



**Department of  
Job and Family Services**

Mike DeWine, Governor  
Jon Husted, Lt. Governor  
Matt Damschroder, Director

A grey map of the state of Ohio with a grid pattern, overlaid with the text "Office of Families and Children" in a dark blue font.

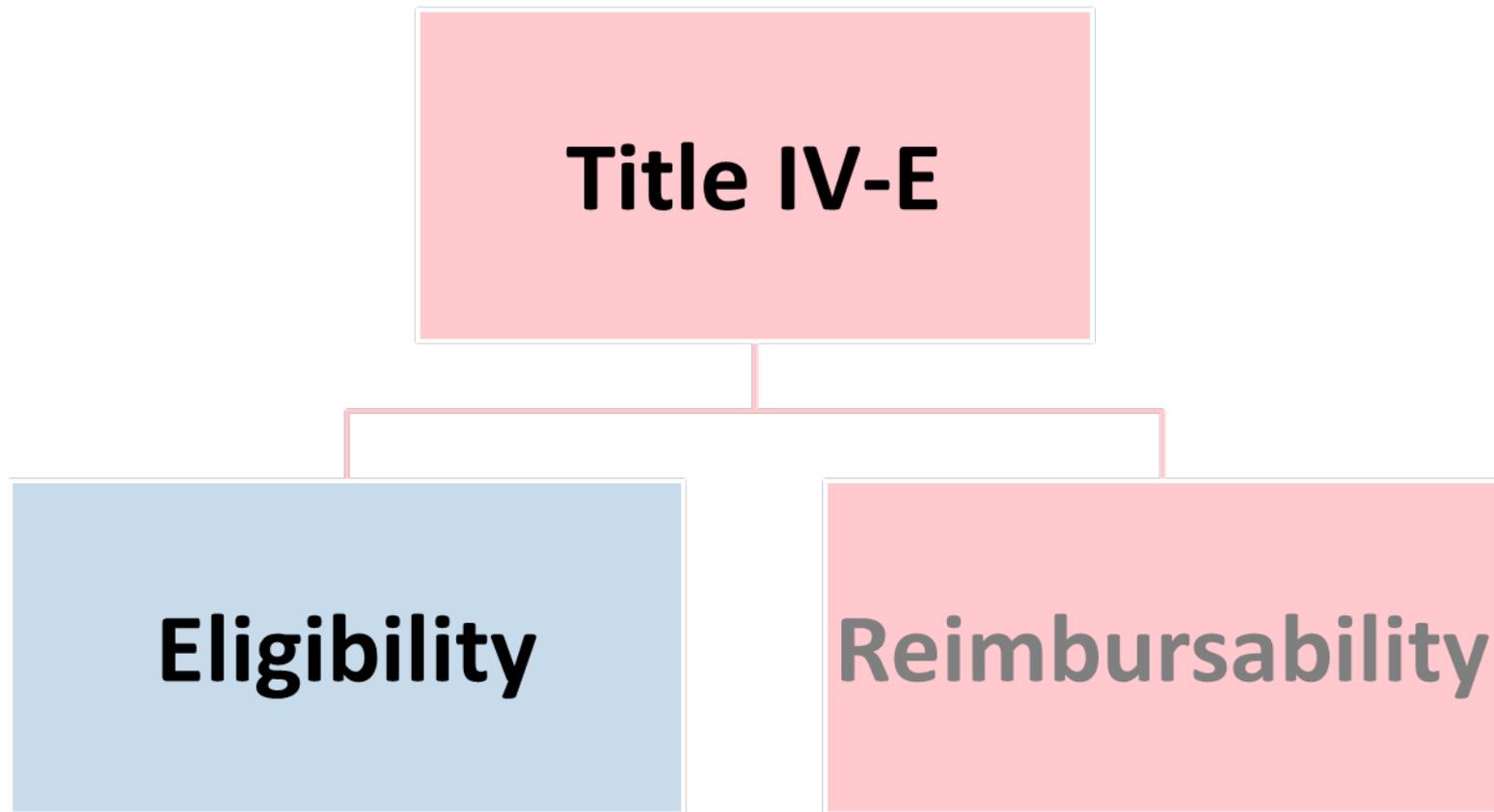
**Office of  
Families and Children**

# TITLE IV-E FOSTER CARE MAINTENANCE TRAINING

## **Part Two - Reimbursability**

Presented April 2022

# REVIEW PROGRAM ELIGIBILITY



# PROGRAM REIMBURSABILITY

- A program eligible child is reimbursable based on the following requirements:
  - Child is determined IV-E program eligible
  - Child is placed into a reimbursable setting
  - The child's income does not exceed the cost of care
  - A timely judicial determination of annual reasonable efforts to finalize the permanency plan.

