	<b>GEORGIA DIVISION OF FAMILY AND CHILDREN SERVICES</b>			
	<b>CHILD WELFARE POLICY MANUAL</b>			
	<b>Chapter:</b>	(9) Eligibility	<b>Effective Date:</b>	October 2021
	<b>Policy Title:</b>	Foster Care Maintenance Payments		
<b>Policy Number:</b>	9.1	<b>Previous Policy #:</b>	N/A	

**CODES/REFERENCES**

Title IV-E of the Social Security Act Sections 406(a); 422(b)(8); 471(a)(1), 471(a)(15); 472 (j)(1); 475(4)(A) & (B) and (5)  
 Title 45 Code of Federal Regulations (CFR) Parts 1355 and 1356  
 The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 aka  
 The Welfare Reform Act of 1996  
 Family First Prevention Services Act (P.L. 115-123)

**REQUIREMENTS**

The Division of Family and Children Services (DFCS) shall:

1. *Provide foster care maintenance payments for each child who meets section 406(a) of the Social Security Act (as in effect 7/16/96), is removed from the home of a specified relative as outlined in policy 9.6 Eligibility: Aid to Families with Dependent Children (AFDC) Relatedness Criteria), and is placed in foster care if:*
  - a. *The removal and foster care placement met and continues to meet the following requirements:*
    - i. *The removal and foster care placement are in accordance with a voluntary placement agreement (VPA) entered into by a parent or legal guardian of the child who is the specified relative; or*
    - ii. *A judicial determination to the effect that continuation of residence in the home from which removed would be contrary to the welfare or that the placement would be in the best interest of the child and that reasonable efforts were made (see policy 9.5 Eligibility: Reasonable Efforts). The contrary to the welfare determination will be made in the first ruling that sanctions (even temporarily) the removal of the child from the home. If the determination regarding contrary to the welfare is not made in the first court ruling pertaining to removal from the home, the child will not be eligible for Title IV-E foster care maintenance payments for the duration of that stay in foster care; and*
    - iii. *The child is placed in one of the following:*
      1. *A foster family home of an individual or family, whether the payments are made to such individual or to a public or private child placement or child care agency (see policy 10.4 Foster Care: Selecting a Placement Resource for definition of a foster family home).*
      2. *A childcare institution (CCI) whether the payments are made to such institution or to a public or private child placement or childcare agency (see policy 10.4 Foster Care: Selecting a Placement Resource for the definition of a CCI). Such payments include only those items listed in the term "foster care maintenance payments" (defined in section 475(4) of the*

Act). Title IV-E agencies may claim for title IV-E foster care maintenance payments paid on behalf of an eligible child placed in a CCI for up to two weeks. Title IV-E agencies may continue to claim administrative costs for the duration of the period in the CCI regardless of whether the CCI meets the criteria of a qualified residential treatment program (QTRP). After two weeks (14 days), title IV-E foster care maintenance payments for a child placed in a CCI are only available if that CCI is:

a. A QRTP, as defined in section 472(k)(4) of the Act (see policy 16.0 Room Board Watchful Oversight: Introduction to Room Board Watchful Oversight for the QRTP program description);

**NOTE:** Georgia has not implemented QRTP and will only claim title IV-E foster care maintenance payments for the initial two weeks (14 days) that an eligible child is placed in a CCI, unless the CCI is an allowable placement category under federal law.

b. A setting specializing in providing prenatal, post-partum, or parenting supports for youth in foster care (see policy 16.1 Room Board Watchful Oversight: Program Designation Types for Maternity Homes and Parenting Support Programs);

c. A supervised setting in which the youth is living independently, in the case of a youth who has attained 18 years of age (see policy 16.0 Room Board Watchful Oversight: Introduction to Room Board Watchful Oversight for the Independent Living Program description);

**NOTE:** Georgia uses supervised independent living settings for youth who has attained the age of 18, however does not currently claim title IV-E foster care maintenance payments for these settings.

d. A setting providing high-quality residential care and supportive services to children and youth who have been found to be, or are at risk of becoming, sex trafficking victims (see policy 16.1 Room Board Watchful Oversight: Program Designation Types for Maximum Watchful Oversight); or

3. With a parent residing in a licensed residential family-based treatment facility for substance abuse, but only to the extent permitted under 472(j) of the Act which include:

a. Eligibility for payments for no more than 12 months;

b. The recommendation for the placement is specified in the child's case plan prior to the placement;

c. The treatment facility provides, as part of the treatment for substance abuse, parenting skills training, parent education, and individual and family counseling; and

d. The substance abuse treatment, parenting skills training, parent education, and individual and family counseling are provided under an organizational structure and treatment framework that involves understanding, recognizing and responding to the effects of all types of traumas and in accordance with recognized principles of a trauma informed approach and trauma-specific interventions to address the consequences of trauma and facilitate healing; or

**NOTE:** Georgia does not currently claim title IV-E foster care maintenance payments for a child placed with a parent in a licensed residential family-based treatment facility for substance abuse.

