persons (with no employees) to reestablish their businesses,
- iv. and other services which alleviate human suffering and promote well being of disaster victims

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Disaster Emergency	41	Refer to specific instructions as provided from state
Benefits		management for each individual disaster event

#### 109.873 UAS Code – 873 (New January 2005)

**PROGRAM NAME -** Promoting Safe and Stable Families (PSSF) Program – Cash Match Family Preservation and Support Services

#### NOTE: FISCAL YEAR SPENDING PERIOD FOR THESE FEDERAL FUNDS IS OCTOBER 1<sup>ST</sup> THROUGH SEPTEMBER 30<sup>TH</sup>. FINAL EXPENDITURES MUST BE PAID ON OR BEFORE SEPTEMBER 15<sup>TH</sup>.

**PROGRAM PURPOSE - PSSF Family Preservation** services are provided to families that have or have had DFCS involvement because of child abuse or neglect, child or parent behavioral challenges, or serious parent-child conflict. Provision of these services grows out of the recognition that the unnecessary separation of children from their families is traumatic, often leaving lasting negative effects. Families at-risk or in-crisis can be preserved and children safely maintained in their homes when families receive intensive support and therapeutic services to improve family functioning and stability. Services are family-focused and are designed to maintain children safely in their homes, prevent the unnecessary separation of families, and are offered as a safe alternative to out-of-home placement.

Providers of PSSF Family Preservation services <u>are required</u> to coordinate services with DFCS and other agencies including mental health, substance abuse, education, child care, and employment services to provide families a comprehensive continuum of community-based supports, interventions and follow-up services responsive to individual and family needs. Services may be offered to families referred by DFCS, juvenile or family court, who are in crisis or at-risk of having a child removed from their home.

**PSSF Family Preservation** services may also be provided to support families post-reunification to help prevent placement disruption.

#### FPS – STR (873-B) INFORMATION

Substance Abuse Family and Recovery Support services provide substance abuse treatment and support services to parents with a child custody or deprivation case where substance abuse treatment, random substance abuse drug screenings and sustained abstinence are required to prevent abandonment and/or maltreatment, removal of the child from the home or as a condition for reunification. Services are community-based and should provide a full continuum of prevention, treatment intervention, and post-treatment support services to substance abusing women with young children and their families to facilitate the maintenance of safe and drug-free households. Service Duration is 3-12 months.

Referral sources include a variety of community-based sources including DFCS Family Support, Family Preservation, or Placement Services or Juvenile, Family or Drug Court.

#### FPS – RCS (873-G) INFORMATION

Relative Caregiver Support services offer a comprehensive array of support services to grandparents and relative caregivers that are the primary caregivers of children other than their own. Relatives are the preferred resource for children who must be removed from their birth parents because placement with relatives increases stability and safety as well as helps to maintain family connections and cultural traditions.

Services for relative caregivers, often grandparents, should take into account that kin are likely to be single, in poorer health, and financially less secure than non-relative caregivers, while children in their care are generally younger and often need special services. These families generally receive few economic supports and are less likely to be aware of services available to them. In addition, they may not have support from extended family, peers, or the community in general.

These services are designed to:

- Promote permanency and child well-being by supporting early and stable relative placements
- Prevent children from coming into or re-entering foster care by improving caretaker and family functioning
- Increase parenting knowledge and demonstrated ability of the caretaker to apply the skills learned and increase decision-making or problem-solving skills of the caretaker
- Increase access to and utilization of community-based supports and services.

Family mediation or counseling is also often needed to assist caregivers and birth parents in resolving conflicts, easing the difficulties of parenting a relative's child, and achieving a permanent plan for the child.

#### Service duration is 3-12 months.

Referral sources include a variety of community-based referral sources including DFCS Family Support or Family Preservation or Placement Services, and Juvenile Court

#### PPS – Placement Prevention Services (873-P)

**Placement Prevention Services (PPS)** offer short-term home- and/or center-based services to children and families with DFCS involvement where children are still in parental custody. These services are provided as a part of a family's safety and/or CPS case plan designed to safely maintain children in their homes and/or prevent unnecessary placement into foster care. <u>Service duration is 6-9 months</u>.

Referral sources include DFCS Family Preservation, DFCS Placement Services, Juvenile, Family or Drug Court

#### CIS – Crisis Intervention Services (873-I)

**Crisis Intervention Services (CIS)** are designed to support <u>families in crisis</u> where children are at imminent risk of placement. **Crisis Intervention Services** utilize a range of research-based and therapeutic interventions, including family counseling, and cognitive/behavioral therapy for biological, foster and adoptive families to help remove barriers to family stability and restore family functioning. <u>Service duration is 3-6 months.</u>

Referral sources include DFCS Family Preservation or Placement Services, Juvenile Court.

#### RAC – Residential Aftercare (873-R)

**Residential After-Care (RAC)** services support children and families reunifying from foster care. These include children returning home from temporary shelters, residential treatment or therapeutic foster home settings, and their families with an open Family Preservation or Placement case, prior to or post change in placement. After-care services are <u>available to families</u> <u>2-3 months pre-discharge and 6-9 months post-discharge</u>, and are designed to sustain treatment outcomes and prevent placement disruption.

Referral sources include DFCS Family Preservation or Placement Services, Juvenile or Family Court.

**COSTAR REPORTING** – Reported client is either the head of the family unit or may be the child in care. **"Count each client or family once per program."** 

**KEY PROGRAM OR ELIGIBILITY REQUIREMENTS** – PSSF Vendors have been approved and contracted through a statewide bid process. A contract for all approved vendors has been fully executed and is on file with the county department. Client referrals to PSSF Vendor Services are made by completing Referral Form # RF10.12 (Form attached). The referral form and a listing of approved PSSF Vendors can be accessed on line at <u>www.pssfnet.com</u>, on the FFS Website at <u>http://167.193.156.254/FFS</u> or refer to the current PSSF Family Service Resource Guide. Services may be offered to families referred by DFCS or directly by Juvenile or Family Court. Eligibility requirements differ by entitlement code.

# ALLOWABLE ENTITLEMENT CODES

# STR Substance Abuse Treatment/ – Entitlement Code begins with "B"

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Educational Supports	BB	Educational support services includes instruction and/or supports provided to children, youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve educational outcomes and/or improve employment. May include individual tutoring, group instruction, GED classes or support, SAT preparation, etc
Case Management	BC	Includes Service Coordination - coordination and monitoring of services/case review, evaluation and documentation of individual case plans including participation, if requested, in case staffings for mutual clients convened by DFCS. Also includes Information & Referral - identifying and linking families to appropriate community resources, and Advocacy - advocating for/with families in various service systems.
Parent Education	BD	Evidence-based, parent education/parenting skills training provided to caregivers in the home or in an interactive group setting conducted at a community-based facility to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Support Group	BE	Facilitated support or informal counseling on-site or at other community- based facility for a group of children, youth or adults with a common objective or circumstance. This does not include support groups with a therapeutic or counseling component.

Intake Assessment and Child Assessments/Screen ings	BF	Assessments are required prior to or at the commencement of services and should identify individual and family strengths and needs in order to facilitate the development of an individual service plan that will be utilized in the monitoring and evaluation of family progress while services are provided. And should include, at a minimum: a. Financial Conditions b. Living conditions c. Caretaker Supports and resources d. Health (caretaker and individual family members) e. Housing f. Employment g. Transportation h. Coping Skills i. Parenting Capacity and Skills Developmental screenings for children/youth to identify children who should receive more intensive assessment or diagnosis.
Childcare	BG	Child care provided for a specified period to facilitate caregiver participation in program activities or services or to enhance child abuse and neglect prevention efforts.
Client Transportation	BH	Transportation assistance to facilitate family or individual participation in on-site services or transportation provided to assist individuals or families without transportation resources to access community resources.

# ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Crisis Intervention	BI	Short period of intensive therapeutic intervention for families experiencing crisis. Services are to be provided by clinically licensed professionals, carrying caseloads not to exceed 10 families and average <u>service duration</u> of 90 to 120 days. Services should be available to families 24 hours a day in the home or other environments accessible to the family.
Behavior Management	BJ	A plan of specific interventions and strategies that is developed as a component of an individualized action plan to provide the caregiver or the child with guidance in affecting prescribed changes and outcomes in the child's behavior, attitude or coping ability that will positively impact family functioning. Training that provides the caregiver with strategies that improve family functioning by encouraging the consistent use of effective interventions and alternatives to the use of corporal discipline.
Drug Screens	BK	Specific tests to determine service eligibility or compliance with service plan.
Life Skills	BL	Classes or individual instruction designed to help individuals improve basic living skills such as managing a budget, managing a household, etc. including instruction and/or supports provided to youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve employment opportunities
Follow-up Services	BM	Follow-up contact to provide ongoing support of primary service objectives. May include home visits, drop-ins, on-site appointments, and/or telephone contact.
Legal Advocacy	BQ	Legal consultation or advocacy services provided to a family or individual engaged in child deprivation, child custody or permanency proceedings.
Caregiver/Child Enrichment	BS	Facilitated group activity such as a field trip, parent/child dinner, holiday gathering, etc. sponsored and coordinated to facilitate positive parent and child interaction.
Respite Care	BU	Period of relief provided to a caregiver (parent, foster parent, adoptive parent, relative caregiver) with primary responsibility for intensive supervision or care of a child or family member.
Substance Abuse Recovery Support	в₩	Services provided to a family, individual or group to prevent relapse and continued use of controlled substances.
Emergency Aid	BX	Temporary assistance to address critical basic needs.
Therapeutic Counseling	BZ	Therapeutic and psychological support services provided by a licensed mental health professional experienced in dealing with children and families with child welfare related issues.