# BEGINNING DATE OF REIMBURSABILITY

- Reimbursement may begin the actual date of the child's placement, if the child meets all program eligibility and program reimbursability criteria.
- In situations where the eligibility month was prior to month that the child is initially placed, reimbursement may go back to the first day of the month in which all program eligibility requirements are met.

## *Reminder:*

- *The eligibility month is based on whichever occur first, the date the agency files a complaint/motion/petition for care and placement/custody of the child or the date the child is physically removed.*
- *If the complaint/motion/petition is filed in an earlier month, all ADC-relatedness will be considered for the entire month.*

# BEGINNING DATE OF REIMBURSABILITY

## Example:

Agency files a complaint in February. Court hearing/removal order is dated March. The eligibility month is February based on the filing of the complaint asking for removal.

The ADC requirements are to be considered based on February. Since the income and deprivation is in the month of, but prior to removal the entire income available and the deprivation is determined by using what was received in February. Deprivation: continued absence of a parent, incapacity of a parent or under employment of the principal wage earner.

## Example:

Agency files a complaint in February and child is removed in February, the income and ADC is based on the date of the physical removal. Only the income available to the child prior to removal is counted. Deprivation factors are also based on prior to removal.

# REIMBURSEMENT REQUIREMENTS

- Reimbursement is contingent upon satisfaction of all of the following:
  - The Title IV-E agency has legal responsibility for the care and placement/custody of the child.
  - The child meets the ADC-relatedness requirements as described in OAC rule 5101:2-47-14.

## *Reminder:*

*Unless the child is placed with a parent in a substance use disorder (SUD) residential facility, as defined in rule 5101:2-1-01 of the Administrative Code*

*The child, removed from a parent is a candidate for Title IV-E family first prevention services (FFPS) and was residing with a kinship caregiver as described in rule 5101:2-47-12 of the Administrative Code.*

# REIMBURSEMENT REQUIREMENTS

- Best interest is received in the first written order sanctioning the removal in rule 5101:2-47-13 of the Administrative Cod.
- Reasonable efforts judicial determination for a court- ordered removal as described in rule 5101:2-47-22 of the Administrative Code, has been obtained.
- The child continues to meet the age requirement as described in rule 5101:2-47-14 of the Administrative Code.
- The child is placed in a reimbursable placement facility as described in rule 5101:2-47-16 of the Administrative Code.

**(OAC 5101:2-47-23)**

# REIMBURSABLE PLACEMENT SETTINGS

- Foster Care Maintenance Programs Reimbursability:  
Reimbursable Placement Settings:
  - Foster home
  - Qualified Residential Treatment Program (QRTP)

*Note: A QRTP as defined in rule 5101:2-9-42 can be a group home, children's residential center or other congregate care setting.*

**(OAC 5101:2-47-16)**

# NON-REIMBURSABLE PLACEMENT SETTINGS

- Court ordered placement with a specific substitute care provider named.  
*\*\*\*This does not include a court-ordered placement where the court has care and control of the child or a court-ordered placement where the court followed or when the court considered the recommendation of the Title IV-E agency for the placement and was noted in the court order.*
- Detention facilities, forestry camps, training schools, locked facilities.
- A home or facility including a pre-adoptive home not licensed, approved or certified.
- A pre-adoptive home licensed as a foster home but receiving Adoption Assistance (family has a choice to receive FCM or AA if dually licensed).
- A relative home not licensed, certified or approved

**(OAC 5101:2-47-16)**

# LEAVE FROM A FOSTER HOME PLACEMENT

- A child may be on a temporary leave from a foster home to another foster home without constituting a move, when all of the following are met:
  - The foster home is licensed at the same level of care as the current foster home.
  - The temporary leave is more than twenty-four hours but for no more than fourteen days.
  - The child returns to the original foster home by the end of the fourteenth day.
  - The child may be in only one temporary leave type during a fourteen day period to be reimbursable without returning to the original foster home before beginning another temporary leave.
  - A child on leave longer than fourteen days will constitute as a placement move.

