# COSTAR – Family Foster Care

### 106.0 UNIFORM ACCOUNTING SYSTEM (UAS) CODES

| UAS            | DESCRIPTION  | LAST UPDATE   |
|----------------|--|---------------|
| 323            | Foster Home Development Funds  | November 2014 |
| <del>501</del> | IV-E Family Foster Care  | July 2024     |
| 502            | State Family Foster Care   | July 2024     |
| 503            | Initial TANF Family Foster Care  | July 2024     |
| 504            | Related Family Foster Care (State)   | July 2022     |
| 513            | Return of Runaways   | Nov 2009      |
| 520            | Respite  | July 2022     |
| 529            | Undocumented Immigrant Children in Family Foster Care                      | July 2024     |
| 531            | Foster/Adoptive Parent Support Services                                    | May 2024      |
| 547            | Emergency Foster Care Beds   | Nov 2022      |
| <del>560</del> | IV-E Voluntary Family Foster Care  | July 2024     |
| 574            | IV-E Specialized Foster Care – State Approved Per Diem Waivers             | July 2024     |
| 575            | Voluntary Specialized FC-State Approved Per Diem Waivers                   | July 2024     |
| 576            | Related Specialized Foster Care (State)                                    | July 2022     |
| 577            | IV-B Child Welfare Specialized FC State Approved Per Diem Waivers          | July 2024     |
| <del>579</del> | Initial TANF Specialized Foster Care State<br>Approved Per Diem Waivers    | July 2024     |
| 593            | Foster, Adoptive and Relative Caregiver Recruitment, Retention and Support | May 2024      |

#### **CLOTHING ALLOWANCES FOR ALL PROGRAMS:**

#### **EXAMPLES:**

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

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

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

Waivers are allowed for additional clothing allowance in special circumstances.

Receipts are required for a reimbursement of clothing.

#### **EXAMPLES OF INITIAL CLOTHING RULE:**

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

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

**Refer to Program 531 for Coding** 

**Program Name - Foster Home Development Funds (Permanency Cases)** 

109.1 UAS Code - 501

PROGRAM NAME – IV-E Family Foster Care

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

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

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

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

#### **PAYMENT REQUIREMENTS:**

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

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

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

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

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

#### **Revised June 2024**

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

#### **UAS 501 (cont)**

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

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

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

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

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

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

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

#### **UAS 501 (cont)**

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

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

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

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

# **UAS Code 501 (continued)**

### ALLOWABLE ENTITLEMENT CODES

| CODE | DESCRIPTION                  | SPECIFIC SERVICE REQUIREMNT   |
|------|------------------------------|---|
| SB   | Sibling Incentive            | Added to the monthly per diem amount for the siblings   |
|      | (Eff. July 1, 2006)          | • \$3.44 per day, effective 7/1/16, per sibling   |
|      |                              | • \$103. 00 per sibling, effective 7/1/13   |
|      |                              | Must be in sibling groups of three or more  |
| 00a  | Birth/Death                  | Payable to Vital Records  |
|      | Certificates                 | http://www.cdc.gov/nchs/w2w.htm   |
| 00b  | Safety Helmets               | Maximum of \$30.00  |
| 00c  | Putative Father              | Payable to Vital Records  |
|      | Register Search              | https://dph.georgia.gov/putative-father-registry  |
| 00d  | Other                        | Expenses that do not fall under a designated entitlement code   |
|      |                              | for 100% state funding  |
|      |                              | • Passports   |
| 01   | Per Diem – Regular           | The Division's Basic Service Rate includes Room, board,   |
|      |                              | clothing replacement Allowance and medicine chest and   |
|      |                              | Incidentals.  |
|      |                              |   |
|      | (See Social                  | Effective July 1, 2024:   |
|      | Services County              | Child age birth through 5 \$28.63   |
|      | Letter 2006-03.              | Child age 6 through 12 \$30.89  |
|      | Form 529s are not            | Child age 13 and older \$33.60  |
|      | required for                 | T100 (1 X ) 1 2022  |
|      | individual children          | Effective July 1, 2022:   |
|      | for the increase)            | Child age birth through 5 \$27.80   |
|      |                              | Child age 6 through 12 \$29.99  |
|      |                              | Child age 13 and older \$32.62  |
|      |                              |   |
|      |                              | NOTE: Des d'essertes de la definition de la 1919  |
|      |                              | NOTE: Per diem increase the month following the child's   |
|      |                              | birthday.   |
|      |                              | With DECS Director/decience's ammoved a amorial add as year   |
| 02   | Dar Diam Special             | With DFCS Director/designee's approval, a special add-on per diem \$.50 to \$1.75 for a child whose care demands additional |
| 02   | Per Diem – Special<br>Add-on |   |
|      | Auu-0II                      | time and skills of the foster parent.   |

| CODE | DESCRIPTION      | SPECIFIC SERVICE REQUIREMNT  |
|------|------------------|--|
| 04   | Initial Clothing | May be purchased during the first 6 months of a child's initial placement in care according to established amounts.        |
|      |                  | Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over                                   |
|      |                  | Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over                                   |
|      |                  | July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.  |
|      |                  | Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.                                   |
|      |                  | May be a one-time expenditure or spent in increments. Exceptions granted via written waiver by County Director or Designee |
| 05   | Annual Clothing  | May be paid as a state reimbursable item for any child in FFC (regular or relative)  |
|      |                  | May be a one-time expenditure or spent in incremental amounts during a fiscal year   |
|      |                  | Cannot be claimed during the calendar year that the child entered care   |
|      |                  | Effective July 2022 – clothing allowance is an expenditure of \$690  |
|      |                  | Effective July 2016 – clothing allowance is an expenditure of \$415  |
|      |                  | Effective July 2014 – clothing allowance is an expenditure of \$409  |
|      |                  | July 2013 - Annual clothing allowance is an expenditure of \$309   |
|      |                  | Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.   |

| CODE | DESCRIPTION  | SPECIFIC SERVICE REQUIREMNT  |
|------|--|--|
| 10c  | Interstate Travel  | ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.   |
| 10d  | Burial   | Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state's maximum amount.  |
| 17   | Supplemental<br>Supervision –<br>Less than 24 hours<br>per day | <ul> <li>Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website.</li> <li>Childcare for a child placed in a regular or relative home whose foster parents work outside the home</li> <li>Childcare when the foster parent attends foster parent</li> <li>A registration fee for childcare may also be included here</li> </ul> |
| 99   | Written Waiver<br>Item   | Expenditure authorized by a written waiver, e.g., non-ICPC authorized travel to place/return a child; some waivers require State Office approval.  |

#### 109.2 UAS Code – 502

**PROGRAM NAME** – State Family Foster Care

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

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

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

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

#### PAYMENT REQUIREMENT

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

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

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

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

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

#### **Revised June 2024**

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

#### **UAS 502 (cont)**

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

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

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

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

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

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

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

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

### **UAS Code 502 (Continued)**

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

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

| CODE | DESCRIPTION                                    | SPECIFIC SERVICE REQUIREMENTS   |
|------|--|---|
| SB   | Sibling<br>Incentive<br>(Eff. July 1,<br>2006) | <ul> <li>Added to the monthly per diem amount for the siblings</li> <li>\$3.44 per day, effective 7/1/16, per sibling</li> <li>\$103.00 per sibling, effective 7/1/13</li> <li>Must be in sibling groups of three or more</li> </ul>  |
| 00a  | Birth/Death<br>Certificates                    | Payable to Vital Records <a href="http://www.cdc.gov/nchs/w2w.htm">http://www.cdc.gov/nchs/w2w.htm</a>  |
| 00b  | Safety Helmets                                 | Maximum of \$30.00  |
| 00c  | Putative Father<br>Register Search<br>Other    | Payable to Vital Records <a href="https://dph.georgia.gov/putative-father-registry">https://dph.georgia.gov/putative-father-registry</a> Expenses that do not fall under a designated entitlement code  |
| UUd  | Other  | for 100% state funding  • Passports   |
| 01   | Per Diem – Regular                             | The Division's Basic Service Rate includes Room, board, clothing replacement Allowance and medicine chest and Incidentals.  Effective July 1, 2024: Child age birth through 5 \$28.63 Child age 6 through 12 \$30.89 Child age 13 and older \$33.60  Effective July 1, 2022: Child age birth through 5 \$27.80 Child age 6 through 12 \$29.99 Child age 13 and older \$32.62  NOTE: Per diem increase the month following the child's birthday. |
| 02   | Per Diem –<br>Special Add-on                   | With DFCS Director/designee's approval, a special add-on per diem \$.50 to \$1.75 for a child whose care demands additional time and skills of the foster parent.   |

| CODE | DESCRIPTION      | SPECIFIC SERVICE REQUIREMENTS  |
|------|------------------|--|
| 04   | Initial Clothing | May be purchased during the first 6 months of a child's initial placement in care according to established amounts.        |
|      |                  | Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over                                   |
|      |                  | Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over                                   |
|      |                  | July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.  |
|      |                  | Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.                                   |
|      |                  | May be a one-time expenditure or spent in increments. Exceptions granted via written waiver by County Director or Designee |
| 05   | Annual Clothing  | May be paid as a state reimbursable item for any child in FFC (regular or relative)  |
|      |                  | May be a one-time expenditure or spent in incremental amounts during a fiscal year   |
|      |                  | Cannot be claimed during the calendar year that the child entered care   |
|      |                  | Effective July 2022 – clothing allowance is an expenditure of \$690  |
|      |                  | Effective July 2016 – clothing allowance is an expenditure of \$415  |
|      |                  | Effective July 2014 – clothing allowance is an expenditure of \$409  |
|      |                  | July 2013 - Annual clothing allowance is an expenditure of \$309   |
|      |                  | Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.   |

| CODE | DESCRIPTION   | SPECIFIC SERVICE REQUIREMENTS  |
|------|---|--|
| 10c  | Interstate Travel                                     | ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.   |
| 10d  | Burial  | Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state's maximum amount.  |
| 17   | Supplemental Supervision – Less than 24 hours per day | <ul> <li>Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website.</li> <li>Childcare for a child placed in a regular or relative home whose foster parents work outside the home</li> <li>Childcare when the foster parent attends foster parent</li> <li>A registration fee for childcare may also be included here</li> </ul> |
| 99   | Written Waiver<br>Item                                | Expenditure authorized by a written waiver, e.g., non-ICPC authorized travel to place/return a child; some waivers require State Office approval.  |