# ALLOWABLE ENTITLEMENT CODES

# RCS/Relative Caregiver Support/Recovery – Entitlement Code begins with "G"

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Educational Supports	GB	Educational support services includes instruction and/or supports provided to children, youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve educational outcomes and/or improve employment. May include individual tutoring, group instruction, GED classes or support, SAT preparation, etc
Case Management	GC	Includes Service Coordination - coordination and monitoring of services/case review, evaluation and documentation of individual case plans including participation, if requested, in case staffings for mutual clients convened by DFCS. Also includes Information & Referral - identifying and linking families to appropriate community resources, and Advocacy - advocating for/with families in various service systems.
Parent Education	GD	Evidence-based parent education curriculum/parenting skills training provided to caregivers facilitated in an individual or interactive group setting conducted at a community-based facility to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Support Group	GE	Facilitated support or informal counseling on-site or at other community- based facility for a group of children, youth or adults with a common objective or circumstance. This does not include support groups with a therapeutic or counseling component.
Intake Assessment and Child Assessments/Screen ings	GF	Assessments are required prior to or at the commencement of services and should identify individual and family strengths and needs in order to facilitate the development of an individual service plan that will be utilized in the monitoring and evaluation of family progress while services are provided. And should include, at a minimum: a. Financial Conditions b. Living conditions c. Caretaker Supports and resources d. Health (caretaker and individual family members) e. Housing f. Employment g. Transportation h. Coping Skills i. Parenting Capacity and Skills Developmental screenings for children/youth to identify children who should receive more intensive assessment or diagnosis.\
Childcare	GG	Child care provided for a specified period to facilitate caregiver participation in program activities or services or to enhance child abuse and neglect prevention efforts.
Client Transportation	GH	Transportation assistance to facilitate family or individual participation in on- site services or transportation provided to assist individuals or families without transportation resources to access community resources.

# ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Crisis Intervention	GI	Short period of intensive therapeutic intervention for families experiencing crisis. Services are to be provided by clinically licensed professionals, carrying caseloads not to exceed 10 families and average service duration of 90 to 120 days. Services should be available to families 24 hours a day in the home or other environments accessible to the family.
Behavior Management	GJ	A plan of specific evidence-based interventions and strategies that is developed as a component of an individualized action plan to provide the caregiver or the child with guidance in affecting prescribed changes and outcomes in the child's behavior, attitude or coping ability that will positively impact family functioning. Training that provides the caregiver with strategies that improve family functioning by encouraging the consistent use of effective interventions and alternatives to the use of corporal discipline.
Drug Screens	GK	Specific tests for service eligibility
Life Skills	GL	Classes or individual instruction designed to help individuals improve basic living skills such as managing a budget, managing a household, etc. including instruction and/or supports provided to youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve employment opportunities
Follow-Up Services	GM	Follow-up contact to provide ongoing support of primary service objectives. May include home visits, drop-ins, on-site appointments, and/or telephone contact.
Healthcare Screening/Services	GN	Healthcare screening, education and/or services for specific child or caregiver health-related problems (physical, mental or developmental).
Caregiver/Child Enrichment Activities and Child/Youth Activities	GS	Facilitated group activity such as a field trip, parent/child dinner, holiday gathering, etc. sponsored and coordinated to facilitate positive parent and child interaction. Activities that allow children/youth to participate in constructive, age-appropriate experiences under adult supervision. Includes academic, social, and recreational activities.
Respite Care	GU	Period of relief provided to a caregiver (parent, foster parent, adoptive parent, relative caregiver) with primary responsibility for intensive supervision or care of a child or family member.
Emergency Aid	GX	Temporary assistance to address immediate or critical basic needs.
Therapeutic Counseling	GZ	Therapeutic and psychological support services provided by a licensed mental health professional experienced in dealing with children and families with child welfare related issues.

# ALLOWABLE ENTITLEMENT CODES

# CIS/Crisis Invention Services – Entitlement Code begins with "I"

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Educational Supports	IB	Educational support services includes instruction and/or supports provided to children, youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve educational outcomes and/or improve employment. May include individual tutoring, group instruction, GED classes or support, SAT preparation, etc
Case Management	IC	Includes Service Coordination - coordination and monitoring of services/case review, evaluation and documentation of individual case plans including participation, if requested, in case staffings for mutual clients convened by DFCS. Also includes Information & Referral - identifying and linking families to appropriate community resources, and Advocacy - advocating for/with families in various service systems.
Parent Education	ID	Evidencebased parent education curriculum/parenting skills training provided to caregivers facilitated in an individual or interactive group setting conducted at a community-based facility to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Support Group	IE	Facilitated support or informal counseling on-site or at other community-based facility for a group of children, youth or adults with a common objective or circumstance. This does not include support groups with a therapeutic or counseling component.
Intake Assessment and Child Assessments/Screen ings	IF	Assessments are required prior to or at the commencement of services and should identify individual and family strengths and needs in order to facilitate the development of an individual service plan that will be utilized in the monitoring and evaluation of family progress while services are provided. And should include, at a minimum: a. Financial Conditions b. Living conditions c. Caretaker Supports and resources d. Health (caretaker and individual family members) e. Housing f. Employment g. Transportation h. Coping Skills i. Parenting Capacity and Skills Developmental screenings for children/youth to identify children who should receive more intensive assessment or diagnosis.
Child Care	IG	Child care provided for a specified period to facilitate caregiver participation in program activities or services or to enhance child abuse and neglect prevention efforts.
Client Transportation	IH	Transportation assistance to facilitate family or individual participation in on-site services or transportation provided to assist individuals or families without transportation resources to access community resources.

# ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Crisis Intervention	Π	Short period of intensive therapeutic intervention for families experiencing crisis. Services are to be provided by clinically licensed professionals, carrying caseloads not to exceed 10 families and average <u>service duration of 90 to 120 days</u> . Services should be available to families 24 hours a day in the home or other environments accessible to the family.
Behavior Management	IJ	A plan of specific interventions and strategies that is developed as a component of an individualized action plan to provide the caregiver or the child with guidance in affecting prescribed changes and outcomes in the child's behavior, attitude or coping ability that will positively impact family functioning. Training that provides the caregiver with strategies that improve family functioning by encouraging the consistent use of effective interventions and alternatives to the use of corporal discipline.
Drug Screens	IK	Specific tests for service eligibility
Life Skills	IL	Classes or individual instruction designed to help individuals improve basic living skills such as managing a budget, managing a household, etc.including instruction and/or supports provided to youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve employment opportunities
Follow-up Services	IM	Follow-up contact to provide ongoing support of primary service objectives. May include home visits, drop-ins, on-site appointments, and/or telephone contact.
Caregiver/child Enrichment Activities	IS	Facilitated group activity such as a field trip, parent/child dinner, holiday gathering, etc. sponsored and coordinated to facilitate positive parent and child interaction.
Respite Care	IU	Period of relief provided to a caregiver (parent, foster parent, adoptive parent, relative caregiver) with primary responsibility for intensive supervision or care of a child or family member.
Substance Abuse Recovery Support	IW	Services provided to a family, individual or group to prevent relapse and continued use of controlled substances.
Emergency Aid	IX	Temporary assistance to address critical basic needs.
Therapeutic Counseling	IZ	Therapeutic and psychological support services provided by a licensed mental health professional experienced in dealing with children and families with child welfare related issues.

# ALLOWABLE ENTITLEMENT CODES

# **PPS/Placement Prevention Services – Entitlement Code begins with "P"**

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Educational Supports	PB	Educational support services includes instruction and/or supports provided to children, youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve educational outcomes and/or improve employment. May include individual tutoring, group instruction, GED classes or support, SAT preparation, etc
Case Management	PC	Includes Service Coordination - coordination and monitoring of services/case review, evaluation and documentation of individual case plans including participation, if requested, in case staffings for mutual clients convened by DFCS. Also includes Information & Referral - identifying and linking families to appropriate community resources, and Advocacy - advocating for/with families in various service systems.
Parent Education	PD	Evidence-based parent education curriculum/parenting skills training provided to caregivers facilitated in an individual or interactive group setting conducted at a community-based facility to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Support Group	PE	Facilitated support or informal counseling on-site or at other community- based facility for a group of children, youth or adults with a common objective or circumstance. This does not include support groups with a therapeutic or counseling component.
Intake Assessment And Child Assessments/Screen ings	PF	Assessments are required prior to or at the commencement of services and should identify individual and family strengths and needs in order to facilitate the development of an individual service plan that will be utilized in the monitoring and evaluation of family progress while services are provided. And should include, at a minimum: <ul> <li>a. Financial Conditions</li> <li>b. Living conditions</li> <li>c. Caretaker Supports and resources</li> <li>d. Health (caretaker and individual family members)</li> <li>e. Housing</li> <li>f. Employment</li> <li>g. Transportation</li> <li>h. Coping Skills</li> <li>i. Parenting Capacity and Skills</li> </ul> <li>Developmental screenings for children/youth to identify children who should receive more intensive assessment or diagnosis.</li>
Childcare	PG	Child care provided for a specified period to facilitate caregiver participation in program activities or services or to enhance child abuse and neglect prevention efforts.
Client Transportation	РН	Transportation assistance to facilitate family or individual participation in on- site services or transportation provided to assist individuals or families without transportation resources to access community resources.

# ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Crisis Intervention	PI	Short period of intensive therapeutic intervention for families experiencing crisis. Services are to be provided by clinically licensed professionals, carrying caseloads not to exceed 10 families and average service duration of 90 to 120 days. Services should be available to families 24 hours a day in the home or other environments accessible to the family.
Behavior Management	PJ	A plan of specific evidence-based interventions and strategies that is developed as a component of an individualized action plan to provide the caregiver or the child with guidance in affecting prescribed changes and outcomes in the child's behavior, attitude or coping ability that will positively impact family functioning. Training that provides the caregiver with strategies that improve family functioning by encouraging the consistent use of effective interventions and alternatives to the use of corporal discipline.
Drug Screens	РК	Specific tests to determine service eligibility or compliance with service plan.
Life Skills	PL	Classes or individual instruction designed to help individuals improve basic living skills such as managing a budget, managing a household, etc. including instruction and/or supports provided to youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve employment opportunities
Follow-up Services	PM	Follow-up contact to provide ongoing support of primary service objectives. May include home visits, drop-ins, on-site appointments, and/or telephone contact.
Home-Visits/Parent Education	PO	Curriculum-based parent education/parenting skills training provided to caregivers in the home to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Mentoring	PR	Mentoring services are designed to nurture a relationship between children and/or adults and appropriate role models.
Caregiver/Child Enrichment Activities	PS	Facilitated group activity such as a field trip, parent/child dinner, holiday gathering, etc. sponsored and coordinated to facilitate positive parent and child interaction.
Respite Care	PU	Period of relief provided to a caregiver (parent, foster parent, adoptive parent, relative caregiver) with primary responsibility for intensive supervision or care of a child or family member.
Stress/Anger Management	PV	Services or training to address the source and impact of stress on family functioning and practical application of coping mechanisms.
Substance Abuse Recovery Support	PW	Services provided to a family, individual or group to prevent relapse and continued use of controlled substances.
Emergency Aid	PX	Temporary assistance to address immediate or critical basic needs.
Therapeutic Counseling	PZ	Therapeutic and psychological support services provided by a licensed mental health professional experienced in dealing with children and families with child welfare related issues.

# ALLOWABLE ENTITLEMENT CODES

# RAC/Residential Aftercare – Entitlement Code begins with "R"

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Educational Supports	RB	Educational support services includes instruction and/or supports provided to children, youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve educational outcomes and/or improve employment. May include individual tutoring, group instruction, GED classes or support, SAT preparation, etc
Case Management	RC	Includes Service Coordination - coordination and monitoring of services/case review, evaluation and documentation of individual case plans including participation, if requested, in case staffings for mutual clients convened by DFCS. Also includes Information & Referral - identifying and linking families to appropriate community resources, and Advocacy - advocating for/with families in various service systems.
Parent Education	RD	Evidence-based parent education curriculum/parenting skills training provided to caregivers facilitated in an individual or interactive group setting conducted at a community-based facility to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Support Group	RE	Facilitated support or informal counseling on-site or at other community- based facility for a group of children, youth or adults with a common objective or circumstance. This does not include support groups with a therapeutic or counseling component.
Intake Assessment and Child Assessments/Screen ings	RF	<ul> <li>Assessments are required prior to or at the commencement of services and should identify individual and family strengths and needs in order to facilitate the development of an individual service plan that will be utilized in the monitoring and evaluation of family progress while services are provided. And should include, at a minimum: <ul> <li>a. Financial Conditions</li> <li>b. Living conditions</li> <li>c. Caretaker Supports and resources</li> <li>d. Health (caretaker and individual family members)</li> <li>e. Housing</li> <li>f. Employment</li> <li>g. Transportation</li> <li>h. Coping Skills</li> <li>i. Parenting Capacity and Skills</li> </ul> </li> <li>Developmental screenings for children/youth to identify children who should receive more intensive assessment or diagnosis.</li> </ul>
Child Care	RG	Child care provided for a specified period to facilitate caregiver participation in program activities or services or to enhance child abuse and neglect prevention efforts.
Client Transportation	RH	Transportation assistance to facilitate family or individual participation in on- site services or transportation provided to assist individuals or families without transportation resources to access community resources.

# ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Crisis Intervention	RI	Short period of intensive therapeutic intervention for families experiencing crisis. Services are to be provided by clinically licensed professionals, carrying caseloads not to exceed 10 families and average service duration
		of 90 to 120 days. Services should be available to families 24 hours a day in the home or other environments accessible to the family.
Behavior Management	RJ	A plan of specific evidence-based interventions and strategies that is developed as a component of an individualized action plan to provide the caregiver or the child with guidance in affecting prescribed changes and outcomes in the child's behavior, attitude or coping ability that will positively impact family functioning. Training that provides the caregiver with strategies that improve family functioning by encouraging the consistent use
Drug Scroons	RK	of effective interventions and alternatives to the use of corporal discipline. Specific tests for service eligibility
Drug Screens Life Skills	RL	Classes or individual instruction designed to help individuals improve basic living skills such as managing a budget, managing a household, etc.including instruction and/or supports provided to youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve employment opportunities
Follow-up Services	RM	Follow-up contact to provide ongoing support of primary service objectives. May include home visits, drop-ins, on-site appointments, and/or telephone contact.
Caregiver/Child Enrichment Activities	RS	Facilitated group activity such as a field trip, parent/child dinner, holiday gathering, etc. sponsored and coordinated to facilitate positive parent and child interaction.
Respite Care	RU	Period of relief provided to a caregiver (parent, foster parent, adoptive parent, relative caregiver) with primary responsibility for intensive supervision or care of a child or family member.
Emergency Aid	RX	Temporary assistance to address critical basic needs.
Therapeutic Counseling	RZ	Therapeutic and psychological support services provided by a licensed mental health professional experienced in dealing with children and families with child welfare related issues.

# NOTE: See page 121-123 for instructions on how to enter in SMILE

# 109.874 UAS Code – 874 – Limited to Purchase of PSSF Vendor Services (New January 2005)

PROGRAM NAME – Cash Match Promoting Safe and Stable Families (PSSF) Program – Family Support Services

# NOTE: FISCAL YEAR SPENDING PERIOD FOR THESE FEDERAL FUNDS IS OCTOBER 1<sup>ST</sup> THROUGH SEPTEMBER 30<sup>TH</sup>. FINAL EXPENDITURES MUST BE PAID ON OR BEFORE SEPTEMBER 15<sup>TH</sup>.

**PROGRAM PURPOSE – PSSF Family Support** services are community-based prevention and early intervention services designed to prevent and reduce the risk of child maltreatment by promoting the well-being of the entire family. **PSSF Family Support** services also include community and faith-based services to strengthen marriages and promote effective co-parenting relationships.

**PSSF Family Support** services promote healthy development by helping parents to enhance their strengths and resolve problems that can lead to child maltreatment, developmental delays, and family disruption. All services are designed to build on existing family strengths, increase the stability of families, increase parental confidence and competence, increase protective capacities, and enhance overall family functioning to prevent initial or repeat child abuse and neglect and to ensure child safety.

**Target Populations:** Families referred for **PSSF Family Support** services face multiple challenges such as generational poverty, little or no support system, unemployment due to lack of skills or education, inadequate/affordable/stable housing, truancy, domestic violence, substance abuse or mental illness. Families can also be referred for healthy marriage/relationship/co-parenting classes, or include families/caregivers with children ages 0-5, including pregnant and parenting teens.

#### PEI – Prevention and Early Intervention Services (874-E)

**Prevention and Early Intervention** services are voluntary, short-term, in-home or center-based family supports and services offered to help families identify and address problematic family issues <u>before CPS</u> intervention is required.

#### HVS – HVS (874-V) INFORMATION

**Home Visitation Services** are voluntary, in-home support and educational services designed to enhance parental capacity to care for children, strengthen parent/child relationships and help families identify and access community resources. Home visiting programs offer a variety of family-focused services to expectant parents and families with new babies and young children. They address issues such as maternal and child health, positive parenting practices, safe home environments, and access to services.

Services utilize an evidence-based home visitation practice model to support positive parent-child relationships, promote optimal child health and development, enhance parental self-sufficiency, ensure safe home environments and prevent child abuse and neglect.