**(OAC 5101:2-47-16)**

# BED HOLDS WHILE ON LEAVE FROM PLACEMENT

- FCM reimbursement may be claimed for payments made to the provider to hold a bed if the following are met:
  - The child shall be physically placed into the setting prior to the leave.
  - The bed shall be available while being held for the child's return.
  - The leave does not exceed fourteen calendar days.
  - The child returns to the same placement as he or she was placed into prior to the leave.

**(OAC 5101:2-47-16)**

# BED HOLDS WHILE ON LEAVE FROM PLACEMENT

- The child shall be in one of the following types of leave:
  - Absence without leave (AWOL).
  - Hospital.
  - Trial home visit (for the purpose of reunification).
  - Parental, relative or non-relative visit (for purpose of reunification).
  - Camp (e.g. boy/girl scout camp, 4H camp, band camp, church camp, sports camp).
  - Vacation (child only).

**(OAC 5101:2-47-16)**

# QRTP REIMBURSABILITY REQUIREMENTS

- Family First Prevention Services Act (FFPSA) made changes to Title IV-E foster care maintenance (FCM) reimbursement for children placed into a qualified residential treatment program (QRTP).
- Any child placed prior to October 1, 2021, in a residential facility or group home that is not certified as a QRTP Network Provider (non-QRTP) is reimbursable until the child is discharged through October 1, 2024.
- All residential facilities and group homes will need to be certified as a QRTP no later than October 1, 2024.
- Any child placed into a non-QRTP after October 1, 2021 is reimbursable for the first 14 days.

# QRTP – FCM Requirements

- For a child to be reimbursable when placed into a QRTP on or after 10/1/21, the following requirements are to be met:
  - Be placed into a facility that meets the QRTP requirements in rule 5101:2-9-42.
  - Have a level of care assessment by a qualified individual using the "Ohio Brief" or "Ohio Comprehensive" versions of the CANS tool within 30 days of the initial placement in the QRTP Network Provider.

# QRTP – FCM Requirements

- The CANS assessment is to:
  - Be completed by a Qualified Individual (QI) as outlined in OAC rule 5101:2-42-12.
  - Be completed with the involvement of the family and permanency team for the child.
  - Determine whether the needs of the child can be met with kin or through placement in a foster home and which setting would provide the most effective and appropriate level of care for the child in the least restrictive environment and be consistent with the short and long-term goals for the child, as specified in the family case plan for the child outlined in OAC 5101:2-38-05.1.

**(OAC 5101:2-47-21)**

# QRTP – FCM Reimbursement

- A child placed with a QRTP Network Provider is not required to have a new assessment if the child moves to another residential setting within the same QRTP Network Provider.
- If a child moves from any QRTP Network Provider residential setting to a foster home and then the child returns to a QRTP, a new assessment will be required.
- If a child is placed with a non-QRTP Network Provider, once the Network Provider becomes QRTP compliant a CANS assessment is required within 30 days of the compliance date.
- Reimbursement will go back to the first day of the month when the non-QRTP Network provider becomes QRTP compliant as long as a CANS is performed timely.

# QRTP – FCM Reimbursement

- No later than 60 days of the eligible child's initial placement with a QRTP Network Provider or once a non-QRTP becomes QRTP compliant, the Title IV-E Agency is to confirm that the juvenile court:
  - Considers the assessment, determination, and documentation made by the qualified individual conducting the assessment.
  - Determines whether the needs of the child can be met through placement in a foster home, or, if not, whether the placement of the child in a QRTP provides the most effective and appropriate level of care for the child in the least restrictive environment and whether that placement is consistent with the short-term and long-term goals for the child, as specified in the family case plan.
  - Approves or disapproves of the placement of the child in a QRTP.

# QRTP – FCM Reimbursement

- If the court does not approve the need for a QRTP placement within the 60-day timeframe, the Title IV-E Agency may only claim FCM for the first 60-days of the placement in the QRTP.
- The Title IV-E Agency may claim FCM to transition a child from the QRTP to the next placement or permanent home up to 30-days after one of following:
  - The "Ohio Brief" or "Ohio Comprehensive" versions of the CANS tool determines that the QRTP is not appropriate.
  - A court disapproves such a placement.
  - A determination is made that a child in an approved QRTP placement is going to return home or be placed with fit and willing relative(s), a legal guardian(s), or an adoptive parent(s), or in a foster family home.