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

109.503 **UAS CODE - 503** 

**PROGRAM NAME** – Initial TANF Family Foster Care

**REFERENCES:** Foster Care Services Manual: Fiscal, 1016.11, 1016.12, 1016.13, 1016.14, 1016.16, 1016.28, 1016.31, & 1016.45

**PROGRAM PURPOSE** – To charge expenditures for a child when he/she first enters family foster care.

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

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

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

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

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

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

#### PAYMENT REQUIREMENT

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

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

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

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

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

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

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

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

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

#### **UAS 503 (cont)**

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

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

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

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

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

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

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

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

PUP Funds may be used to reimburse a case manager if they have to purchase some initial clothing or an approved child restraints for child(ren) that are taken into care. Codes 48h (Emergency Clothing, max \$100 per child) and 48j (Child Safety Devices (Child Restraints, max \$200 per child restraints)).

### ALLOWABLE ENTITLEMENT CODES

| CODE     | DESCRIPTION              | SPECIFIC SERVICE REQUIREMENTS                                  |
|----------|--------------------------|--|
| SB       | Sibling Incentive        | Added to the monthly per diem amount for the siblings          |
|          | (Eff. July 1, 2006)      | • \$3.44 per day, effective 7/1/16, per sibling                |
|          |                          | • \$103. 00 per sibling, effective 7/1/13                      |
|          |                          | Must be in sibling groups of three or more                     |
| 00a      | Birth/Death Certificates | Payable to Vital Records                                       |
|          |                          | http://www.cdc.gov/nchs/w2w.htm                                |
| 00b      | Safety Helmets           | Maximum of \$30.00   |
| 00c      | Putative Father Register | Payable to Vital Records                                       |
|          | Search                   | https://dph.georgia.gov/putative-father-registry               |
| 00d      | Other                    | Expenses that do not fall under a designated entitlement code  |
|          |                          | for 100% state funding   |
|          |                          | • Passports  |
|          |                          | The Division's Basic Service Rate includes Room, board,        |
| 01       | Per Diem – Regular       | clothing replacement Allowance and medicine chest and          |
|          |                          | Incidentals.   |
|          |                          |  |
|          |                          | Effective July 1, 2024:  |
|          |                          | Child age birth through 5 \$28.63                              |
|          |                          | Child age 6 through 12 \$30.89                                 |
|          |                          | Child age 13 and older \$33.60                                 |
|          |                          | Effective July 1 2022.   |
|          |                          | Effective July 1, 2022: Child age birth through 5 \$27.80      |
|          |                          | Child age 6 through 12 \$29.99                                 |
|          |                          | Child age 13 and older \$32.62                                 |
|          |                          | Cliffd age 13 and older \$52.02                                |
|          |                          | NOTE: Per diem increase the month following the child's        |
|          |                          | birthday.  |
|          |                          | With DFCS Director/designee's approval, a special add-on per   |
| 02       | Per Diem – Special       | diem \$.50 to \$1.75 for a child whose care demands additional |
| 02       | Add-on                   | time and skills of the foster parent.                          |
| <u> </u> | ridu OII                 | time and skins of the roster parent.                           |

| CODE | DESCRIPTION      | SPECIFIC SERVICE REQUIREMENTS   |
|------|------------------|---|
| 04   | Initial Clothing | May be purchased during the first 6 months of a child's initial placement in care according to established amounts.           |
|      |                  | Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over                                      |
|      |                  | Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over                                      |
|      |                  | July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.   |
|      |                  | Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.                                      |
|      |                  | May be a one-time expenditure or spent in increments.<br>Exceptions granted via written waiver by County Director or Designee |
| 05   | Annual Clothing  | May be paid as a state reimbursable item for any child in FFC (regular or relative)   |
|      |                  | May be a one-time expenditure or spent in incremental amounts during a fiscal year  |
|      |                  | Cannot be claimed during the calendar year that the child entered care  |
|      |                  | Effective July 2022 – clothing allowance is an expenditure of \$690   |
|      |                  | Effective July 2016 – clothing allowance is an expenditure of \$415   |
|      |                  | Effective July 2014 – clothing allowance is an expenditure of \$409   |
|      |                  | July 2013 - Annual clothing allowance is an expenditure of \$309  |
|      |                  | Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.  |

| CODE | DESCRIPTION   | SPECIFIC SERVICE REQUIREMENTS  |
|------|---|--|
| 10c  | Interstate Travel                                     | ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.   |
| 10d  | Burial  | Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state's maximum amount.  |
| 17   | Supplemental Supervision – Less than 24 hours per day | <ul> <li>Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website.</li> <li>Childcare for a child placed in a regular or relative home whose foster parents work outside the home</li> <li>Childcare when the foster parent attends foster parent</li> <li>A registration fee for childcare may also be included here</li> </ul> |
| 99   | Written Waiver<br>Item                                | Expenditure authorized by a written waiver, e.g., non-ICPC authorized travel to place/return a child; some waivers require State Office approval.  |

#### **109.4 UAS CODE – 504**

**PROGRAM NAME – Related Family Foster Care – State** 

**REFERENCES:** Foster Care Services Manual: Fiscal, 1016.11, 1016.12, 1016.45

**PROGRAM PURPOSE** – Used to charge expenditures for children who is currently placed in UAS Program 501, 502, 529 and 560 and incurs a service that can only be paid from 100% state funds

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

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

### PAYMENT REQUIREMENT

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

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

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

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

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

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

# **UAS Code 504 (Continued)**

| CODE | DESCRIPTION      | SPECIFIC SERVICE REQUIREMENTS   |
|------|------------------|---|
| 08   | In-Hospital Care | Pays for in-hospital expenses for a child in care who is not covered by Medicaid or private insurance.  |
| 10a  | Unusual Medical  | Maximum state funds used for Unusual Medical is \$5,000.00  Waivers: The Regional Director can approve Unusual Medical expenses for children in custody above the \$5,000.00 limit not covered by Medicaid/Amerigroup/Child's Insurance.  Unusual Medical should only be used if the medical procedure is denied by Medicaid/Amerigroup/Child's Insurance the child is undocumented the child is living in an out of state placement  Supporting documentation must be attached in all instances to the check request when submitted  If no supporting documentation can be provided, the request will have to be approved by Sr Director of Accounting and Delivered Services.  Request for the following expenditures will also be considered appropriate:  • Eye Glasses/Contacts and repairs or replacement of lens and frames  • Formula for infants when prescribed by doctor  • In-Home Nursing Services, an MOU is required and must be executed by state leadership  • Lab Fees  • Lice Treatment and Fee  • Office visit Co-Pays if on child's family insurance Prescriptions for children first coming into care or Prescriptions that are denied by Medicaid/Amerigroup |

# **UAS Code 504 (Continued)**

| CODE | DESCRIPTION                       | SPECIFIC SERVICE REQUIREMENTS  |
|------|-----------------------------------|--|
| 10b  | Unusual Dental                    | Maximum funds used for Unusual Dental is \$5,000.00  |
|      |                                   | Waivers: The Regional Director can approve Unusual Dental expenses for children in custody above the \$5,000.00 limit not covered by Medicaid/Amerigroup/Child's Insurance.  |
|      |                                   | Braces and other dental services needed for the child are covered under this code.   |
|      |                                   | For braces, the case manager should obtain an official estimate of the treatment cost on the orthodontist's letterhead. Payment can only be made as the services are rendered and therefore, we are not to pay the entire orthodontic treatment up front.  |
|      |                                   | The Authorization for Disbursement (ADPOR) should request payments made directly to orthodontist, not the provider. A copy of the monthly statement/invoice from the orthodontist should be attached to the ADPOR.   |
| 11   | Child Restraint<br>Devices (CRDs) | <ul> <li>Max of \$200, anything over this amount will have to be paid from county funds.</li> <li>Purchased in accordance with state law for a specific child from birth to eight years of age. The CRD then belongs to that child.</li> <li>The CRDs are reimbursed from state funds when purchased for a specific child by the foster parent. If Agency purchases the CRD and is not for a specific child, the expense must be paid from regular operating funds.</li> <li>Children age 8 and older who are small for their age, i.e., weighing under 80 pounds and/or under 4'9" in height, should use a booster seat instead of a lap/shoulder belt restraint system.</li> <li>The County Director can authorize a waiver for the age requirement and to purchase a booster seat for the safety needs of a child. Copy of waiver should be sent with payment request to accounting.</li> </ul> |
| 99   | Written Waiver<br>Item            | Expenditure authorized by a written waiver, e.g., non-ICPC authorized travel to place/return a child; some waivers require State Office approval.  |

#### 109.13 UAS Code - 513

**PROGRAM NAME** – Return of Runaways

**REFERENCES:** Foster Care Services Manual: Fiscal, 1016.42

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

COSTAR REPORTING – The reported client is the child.