- iv. The child's placement and care are the responsibility of:
  1. The state agency administering the approved state plan;
  2. Any other public agency with which the state agency administering or supervising the administration of the approved Title IV-E plan has made an agreement with which is still in effect; and
  3. A tribe that has an approved plan; and
- b. The child, while in the home, would have met the Aid to Families with Dependent Children (AFDC) program eligibility requirement. The child:
  - i. Received AFDC, in the home of the specified relative in or for the month in which either a VPA was entered into or court proceedings leading to the required judicial determination were initiated; or
  - ii. Would have received AFDC, in the home, in or for the month in which either a voluntary placement agreement was entered into or court proceedings leading to the required judicial determination were initiated if application for such aid were made; or
  - iii. Had been living with a specified relative within six months prior to the month in which a VPA proceedings leading to the required judicial determination were initiated, and would have received AFDC in or for such month if the child had been living in the home with such relative and an application had been made for AFDC; and
  - iv. Had resources that had a combined value of not more than \$10,000 or
  - v. Is not required to meet AFDC requirements in 472(a)(3) of the Act (as outlined above under AFDC program eligibility requirements) because the child is placed with a parent residing in a licensed residential family-based substance abuse treatment facility.
2. Deem any child with respect to whom foster care maintenance payments are paid a dependent child as defined in section 406 of the Social Security Act (as in effect 7/16/1996) and a recipient of AFDC under Part A of this Title (as in effect 7/16/1996), for the purposes of Title XIX and Title XX. Title XIX and Title XX services will be available to such child in the state in which the child resides.

**NOTE:** Georgia has opted out of kinship guardianship assistance program.
3. Make foster care maintenance payments for the voluntary placement of a child out of the home by or with the participation of the state agency only if:
  - a. The state has fulfilled all of the requirements of section 472 of the Social Security Act; sections 422(b)(8) and 475(5) of the Social Security Act; and 45 CFR 1356.21 (e), (f), (g), (h) and (i) of the Social Security Act; and
  - b. The assistance of the state/tribal agency has been requested by the child's parent(s) or legal guardian(s);
  - c. There is a written voluntary placement agreement, binding all parties to the agreement, which specifies at a minimum the legal status of the child and the rights and obligations of the parents or guardians, the child and the state/tribal agency while the child is in placement (see policy 10.2 Foster Care: Placement of a Child via Voluntary Placement Agreement).
4. Claim federal financial participation only for voluntary foster care maintenance expenditures made within the first 180 days of the child's placement in foster care unless

*there has been a judicial determination by a court of competent jurisdiction, within the first 180 days of the date of such placement, to the effect that the continued voluntary placement is in the best interests of the child (see policy 10.2 Foster Care: Placement of a Child via Voluntary Placement Agreement).*

5. *Provide foster care maintenance payments for a child in foster care to cover the cost of (and the cost of providing) food, clothing, shelter, daily supervision, school supplies, a child's personal incidentals, liability insurance with respect to the child, and reasonable travel to the child's home for visitation with family, or other caretakers and reasonable travel for the child to remain in the school in which the child is enrolled at the time of placement. Local travel associated with providing these items is also an allowable expense. In the case of child care institutions, such term must include the reasonable costs of administration and operation of such institutions as are necessarily required to provide the items described.*
6. *Make foster care maintenance payments on behalf of an eligible child who is:*
  - a. *In the foster family home of an individual or family, whether the payments are made to that individual or to a public or private child placement or child care agency; or*
  - b. *In a childcare institution, whether the payments are made to such institution or to a public or private child placement or childcare agency. Such payments are limited to include only those items listed above in the term "foster care maintenance payments" (defined in section 475(4) of the Act).*
7. *Ensure that foster care maintenance payments made on behalf of a child placed in a foster family home or child care institution, who is the parent of a son or daughter in the same home or institution, must include amounts which are necessary to cover the costs incurred on behalf of the child's son or daughter. Such costs are limited to funds expended on the items described in the definition of foster care maintenance payments (see policy 9.10 Eligibility: Special Situations (Trial Home Visits, Runaway, Parenting Youth in Foster Care and Out-of-State IV-E Foster Care) and 10.21 Foster Care: Expectant or Parenting Youth in Foster Care).*
8. *Claim administrative costs on all cases for those children who are IV-E reimbursable. from claiming administrative costs, at this time, associated with an otherwise eligible child who is an unallowable facility or an unapproved relative home and who is removed in accordance with Section 472 (a) from the home of a relative specified in section 406(a)(as in effect on July 16, 1996) shall be considered only for expenditures:*
  - a. *For a period of not more than the lesser of 12 months or the average length of time it takes to license or approve a home as a foster home, in which the child is in the home of a relative and an application is pending for licensing or approval of the home as a foster family home; or*
  - b. *For a period of not more than 1 calendar month when a child moves from a facility not eligible for payments under this part into a foster family home or child care institution licensed or approved by the state/tribe.*
9. *Refrain from claiming administrative costs, at this time, associated with a child who is potentially eligible for benefits under the approved Title IV-E plan and at imminent risk of removal from the home, and shall be considered for expenditures only if:*
  - a. *Reasonable efforts are being made in accordance with section 471(a)(15) to prevent the need for, or if necessary to pursue, removal of the child from the home; and*
  - b. *The state/tribal agency has made, not less often than every 6 months, a determination (or redetermination) as to whether the child remains at imminent risk of removal from the home.*

## PROCEDURES

N/A

## PRACTICE GUIDANCE

### **Title IV-E Reimbursements**

Title IV-E provides reimbursement for costs associated with the care and maintenance of children in foster care placement and for administrative cost related to the state's Foster Care Program. The IV-E Foster Care Program authorized by the Social Security Act, provides funds to states for the following activities:

1. Maintenance of children in foster care placements.
2. Reimbursement of administrative and case management costs incurred while staff work with the child, the child's family and the care provider.
3. Reimbursement for training agency staff and providers who work with the child or who administer the foster care program.