Services are offered to a variety of at-risk families with children ages 0-5 who are referred by hospitals, schools or other community-based screening processes, or *referred by DFCS* to provide prevention-oriented assistance to isolated families to prevent CPS intervention. <u>Service duration is 3-12 months.</u>

#### HMI – Healthy Relationship/Co-Parenting (874-M)

**PSSF Healthy Relationship & Co-Parenting** services teach skills to help couples communicate better, manage their emotions more effectively when they disagree and be better parents for their children. Skills that help parents work cooperatively should also increase voluntary paternity establishment for children. Even when couples are unable to sustain a healthy marriage, parents who can work together are more likely to agree to fair support orders and to provide financial and emotional support for their children.

**PSSF Healthy Relationship & Co-Parenting** services are designed for families referred for healthy marriage/relationship/co-parenting classes to strengthen and promote stable and life-long parental or co-parenting relationships. Services should teach couples how to build and maintain healthy partnerships, identify and manage stress that threatens relationships, and promote and support co-parenting.

# <u> SHY – Supports/Services for Homeless Youth & Families (874-H)</u>

The purpose of **PSSF Supports and Services for Homeless Youth & Families** is to provide supportive services to help unaccompanied homeless youth transition to independent living and become self-sufficient.

Services should ensure that individuals are engaged in the process to understand their needs, identify their goals, and create a plan for achieving those goals. **PSSF Supports and Services for Homeless Youth** & Families focus on developing skills and identifying resources necessary to secure and maintain a safe and stable living environment. Services also focus on developing relationships and building supportive networks in the community.

**COSTAR REPORTING** – Reported client is either the head of the family unit or may be the child in care. **"Count each client or family once per program."** 

**KEY PROGRAM OR ELIGIBILITY REQUIREMENTS** – Vendors of PSSF Family Support Services have been approved and contracted through a statewide bid process. A Contract for all approved vendors has been fully executed. Client referrals to PSSF Vendor Services are made by completing Referral Form # RF10.12 (Form Attached). The referral form and a listing of approved PSSF Vendors can be accessed on line at <u>www.pssfnet.com</u>, on the FFS Website at <u>http://167.193.156.254/FFS</u> or refer to the current PSSF Family Service Resource Guide. Eligibility requirements differ by entitlement code.

# ALLOWABLE ENTITLEMENT CODES

# **PEI/Prevention and Early Intervention Services - Entitlement Code begins with "E"**

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Educational Supports	EB	Educational support services includes instruction and/or supports provided to children, youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve educational outcomes and/or improve employment. May include individual tutoring, group instruction, GED classes or support, SAT preparation, etc
Case Management	EC	Includes Service Coordination - coordination and monitoring of services/case review, evaluation and documentation of individual case plans including participation, if requested, in case staffings for mutual clients convened by DFCS. Also includes Information & Referral - identifying and linking families to appropriate community resources, and Advocacy - advocating for/with families in various service systems.
Parent Education	ED	Evidence-based parent education curriculum/parenting skills training provided to caregivers facilitated in an individual or interactive group setting conducted at a community-based facility to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Support Group	EE	Facilitated support or informal counseling on-site or at other community- based facility for a group of children, youth or adults with a common objective or circumstance. This does not include support groups with a therapeutic or counseling component.
Intake Assessment and Child Assessments/Screenings	EF	Assessments are required prior to or at the commencement of services and should identify individual and family strengths and needs in order to facilitate the development of an individual service plan that will be utilized in the monitoring and evaluation of family progress while services are provided. And should include, at a minimum: a. Financial Conditions b. Living conditions c. Caretaker Supports and resources d. Health (caretaker and individual family members) e. Housing f. Employment g. Transportation h. Coping Skills i. Parenting Capacity and Skills Developmental screenings for children/youth to identify children who should receive more intensive assessment or diagnosis.
Childcare	EG	Child care provided for a specified period to facilitate caregiver participation in program activities or services or to enhance child abuse and neglect prevention efforts.
Client Transportation	ЕН	Transportation assistance to facilitate family or individual participation in on-site services or transportation provided to assist individuals or families without transportation resources to access community resources.

# ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Behavior Management	EJ	A plan of specific evidence-based interventions and strategies that is developed as a component of an individualized action plan to provide the caregiver or the child with guidance in affecting prescribed changes and outcomes in the child's behavior, attitude or coping ability that will positively impact family functioning. Training that provides the caregiver with strategies that improve family functioning by encouraging the consistent use of effective interventions and alternatives to the use of corporal discipline.
Life Skills	EL	Classes or individual instruction designed to help individuals improve basic living skills such as managing a budget, managing a household, etc. including instruction and/or supports provided to youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve employment opportunities
Follow-up Services	EM	Follow-up contact to provide ongoing support of primary service objectives. May include home visits, drop-ins, on-site appointments, and/or telephone contact.
Healthcare Screening/Services	EN	Healthcare education, screening or services for specific child or caregiver health-related problems (physical, mental or developmental).
Home-Visits and Parent Education	EO	Curriculum-based parent education/parenting skills training provided to caregivers in the home to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Legal Advocacy	EQ	Legal consultation or advocacy services provided to a family or individual engaged in child deprivation, child custody or permanency proceedings.
Mentoring	ER	Mentoring services are designed to nurture a relationship between children and/or adults and appropriate role models.
Caregiver/Child Enrichment Activities And Child/Youth Activities and Caregiver Activities	ES	<ul> <li>Facilitated group activity such as a field trip, parent/child dinner, holiday gathering, etc. sponsored and coordinated to facilitate positive parent and child interaction.</li> <li>Activities that allow children/youth to participate in constructive, age-appropriate experiences under adult supervision. Includes academic, social, and recreational activities.</li> <li>Enrichment activities for parents/caregivers to support them in their role as caregivers</li> </ul>
Respite Care	<mark>EU</mark>	Period of relief provided to a caregiver (parent, foster parent, adoptive parent, relative caregiver) with primary responsibility for intensive supervision or care of a child or family member.
Stress/Anger Management	EV	Services or training to address the source and impact of stress on family functioning and practical application of coping mechanisms.
Substance Abuse Recovery Support	EW	Services provided to a family, individual or group to prevent relapse and continued use of controlled substances.
Emergency Aid	EX	Temporary assistance to address immediate or critical basic needs.
Therapeutic Counseling	EZ	Therapeutic and psychological support services provided by a licensed mental health professional experienced in dealing with children and families with child welfare related issues.

# ALLOWALBLE ENTITLEMENT CODES

# HVS/Home Visitation Services - Entitlement Code begins with "V"

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Educational Supports	VB	Educational support services includes instruction and/or supports provided to children, youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve educational outcomes and/or improve employment. May include individual tutoring, group instruction, GED classes or support, SAT preparation, etc
Case Management	VC	Includes Service Coordination - coordination and monitoring of services/case review, evaluation and documentation of individual case plans including participation, if requested, in case staffings for mutual clients convened by DFCS. Also includes Information & Referral - identifying and linking families to appropriate community resources, and Advocacy - advocating for/with families in various service systems.
Parent Education	VD	Evidencebased parent education curriculum/parenting skills training provided to caregivers facilitated in an individual or interactive group setting conducted at a community-based facility to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Support Group	VE	Facilitated support or informal counseling on-site or at other community-based facility for a group of children, youth or adults with a common objective or circumstance. This does not include support groups with a therapeutic or counseling component.
Intake Assessment and Child Assessments/Screen ings	VF	Assessments are required prior to or at the commencement of services and should identify individual and family strengths and needs in order to facilitate the development of an individual service plan that will be utilized in the monitoring and evaluation of family progress while services are provided. And should include, at a minimum: <ul> <li>a. Financial Conditions</li> <li>b. Living conditions</li> <li>c. Caretaker Supports and resources</li> <li>d. Health (caretaker and individual family members)</li> <li>e. Housing</li> <li>f. Employment</li> <li>g. Transportation</li> <li>h. Coping Skills</li> <li>i. Parenting Capacity and Skills</li> </ul> <li>Developmental screenings for children/youth to identify children who should receive more intensive assessment or diagnosis.</li>
Child Care	VG	Child care provided for a specified period to facilitate caregiver participation in program activities or services or to enhance child abuse and neglect prevention efforts.
Client Transportation	VH	Transportation assistance to facilitate family or individual participation in on-site services or transportation provided to assist individuals or families without transportation resources to access community resources.
Life Skills	VL	Classes or individual instruction designed to help individuals improve basic living skills such as managing a budget, managing a household, etc. including instruction and/or supports provided to youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve employment opportunities

#### ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Home Visit and Parent Education	VO	Curriculum-based parent education/parenting skills training provided to caregivers in the home to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Mentoring	VR	Mentoring services are designed to nurture a relationship between children and/or adults and appropriate role models.
Caregiver/Child Enrichment Activities	VS	Facilitated group activity such as a field trip, parent/child dinner, holiday gathering, etc. sponsored and coordinated to facilitate positive parent and child interaction.
Emergency Aid	VX	Temporary assistance to address critical basic needs.
Therapeutic Counseling	VZ	Therapeutic and psychological support services provided by a licensed mental health professional experienced in dealing with children and families with child welfare related issues.