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

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

#### ALLOWABLE ENTITLEMENT CODES

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

#### 109.20 UAS CODE - 520

### PROGRAM NAME – Foster Care Respite Care

**REFERENCES:** Foster Care Services Manual

#### **PROGRAM PURPOSE:**

#### **Respite Care:**

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

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

#### COSTAR REPORTING

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

#### **KEY PROGRAM OR ELIGIBILITY REQUIREMENT:**

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

#### **Respite Care**

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

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

### PAYMENT REQUIREMENT

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

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

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

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

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

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

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

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

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

#### ALLOWABE ENTITLEMENT CODES

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

109.29 **UAS CODE - 529** 

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

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

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

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

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

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

#### PAYMENT REQUIREMENT

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

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

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

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

#### **UAS 529 (cont)**

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

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

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

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

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

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

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

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

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

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

#### ALLOWABLE ENTITLEMENT CODES

| CODE | DESCRIPTION       | SPECIFIC SERVICE REQUIREMENTS                                  |
|------|-------------------|--|
| SB   | Sibling Incentive | Added to the monthly per diem amount for the siblings          |
|      | (Eff. July 1,     | • \$3.44 per day, effective 7/1/16, per sibling                |
|      | 2006)             | • \$103. 00 per sibling, effective 7/1/13                      |
|      |                   | Must be in sibling groups of three or more                     |
| 00a  | Birth/Death       | Payable to Vital Records                                       |
|      | Certificates      | http://www.cdc.gov/nchs/w2w.htm                                |
| 00b  | Safety Helmets    | Maximum of \$30.00   |
| 00c  | Putative Father   | Payable to Vital Records                                       |
|      | Register Search   | https://dph.georgia.gov/putative-father-registry               |
| 00d  | Other             | Expenses that do not fall under a designated entitlement code  |
|      |                   | for 100% state funding   |
|      |                   | <ul> <li>Passports</li> </ul>                                  |
| 01   | Per Diem –        | The Division's Basic Service Rate includes Room, board,        |
|      | Regular           | clothing replacement Allowance and medicine chest and          |
|      |                   | Incidentals.   |
|      |                   |  |
|      |                   | Effective July 1, 2024:  |
|      |                   | Child age birth through 5 \$28.63                              |
|      |                   | Child age 6 through 12 \$30.89                                 |
|      |                   | Child age 13 and older \$33.60                                 |
|      |                   |  |
|      |                   | Effective July 1, 2022:  |
|      |                   | Child age birth through 5 \$27.80                              |
|      |                   | Child age 6 through 12 \$29.99                                 |
|      |                   | Child age 13 and older \$32.62                                 |
|      |                   | NOTE: Per diem increase the month following the child's        |
|      |                   | birthday.  |
|      |                   |  |
| 02   | Per Diem –        | With DFCS Director/designee's approval, a special add-on per   |
|      | Special Add-on    | diem \$.50 to \$1.75 for a child whose care demands additional |
|      |                   | time and skills of the foster parent.                          |

| CODE | DESCRIPTION      | SPECIFIC SERVICE REQUIREMENTS  |
|------|------------------|--|
| 04   | Initial Clothing | May be purchased during the first 6 months of a child's initial placement in care according to established amounts.              |
|      |                  | Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over   |
|      |                  | Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over   |
|      |                  | July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.  |
|      |                  | Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.   |
|      |                  | May be a one-time expenditure or spent in increments.<br>Exceptions granted via written waiver by County Director or<br>Designee |
| 05   | Annual Clothing  | May be paid as a state reimbursable item for any child in FFC (regular or relative)  |
|      |                  | May be a one-time expenditure or spent in incremental amounts during a fiscal year   |
|      |                  | Cannot be claimed during the calendar year that the child entered care   |
|      |                  | Effective July 2022 – clothing allowance is an expenditure of \$690  |
|      |                  | Effective July 2016 – clothing allowance is an expenditure of \$415  |
|      |                  | Effective July 2014 – clothing allowance is an expenditure of \$409  |
|      |                  | July 2013 - Annual clothing allowance is an expenditure of \$309   |
|      |                  | Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.   |

# UAS Code 529 (cont)

| CODE | DESCRIPTION   | SPECIFIC SERVICE REQUIREMENTS  |
|------|---|--|
| 10c  | Interstate Travel                                     | ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.   |
| 10d  | Burial  | Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state's maximum amount.  |
| 17   | Supplemental Supervision – Less than 24 hours per day | <ul> <li>Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website.</li> <li>Childcare for a child placed in a regular or relative home whose foster parents work outside the home</li> <li>Childcare when the foster parent attends foster parent</li> <li>A registration fee for childcare may also be included here</li> </ul> |
| 99   | Written Waiver<br>Item                                | Expenditure authorized by a written waiver, e.g., non-ICPC authorized travel to place/return a child; some waivers require State Office approval.  |

**UAS Code – 531** 

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

All payments can be made in SMILE.

#### **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 State Approved Pre-Service Training for Foster Homes and completing ICPC or Regular Foster Home Evaluations. This program should not be used to complete Regular Adoptive and Regular Adoptive Legal-Risk Home Evaluations.

**Costar Reporting**: Should be reported as outlined below.

**Entitlement Code E1 through E7** - Count the number of Evaluations completed. In the description line 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 Kinship Care 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 the State Approved Pre-Service Training (NTDC-National Training and Development Curriculum, effective 7/1/24 IMPACT training is obsolete).

**Entitlement Code 67b** - For individual session, count the unduplicated number of foster parents who complete the State Approved Pre-Service training (NTDC-National Training and Development Curriculum, effective 7/1/24 IMPACT training is obsolete). Approval from the Resource Development Lead is needed to conduct one-on-one trainings with these funds.

**Entitlement Code 67c and 67d** – Reported client is the foster/adoptive/ICPC parent.

**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

Up to \$800.00-----per completed Regular Foster Home or ICPC Home Evaluation submitted

Partial rates are negotiated based on amount of work completed. Partial rates are not to exceed \$800 for a completed evaluation.

# **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 up to \$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 06** – Used to reimburse a foster/adoptive/ICPC parents for drug screens, physicals, lab tests and vaccinations that are required of prospective and current foster/adoptive/ICPC parents. Cost incurred by the foster parent for carbon monoxide detectors and ABC rated fire extinguishers will be reimbursed to the foster parents.

All Entitlement Code 06 expenditures are reimbursed to the foster, adoptive or ICPC family once the applicant has incurred the expense.

NOTE: For Drug Screens, the applicant cannot be reimbursed unless the results of the drug screen are negative.

All household members over age 18 are required to be fingerprinted, and these costs are reimbursable to the foster parent. The foster parent should not be asked to provide payment at the time of the fingerprinting.

Payments for Environmental Inspections, Septic Tank Inspections and Pumping and Pest Inspection and Treatment of foster parent's home may be paid directly to the vendor due to cost.

**Entitlement Code 29b -** Family Evaluation for Kinship Care Adoption – Name of Family (first and last name) and the date of the evaluation

\$350-----per completed Family Evaluation for Kinship Care Adoption Submitted

#### **UAS Code 531 (continued)**

#### Entitlement code 67 –

STATE APPROVED PRE-SERVICE TRAINING (NTDC-National Training and Development Curriculum, effective 7/1/24 IMPACT training is obsolete) – Name of Provider facilitating the training, and the dates of the training

- 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

\$950.00 ------GROUP SETTING (67a) for facilitating the complete State Approved Pre-Service training (NTDC-National Training and Development Curriculum, effective 7/1/24 IMPACT training is obsolete). 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 (67b) for facilitating the complete State Approved Pre-Service Training (NTDC-National Training and Development Curriculum, effective 7/1/24 IMPACT training is obsolete) for one person or one 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.

<u>Co-Facilitator Fee (Code 67c)</u> - To be eligible for the \$350 reimbursement for co-leading the State Approved Pre-Service Training, 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

<u>Pre-Service Train the Trainer (Code 67d)</u> - In order to co-lead a State Approved Pre-Service Training with DFCS staff, foster/adoptive parents must have successfully completed the Train the Trainer certification program (expenses for this may be paid upon submission by the foster/adoptive parent of a completed Form 5357).