Children classified as Title IV-E eligible must have some relationship to the Aid to Families with Dependent Children (AFDC) program in addition to meeting other criteria. Title IV-E is unrelated to Temporary Assistance to Needy Families (TANF). In the Welfare Reform Act of 1996, Congress mandated that the state AFDC policy in effect on July 16, 1996 be used for determining the AFDC relationship for IV-E eligibility purposes.

### **Federal Financial Participation (FFP)**

FFP is the portion paid by the Federal government to states for their share of expenditures for providing medical assistance services, administering the medical assistance program and certain other human services programs.

### **Aid to Families with Dependent Children (AFDC)**


AFDC was a program administered and funded by federal and state governments to provide cash assistance to needy families. It was replaced by the Temporary Assistance to Needy Families (TANF) grant in August 1996.

### **Child Care Institution**

States may claim title IV-E foster care maintenance payments for children placed in a CCI for up to two weeks (14 days). After 14 days, the CCI must meet the requirements for a QRTP to claim foster care maintenance payments, unless the CCI placement is one of the allowable categories under title IV-E. Title IV-E agencies may claim 14 days of title IV-E foster care maintenance payments each time an eligible child is placed in a CCI regardless of whether the child has had previous CCI placements during their current foster care episode.

## FORMS AND TOOLS

N/A

	<b>GEORGIA DIVISION OF FAMILY AND CHILDREN SERVICES CHILD WELFARE POLICY MANUAL</b>			
	<b>Chapter:</b>	(9) Eligibility	<b>Effective Date:</b>	December 2018
	<b>Policy Title:</b>	Applying for Medical Services at Initial Entry and Exit		
	<b>Policy Number:</b>	9.2	<b>Previous Policy #:</b>	N/A

**CODES/REFERENCES**

N/A

**REQUIREMENTS**

The Division of Family and Children Services (DFCS) shall:

1. Utilize funds provided by the medical assistance program to pay for medical services for eligible recipients to conserve state funds for children ineligible for medical assistance.
2. Screen each child entering foster care in the Georgia Medicaid Management Information System (GAMMIS) within one business day of a child entering foster care.
3. Document all known information (i.e. demographic, removal, financial, etc.) on the required pages in Georgia SHINES within 24 hours of a child's entry into foster care to initiate the Medicaid Application.
4. Sign, save and submit the Medicaid Application in Georgia SHINES.
5. Notify Amerigroup, the Revenue Maximization (RevMax) Unit, and the Georgia Department of Community Health (DCH) via the Amerigroup GA Families 360° DFCS Referral Form within 24 hours of a child entering or exiting foster care.  
**NOTE:** Completion of the Amerigroup GA Families 360° DFCS Referral Form does not constitute an application for Medicaid (see Practice Guidance: Amerigroup GA Families 360° DFCS Referral Form).
6. Notify RevMax via the Notification of Change (NOC) in Georgia SHINES and include the child's current legal status and placement information to allow RevMax to transition the youth to another Medicaid Class of Assistance when:
  - a. A child in foster care turns 18.
  - b. A child exits foster care.
7. Inform youth 18 and older exiting foster care they may apply for medical assistance at any local DFCS office, if their medical assistance case closes. Instruct youth to notify the county office where they apply of their former foster care status.

**PROCEDURES**

The Social Services Case Manager (SSCM) will:

1. Gather as much medical history on the child as possible and document in Georgia SHINES, upon the child's entry into foster care.
2. Conduct the following screenings:
  - a. Each child in GAMMIS within 24 hours of entering care to determine if the child already has a Medicaid card.

- b. All available resources to determine if there is any historical or current information about the family.
3. Document all known information in the following pages in Georgia SHINES within 24 hours of a child's entry into foster care to initiate an application for medical assistance:
  - a. Person Detail
  - b. Citizenship and Identity
  - c. Custody
  - d. Legal Status
  - e. Placement List
  - f. Income and Expenditures Documentation Checklist
  - g. Application and Background

**NOTE:** Completion of the required pages in Georgia SHINES will allow data to be transmitted from Georgia SHINES to Georgia Gateway and pre-populate to the Medicaid application. The Medicaid Application must be completed regardless of the child's potential eligibility as some of the information on these pages will be used to process the IV-E application.