# HMI/Healthy Relationship & Co-Partnering Services- Entitlement Code begins with "M"

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Educational Supports	MB	Educational support services includes instruction and/or supports provided to children, youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve educational outcomes and/or improve employment. May include individual tutoring, group instruction, GED classes or support, SAT preparation, etc
Case Management	MC	Includes Service Coordination - coordination and monitoring of services/case review, evaluation and documentation of individual case plans including participation, if requested, in case staffings for mutual clients convened by DFCS. Also includes Information & Referral - identifying and linking families to appropriate community resources, and Advocacy - advocating for/with families in various service systems.
Parent Education	MD	Evidence-based parent education curriculum/parenting skills training provided to caregivers facilitated in an individual or interactive group setting conducted at a community-based facility to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Support Group	ME	Facilitated support or informal counseling on-site or at other community-based facility for a group of children, youth or adults with a common objective or circumstance. This does not include support groups with a therapeutic or counseling component.

# ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Intake Assessment and Child Assessments/Screen ings	MF	Assessments are required prior to or at the commencement of services and should identify individual and family strengths and needs in order to facilitate the development of an individual service plan that will be utilized in the monitoring and evaluation of family progress while services are provided. And should include, at a minimum: <ul> <li>a. Financial Conditions</li> <li>b. Living conditions</li> <li>c. Caretaker Supports and resources</li> <li>d. Health (caretaker and individual family members)</li> <li>e. Housing</li> <li>f. Employment</li> <li>g. Transportation</li> <li>h. Coping Skills</li> <li>i. Parenting Capacity and Skills</li> </ul> <li>Developmental screenings for children/youth to identify children who should receive more intensive assessment or diagnosis.</li>
Child Care	MG	Child care provided for a specified period to facilitate caregiver participation in program activities or services or to enhance child abuse and neglect prevention efforts.
Client Transportation	MH	Transportation assistance to facilitate family or individual participation in on-site services or transportation provided to assist individuals or families without transportation resources to access community resources.
Life Skills	ML	Classes or individual instruction designed to help individuals improve basic living skills such as managing a budget, managing a household, etc.including instruction and/or supports provided to youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve employment opportunities
Home Visits and Parent Education	МО	Curriculum-based parent education/parenting skills training provided to caregivers in the home to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Mentoring	MR	Mentoring services are designed to nurture a relationship between children and/or adults and appropriate role models.
Caregiver/Child Enrichment Activities	MS	Facilitated group activity such as a field trip, parent/child dinner, holiday gathering, etc. sponsored and coordinated to facilitate positive parent and child interaction.
Emergency Aid	MX	Temporary assistance to address critical basic needs.
Therapeutic Counseling	MZ	Therapeutic and psychological support services provided by a licensed mental health professional experienced in dealing with children and families with child welfare related issues.

# ALLOWABLE ENTITLEMENT CODES

# SHY/Support & Services for Homeless Youth & Families - Entitlement Code begins with "H"

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Educational Supports	HB	Educational support services includes instruction and/or supports provided to children, youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve educational outcomes and/or improve employment. May include individual tutoring, group instruction, GED classes or support, SAT preparation, etc
Case Management	НС	Includes Service Coordination - coordination and monitoring of services/case review, evaluation and documentation of individual case plans including participation, if requested, in case staffings for mutual clients convened by DFCS. Also includes Information & Referral - identifying and linking families to appropriate community resources, and Advocacy - advocating for/with families in various service systems.
Parent Education	HD	Curriculum-based parent education/parenting skills training provided to caregivers facilitated in an individual or interactive group setting conducted at a community-based facility to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Support Group	HE	Facilitated support or informal counseling on-site or at other community- based facility for a group of children, youth or adults with a common objective or circumstance. This does not include support groups with a therapeutic or counseling component.
Intake Assessment and child Assessments/Screen ings	HF	Assessments are required prior to or at the commencement of services and should identify individual and family strengths and needs in order to facilitate the development of an individual service plan that will be utilized in the monitoring and evaluation of family progress while services are provided. And should include, at a minimum: a. Financial Conditions b. Living conditions c. Caretaker Supports and resources d. Health (caretaker and individual family members) e. Housing f. Employment g. Transportation h. Coping Skills i. Parenting Capacity and Skills Developmental screenings for children/youth to identify children who should receive more intensive assessment or diagnosis.
Child Care	HG	Child care provided for a specified period to facilitate caregiver participation in program activities or services or to enhance child abuse and neglect prevention efforts.
Client Transportation	НН	Transportation assistance to facilitate family or individual participation in on- site services or transportation provided to assist individuals or families without transportation resources to access community resources.

## UAS Code – 874 (continued)

#### ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Behavior Management	HJ	A plan of specific evidence-based interventions and strategies that is developed as a component of an individualized action plan to provide the caregiver or the child with guidance in affecting prescribed changes and outcomes in the child's behavior, attitude or coping ability that will positively impact family functioning. Training that provides the caregiver with strategies that improve family functioning by encouraging the consistent use of effective interventions and alternatives to the use of corporal discipline.
Life Skills	HL	Classes or individual instruction designed to help individuals improve basic living skills such as managing a budget, managing a household, etc. including instruction and/or supports provided to youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve employment opportunities
Home Visits and Parent Education	НО	Curriculum-based parent education/parenting skills training provided to caregivers in the home to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Mentoring	HR	Mentoring services are designed to nurture a relationship between children and/or adults and appropriate role models.
Caregiver/child enrichment Activities	HS	Facilitated group activity such as a field trip, parent/child dinner, holiday gathering, etc. sponsored and coordinated to facilitate positive parent and child interaction.
Substance Abuse Recovery Support	HW	Services provided to a family, individual or group to prevent relapse and continued use of controlled substances.
Emergency Aid	HX	Temporary assistance to address immediate or critical basic needs
Therapeutic Counseling	HZ	Therapeutic and psychological support services provided by a licensed mental health professional experienced in dealing with children and families with child welfare related issues.

NOTE: See page 121-123 for instructions on how to enter in SMILE

#### 109.883 UAS Code – 883 Limited to Purchase of PSSF Vendor Services (New January 2005)

PROGRAM NAME - Cash Match Promoting Safe and Promoting Safe and Stable Families (PSSF) Program Family Reunification Services

## NOTE: FISCAL YEAR SPENDING PERIOD FOR THESE FEDERAL FUNDS IS OCTOBER 1<sup>ST</sup> THROUGH SEPTEMBER 30<sup>TH</sup>. FINAL EXPENDITURES MUST BE PAID ON OR BEFORE SEPTEMBER 15<sup>TH</sup>.

PROGRAM PURPOSE – Safe family reunification is the preferred permanency planning option for all children in state of Georgia custody. Efforts to assure safe and permanent reunifications for children are complicated because of the strict time frames set forth in the Adoption and Safe Families Act (ASFA) of 1997 and the complex and interrelated problems many families experience such as substance abuse, domestic violence and mental illness. The degree to which families are effectively reunited is largely dependent upon the ability to connect families with timely, intensive and responsive supports and services the first 15 months children are in foster care and post-reunification.

**PSSF Family Reunification** services are time-limited, intensive support services provided to a child with a plan of safe, appropriate, and timely reunification and to the parents or primary caregiver of the child. These services may be provided to children during the first fifteen months that the child is in foster care to expedite reunification, and after the child returns from foster care to sustain permanency.

## CFA-Family and Child Advocacy (883-C)

**Child and Family Advocacy (CFA)** services provide supports to children and their families to promote and sustain reunification or other permanency options such as adoption or legal guardianship. Providers of **CFA** services work in collaboration with DFCS and the Courts first and foremost to ensure that children are safe and families receive the timely and responsive services, minimize the trauma of out-of-home placement and prevent placement disruptions. These advocacy services ensure that the needs of children are met, families receive supports necessary so that children who must be removed from the home maintain connections to their families and communities, achieve permanency as quickly as possible, and prevent a subsequent removal after reunification.

**CFA** services may also help to ensure that children involved in deprivation proceedings are appointed representation, Court-Appointed Special Advocates (CASA) or Guardian ad Litem (GAL) to support and advocate for timely permanency decisions that are in the best interest of the child.

Target population includes children entering or in foster care or other temporary placement, and their families.

#### SFV-Supervised Family Visitation (883-F)

**Supervised Family Visitation (SFV)** Children in out-of-home placement have the right to continued relationships with their family of origin, extended family, and others with whom they have had meaningful relationships, unless prohibited for reasons of safety. Likewise, parents of children in care have the right and responsibility to maintain regularly scheduled visits and other contacts with their children unless prohibited by the court for compelling reasons.

Family visitation centers provide increased opportunities for children in foster care to visit with their families in less restrictive, non-threatening environments. These community-based visitation centers are designed with a working parent's schedule in mind and should increase the frequency and quality of interactions between parents and children and children and their siblings and other significant adults.

Successful family reunification is based, in part, on the family or primary caregiver demonstrating an understanding of the child's needs and competency to meet those identified needs during observed visits. Services are designed to establish or sustain parent-child and sibling relationships and facilitate the achievement of reunification case plan goals.

Target populations include children in foster or relative care with a reunification or an alternative permanency plan and their parents(s), caregivers, relatives or other extended family members, or siblings who have been placed in separate foster homes.

#### **Target Population:**

• Families mandated by DFCS CPS, Placement Services or the Courts to undergo substance abuse treatment as condition of family reunification.