Foster Parent completes and signs Form 5357 (Bill for Services Rendered) to be reimbursed for State Approved Pre-Service Training Reimbursement/Foster Care/Adoptive Parent Reimbursement for Training.

#### **Entitlement Code 68**

Registration and Lodging may be paid in advance.

Annual Adoptive and Foster Parent Association of Georgia Conference (AFPAG) – Registration, travel, lodging and meal costs associated with attendance

<u>OR</u>

#### **UAS Code 531 (continued)**

Continued Parent Development Trainings (to include AFPAG mini-conferences and foster parent summits)- Registration, travel, lodging, 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 summit 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.

CPR and First Aid Training/Water Safety Instructional Costs - include 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.

Continued Parent Development Trainings, the following steps need to be adhered to:

- 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.

#### **Entitlement Code 84**

**Recruitment and Retention** - Services and activities designed to promote the development of new foster homes such as State Approved Pre-Service 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 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.

#### **UAS Code 531 (continued)**

### Fingerprints – **Paid Directly to GBI**

- Approved Disbursement request with applicants' names authorizing payment, only needed if there's no Vendor's Invoice
- Purchase Order
- Original Invoice, approved for payment

(Code 84) is used when reimbursing support services cost directly to a vendor as part of a special recruitment group processing (special initiatives) or groups of veteran foster parents for re-evaluation purposes.

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

A waiver for the payment for groups of less than five must be obtained from the Caregiver Recruitment and Retention Unit Director.

| DESCRIPTION         | CODE | SPECIFIC SERVICE REQUIREMENTS   |
|---------------------|------|---|
| <b>Foster Home</b>  |      | This is a contracted service. A PO will be needed   |
| <b>Evaluations</b>  | E1   | <ul> <li>Completed and accepted with no further edits</li> </ul>  |
| Completed           |      | needed a Regular Foster Home Evaluation within  |
|                     |      | 6 weeks   |
|                     |      | <ul> <li>Rate includes cost for transportation and mileage</li> </ul>   |
|                     |      | <ul> <li>Contractors paid up to \$800 per Foster Home</li> </ul>  |
|                     |      | Evaluation.   |
|                     |      | <ul> <li>Evaluations must be completed per Child</li> </ul>   |
|                     |      | Welfare Policy Chapter 14   |
| Partial Completed   |      | This is a contracted service. A PO will be needed   |
| <b>Foster Homes</b> | E2   | <ul> <li>Partial or incomplete assessments rates are</li> </ul>   |
| <b>Evaluations</b>  |      | negotiated based upon the amount of work  |
|                     |      | completed   |
|                     |      | At minimum contractors must provide   |
|                     |      | <ul> <li>At minimum, contractors must provide<br/>documentation collected, written summations,</li> </ul>   |
|                     |      | any contacts-including preliminary assessments  |
|                     |      | any contacts-including plenninary assessments   |
|                     |      | <ul> <li>Partial Rates are not to exceed \$800 cost of a</li> </ul>   |
|                     |      | completed Foster Home Evaluation  |
|                     |      |   |
| ICPC Home           | D.   | This is a contracted service. A PO will be needed   |
| Evaluations         | E5   |   |
| Completed           |      | Completed and accepted with no further edits  |
|                     |      | needed a ICPC Foster Home Evaluation within 6   |
|                     |      | weeks   |
|                     |      | Rate includes cost for transportation and mileage  ACRE To Table 1. Ta |
|                     |      | Contractors paid up to \$800 per ICPC Foster  |
|                     |      | Home Evaluation.  |
|                     |      | Evaluations must be completed per Child  W. 16. D. W. 11.  On the Child of the |
|                     |      | Welfare Policy Chapter 14   |

| DESCRIPTION   | CODE | SPECIFIC SERVICE REQUIREMENTS  |
|---|------|--|
| Partial Completed   |      | This is a contracted service. A PO will be needed  |
| ICPC Home<br>Evaluations  | E6   | <ul> <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 contacts-including preliminary assessments</li> <li>Partial Rates are not to exceed \$800 cost of a completed ICPC Foster Home Evaluation</li> </ul>  |
| Foster Home Evaluation & Gathering of Attachments & Verifications | E7   | <ul> <li>This is a contracted service. A PO will be needed</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 up to \$850 per Foster Home Evaluation/Packet</li> <li>Evaluations must be completed per Child Welfare Policy Chapter 14</li> </ul> |
| Family Evaluation<br>for Kinship Care<br>Adoptions                | 29b  | <ul> <li>This is a contracted service. A PO will be needed</li> <li>Completed and accepted with no further edits needed a Family Evaluation for Kinship Care Adoption within 30 days of referral from DFCS</li> <li>Rate includes cost for transportation and mileage</li> <li>Contractors paid \$350 per Family Evaluation Kinship Care 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.  Payments for Environmental Inspections, Septic Tank Inspections and Pumping and Pest Inspection and Treatment of foster parent's home may be paid directly to the vendor due to cost.  |

| DESCRIPTION                         | CODE | SPECIFIC SERVICE REQUIREMENTS   |
|-------------------------------------|------|---|
|                                     | 06a  | Drug Screens  |
|                                     |      |   |
|                                     | 0.71 | <ul> <li>Support Services – Physicals</li> </ul>  |
|                                     | 06b  | Physicals for Kinship Care parents  |
|                                     |      | <ul> <li>Support Services – Lab tests, influenza, and</li> </ul>  |
|                                     | 06c  | pertussis vaccinations  |
|                                     |      | • Environmental Inspections by the Health   |
|                                     | 06e  | Department for Foster Parents homes.  |
|                                     | 066  | • Septic tanks pumped if required by the Heath  |
|                                     | 06f  | Department for Foster Parent's homes.   |
|                                     | 060  | Additional training and State Approved Pre- Samina Training metanisls   |
|                                     | 06g  | Service Training materials  |
|                                     | 06h  | Carbon Monoxide Detectors     ABC Poted Fire Patie swishous   |
|                                     | 06i  | ABC Rated Fire Extinguishers  May of \$10,000   |
|                                     | 001  | • Max of \$10,000   |
|                                     |      | <ul> <li>Pest Inspection and Treatments (lice and bed<br/>bugs would be included in this category)</li> </ul> |
| Group STATE                         |      | This is a contracted service. A PO will be needed   |
| APPROVED                            | 67a  | • State Approved Pre-Service Training Payment -   |
| PRE-SERVICE                         | 074  | \$950.00  |
| TRAINING                            |      | Ψ230.00   |
| (NTDC-National                      |      |   |
| Training and                        |      |   |
| Development Curriculum, effective   |      |   |
| 7/1/24 IMPACT                       |      |   |
| training is obsolete)               |      |   |
| INDIVIDUAL (1                       |      | This is a contracted service. A PO will be needed   |
| to 1) STATE                         | 67b  | Must be pre-approved by Resource  |
| APPROVED                            |      | Development Lead  |
| PRE-SERVICE                         |      | State Approved Pre-Service Training Payment -   |
| TRAINING (NTDC-National             |      | \$500.00  |
| Training and                        |      | ψ300.00   |
| Development Development             |      |   |
| Curriculum, effective 7/1/24 IMPACT |      |   |
| 7/1/24 IMPACT training is obsolete) |      |   |
| Caregiver Co-                       | 67c  | Max up to \$350 for class   |
| Facilitator                         |      |   |
| <b>Pre-Service Train-</b>           | 67d  |   |
| The-Trainer                         |      |   |

| DESCRIPTION  | CODE | SPECIFIC SERVICE REQUIREMENTS  |
|--|------|--|
| Continued Parent Development (CPD) and AFPAG Trainings | 68   | CPD and AFPAG Trainings expenditures are reimbursements to the foster parent.  Payments for registration and lodging may be paid                           |
|  |      | in Advance.  |
| CPD –Registration                                      | 68a  | Although Registration may be paid in Advance, it will still need to be reported by foster parent when the 5357 form is submitted.                          |
|  |      | Note: Caregivers are required to attach all receipts for registration whether paid in advance or not, when submitting Form 5357 for travel reimbursements. |
| CPR, 1 <sup>st</sup> Aid and Water Safety              | 68b  | <ul> <li>CPR and First Aid Training (pre- and post-approval)</li> <li>Water Safety Services</li> </ul>   |
| AFPAG - registration                                   | 68c  | Although Registration may be paid in Advance, it will still need to be reported by foster parent when the 5357 form is submitted.                          |
|  |      | Note: Caregivers are required to attach all receipts for registration whether paid in advance or not, when submitting Form 5357 for travel reimbursements. |
| CPD – Lodging  | 68d  | Lodging (may be paid in advance) should follow<br>state reimbursement guidelines   |
| CPD – Mileage  | 68e  | • Mileage should follow state reimbursement guidelines   |
| CPD - Meals  | 68f  | • Meals should follow state reimbursement guidelines   |
| AFPAG – Lodging  | 68g  | Lodging (may be paid in advance) should follow<br>state reimbursement guidelines   |
| AFPAG – Mileage  | 68h  | • Mileage should follow state reimbursement guidelines   |
| AFPAG - Meals  | 68i  | Meals should follow state reimbursement guidelines   |

| DESCRIPTION     | CODE | SPECIFIC SERVICE REQUIREMENTS  |
|-----------------|------|--|
| Recruitment and | 84   | Foster Parent promotion, recruitment and retention   |
| 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 are required in order to process payment. |
|                 |      | Payments are to be made to the provider  |
|                 |      | PO is required   |
|                 | 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)  |

109.47 UAS CODE - 547

**PROGRAM NAME** – Receiving Home Placements

**REFERENCES:** Foster Care Services Manual:

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

**COSTAR REPORTING** - The reported client is the child.

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

**PAYMENT REQUIREMENT:** Case Manager will enter a placement and payment of care request into SHINES to place a child in a Receiving Home bed. During initial pilot and until SHINES is modified to accommodate payment needs, receiving homes will be paid directly through SMILE. The Receiving Home Placement Log and Receiving Home Foster Care Invoice will need to be completed, approved and submitted to accounting for processing.