4. Sign, save and submit the Medicaid Application in Georgia SHINES.

**NOTE:** A RevMax Specialist (RMS) will be assigned as a secondary worker as soon as the Medicaid Application is saved and submitted in SHINES.
5. Notify Amerigroup that a child has entered foster care within 24 hours of the date of removal via the Amerigroup GA Families 360° DFCS Referral Form. Follow all directions at the top of the form regarding submission to Amerigroup, RevMax, and the Georgia Department of Community Health (DCH).
6. Submit the Amerigroup GA Families 360° DFCS Referral Form for the following case actions:
  - a. Removal of a child.
  - b. Changes in placement.
  - c. Child exits DFCS custody.
  - d. Updates to existing information.
  - e. Changes in DFCS SSCM.
  - f. Notification of the Comprehensive Child and Family Assessment provider's name and contact information.
7. Document the following in the narrative of the Contact Detail in Georgia SHINES within 72 hours:
  - a. All submissions of the Amerigroup GA Families 360° DFCS Referral Form.
  - b. The Amerigroup contact, including the staff member's name, telephone number and date and time of initial contact.
8. Verify that the Amerigroup Care Coordination Team (CCT) has scheduled each child's initial Health Check and trauma assessment, if applicable (see policy 10.11 Foster Care: Medical, Dental and Developmental Needs).
9. Report any issues/concerns with Amerigroup to the Wellness Programming Assessment and Consultation (WPAC) Unit via email at [healthmatters@dhs.ga.gov](mailto:healthmatters@dhs.ga.gov). Include the following:
  - a. The term "Amerigroup Issue" and the county name in the subject line.
  - b. The Amerigroup staff member who was contacted, their telephone number, and the date and time of the contact.
  - c. A summary of the issue/concern.

10. Notify Amerigroup, RevMax, and DCH of a child exiting DFCS custody via the Amerigroup GA Families 360° DFCS Referral Form within 24 hours of the exit.
11. Notify RevMax via an NOC in Georgia SHINES of any child exiting care and/or turning 18, within three business days. Update the following in Georgia SHINES:
  - a. Legal Status page.
  - b. Child's placement, including an ending date and discharge reason if the child is exiting foster care.
 

**NOTE:** If a child is in a post Foster Care (PFC) stage and DFCS is paying a subsidy, enter the new placement in the PFC stage.
12. Inform youth 18 and older exiting foster care of the following and document the discussion in the narrative of the Contact Detail in Georgia SHINES:
  - a. Notices to renew their Medicaid will be sent to their last known address in Gateway and they must renew their Medicaid annually by verifying Georgia residency.
  - b. Youth may apply for medical assistance at any local DFCS office, if their medical assistance case closes, and must notify the county office where they apply of their former foster care status.

The RMS will:

1. Review the submitted Medicaid Application.
2. Contact the SSCM by telephone or email if there are any questions with the application.
3. Request the SSCM sign, as the child's authorized representative, the Health Insurance Questionnaire (Form DMA-285), regarding third party resources available to the child.
4. Screen for the Enterprise Master Person Index (EMPI) number to prevent duplication of existing cases and/or merge duplicate identification (ID) numbers.
5. Verify whether there is an existing case for Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), and/or medical assistance that includes each applicant child as a member.
6. Determine each child's eligibility for medical assistance, change living arrangement codes and remove each child from existing active/pending Georgia Gateway cases, within one business day of application.
7. Close the child out of an existing Georgia Gateway family case for the ongoing month and register a new medical assistance case coding the child's living arrangement, for a child active in Georgia Gateway.
8. Make the appropriate Class of Assistance (COA) determination and complete the Medical Assistance Application via Georgia Gateway and Georgia SHINES, for a child not active on Georgia Gateway.
9. Complete the funding determination through Georgia SHINES when all required criteria have been met (see policy 9.3 Eligibility: Applying for Initial Funding).
10. Communicate the initial decision for medical assistance and IV-E via the Eligibility Summary page in Georgia SHINES.
11. Update the residential and mailing address, determine if a family has tried to add the child to a medical assistance case and update the class of assistance, for a child exiting foster care.
12. Complete a Continuing Medicaid Determination (CMD) for Child Under Age 19, Chafee, or Former Foster Care Medicaid, upon receiving updated placement information at discharge or exit from foster care for a child of any age.



- a. The caregiver for children under age 18 may add the child to an existing Family Medicaid case or be added to the new Family Medicaid case.
- b. Foster youth over 18 will be CMD to Child Under Age 19, Chafee, or Former Foster Care Medicaid. These youth must renew their Medicaid annually by verifying Georgia residency.

**NOTE:** The child's Medical Assistance case should not be closed when the child is exiting foster care.

The Social Services Supervisor (SSS) will:

1. Review the case record in Georgia SHINES to ensure documentation of the following:
  - a. Medical history and insurance information.
  - b. Signature, saving and submission of The Medical Assistance Application.
  - c. Notification of the child's entry into or exit from foster care via the Amerigroup GA Families 360° DFCS Referral Form.

**NOTE:** The NOC in Georgia SHINES must be submitted to notify RevMax of any foster care exits.

2. Staff any issues or concerns regarding the child's Medical Assistance case or medical care with the SSCM (see policy 19.6 Case Management: Supervisor Staffing).