**COSTAR REPORTING** – Reported client is either the head of the family unit or may be the child in care. **"Count each client or family once per program."** 

**KEY PROGRAM OR ELIGIBILITY REQUIREMENTS** – PSSF Vendors have been approved through a statewide bid process. A contract for all approved vendors will have been fully executed. Client referrals to PSSF Vendor Services are made by completing Referral Form # RF10.12 (Form Attached). The referral form and a listing of approved PSSF Vendors can be accessed on line at <u>www.pssfnet.com</u>, on the FFS Website at <u>http://167.193.156.254/FFS</u> or refer to the current PSSF Family Service Resource Guide. Eligibility requirements differ by entitlement code.

# ALLOWABLE ENTITLEMENT CODES

# CFA/Family and Child Advocate – Entitlement Code begins with "C"

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Educational Supports	СВ	Educational support services includes instruction and/or supports provided to children, youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve educational outcomes and/or improve employment. May include individual tutoring, group instruction, GED classes or support, SAT preparation, etc
Case Management	CC	Includes Service Coordination - coordination and monitoring of services/case review, evaluation and documentation of individual case plans including participation, if requested, in case staffings for mutual clients convened by DFCS. Also includes Information & Referral - identifying and linking families to appropriate community resources, and Advocacy - advocating for/with families in various service systems.
Parent Education	CD	Curriculum-based parent education/parenting skills training provided to caregivers facilitated in an individual or interactive group setting conducted at a community-based facility to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Support Groups	CE	Facilitated support or informal counseling on-site or at other community- based facility for a group of children, youth or adults with a common objective or circumstance. This does not include support groups with a therapeutic or counseling component.
Intake Assessment and Child Assessments/Screen nings	CF	<ul> <li>Assessments are required prior to or at the commencement of services and should identify individual and family strengths and needs in order to facilitate the development of an individual service plan that will be utilized in the monitoring and evaluation of family progress while services are provided. And should include, at a minimum: <ul> <li>a. Financial Conditions</li> <li>b. Living conditions</li> <li>c. Caretaker Supports and resources</li> <li>d. Health (caretaker and individual family members)</li> <li>e. Housing</li> <li>f. Employment</li> <li>g. Transportation</li> <li>h. Coping Skills</li> <li>i. Parenting Capacity and Skills</li> </ul> </li> <li>Developmental screenings for children/youth to identify children who should receive more intensive assessment or diagnosis.</li> </ul>
Child Care	CG	Child care provided for a specified period to facilitate caregiver participation in program activities or services or to enhance child abuse and neglect prevention efforts.
Client Transportation	СН	Transportation assistance to facilitate family or individual participation in on- site services or transportation provided to assist individuals or families without transportation resources to access community resources.
Drug Screens	СК	Specific tests to determine service eligibility or compliance with service plan.

## ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Life Skills	CL	Classes or individual instruction designed to help individuals improve basic living skills such as managing a budget, managing a household, etc.including instruction and/or supports provided to youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve employment opportunities
Follow-up Services	СМ	Ongoing, quality, monthly, face-to-face contact between volunteer and child and/or Ongoing collateral contact by volunteers with family members, extended family, teachers, etc.
Legal Advocacy	CQ	Legal consultation or advocacy services provided to a family or individual engaged in child deprivation, child custody or permanency proceedings.
Mentoring	CR	Mentoring services are designed to nurture a relationship between children and/or adults and appropriate role models.
Caregiver/child Enrichment Activities	CS	Facilitated group activity such as a field trip, parent/child dinner, holiday gathering, etc. sponsored and coordinated to facilitate positive parent and child interaction.
Respite Care	CU	Period of relief provided to a caregiver (parent, foster parent, adoptive parent, relative caregiver) with primary responsibility for intensive supervision or care of a child or family member.
Emergency Aid	CX	Temporary assistance to address critical basic needs.
Therapeutic Counseling	CZ	Therapeutic and psychological support services provided by a licensed mental health professional experienced in dealing with children and families with child welfare related issues.

# Supervised Family Visitation – Entitlement Code begins with "F"

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Educational Supports	FB	Educational support services includes instruction and/or supports provided to children, youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve educational outcomes and/or improve employment. May include individual tutoring, group instruction, GED classes or support, SAT preparation, etc
Case Management	FC	Includes Service Coordination - coordination and monitoring of services/case review, evaluation and documentation of individual case plans including participation, if requested, in case staffings for mutual clients convened by DFCS. Also includes Information & Referral - identifying and linking families to appropriate community resources, and Advocacy - advocating for/with families in various service systems.
Parent Education	FD	Curriculum-based parent education/parenting skills training provided to caregivers facilitated in an individual or interactive group setting conducted at a community-based facility to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Support Group	FE	Facilitated support or informal counseling on-site or at other community- based facility for a group of children, youth or adults with a common objective or circumstance. This does not include support groups with a therapeutic or counseling component.

## ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Intake Assessment and Child assessments/Screeni ngs	FF	Assessments are required prior to or at the commencement of services and should identify individual and family strengths and needs in order to facilitate the development of an individual service plan that will be utilized in the monitoring and evaluation of family progress while services are provided. And should include, at a minimum: <ul> <li>a. Financial Conditions</li> <li>b. Living conditions</li> <li>c. Caretaker Supports and resources</li> <li>d. Health (caretaker and individual family members)</li> <li>e. Housing</li> <li>f. Employment</li> <li>g. Transportation</li> <li>h. Coping Skills</li> <li>i. Parenting Capacity and Skills</li> </ul>
		receive more intensive assessment or diagnosis.
Child Care	FG	Child care provided for a specified period to facilitate caregiver participation in program activities or services or to enhance child abuse and neglect prevention efforts.
Client Transportation	FH	Transportation assistance to facilitate family or individual participation in on- site services or transportation provided to assist individuals or families without transportation resources to access community resources.
Drug Screens	FK	Specific tests to determine service eligibility and/or compliance with service plan
Life Skills	FL	Classes or individual instruction designed to help individuals improve basic nliving skills such as managing a budget, managing a household, etc.including instruction and/or supports provided to youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve employment opportunities
Follow-up Services	FM	Follow-up contact to provide ongoing support of primary service objectives. May include home visits, drop-ins, on-site appointments, and/or telephone contact.
Mentoring	FR	Mentoring services are designed to nurture a relationship between children and/or adults and appropriate role models.
Caregiver/child Enrichment Activities	FS	Facilitated group activity such as a field trip, parent/child dinner, holiday gathering, etc. sponsored and coordinated to facilitate positive parent and child interaction.
Respite Care	FU	Period of relief provided to a caregiver (parent, foster parent, adoptive parent, relative caregiver) with primary responsibility for intensive supervision or care of a child or family member.
Emergency Aid	FX	Temporary assistance to address critical basic needs.
Supervised Family Visitation	FY	Structured family interaction and enrichment activities conducted in neutral community-based settings for children in state custody and their families to facilitate permanency.
Therapeutic Counseling	FZ	Therapeutic and psychological support services provided by a licensed mental health professional experienced in dealing with children and families with child welfare related issues.

NOTE: See page 121-123 for instructions on how to enter in SMILE

#### 109.884 UAS Code – 884 – Limited to Purchase of PSSF Vendor Services (New January 2005)

PROGRAM NAME – Promoting Safe and Stable Families Program (PSSF) – Cash Match Adoption Promotion and Post Permanency Services

# NOTE: FISCAL YEAR SPENDING PERIOD FOR THESE FEDERAL FUNDS IS OCTOBER 1<sup>ST</sup> THROUGH SEPTEMBER 30<sup>TH</sup>. FINAL EXPENDITURES MUST BE PAID ON OR BEFORE SEPTEMBER 15<sup>TH</sup>.

**PROGRAM PURPOSE** – All families need supportive services to prepare for and sustain adoption. Crisis and transition periods can be especially difficult for these families who must also address child welfare-related issues such as separation and loss. Families who adopt children with special needs also face additional challenges which may be compounded by the child's past experiences of child abuse and neglect. **PSSF Adoption Promotion and Post-Permanency** (**APP**) services are designed to encourage and support permanency for children through adoption, when adoption is in the best interest of the child, and to prevent disruption post adoption.

Adoption Promotion and Post-Permanency Supports may also provide additional support to facilitate permanency for children through guardianship.

Youth who are nearing the age of emancipation without an identified permanency resource may need additional supports and services to help transition and prepare for the opportunities and challenges of independent adult living. Unemployment, incarceration, homelessness, substance abuse, pregnancy, limited educations and inadequate health care are all obstacles that can impair the transition to adulthood. **Transition and Emancipation Support** services help these youth develop skills for independent living and establish meaningful adult connections while simultaneously working toward achieving permanency through reunification, adoption, or guardianship.

## **APS - Adoption Promotion and Permanency Support**

**PSSF Adoption Promotion and Permanency Support (APS)** services are designed to assist children and families prior to, during and after adoptive placement. Services may be delivered to both birth, foster and adoptive families and are designed to help facilitate and expedite the adoption process, support birth/foster/adoptive families throughout the adoption process and provide post adoption support services to help prevent disruption.