UAS CODE – 547 (cont)

### ALLOWABLE ENTITLEMENT CODES

| CODE | DESCRIPTION                            | SPECIFIC SERVICE REQUIREMENTS   |
|------|--|---|
| 0.1  | В                                      | \$100.00 per day  |
| 01   | Receiving Home – Regular Per Diem rate | This rate includes Room, board, clothing replacement allowance, over the counter medicine and Incidentals.                                      |
| 60   | Day Respite Services                   | \$50.00 – Partial Day Services  Day Respite Services if child is placed in Receiving  Home for more than 2 hours, but does not spend the night. |
| 06   | Passiving Home Pad                     | \$30.00 per day   |
| 96   | Receiving Home Bed<br>Hold             | Used to maintain an open placement bed for hard-to-<br>place children   |

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

109.60 UAS Code - 560

**PROGRAM NAME - V**oluntary Family Foster Care – IV-E

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

**PROGRAM PURPOSE** – To charge expenditures for a child placed in FFC care by Voluntary Placement Agreement and who is determined to be IV-E eligible. **Note:** Program 504 may be used in conjunction with this program.

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

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

#### PAYMENT REQUIREMENT

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

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

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

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

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

UAS 560 (cont)

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

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

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

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

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

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

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

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

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

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

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

| CODE | DESCRIPTION              | SPECIFIC SERVICE REQUIREMENTS                            |
|------|--------------------------|--|
| SB   | Sibling Incentive        | Added to the monthly per diem amount for the             |
|      | (Eff. July 1, 2006)      | siblings   |
|      |                          | • \$3.44 per day, effective 7/1/16, per sibling          |
|      |                          | • \$103. 00 per sibling, effective 7/1/13                |
|      |                          | Must be in sibling groups of three or more               |
| 00a  | Birth/Death Certificates | Payable to Vital Records                                 |
|      |                          | http://www.cdc.gov/nchs/w2w.htm                          |
| 00b  | Safety Helmets           | Maximum of \$30.00                                       |
| 00c  | Putative Father Register | Payable to Vital Records                                 |
|      | Search                   | https://dph.georgia.gov/putative-father-registry         |
| 00d  | Other                    | Expenses that do not fall under a designated entitlement |
|      |                          | code for 100% state funding                              |
|      |                          | <ul> <li>Passports</li> </ul>                            |
|      |                          | The Division's Basic Service Rate includes Room, board,  |
| 01   | Per Diem - Regular       | clothing replacement Allowance and medicine chest and    |
|      |                          | Incidentals.   |
|      |                          | Effective July 1, 2024:                                  |
|      |                          | Child age birth through 5 \$28.63                        |
|      |                          | Child age 6 through 12 \$30.89                           |
|      |                          | Child age 13 and older \$33.60                           |
|      |                          | Figs. 4: 4 1 2022  |
|      |                          | Effective July 1, 2022:                                  |
|      |                          | Child age birth through 5 \$27.80                        |
|      |                          | Child age 6 through 12 \$29.99                           |
|      |                          | Child age 13 and older \$32.62                           |
|      |                          | NOTE: Per diem increase the month following the          |
|      |                          | child's birthday.  |
|      |                          | With DFCS Director/designee's approval, a special add-   |
| 02   | Per Diem – Special Add-  | on per diem \$.50 to \$1.75 for a child whose care       |
|      | on                       | demands additional time and skills of the foster parent. |

| CODE | DESCRIPTION      | SPECIFIC SERVICE REQUIREMENTS  |
|------|------------------|--|
| 04   | Initial Clothing | May be purchased during the first 6 months of a child's initial placement in care according to established amounts.              |
|      |                  | Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over   |
|      |                  | Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over   |
|      |                  | July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.  |
|      |                  | Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.   |
|      |                  | May be a one-time expenditure or spent in increments.<br>Exceptions granted via written waiver by County Director or<br>Designee |
| 05   | Annual Clothing  | May be paid as a state reimbursable item for any child in FFC (regular or relative)  |
|      |                  | May be a one-time expenditure or spent in incremental amounts during a fiscal year   |
|      |                  | Cannot be claimed during the calendar year that the child entered care   |
|      |                  | Effective July 2022 – clothing allowance is an expenditure of \$690  |
|      |                  | Effective July 2016 – clothing allowance is an expenditure of \$415  |
|      |                  | Effective July 2014 – clothing allowance is an expenditure of \$409  |
|      |                  | July 2013 - Annual clothing allowance is an expenditure of \$309   |
|      |                  | Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.   |

| CODE | DESCRIPTION  | SPECIFIC SERVICE REQUIREMENTS  |
|------|--|--|
| 10c  | Interstate Travel  | ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.   |
| 10d  | Burial   | Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state's maximum amount.  |
| 17   | Supplemental<br>Supervision –<br>Less than 24<br>hours per day | <ul> <li>Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website.</li> <li>Childcare for a child placed in a regular or relative home whose foster parents work outside the home</li> <li>Childcare when the foster parent attends foster parent</li> <li>A registration fee for childcare may also be included here</li> </ul> |
| 99   | Written Waiver<br>Item   | Expenditure authorized by a written waiver, e.g., non-ICPC authorized travel to place/return a child; some waivers require State Office approval.  |

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

109.74 UAS Code - 574

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

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

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

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

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

#### PAYMENT REQUIREMENT

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

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

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

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

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

#### **UAS 574 (cont)**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

| CODE | DESCRIPTION                     | SPECIFIC SERVICE REQUIREMENTS  |
|------|---------------------------------|--|
| SB   | Sibling Incentive (Eff. July 1, | <ul> <li>Added to the monthly per diem amount for the siblings</li> <li>\$3.44 per day, effective 7/1/16, per sibling</li> </ul> |
|      | 2006)                           | • \$103. 00 per sibling, effective 7/1/13  |
|      | 2000)                           | <ul> <li>Must be in sibling groups of three or more</li> </ul>   |
| 00a  | Birth/Death                     | Payable to Vital Records   |
| OOa  | Certificates                    | http://www.cdc.gov/nchs/w2w.htm  |
| 00b  | Safety Helmets                  | Maximum of \$30.00   |
| 00c  | Putative Father                 | Payable to Vital Records   |
| 000  |                                 | https://dph.georgia.gov/putative-father-registry   |
| 00d  | Register Search Other           | Expenses that do not fall under a designated entitlement code for  |
| oou  | Other                           | 100% state funding   |
|      |                                 |  |
|      |                                 | Passports  The Division's Basic Service Rate includes Room, board,   |
| 01   | Per Diem -                      | clothing replacement Allowance and medicine chest and  |
| 01   | Regular                         | Incidentals.   |
|      | Regulai                         | incidentals.   |
|      |                                 | Effective July 1, 2024:  |
|      |                                 | Child age birth through 5 \$28.63  |
|      |                                 | Child age 6 through 12 \$30.89   |
|      |                                 | Child age 13 and older \$33.60   |
|      |                                 |  |
|      |                                 | Effective July 1, 2022:  |
|      |                                 | Child age birth through 5 \$27.80  |
|      |                                 | Child age 6 through 12 \$29.99   |
|      |                                 | Child age 13 and older \$32.62   |
|      |                                 |  |
|      |                                 | NOTE: Per diem increase the month following the child's birthday.  |

| CODE | DESCRIPTION                  | SPECIFIC SERVICE REQUIREMENTS   |
|------|------------------------------|---|
| 02   | Per Diem –<br>Special Add-on | With DFCS Director/designee's approval, a special add-on per diem \$.50 to \$1.75 for a child whose care demands additional time and skills of the foster parent. |
|      | Special Add-oil              | 1   |
| 04   | Initial Clothing             | May be purchased during the first 6 months of a child's initial placement in care according to established amounts.   |
|      |                              | Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over  |
|      |                              | Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over  |
|      |                              | July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.   |
|      |                              | Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.  |
|      |                              | May be a one-time expenditure or spent in increments. Exceptions granted via written waiver by County Director or Designee  |
| 05   | Annual Clothing              | May be paid as a state reimbursable item for any child in FFC (regular or relative)   |
|      |                              | May be a one-time expenditure or spent in incremental amounts during a fiscal year  |
|      |                              | Cannot be claimed during the calendar year that the child entered care  |
|      |                              | Effective July 2022 – clothing allowance is an expenditure of \$690   |
|      |                              | Effective July 2016 – clothing allowance is an expenditure of \$415   |
|      |                              | Effective July 2014 – clothing allowance is an expenditure of \$409   |
|      |                              | July 2013 - Annual clothing allowance is an expenditure of \$309  |
|      |                              | Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.  |