## **PRACTICE GUIDANCE**

### **Eligibility Determinations**

All funding, reimbursability and medical assistance eligibility determinations for foster care or adoption assistance are the responsibility of the RMS based on information submitted by a DFCS SSCM via Georgia SHINES. Coordination between SSCMs and the RMS is critical to the funding determination and medical assistance coverage for children in out-of-home placement.

If a child in DFCS custody is covered by health insurance other than Medicaid, the name of the insurance company, policy number, group number and name of insured are important in processing the application for medical assistance. At the time that a claim is filed, such coverage will be primary with Medicaid being the secondary insurance provider.

Children who are in an out-of-home placement may be eligible for medical assistance coverage under several Classes of Assistance (COA). The RMS determines the COA and processes the medical assistance determination in Georgia Gateway. The COA aligns with the funding determination (see the Medicaid Manual Chapter 2100: Classes of Assistance for the eligibility requirements of each type of medical assistance).

### **Medicaid**

The Medicaid program is a joint federal/state program that is authorized under the Social Security Act. Funds are available to states for providing medical services to eligible recipients and for reimbursing activities that support the administration of the Medicaid program. DFCS accesses Medicaid funds through the Department of Community Health (DCH) and the Division of Medical Assistance (DMA) for case management and services for children in out-of-home care. Children who are IV-E eligible and/or SSI eligible are categorically eligible for Medicaid. Although most children in foster care are eligible for Medicaid, children whose foster

care is paid by state funds may not be eligible for Medicaid. Consequently, the medical assistance COA for which these children qualify must be determined. Each COA has resource limits and certain deductibles (see the Medicaid Manual Chapter 2100: Classes of Assistance for the eligibility requirements of each type of medical assistance).

### **Supplemental Security Income (SSI):**

SSI is a federal payment program for disabled individuals administered by the Social Security Administration. If a child in DFCS custody receives SSI, the Social Security Administration processes the child's monthly Medicaid card.

### **PeachCare for Kids®**

PeachCare for Kids® provides comprehensive health care for children who do not qualify for medical assistance and do not have any other form of insurance. The child must meet citizenship/alienage requirements. PeachCare for Kids® is available to children from birth through the last day of the month of a child's 19th birthday. PeachCare for Kids® will waive the monthly premium for children in DFCS custody.

### **GAMMIS**

GAMMIS consolidates all required functions for Medicaid, PeachCare for Kids® and the public employee health benefits into a single computer system. The state agency which has oversight of these functions is the Department of Community Health (DCH). When screening in GAMMIS, assistance from the appropriate Office of Financial Independence (OFI) supervisor or case manager will be required.

### **Georgia Families 360°**

On March 03, 2014, DFCS transitioned from a standard fee-for-service Medicaid program to a statewide Medicaid Care Management Organization (CMO) through Amerigroup Georgia Managed Care Company. The transition impacted children in DFCS custody and children receiving AA as they became members of a new program called Georgia Families 360° which is separate from Georgia Families, the general Medicaid program administered by the Georgia Department of Community Health (DCH). Georgia Families 360° is designed to provide coordinated care across multiple services and focus on the physical, dental, and behavioral needs of member children. The program is designed to ensure each member has a medical and dental home, access to preventive care screenings, and timely assessments. It also seeks to ensure medical providers adhere to clinical practice guidelines and evidence-based medicine.

Upon receipt of the Amerigroup GA Families 360° DFCS Referral Form notifying of a child's entry into foster care, Amerigroup will:

1. Ensure the child is enrolled on their roster as a member.
2. Access each child's Virtual Health Record (If available) to begin care coordination planning and developing each child's individualized care plan.
3. Assign each child to a CCT.
4. Assign each child a primary care physician (PCP) and primary care dentist (PCD).
5. Contact the primary care provider assigned to the child to obtain the most recent information available and required historical data.
6. Provide ID cards to members via a secure portal on the Amerigroup website.

7. Coordinate medical assessments and development of an individualized care plan for each child.

### **Amerigroup Care Coordination Teams (CCT) and Care Managers**


Each Georgia Families 360° member is assigned to a regional Care Coordination Team with a specified Care Manager. The CCT members are Masters level staff, the majority of whom hold a professional license to practice in their respective field. The CCT completes a Health Risk Screening (HRS) on youth in care to identify medical and/or behavioral needs. The CCT is responsible for coordinating the health components of the Comprehensive Child and Family Assessment (CCFA), including the initial physical assessment, dental screening, and trauma assessment. Care Managers are the primary partner for identifying and making referrals for needed services. They ensure each youth has an individualized care plan that addresses both physical and behavioral health needs. They work with community agencies to ensure appropriate services are provided.