# QRTP – FCM Reimbursement

- For every QRTP the child is placed in for more than 12 consecutive months or 18 nonconsecutive months or, in the case of a child who has not attained age 13, for more than 6 consecutive or nonconsecutive months, the Title IV-E Agency is to maintain the following:
  - Documentation submitted at every case review or permanency hearing regarding the child’s case plan that supports a continued QRTP placement.
  - The signed approval of the Title IV-E Agency director/Title IV-E Court judge for the continued placement of the child in the QRTP.

*Note: Continued placement is to have the approval every 6 or every 12 month, as applicable until the child is discharged from the QRTP.*

# QRTP – FCM Reimbursement

- If the "Ohio Brief" or "Ohio Comprehensive" versions of the CANS tool is not completed within 30 days of the initial placement into a QRTP, the Title IV-E Agency cannot claim FCM for the entirety of the QRTP placement (including the first 14 days).
- May claim 14 days of FCM each time a child is "placed in a child-care institution" regardless of whether the child has had previous CCI placements during his or her foster care episode.
- There will be no FCM reimbursement until the information about the child's CANS assessment is recorded in SACWIS.

# QRTP – FCM Reimbursement

- The IV-E Agency may claim Title IV-E administrative costs during the placement in the QRTP. These administrative costs are for the administration of the Title IV-E program, and not the costs of the administration and operation of the QRTP/CCI. Those costs are only allowable when a child is eligible for FCM.
- Note: A CANS assessment is required when a child moves from one QRTP Network Provider to another QRTP Network Provider.

# CHILD'S UNEARNED INCOME AND IMPACT TO THE COST OF CARE

- If child has income, enter it in the Financial/ Benefit section of SACWIS.
- Determined by comparing the child's unearned income to the cost of care.
- The cost of care is reduced by the unearned income benefit as the agency should become the payee for the child's unearned benefit.
- If the child's unearned income exceeds the cost of care the child will not be reimbursable.
- Reimbursement is based on the agency's cost minus the unearned benefit. If the cost of care is \$900 and the child receives SS disability of \$250, the cost of care would be \$650.
- Earned income for a youth who is a full-time student is not counted.

# SUPPLEMENTAL SECURITY INCOME VS COSTS OF CARE

- Title IV-E FCM payments and SSI benefits may be received concurrently
- SSI and Costs of Care (SSI is reduced dollar for dollar)
- Determining which reimbursement is best SSI or FCM
- Multiply the costs of care (maintenance only) by the current Federal Financial Participation (FFP) 70.30%. The FFP or Federal Medicaid Assistance Percentage changes each Federal Fiscal Year.(October 1–September 30).
- SSI amount \$841 for January 2022 - December 2022
- If you decide to receive the SSI, your agency can still claim for any Administrative Costs and Medicaid

**(OAC 5101:2-47-12)**

# SSI vs. FCM COMPARISON

SSI amount	Costs of Care (maintenance costs)	Calculation	Receive more if you keep the
\$841	\$700	$  \begin{array}{r}  \$700.00 \\  \times 70.30\% \\  \hline  \$492.10 \text{ FCM}  \end{array}  $	SSI
\$841	\$900	$  \begin{array}{r}  \$900 \\  \times 70.30\% \\  \hline  \$632.70 \text{ FCM}  \end{array}  $	SSI
\$841	\$1800	$  \begin{array}{r}  \$1800 \\  \times 70.30\% \\  \hline  \$1265.40 \text{ FCM}  \end{array}  $	FCM
\$841	\$2900	$  \begin{array}{r}  \$1100 \\  \times 70.30\% \\  \hline  \$2038.70 \text{ FCM}  \end{array}  $	FCM

# SHARED FUNDING FOR CHILDREN

- Reimbursement is based on the agency's cost of care. If an agency enters into a shared funding agreement. The IV-E agency incurs the cost of care and is reimbursed based on that cost. The other entity would pay an amount for the non-federal share that is not reimbursed. (29.70 %)
- Donated funds originating from public sources may comprise the nonfederal share in claiming FFP under the following conditions:
  - (1) Funds shall be:
    - (a) Appropriated directly to the local agency, or
    - (b) Transferred from another public agency to the local agency and under the local agency's administrative control, or
    - (c) Certified by the contributing public agency as representing expenditures eligible for FFP;
  - (2) Funds shall not be used to match other federal funds; and
  - (3) Funds shall not be federal funds, except those authorized by federal law to be used to match other federal funds.