| CODE | DESCRIPTION   | SPECIFIC SERVICE REQUIREMENTS  |
|------|---|--|
| 10c  | Interstate Travel                                     | ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.   |
| 10d  | Burial  | Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state's maximum amount.  |
| 17   | Supplemental Supervision – Less than 24 hours per day | <ul> <li>Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website.</li> <li>Childcare for a child placed in a regular or relative home whose foster parents work outside the home</li> <li>Childcare when the foster parent attends foster parent</li> <li>A registration fee for childcare may also be included here</li> </ul> |
| 99   | Written Waiver<br>Item (Per Diem<br>Only)             | <ul> <li>Additional per diem above rate in 01 and 02 which has been approved via State Office Written Waiver</li> <li>Other expenditures authorized by a waiver such as non-ICPC authorized travel to place or return a child</li> <li>Some waivers require state office approval</li> </ul>   |

109.75 UAS Code - 575

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

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

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

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

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

#### PAYMENT REQUIREMENT

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

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

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

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

#### **UAS 575 (cont)**

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

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

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

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

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

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

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

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

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

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

#### **UAS 575 (cont)**

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

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

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

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

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

## **UAS Code – 575 (continued)**

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| CODE | DESCRIPTION      | SPECIFIC SERVICE REQUIREMENTS  |
|------|------------------|--|
| 04   | Initial Clothing | May be purchased during the first 6 months of a child's initial placement in care according to established amounts.              |
|      |                  | Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over   |
|      |                  | Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over   |
|      |                  | July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.  |
|      |                  | Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.   |
|      |                  | May be a one-time expenditure or spent in increments.<br>Exceptions granted via written waiver by County Director or<br>Designee |
| 05   | Annual Clothing  | May be paid as a state reimbursable item for any child in FFC (regular or relative)  |
|      |                  | May be a one-time expenditure or spent in incremental amounts during a fiscal year   |
|      |                  | Cannot be claimed during the calendar year that the child entered care   |
|      |                  | Effective July 2022 – clothing allowance is an expenditure of \$690  |
|      |                  | Effective July 2016 – clothing allowance is an expenditure of \$415  |
|      |                  | Effective July 2014 – clothing allowance is an expenditure of \$409  |
|      |                  | July 2013 - Annual clothing allowance is an expenditure of \$309   |
|      |                  | Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.   |

| CODE | DESCRIPTION  | SPECIFIC SERVICE REQUIREMENTS  |
|------|--|--|
| 10c  | Interstate Travel  | ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.   |
| 10d  | Burial   | Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state's maximum amount.  |
| 17   | Supplemental<br>Supervision – Less<br>than 24 hours per<br>day | <ul> <li>Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website.</li> <li>Childcare for a child placed in a regular or relative home whose foster parents work outside the home</li> <li>Childcare when the foster parent attends foster parent</li> <li>A registration fee for childcare may also be included here</li> </ul> |
| 99   | Written Waiver<br>Item (Per Diem<br>Only)                      | <ul> <li>Additional per diem above rate in 01 and 02 which has been approved via State Office Written Waiver</li> <li>Other expenditures authorized by a waiver such as non-ICPC authorized travel to place or return a child</li> <li>Some waivers require state office approval</li> </ul>   |

109.76 UAS Code - 576

**PROGRAM NAME -** Specialized Foster Care Related Expenses (State)

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

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

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

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

#### PAYMENT REQUIREMENT

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

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

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

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

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

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

| CODE | DESCRIPTION      | SPECIFIC SERVICE REQUIREMENTS   |
|------|------------------|---|
|      |                  | Pays for in-hospital expenses for a child in care who is not  |
| 08   | In-Hospital Care | covered by Medicaid or private insurance.   |
| 10a  | Unusual Medical  | Maximum state funds used for Unusual Medical is \$5,000.00  |
|      | Chasan Water     | Waivers: The Regional Director can approve Unusual Medical  |
|      |                  | expenses for children in custody above the \$5,000.00 limit not   |
|      |                  | covered by Medicaid/Amerigroup/Child's Insurance.   |
|      |                  | Unusual Medical should only be used if  |
|      |                  | the medical procedure is denied by  |
|      |                  | Medicaid/Amerigroup/Child's Insurance   |
|      |                  | the child is undocumented   |
|      |                  | the child is living in an out of state placement  |
|      |                  | Supporting documentation must be attached in all instances to the check request when submitted  |
|      |                  | If no supporting documentation can be provided, the request will have to be approved by Sr Director of Accounting and Delivered Services. |
|      |                  | Request for the following expenditures will also be considered appropriate:   |
|      |                  | <ul> <li>Eye Glasses/Contacts and repairs or replacement of lens<br/>and frames</li> </ul>  |
|      |                  | <ul> <li>Formula for infants when prescribed by doctor</li> </ul>   |
|      |                  | <ul> <li>In-Home Nursing Services, an MOU is required and must</li> </ul>   |
|      |                  | be executed by state leadership   |
|      |                  | • Lab Fees  |
|      |                  | <ul> <li>Lice Treatment and Fee</li> </ul>  |
|      |                  | Office visit Co-Pays if on child's family insurance   |
|      |                  | Prescriptions for children first coming into care or  |
|      |                  | Prescriptions that are denied by Medicaid/Amerigroup  |

| CODE | DESCRIPTION                       | SPECIFIC SERVICE REQUIREMENTS   |
|------|-----------------------------------|---|
| 10b  | Unusual Dental                    | Maximum funds used for Unusual Dental is \$5,000.00   |
|      |                                   | Waivers: The Regional Director can approve Unusual Dental expenses for children in custody above the \$5,000.00 limit not covered by Medicaid/Amerigroup/Child's Insurance.   |
|      |                                   | Braces and other dental services needed for the child are covered under this code.  |
|      |                                   | For braces, the case manager should obtain an official estimate of the treatment cost on the orthodontist's letterhead. Payment can only be made as the services are rendered and therefore, we are not to pay the entire orthodontic treatment up front.   |
|      |                                   | The Authorization for Disbursement (ADPOR) should request payments made directly to orthodontist, not the provider. A copy of the monthly statement/invoice from the orthodontist should be attached to the ADPOR.  |
| 11   | Child Restraint<br>Devices (CRDs) | <ul> <li>Max of \$200, anything over this amount will have to be paid from county funds.</li> <li>Purchased in accordance with state law for a specific child from birth to eight years of age. The CRD then belongs to that child.</li> <li>The CRDs are reimbursed from state funds when purchased for a specific child by the foster parent. If Agency purchases the CRD and is not for a specific child, the expense must be paid from regular operating funds.</li> <li>Children age 8 and older who are small for their age, i.e., weighing under 80 pounds and/or under 4'9" in height, should use a booster seat instead of a lap/shoulder belt restraint system.</li> <li>The County Director can authorize a waiver for the age requirement and to purchase a booster seat for the</li> </ul> |
|      |                                   | safety needs of a child. Copy of waiver should be sent with payment request to accounting.  Expenditure authorized by a written waiver, e.g., non-ICPC  |
| 99   | Written Waiver<br>Item            | authorized travel to place/return a child; some waivers require State Office approval.  |

109.77 UAS Code - 577

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

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

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

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

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

#### PAYMENT REQUIREMENTS

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

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

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

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

**UAS 577 (cont)** 

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

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

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

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

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

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

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

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

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

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

| COD<br>E | DESCRIPTION                           | SPECIFIC SERVICE REQUIREMENTS   |
|----------|---------------------------------------|---|
| SB       | Sibling Incentive (Eff. July 1, 2006) | <ul> <li>Added to the monthly per diem amount for the siblings</li> <li>\$3.44 per day, effective 7/1/16, per sibling</li> <li>\$103. 00 per sibling, effective 7/1/13</li> <li>Must be in sibling groups of three or more</li> </ul> |
| 00a      | Birth/Death<br>Certificates           | Payable to Vital Records <a href="http://www.cdc.gov/nchs/w2w.htm">http://www.cdc.gov/nchs/w2w.htm</a>  |
| 00b      | Safety Helmets                        | Maximum of \$30.00  |
| 00c      | Putative Father<br>Register Search    | Payable to Vital Records <a href="https://dph.georgia.gov/putative-father-registry">https://dph.georgia.gov/putative-father-registry</a>  |
| 00d      | Other                                 | Expenses that do not fall under a designated entitlement code for 100% state funding  • Passports   |
| 01       | Per Diem –<br>Regular                 | The Division's Basic Service Rate includes Room, board, clothing replacement Allowance and medicine chest and Incidentals.  |
|          |                                       | Effective July 1, 2024: Child age birth through 5 \$28.63 Child age 6 through 12 \$30.89 Child age 13 and older \$33.60   |
|          |                                       | Effective July 1, 2022: Child age birth through 5 \$27.80 Child age 6 through 12 \$29.99 Child age 13 and older \$32.62  NOTE: Per diem increase the month following the child's  |
|          |                                       | birthday.   |
| 02       | Per Diem –<br>Special Add-on          | With DFCS Director/designee's approval, a special add-on per diem \$.50 to \$1.75 for a child whose care demands additional time and skills of the foster parent.   |