## **Target Populations:**

- **Birth parent(s)**
- Foster/adoptive children and youth
- Foster families
- Pre-adoptive and adoptive families
- **Relative caregivers**\* (See notes below on this special population)

#### **Adoption Promotion and Permanency Support (884-A)**

Adoption Promotion and Post-Permanency Support (APS) services are provided to families to facilitate and support permanency for children through adoption or other permanency options such as legal guardianship, to prevent disruption or dissolution of those relationships. APS services are designed to promote and assist children and families prior to, during and after adoptive placement or guardianship. Services may be delivered to birth, foster, relative or adoptive families and are designed to support families throughout the adoption and/or guardianship process and provide post-permanency support services.

Target populations include foster/adoptive children and youth, *particularly those with special needs;* foster, pre-adoptive and adoptive parents; and relative caregivers.

Adoption Promotion and Post-Permanency Support services must be delivered at a minimum by a bachelor's level professional or supervised para-professionals who are qualified by education, training and experience to work with the target population. <u>Service duration is 3-6</u> months pre-adoption or guardianship and 3-6 months post-adoption or guardianship.

#### **TES - Transition and Emancipation Support (884-T)**

**Transition and Emancipation Support (TES)** services are designed to help foster care youth ages 16-21 years of age prepare for legal emancipation from the foster care system and to equip them with the life skills, educational and career planning supports necessary to support successful transition to independent adult living.

Target population includes youth ages 16-21 preparing for emancipation from foster care, and may include young adults with low IQ's.

Services must be delivered at a minimum by a bachelor's level professional or supervised paraprofessionals who are qualified by education and training to work with the target population and experience working with adolescents. Service providers must be knowledgeable of and collaborate with DFCS and other community- and faith-based agencies to ensure youth access to the array of supports and services needed to meet case plan goals.

Service duration is 6-9 months before exiting foster care and/or 6-9 months post-permanency or emancipation, not to exceed 12 months.

**COSTAR REPORTING** – Reported client is either the head of the family unit or may be the child in care. **"Count each client or family once per program."** 

## **KEY PROGRAM OR ELIGIBILITY REQUIREMENTS –**

PSSF Vendors have been approved through a statewide bid process. A contract for all approved vendors has been fully executed. Client referrals to PSSF Vendor Services are made by completing Referral Form # RF10.12 – See Appendix A. The referral form and a listing of approved PSSF Vendors can be accessed on line at <u>www.pssfnet.com</u>, on the FFS Website at <u>http://167.193.156.254/FFS</u> or refer to the current PSSF Family Service Resource Guide.

#### ALLOWABLE ENTITLEMENT CODES

#### APS/Adoption Promotion & Permanency Support – Entitlement Code begins with "A"

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Adoption Promotion	AA	Direct service activity designed to promote adoption or the establishment of legal guardianship for children in care. Professional interventions and supportive services provided to families engaged in the adoption process and post adoptive support services to prevent placement disruption.
Educational Supports	AB	Educational support services includes instruction and/or supports provided to children, youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve educational outcomes and/or improve employment. May include individual tutoring, group instruction, GED classes or support, SAT preparation, etc
Case Management	AC	Includes Service Coordination - coordination and monitoring of services/case review, evaluation and documentation of individual case plans including participation, if requested, in case staffings for mutual clients convened by DFCS. Also includes Information & Referral - identifying and linking families to appropriate community resources, and Advocacy - advocating for/with families in various service systems.
Parent Education	AD	Curriculum-based parent education/parenting skills training provided to caregivers facilitated in an individual or interactive group setting conducted at a community-based facility to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Support Group	AE	Facilitated support or informal counseling on-site or at other community- based facility for a group of children, youth or adults with a common objective or circumstance. This does not include support groups with a therapeutic or counseling component.

# ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Intake Assessment and Child Assessments/Screen ings	AF	Assessments are required prior to or at the commencement of services and should identify individual and family strengths and needs in order to facilitate the development of an individual service plan that will be utilized in the monitoring and evaluation of family progress while services are provided. And should include, at a minimum: <ul> <li>a. Financial Conditions</li> <li>b. Living conditions</li> <li>c. Caretaker Supports and resources</li> <li>d. Health (caretaker and individual family members)</li> <li>e. Housing</li> <li>f. Employment</li> <li>g. Transportation</li> <li>h. Coping Skills</li> <li>i. Parenting Capacity and Skills</li> </ul>
Child Care	AG	<ul> <li>receive more intensive assessment or diagnosis.</li> <li>Child care provided for a specified period to facilitate caregiver participation in program activities or services or to enhance child abuse and neglect prevention efforts.</li> </ul>
Client Transportation	AH	Transportation assistance to facilitate family or individual participation in on- site services or transportation provided to assist individuals or families without transportation resources to access community resources.
Behavior Management	AJ	A plan of specific interventions and strategies that is developed as a component of an individualized action plan to provide the caregiver or the child with guidance in affecting prescribed changes and outcomes in the child's behavior, attitude or coping ability that will positively impact family functioning. Training that provides the caregiver with strategies that improve family functioning by encouraging the consistent use of effective interventions and alternatives to the use of corporal discipline.
Life Skills	AL	Classes or individual instruction designed to help individuals improve basic living skills such as managing a budget, managing a household, etc. including instruction and/or supports provided to youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve employment opportunities
Healthcare Screening/Services	AN	Healthcare education, screening or services for specific child or caregiver health-related problems (physical, mental or developmental).
Legal Advocacy	AQ	Legal consultation or advocacy services provided to a family or individual engaged in child deprivation, child custody or permanency proceedings.
Mentoring	AR	Mentoring services are designed to nurture a relationship between children and/or adults and appropriate role models.
Caregiver/Child enrichment Activities and Child/youth Activities	AS	<ul> <li>Facilitated group activity such as a field trip, parent/child dinner, holiday gathering, etc. sponsored and coordinated to facilitate positive parent and child interaction.</li> <li>Activities that allow children/youth to participate in constructive, age-appropriate experiences under adult supervision. Includes academic, social, and recreational activities.</li> </ul>

## ALLOWABLE ENTITLEMENT CODES

#### CFA/Family and Child Advocate – Entitlement Code begins with "C"

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Respite Care	AU	Period of relief provided to a caregiver (parent, foster parent, adoptive parent, relative caregiver) with primary responsibility for intensive supervision or care of a child or family member.
Emergency Aid	AX	Temporary assistance to address critical basic needs.

# TES/Transition & Emancipation Support – Entitlement Code begins with "T"

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Educational Supports	TB	Educational support services includes instruction and/or supports provided to children, youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve educational outcomes and/or improve employment. May include individual tutoring, group instruction, GED classes or support, SAT preparation, etc
Case Management	TC	Includes Service Coordination - coordination and monitoring of services/case review, evaluation and documentation of individual case plans including participation, if requested, in case staffings for mutual clients convened by DFCS. Also includes Information & Referral - identifying and linking families to appropriate community resources, and Advocacy - advocating for/with families in various service systems.
Parent Education	TD	Curriculum-based parent education/parenting skills training provided to caregivers facilitated in an individual or interactive group setting conducted at a community- based facility to enhance parent capacity to care for and meet the needs of their children. Includes positive parenting practices, positive parent-child relationships, and child health and development to enhance parental self-sufficiency and prevent child abuse and neglect.
Support Group	ТЕ	Facilitated support or informal counseling on-site or at other community-based facility for a group of children, youth or adults with a common objective or circumstance. This does not include support groups with a therapeutic or counseling component.
Intake Assessment and Child Assessments/Screen ings	TF	<ul> <li>Assessments are required prior to or at the commencement of services and should identify individual and family strengths and needs in order to facilitate the development of an individual service plan that will be utilized in the monitoring and evaluation of family progress while services are provided. And should include, at a minimum: <ul> <li>a. Financial Conditions</li> <li>b. Living conditions</li> <li>c. Caretaker Supports and resources</li> <li>d. Health (caretaker and individual family members)</li> <li>e. Housing</li> <li>f. Employment</li> <li>g. Transportation</li> <li>h. Coping Skills</li> <li>i. Parenting Capacity and Skills</li> </ul> </li> <li>Developmental screenings for children/youth to identify children who should receive more intensive assessment or diagnosis.</li> </ul>
Child Care	TG	Child care provided for a specified period to facilitate caregiver participation in program activities or services or to enhance child abuse and neglect prevention efforts.

#### ALLOWABLE ENTITLEMENT CODES

DESCRIPTION	CODE	SPECIFIC SERVICE REQUIREMENTS
Client Transportation	TH	Transportation assistance to facilitate family or individual participation in on-site services or transportation provided to assist individuals or families without transportation resources to access community resources.
Behavior Management	TJ	A plan of specific interventions and strategies that is developed as a component of an individualized action plan to provide the caregiver or the child with guidance in affecting prescribed changes and outcomes in the child's behavior, attitude or coping ability that will positively impact family functioning. Training that provides the caregiver with strategies that improve family functioning by encouraging the consistent use of effective interventions and alternatives to the use of corporal discipline.
Life Skills	TL	Classes or individual instruction designed to help individuals improve basic living skills such as managing a budget, managing a household, etc. including instruction and/or supports provided to youth or adults, individuals or groups, designed to enhance skills, support and encourage individual goals and improve employment opportunities
Mentoring	TR	Mentoring services are designed to nurture a relationship between children and/or adults and appropriate role models.
Caregiver/child enrichment Activities	TS	Facilitated group activity such as a field trip, parent/child dinner, holiday gathering, etc. sponsored and coordinated to facilitate positive parent and child interaction.
Respite Care	TU	Period of relief provided to a caregiver (parent, foster parent, adoptive parent, relative caregiver) with primary responsibility for intensive supervision or care of a child or family member.
Substance Abuse Recovery Support	TW	Services provided to a family, individual or group to prevent relapse and continued use of controlled substances.
Emergency Aid	ТХ	Temporary assistance to address critical basic needs.
Therapeutic Counseling	TZ	Therapeutic and psychological support services provided by a licensed mental health professional experienced in dealing with children and families with child welfare related issues.