### **Amerigroup GA Families 360° DFCS Referral Form**

DFCS communicates with Amerigroup, RevMax, and DCH utilizing an electronic notification form (E-Form) entitled Amerigroup GA Families 360° DFCS Referral Form. It is the primary means for communicating information about a member in Amerigroup. The form must be completed and sent to Amerigroup, RevMax, and DCH within 24 hours of a youth entering foster care. It should be thoroughly completed to include demographic information, medical information, placement information, the identified CCFA provider and other referrals (e.g., Babies Can't Wait). The form is also used to report updates, such as placement changes, a youth exiting care, etc. If there is information not available at the time of the initial referral to Amerigroup, submit the form as an update as soon as the information is obtained. Accurate and timely communication with Amerigroup and RevMax is vital to the Medicaid eligibility determination and the assignment of an Amerigroup CCTs and service providers. Important decisions regarding the assignment of primary care providers and referrals are made based upon the information submitted on the form.

<b>FORMS AND TOOLS</b>
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Amerigroup GA Families 360° DFCS Referral Form  
PeachCare for Kids

	<b>GEORGIA DIVISION OF FAMILY AND CHILDREN SERVICES CHILD WELFARE POLICY MANUAL</b>			
	<b>Chapter:</b>	(9) Eligibility	<b>Effective Date:</b>	December 2018
	<b>Policy Title:</b>	Applying for Initial Funding		
	<b>Policy Number:</b>	9.3	<b>Previous Policy #:</b>	N/A

**CODES/REFERENCES**

Title IV-E of the Social Security Act Section 472

**REQUIREMENTS**

The Division of Family and Children Services (DFCS) shall:

1. Submit the IV-E funding application via Georgia SHINES to the Revenue Maximization (RevMax) Unit within five business days of a child's entry into foster care.
2. Determine the funding source, including eligibility for Title IV-E, each time a child enters foster care via court order or Voluntary Placement Agreement (VPA).
3. Refer parents of children in foster care to the Division of Child Support Services (DCSS) to determine their obligation to contribute to the child's care, if any, and if medical support is available or can be obtained at a reasonable cost.

**NOTE:** The Revenue Maximization Specialist (RMS makes the referral through a Georgia SHINES interface with DCSS (see policy 9.12 Eligibility: Child Support).

**PROCEDURES**

The Social Services Case Manager (SSCM) will:

1. Complete the following pages in Georgia SHINES:
  - a. Person List
  - b. Citizenship and Identity
  - c. Placement List
  - d. Legal Status
  - e. Custody
  - f. Income and Expenditures Documentation Checklist
  - g. Application and Background
2. Submit the IV-E application via Georgia SHINES within five business days of the child entering foster care.
3. Review court orders for accuracy and appropriate court order language and upload all court orders associated with the child's removal into Georgia SHINES, if not uploaded by the Case Plan Reporting System (CPRS) (see policy 9.4 Eligibility: Removal from the Home and 9.5 Eligibility: Reasonable Efforts).
4. Document a legal action with appropriate court order language selected into Georgia SHINES, when applicable.
5. Submit an application (see <http://ssa.gov/applyfordisability/child.htm>) to the Social Security Administration (SSA) to determine a child's eligibility for Supplemental Security Income (SSI) benefits:

- a. Within five business days of obtaining verification that the child is diagnosed with a mental, physical or emotional condition which may qualify them to receive SSI.
  - b. For any child in care where a Specialized Foster Care Per Diem, Child Placing Agency (CPA) Foster Parent Per Diem Waiver or Child Caring Institution (CCI) designation of Additional Watchful Oversight (AWO) or Maximum Watchful Oversight (MWO) is being applied for or received.
 

**NOTE:** Annual application for renewal of the increased per diem/waiver rate will be denied if the SSI application process has not been completed.
6. Provide the SSA with copies of medical information, psychological assessments, educational evaluations, etc., needed to make the eligibility determination.
  7. Upload SSI approval/denial letters in External Documentation of Georgia SHINES.
  8. Enter SSI eligibility and monthly check amount in Georgia SHINES as income to the child, if the SSI application is approved.
  9. Notify RevMax of the approval of SSI via the Notification of Change (NOC) in Georgia SHINES.
  10. Notify the SSA if the per diem of a child receiving SSI will be charged to IV-E FC.
  11. Contact the Wellness Programming Assessment and Consultation (WPAC) Unit when any difficulties arise in applying for SSI or becoming a child's payee.
  12. Reapply for SSI for any child denied, within five business days of knowledge of a new or changed mental, physical or emotional condition.

The RMS will:

1. Review the application in Georgia SHINES.
2. Contact the SSCM or designated staff by telephone or email if there are any questions with the application.
3. Verify the child meets all AFDC Relatedness criteria (see policy 9.6 Eligibility: Aid to Families with Dependent Children (AFDC) Relatedness Criteria).
4. Review court orders to verify the child entered care as a result of one of the following:
  - a. A court order with a judicial determination that it is contrary to the welfare of the child to remain in the home or that placement is in the best interest of the child.
  - b. A VPA (see policy 9.4 Eligibility: Removal from the Home and policy 17.12 Legal: Voluntary Surrender of Parental Rights).
5. Verify that a reasonable efforts judicial determination was made within 60 days of the removal and includes the agency specific details of those efforts (see policy 9.5 Eligibility: Reasonable Efforts).
6. Approve the IV-E Foster Care Eligibility Summary page and document the determination details in Georgia SHINES, if the child is IV-E FC eligible.
7. Verify and validate the Georgia SHINES determination of IV-E ineligibility.
 