| CODE | DESCRIPTION      | SPECIFIC SERVICE REQUIREMENTS  |
|------|------------------|--|
|      |                  |  |
| 04   | Initial Clothing | May be purchased during the first 6 months of a child's initial placement in care according to established amounts.              |
|      |                  | Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over   |
|      |                  | Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over   |
|      |                  | July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.  |
|      |                  | Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.   |
|      |                  | May be a one-time expenditure or spent in increments.<br>Exceptions granted via written waiver by County Director or<br>Designee |
| 05   | Annual Clothing  | May be paid as a state reimbursable item for any child in FFC (regular or relative)  |
|      |                  | May be a one-time expenditure or spent in incremental amounts during a fiscal year   |
|      |                  | Cannot be claimed during the calendar year that the child entered care   |
|      |                  | Effective July 2022 – clothing allowance is an expenditure of \$690  |
|      |                  | Effective July 2016 – clothing allowance is an expenditure of \$415  |
|      |                  | Effective July 2014 – clothing allowance is an expenditure of \$409  |
|      |                  | July 2013 - Annual clothing allowance is an expenditure of \$309   |
|      |                  | Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.   |

| CODE | DESCRIPTION  | SPECIFIC SERVICE REQUIREMENTS  |
|------|--|--|
| 10c  | Interstate Travel  | ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.   |
| 10d  | Burial   | Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state's maximum amount.  |
| 17   | Supplemental<br>Supervision –<br>Less than 24<br>hours per day | <ul> <li>Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website.</li> <li>Childcare for a child placed in a regular or relative home whose foster parents work outside the home</li> <li>Childcare when the foster parent attends foster parent</li> <li>A registration fee for childcare may also be included here</li> </ul> |
| 99   | Written Waiver<br>Item   | <ul> <li>Additional per diem above rate in 01 and 02 which has been approved via State Office Written Waiver</li> <li>Other expenditures authorized by a waiver such as non-ICPC authorized travel to place or return a child</li> <li>Some waivers require state office approval</li> </ul>   |

#### 109.79 UAS Code 579

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

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

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

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

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

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

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

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

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

#### **UAS 579 (cont)**

#### PAYMENT REQUIREMENT

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

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

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

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

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

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

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

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

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

**UAS 579 (cont)** 

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

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

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

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

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

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

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

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

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

### **UAS CODE 579 (continued)**

PUP Funds may be used to reimburse a case manager if they have to purchase some initial clothing or an approved child restraints for child(ren) that are taken into care. Codes 48h (Emergency Clothing, max \$100 per child) and 48j Child Safety Devices (Child Restraints, max \$200 per child restraints)).

| CODE | DESCRIPTION                           | SPECIFIC SERVICE REQUIREMENTS   |  |  |
|------|---------------------------------------|---|--|--|
| SB   | Sibling Incentive (Eff. July 1, 2006) | <ul> <li>Added to the monthly per diem amount for the siblings</li> <li>\$3.44 per day, effective 7/1/16, per sibling</li> <li>\$103. 00 per sibling, effective 7/1/13</li> <li>Must be in sibling groups of three or more</li> </ul> |  |  |
| 00a  | Birth/Death Certificates              | Payable to Vital Records <a href="http://www.cdc.gov/nchs/w2w.htm">http://www.cdc.gov/nchs/w2w.htm</a>  |  |  |
| 00b  | Safety Helmets                        | Maximum of \$30.00  |  |  |
| 00c  | Putative Father Register<br>Search    | Payable to Vital Records  https://dph.georgia.gov/putative-father-registry  |  |  |
| 00d  | Other                                 | Expenses that do not fall under a designated entitlement code for 100% state funding  • Passports   |  |  |
| 01   | Per Diem – Regular                    | The Division's Basic Service Rate includes Room, board, clothing replacement Allowance and medicine chest and Incidentals.  Effective July 1, 2024:   |  |  |
|      |                                       | Child age birth through 5 Child age 6 through 12 Child age 13 and older \$28.63 \$30.89 Child age 13 and older \$33.60  |  |  |
|      |                                       | Effective July 1, 2022: Child age birth through 5 \$27.80 Child age 6 through 12 \$29.99 Child age 13 and older \$32.62  NOTE: Per diem increase the month following the child's  |  |  |
|      |                                       | birthday.   |  |  |
| 02   | Per Diem – Special Addon              | With DFCS Director/designee's approval, a special add-on per diem \$.50 to \$1.75 for a child whose care demands additional time and skills of the foster parent.   |  |  |

# UAS Code 579 (continued)

| CODE | DESCRIPTION      | SPECIFIC SERVICE REQUIREMENTS   |
|------|------------------|---|
| 04   | Initial Clothing | May be purchased during the first 6 months of a child's initial placement in care according to established amounts.         |
|      |                  | Effective July 2016 - \$311 for birth through age 12 and \$415 for youth age 13 and over                                    |
|      |                  | Effective July 2014 - \$306 for birth through age 12 and \$409 for youth age 13 and over                                    |
|      |                  | July 2013 - \$206 for birth through age 12 and \$309 for youth age 13 and over.   |
|      |                  | Prior to July 2013 - \$200 for birth through age 12 and \$300 for youth age 13 and over.                                    |
|      |                  | May be a one-time expenditure or spent in increments.  Exceptions granted via written waiver by County Director or Designee |
| 05   | Annual Clothing  | May be paid as a state reimbursable item for any child in FFC (regular or relative)   |
|      |                  | May be a one-time expenditure or spent in incremental amounts during a fiscal year  |
|      |                  | Cannot be claimed during the calendar year that the child entered care  |
|      |                  | Effective July 2022 – clothing allowance is an expenditure of \$690   |
|      |                  | Effective July 2016 – clothing allowance is an expenditure of \$415   |
|      |                  | Effective July 2014 – clothing allowance is an expenditure of \$409   |
|      |                  | July 2013 - Annual clothing allowance is an expenditure of \$309  |
|      |                  | Prior to July 2013 - Annual clothing allowance is an expenditure of \$300.  |

# UAS Code 579 (continued)

| CODE | DESCRIPTION   | SPECIFIC SERVICE REQUIREMENTS  |  |
|------|---|--|--|
| 10c  | Interstate Travel                                     | ICPC authorized travel expenses for the child only with an Interstate Travel Waiver.   |  |
| 10d  | Burial  | Maximum funds used for burial expense - \$5,000 (unless the County Director/ Designee grants a waiver to exceed the state's maximum amount.  |  |
| 17   | Supplemental Supervision – Less than 24 hours per day | <ul> <li>Usage is limited to certain circumstances. Refer to page 9 of the Foster Care Overview Policy on the Field Fiscal Services Website.</li> <li>Childcare for a child placed in a regular or relative home whose foster parents work outside the home</li> <li>Childcare when the foster parent attends foster parent</li> <li>A registration fee for childcare may also be included here</li> </ul> |  |
| 99   | Written Waiver Item                                   | <ul> <li>Additional per diem above rate in 01 and 02 which has been approved via State Office Written Waiver</li> <li>Other expenditures authorized by a waiver such as non-ICPC authorized travel to place or return a child</li> <li>Some waivers require state office approval</li> </ul>   |  |

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

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

All payments can be made in SMILE.

#### **REFERENCES:**

**PROGRAM PURPOSE** – To support efforts to recruit, train, retain and provide support services for foster, adoptive and Kinship caregivers. These funds include paying qualified contractors to facilitate State Approved Pre-Service Training and completing foster, adoptive and kinship care home evaluations.

**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 Kinship caregivers.

**Entitlement Code E1 through E4** - Count the number of Evaluations completed. In the description line 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 Kinship Care 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 the State Approved Pre-Service Training (NTDC-National Training and Development Curriculum, effective 7/1/24 IMPACT training is obsolete).

**Entitlement Code 67b** - For individual session, count the unduplicated number of foster parents who complete the State Approved Pre-Service training (NTDC-National Training and Development Curriculum, effective 7/1/24 IMPACT training is obsolete). Approval from the Resource Development Lead is needed to conduct one-on-one trainings with these funds.

Entitlement Code 67c and 67d – Reported client is the foster/adoptive/ICPC parent.

**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 –**

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, Kinship, or fictive kin) to defray costs associated with initial placement of child(ren) into a foster or Kinship 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 (i.e., 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.

# <u>Entitlement Code E1, E2 (Foster Home Evaluations</u> - Name of Family (first and last name) and the date of the evaluation

Up to \$800.00-----per completed Regular Foster Home or ICPC Home Evaluation submitted

Partial rates are negotiated based on amount of work completed. Partial rates are not to exceed \$800 for a completed evaluation.