NOTE: See page 121-123 for instructions on how to enter in SMILE

#### UAS 873 - 884 - Proper Procedures for Making the Payments

1. Key in information from the invoice into the Child Welfare Transaction File. If due to the new Entitlement Code structure, you will have more than 4 different entitlement codes, you will need to break it up onto 2 screens (see below for SMILE screen prints for example)

**NOTE:** Do not start a CW transaction screen with the "00" or "r" codes, they need to follow directly below the service codes.

- 2. 884XX Total Service Cost
  884XX Total Service Cost
  884XX Total Service Cost
  88400 Contractor's Match amount (25%) as positive amount
  884r Contractor's Match amount (25%) as negative amount
- 3. Total amount on screen(s) should equal Total Service Cost.
- 4. Amount of check should be 75% of Total Service Cost.
- 5. Month-end General Journal Entry:

DR 880.4XX Local Contractor's Match Expense (25%) amount CR 422.8XX C/M Revenue – PSSF for the same 25% amount

6. Month-end Reconciliation

Calculate 25% of YTD Expenses on Department Statement for Program 8XX. Should agree with YTD Expenses on Department Statement for Program 4XX

NOTE: The 473 – 484 Department Statements Excess Revenue over Expenditures should always be "0.00" once the GJE's have been completed).

#### SMILE CHILD WELFARE SCREEN PRINTS OF CM PSSF ENTRIES

In this example, you can see that there were 5 entitlement code combinations, so they broke it up into 2 separate screens each one having the 87300 and the 873r.

🛱 REDBARON
Ele Edit Options gend Receive Window Help         PERFORM:       Query Next Previous View Add Update Remove Table Screen         Shows the next row in the Current List.       *** 1: cwtran table**         Child # [00042466] Name CM PSSF CRIS       PROGRAM 873         Cty # [014] County Name IBROOKS       ] Custody [N] Person ID [       ]         Trns Dte [05/13/2009] Svc Mth(YYMM)[0903] DDB 01/01/1800 Age ** DEC[07/01/07]       Vendor # [032277]       Wur[] Name ICHILD AND FAMILY GUIDANCE OF GEDRGIA, INC       ]         Resource ID [000000008533732]Add1[       ]       ]       ]       ]         Invoice ID [       ] Add2IPO BOX 673       ]       ]         Inv#[0]       ] UAS # [873]       City/St/2ip[MILLEDGEVILLE       ], [GA][31059]
# Days [ 31] Begin Date [03/01/2009] End Date [03/31/2009] Rate/Day[ \$18.80] Bank[1 ] 114.101 CASH IN BANK - Rerate[ ] Ck#[ 137065] RF Bal \$0.00
TypeCountDescriptionAmountAccountTrans 1[873IJ] [4.00] [CRISIS INT-EFF DISC/BEH M] [ $$880.00$ ] [ $622.873$ ]Trans 2[873I0] [.00] [CRISIS INT-HOME-BASED PAR] [ $$1344.80$ ] [ $622.873$ ]Trans 3[87300] [4.00] [CONTRACTOR'S MATCH - PSSF] [ $$556.20$ ] [ $622.873$ ]Trans 4[873r ] [-1.00] [CONTRACTOR'S MATCH - PSSF] [ $$556.20$ ] [ $622.873$ ]Trans 5[873r ] [-1.00] [CONTRACTOR'S MATCH - REVE] [ $$-556.20$ ] [ $431.473$ ]Trans 5[873r ] [.00] [] [ $$0.00$ ] [ $431.473$ ]Trans 6 [] [1.00] [] [ $$0.001$ [ $0.000$ ]Post Receipts (Y/N) []Total Amount $$2224.80$ Press 2T to query a Child Master File,3T to query a Vendor,4T to query a Code
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E REDBARON
PERFORM:       Query Next Previous View Add Update Remove Table Screen         Shows the next row in the Current List.       ** 1: cwtran table**         Child # [00042466] Name CM PSSF CRIS       PROGRAM 873         Cty # [014] County Name [BRODKS ] Custody [N] Person ID [       1         Trns Dte [05/13/2009] Svc Mth(YYMM)[0904] DDB 01/01/1800 Age ** DEC[07/01/07]       1         Vendor # [032277]       Wvr[] Name [CHILD AND FAMILY GUIDANCE OF GEDRGIA, INC ]         Resource ID [000000008533732]Add1[       1         Invoice ID [       ]         Inv#[0]       ] UAS # [873]         City/St/Zip[MILLEDGEVILLE]       ], [GA][31059]
# Days [ 30] Begin Date [04/01/2009] End Date [04/30/2009] Rate/Day[ \$18.80] Bank[1 ] 114.101 CASH IN BANK - Rerate[ ] Ck#[ 137065] RF Bal \$0.00
Type         Count         Description         Amount         Account           Trans 1         [873IJ] [         4.00]         [CRISIS INT-EFF DISC/BEH M] [         \$240.00] [         622.873]           Trans 2         [873I0] [         .00]         [CRISIS INT-HOME-BASED PAR] [         \$470.68] [         622.873]           Trans 2         [87300] [         4.00]         [CONTRACTOR'S MATCH - PSSF] [         \$177.67] [         622.873]           Trans 3         [87300] [         4.00]         [CONTRACTOR'S MATCH - PSSF] [         \$177.67] [         622.873]           Trans 4         [873r ] [-         1.00] [CONTRACTOR'S MATCH - PSSF] [         \$177.67] [         622.873]           Trans 5         [] [         1.00] [CONTRACTOR'S MATCH - PSSF] [         \$177.67] [         622.873]           Trans 5         [] [         1.00] [CONTRACTOR'S MATCH - PSSF] [         \$177.67] [         622.873]           Trans 5         [] [         1.00] [CONTRACTOR'S MATCH - PSSF] [         \$1777.67] [         622.873]           Trans 5         [] [         1.00] [         [] [         \$0.00] [         0.000]           Trans 6         [] [] [         1.00] [         [] [         \$0.00] [         0.000]           Post Receipts         (Y/N) [] ]         Total Amount
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#### SMILE GENERAL LEDGER SCREEN PRINTS OF CM PSSF ENTRIES

Using the example above, Your 622.873 is the100% expenditures of \$2935.48 Your 422.473 is the 25% share of expenditures \$733.87 Producing a check on the General Ledger page for: Difference between 100% expenditures less 25% share for \$2201.61 for the CM PSSF programs Plus 240.00 for CCFA Wrap Around Plus 265.00 for Early Intervention Giving you a total check of \$2706.61

🗧 redbaron
Elle Edit Options Send Receive Window Help
PERFORM: Query Next Previous View Add Update Remove Table Screen Searches the active database table. ** 1: checks table** Cty # [034] County Name [DFCS REGION 11] Check Number [ 137065] Check Date [05/14/2009] Posting Indicator [P]
Vendor No. [32277 ] Vendor Name [CHILD AND FAMILY GUIDANCE OF GEORGIA, INC ] Resource ID Address 1[ ] 8533732 Address 2[ ] Citstzp [MILLEDGEVILLE GA 31059 ] Description [PROGRAM 873 , CM PSSF C CRISIS INT-EFF DISC/BEH M INV ]
Check Type [3] Bank Number [1 ] Check Written Indicator [W] Check Cleared [C]
Account       Description       Amount       Account       Description       Amount         [       622.873]       GIA       EXP - CM       [       \$2935.4811       431.473]       LOCAL       CONTRA       [       \$-733.87]         [       622.518]       GIA       EXP - CC       [       \$240.0011       622.551]       GIA       EXP - EA       [       \$265.001         [       .0001       [       \$0.0011       .0001       [       \$0.001         [       .0001       [       \$0.0011       .0001       [       \$0.001         [       .0001       [       \$0.0011       .0001       [       \$0.001         [       .0001       [       \$0.0011       .0001       [       \$0.001         [       .0001       [       \$0.0011       .0001       [       \$0.001         [       .0001       [       \$0.0011       .0001       [       \$0.001         [       .0001       [       \$0.0011       .0001       [       \$0.001         [       .0001       [       \$0.001       [       \$0.001       \$0.001         [       .0001       [       \$2706.611       114.101<
Q 0000 ANSI TCP/IP 10:53
😋 Start 🕥 Novell GroupWise 🏪 REDBARON 🌈 http://167.193.1 🖾 COSTAR 3006 😰 🗳 Search Desktop 🖉 🍫 10:53 AM