**NOTE:** Whenever a child is not eligible for IV-E FC, the funding source is state funds.
8. Communicate the initial decision for Medical Assistance and IV-E via the Eligibility Summary page in Georgia SHINES with documentation of the decision in the narrative of the Contact Detail.

The Social Services Supervisor (SSS) will:

1. Review the case record in Georgia SHINES to ensure:
  - a. Submission of the IV-E application.
  - b. Receipt and uploading of court orders.
  - c. Application for SSI, when applicable.

2. Staff any issues or concerns regarding the IV-E process or the application of SSI with the SSCM (see policy 19.6 Case Management: Supervisor Staffing).

## PRACTICE GUIDANCE

Funding for Georgia's Foster Care Program is available from federal and state sources including IV-E Foster Care, IV-B Foster Care, Supplemental Security Income (SSI), Medicaid and state funds. The funding determination is processed in Georgia SHINES. Whenever possible, it is advantageous for the state to maximize federal financial participation. This allows state funds to be conserved and used for other services to benefit families. Another funding source available to DFCS is child support. The parents of children in care are routinely referred to Division of Child Support Services (DCSS) and may be obligated by court order to contribute to their child's care and medical support.

The Social Services Case Manager (SSCM) needs to be familiar with funding sources and their programmatic requirements:

1. **IV-E Foster Care:** Title IV-E is a federal funding source which provides reimbursement for costs associated with the care and maintenance of children in placement and for administrative costs related to the state's Foster Care Program (e.g., case management, staff training, etc.). Children classified as IV-E eligible must have some relation to the Aid to Families with Dependent Children (AFDC) program (see policy 9.6 Eligibility: Aid to Families with Dependent Children (AFDC) Relatedness Criteria) in addition to meeting other criteria. Title IV-E is unrelated to Temporary Assistance for Needy Families (TANF).
2. **IV-B:** Title IV-B is a federal child welfare block grant that provides funds to states for foster care expenses. A child who is eligible for IV-B has been determined ineligible for IV-E Foster Care. The IV-B grant is capped. Once these limited federal funds are spent, foster care expenses are paid primarily with state funds. Any youth who has been IV-E eligible, but reaches the age of 18 and receives Extended Youth Supportive Services (EYSS), the youth is re-classified to state funded beginning the first day of the month following the month of his or her 18th birthday.
3. **Supplemental Security Income (SSI):** SSI is a federal payment program for disabled individuals administered by the Social Security Administration. Payments are made directly to the recipient from the federal government monthly. However, when a child is in DFCS custody, the county department becomes the payee for the child's SSI check. SSI payments follow the child; and therefore, are a benefit to children while in care as well as when they achieve permanency. While in care the SSI benefits help to offset the cost to care for the child. Federal policy allows for a child to be concurrently eligible for SSI and IV-E FC.

### Guidelines for Deciding IV-E vs. SSI

For a child receiving SSI, the RMS will determine if it is more advantageous for the child in foster care to continue receiving SSI benefits or have his or her costs paid from IV-E Foster Care (FC).


1. Using the child's per diem payment as the basis for making the decision:
  - a. Make the child IV-E reimbursable (charge per diem costs to IV-E foster care), if the monthly per diem payment is more than the amount of the SSI funds received by the

- child.
- b. Continue the SSI and classify the child as IV-E non-reimbursable, if the monthly per diem cost is less than the amount of SSI funds received by the child.
2. Applying programmatic reasons for making the decision, continue the SSI if:
- a. The child is expected to be in out-of-home care a short period of time.
  - b. The child is approaching emancipation because SSI benefits do not terminate at age 18 as do IV-E benefits.
  - c. The child is in the adoption process.

The child's receipt of IV-E FC per diem and its effective date must be reported by the SSCM to the SSA. Per regulation, the SSA treats IV-E per diem as "income" and reduces the child's SSI check dollar for dollar based on the IV-E per diem amount. In all likelihood, the child's SSI payment will be suspended. If the child continues to receive a reduced SSI check amount, these funds may be used for other items/needs of the child. It must not be applied to the child's IV-E per diem as IV-E costs have already been applied. If the child subsequently loses IV-E eligibility, the SSCM must notify SSA. The child's SSI may be restored since state funded payments are not counted as income.

## **FORMS AND TOOLS**

Social Security Administration (SSA)

	<b>GEORGIA DIVISION OF FAMILY AND CHILDREN SERVICES CHILD WELFARE POLICY MANUAL</b>			
	<b>Chapter:</b>	(9) Eligibility	<b>Effective Date:</b>	July 2019
	<b>Policy Title:</b>	Removal from the Home		
	<b>Policy Number:</b>	9.4	<b>Previous Policy #:</b>	N/A

**CODES/REFERENCES**

O.C.G.A. §15-11-133.1  
 O.C.G.A. §15-11-134 Required Findings Justifying Removal from the Home  
 O.C.G.A. §15-11-146 Preliminary Protective Hearing; Findings  
 Title IV-E of the Social Security Act Section 472(a)  
 Title 45 Code of Federal Regulations (CFR) Part 1356.21 (c), (d), (k) and (l)