# **Entitlement Code E3, E4 (Adoptive Home Evaluations - Name of Family (first and last name)** and the date of the evaluation

Up to \$800.00-----per completed Regular Adoptive Home or Adoptive Legal Risk home evaluation submitted.

Partial rates are negotiated based on amount of work completed. Partial rates are not to exceed \$800 for a partial evaluation.

<u>Entitlement Code 29a: Family Evaluation for Kinship Care Adoption - Name of Family (first and last name) and the date of the evaluation</u>

\$350-----per completed Family Evaluation for Kinship Care Adoption Submitted

#### Entitlement code 67 –

STATE APPROVED PRE-SERVICE TRAINING (NTDC-National Training and Development Curriculum, effective 7/1/24 IMPACT training is obsolete) – Name of Provider facilitating the training, and the dates of the training

- 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

\$950.00 ------GROUP SETTING (67a) for facilitating the complete State Approved Pre-Service training (NTDC-National Training and Development Curriculum, effective 7/1/24 IMPACT training is obsolete). 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 (67b) for facilitating the complete State Approved Pre-Service Training (NTDC-National Training and Development Curriculum, effective 7/1/24 IMPACT training is obsolete) for one person or one 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 68**

Registration and Lodging may be paid in advance.

Annual Adoptive and Foster Parent Association of Georgia Conference (AFPAG) – Registration, travel, lodging and meal costs associated with attendance

#### OR

Continued Parent Development Trainings (to include AFPAG mini-conferences and foster parent summits)- Registration, travel, lodging, 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 summit 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.

Continued Parent Development Trainings, the following steps need to be adhered to:

- 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.

#### **Entitlement Code 84**

**Recruitment and Retention** - Services and activities designed to promote the development of new foster homes such as State Approved Pre-Service 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. 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.

**Retention Funding Incentives**-Services and activities designed to promote the retention of existing foster, adoptive and kinship caregivers such as focus groups, guest speakers/keynote and/or to facilitate a training. Focus group participation is a flat fee of \$100, speaker's fee (conference keynote, etc.) should not exceed \$250 and payment to conduct regional trainings should not exceed \$50.Other services and activities should be approved by Caregiver Recruitment and Retention Director in accordance with the above.

NOTE: Purchase of gift cards are prohibited.

| DESCRIPTION                   | CODE | SPECIFIC SERVICE REQUIREMENTS   |
|-------------------------------|------|---|
| Caregiver<br>Support Services | 06   | These are emergency payments. Use of an ADPOR is acceptable if paying without an invoice. Receipts will need to be attached.  |
|                               |      | This is designed to be an emergency service and <b>NOT</b> 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, Kinship, or fictive kin) to defray costs associated with initial placement of child(ren) into a foster or Kinship Care 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.  |

## 109.593 **UAS Code – 593 (cont.)**

| DESCRIPTION                  | CODE | SPECIFIC SERVICE REQUIREMENTS   |
|------------------------------|------|---|
| <b>Foster Home</b>           |      | This is a contracted service. A PO will be  |
| <b>Evaluations Completed</b> | E1   | needed  |
|                              |      | <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 up to \$800 per Foster Home Evaluation.</li> <li>Evaluations must be completed per Child Welfare Policy Chapter 14</li> </ul>   |
| Partial Completed            |      | This is a contracted service. A PO will be  |
| Foster                       | E2   | needed  |
| Homes<br>Evaluations         |      | <ul> <li>Partial or incomplete assessments rates are<br/>negotiated based upon the amount of work<br/>completed</li> </ul>  |
|                              |      | <ul> <li>At minimum, contractors must provide documentation collected, written summations, any contacts-including preliminary assessments</li> <li>Partial Rates are not to exceed \$800 cost of a completed Foster Home Evaluation</li> </ul>  |
| Adoptive and Adoptive        | E3   | This is a contracted service. A PO will be  |
| Legal Risk Home              |      | needed.   |
| Evaluations                  |      | <ul> <li>Completed and accepted with no further edits needed on the Regular Adoptive Home or Adopt Legal Risk Home evaluation within 6 weeks.</li> <li>Rate includes cost for transportation and mileage.</li> <li>Contractors are paid up to \$800 per Adoptive Home or Adoptive Legal Risk Home Evaluation.</li> <li>Evaluations must be completed per Child Welfare Policy Chapter 14</li> </ul> |

## 109.593 **UAS Code – 593 (cont.)**

| DESCRIPTION  | CODE | SPECIFIC SERVICE REQUIREMENTS  |
|--|------|--|
| Partial Completed  |      | This is a contracted service. A PO will be   |
| Adoptive and Adoptive  | E4   | needed   |
| Legal Risk Homes<br>Evaluations  |      | Partial or incomplete assessments rates are<br>negotiated based upon the amount of work<br>completed   |
|  |      | At minimum, contractors must provide<br>documentation collected, written<br>summations, any contacts-including<br>preliminary assessments  |
|  |      | Partial Rates are not to exceed \$800 cost of a completed Adoptive Home or Adoptive Legal Risk Home Evaluation   |
| Family Evaluation for Kinship Care   | 29a  | This is a contracted service. A PO will be needed  |
| Adoptions  |      | <ul> <li>Completed and accepted with no further edits needed a Family Evaluation for Kinship Care Adoption within 30 days of referral from DFCS</li> <li>Rate includes cost for transportation and mileage</li> <li>Contractors paid \$350 per Family Evaluation Kinship Care Adoption Packet</li> <li>Evaluation must be completed per Child Welfare Policy Chapter 14</li> </ul> |
| Group STATE APPROVED PRE- SERVICE TRAINING (NTDC-National Training and Development Curriculum, effective 7/1/24 IMPACT training is obsolete) | 67a  | This is a contracted service. A PO will be needed State Approved Pre-Service Training Payment - \$950.00   |
| INDIVIDUAL (1 to 1) STATE APPROVED PRE-SERVICE TRAINING (NTDC-National Training and Development  | 67b  | This is a contracted service. A PO will be needed  • Must be pre-approved by Resource Development Lead   |
| Curriculum, effective 7/1/24 IMPACT training is obsolete)  |      | State Approved Pre-Service Training Payment - \$500.00   |

| DESCRIPTION             | CODE | SPECIFIC SERVICE REQUIREMENTS                            |
|-------------------------|------|--|
| <b>Continued Parent</b> | 68   | CPD and AFPAG Trainings expenditures are                 |
| Development             |      | reimbursements to the foster parent.                     |
| (CPD) and               |      |  |
| <b>AFPAG Trainings</b>  |      | Payments for registration and lodging may be paid        |
|                         |      | in Advance.  |
|                         |      |  |
| CPD –Registration       | 68a  | Although Registration may be paid in Advance, it will    |
| _                       |      | still need to be reported by foster parent when the 5357 |
|                         |      | form is submitted.                                       |
|                         |      |  |
|                         |      | Note: Caregivers are required to attach all receipts for |
|                         |      | registration whether paid in advance or not, when        |
|                         |      | submitting Form 5357 for travel reimbursements.          |
| AFPAG -                 | 68c  | Although Registration may be paid in Advance, it will    |
| registration            |      | still need to be reported by foster parent when the 5357 |
|                         |      | form is submitted.                                       |
|                         |      |  |
|                         |      | Note: Caregivers are required to attach all receipts for |
|                         |      | registration whether paid in advance or not, when        |
|                         |      | submitting Form 5357 for travel reimbursements.          |
| CPD – Lodging           | 68d  | • Lodging (may be paid in advance) should follow         |
|                         |      | state reimbursement guidelines                           |
| CPD – Mileage           | 68e  | Mileage should follow state reimbursement                |
|                         |      | guidelines   |
| CPD - Meals             | 68f  | • Meals should follow state reimbursement                |
|                         |      | guidelines   |
| AFPAG – Lodging         | 68g  | • Lodging (may be paid in advance) should follow         |
|                         |      | state reimbursement guidelines                           |
| AFPAG – Mileage         | 68h  | Mileage should follow state reimbursement                |
|                         |      | guidelines   |
| AFPAG - Meals           | 68i  | Meals should follow state reimbursement                  |
|                         |      | guidelines   |
|                         | 1    |  |

| DESCRIPTION        | CODE | SPECIFIC SERVICE REQUIREMENTS   |
|--------------------|------|---|
| Recruitment and 84 |      | Foster Parent promotion, recruitment and retention  |
| Retention          |      | activities could include, but are not limited to:   |
|                    |      | (Maximum of \$4000 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 are required to process payment. |
|                    |      | Payments are to be made to the provider   |
|                    |      | PO is required  |
|                    | 84a  | \$500 - Booth Rental/Registration Fees  |
|                    | 84b  | \$500 – Printing (photos, signs, or paper items such as   |
|                    |      | flyers, inserts or posters) per campaign or event   |
|                    | 84c  | \$500 - Event Decoration and Supplies   |
|                    | 84d  | \$4000 – Foster Parent Recruitment Event Site Rental  |
|                    | 84j  | Retention Funding Incentives. See notes on page 79 for  |
|                    |      | spending limits.  |