**REQUIREMENTS**

The Division of Family and Children Services (DFCS) shall:

1. *Ensure that a child's removal from the home occurs pursuant to:*
  - a. *A voluntary placement agreement (VPA) entered into by a parent or relative which leads to a physical or constructive removal (i.e., a non-physical or constructive removal of custody) of the child from the home; or*
  - b. *A judicial order for a physical or constructive removal of the child from a parent or specified relative.*

**NOTE:** *A removal has not occurred in situations where legal custody is removed from the parent or relative and the child remains with the same relative in that home under supervision by the state/tribal agency.*
2. *Consider a child constructively removed on the date of:*
  - a. *The first judicial order removing custody, even temporarily, from the appropriate specified relative; or*
  - b. *The signing of the voluntary placement agreement by all relevant parties.*
3. *Ensure the removal and foster care placement of a child is in accordance with a judicial determination to the effect that continuation of residence in the home from which removed would be contrary to the welfare or that the placement would be in the best interest of the child and that reasonable efforts to maintain the family unit were made (see policy 9.5 Eligibility: Reasonable Efforts). The contrary to the welfare determination will be made in the first ruling that sanctions (even temporarily) the removal of the child from the home. If the determination regarding contrary to the welfare is not made in the first court ruling pertaining to removal from the home, the child will not be eligible for Title IV-E foster care maintenance payments for the duration of that stay in foster care.*
4. *Verify that the judicial determination regarding contrary to the welfare is explicitly documented and made on a case-by-case basis in the court order. If the contrary to the welfare judicial determination is not included as required in the court orders, a transcript of the court proceedings is the only other documentation accepted to verify that the required determination has been made. Neither affidavits nor nunc pro tunc orders will be accepted as verification in support of contrary to the welfare judicial determinations.*



5. *Acknowledge that court orders that reference state law to substantiate judicial determinations are not acceptable, even if the law provides that a removal must be based on a judicial determination that remaining in the home would be contrary to the welfare or that removal can only be ordered after reasonable efforts have been made.*

## PROCEDURES

The Social Services Case Manager (SSCM) will:

1. Review the first order signed by a judge which sanctions the removal of the child from the home to determine if the appropriate judicial finding of “contrary to the welfare” or “best interest of the child” is made.
2. Verify the court order includes child specific details which led to the sanctioning of the removal by the judge.
3. Document the following on the Legal Action and Outcome Detail page in Georgia SHINES:
  - a. Date Field: The date of the complaint/petition or the signature date of the VPA;
  - b. Court action date;
  - c. Action: Type of placement authority;
  - d. Hearing type/court order;
  - e. Date shelter care authorized;
  - f. Court order date.

**NOTE:** Nunc pro tunc orders must be carefully reviewed to ensure that only the judge’s signature and not the finding is dated back to the actual hearing date.
4. Upload all court orders in External Documentation in Georgia SHINES, if not uploaded by the Case Plan Reporting System (CPRS).
5. Notify the Revenue Maximization (RevMax) Unit via the Notification of Change (NOC) in Georgia SHINES of the uploaded court orders.

The Social Services Supervisor (SSS) will:

1. Review court orders for appropriate judicial determinations and language.
2. Ensure the SSCM documents removal information and uploads corresponding orders timely.

## PRACTICE GUIDANCE

### “Contrary to the Welfare” Determination

The “contrary to the welfare” determination is a long-standing protection afforded to children and their families that recognizes the severity of removing a child, even temporarily, from the home. Judicial oversight is intended to prevent state agencies from acting too quickly and removing children unnecessarily.

The first court order language criterion to establish IV-E eligibility is the judicial determination that continuation in the home is “contrary to the welfare” of the child or that placement would be “in the best interest” of the child. The contrary to the welfare determination must be in the first ruling that sanctions the removal of the child from the home or any order for temporary alternatives to foster care (see Practice Guidance in policy 17.1 Legal: The Juvenile Court Process for information on temporary alternatives to foster care). If the contrary to the welfare determination is not made in the first court ruling pertaining to removal from the home, the child will not be eligible for Title IV-E foster care maintenance payments for the duration of that stay

in foster care. The finding should be explicitly documented in the court order and based on individual circumstances/facts of the case that led the judge to conclude the finding. The order must enumerate the specific facts of the case or reference the facts contained in such documents as the complaint, court report, Affidavit of Efforts, etc.

### **Types of Removal**

When DFCS obtains custody, there must be a “removal” for a child to be IV-E eligible. The two types of removals are:

1. Physical removal, which occurs when the agency has physically removed the child from their current living arrangement.
2. Constructive removal, which is considered a “paper” removal. In a constructive removal, the state/tribal agency has obtained legal custody and supervision of the child, but did not physically remove the child from their parent, guardian or legal custodian as the child was living with an interim caregiver at the time of removal. A child is considered constructively removed on the date of the first judicial order removing custody from the appropriate specified relative or the date that the voluntary placement agreement is signed by all relevant parties.

<b>FORMS AND TOOLS</b>
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N/A