# CHILD CARE, CLOTHING, GRADUATION EXPENSES

- Employment related childcare is reimbursable and when the foster parent is required to participate in activities associated with parenting without the child for children in foster homes.
- Initial and on-going clothing is reimbursable.
- High School Graduation expenses are reimbursable.
- **Maximum amounts listed in an annual Procedure Letter**

**(OAC 5101:2-47-17 and OAC 5101:2-47-19)**

# PERSONAL INCIDENTALS

- Personal incidentals include, but not limited to:
  - Items related to personal hygiene
  - Cosmetics
  - Over-the-counter medications (not covered by Medicaid)
  - Special dietary foods (not covered by Medicaid)
  - Infant and toddler supplies (e.g., booster seats, diapers)
  - Fees related to activities (e.g., boy/girl scouts, 4H, band, sports, cheer)
  - Special lessons (e.g., horseback riding, swimming, music)
  
- **Receipts of all auxiliary reimbursements must be made available for any review of the FCM case record for verification.**

**(OAC 5101:2-47-09/OAC 5101:2-47-19)**

# DIFFICULTY OF CARE REIMBURSEMENT

- A child with special, exceptional, or intensive needs, may be eligible for a supplemental difficulty of care reimbursement.
- Child characteristics describing the child's special, exceptional or intensive placement services needs
- Characteristics shall be entered into SACWIS within thirty (30) days entry into foster care.

**(OAC 5101:2-47-18)**

# CHILD OF A MINOR PARENT

- The minor parent in substitute care must be FCM reimbursable and their child is placed with them.
- Agency does not have placement and care responsibility for the child of the minor parent.
- Agency can receive supplemental reimbursement for the child of a minor parent while placed together.
- Child is eligible for Medicaid under this situation.

**(OAC 5101:2-47-20)**

# QRTP – AFTERCARE

- A QRTP Network Provider is to provide family-based aftercare support to any child placed into one of their residential settings for more than fourteen days if the child, even if the youth reaches the age of majority, is discharged to any family-based setting.
- A Title IV-E Agency may contract with a QRTP Network Provider for aftercare services when the permanency planning team, which includes the youth and family, agrees to the aftercare services as part of the discharge planning.
- A child who is discharged from a residential setting that is a QRTP may be determined by the Title IV-E Agency to be a candidate for Family First Prevention Services (FFPS) as outlined in Chapter 5101:2-45 of the Administrative Code.

**(5101:2-47-21, 5101:2-47-23.1 and 5101:2-33-27)**

# NON-REIMBURSABLE QRTP AFTERCARE

## Aftercare Support

"Aftercare support" is monthly case management activities performed with or on behalf of a child/family, by the qualified residential treatment program (QRTP) as part of the required discharge plan developed by the permanency team for a minimum of six months from discharge. Aftercare support, as identified in the discharge plan, may be part of the "agreement for Title IV-E agencies and providers for the provision of placement services" or the Title IV-E agencies may use the "agreement for Title IV-E agencies for the provision of non-placement services" and the "Title IV-E schedule B" rate information.

**OAC 5101:2-1-01,  
5101:2-47-21 and 5101:2-47-23.1**

## Aftercare Services

Aftercare services" are defined as specific individualized community-based trauma informed services that build on treatment gains to promote the safety and well-being of children and families, with the goal of preserving the youth in a supportive family environment. Aftercare services may be part of the discharge plan and added to the "Agreement for Title IV-E agencies for the Provision of Non-placement Services" and the "Title IV-E schedule B" rate information.

**OAC 5101:2-33-27**

# ADDITIONAL TRAINING

- **FCM Eligibility and QRTP with SACWIS training held on August 18, 2021**

<https://www.odjfs.state.oh.us/tutorials/OFC/FamilyFirst/08182021-FCM-Eligibility-and-QRTP-and-SACWIS-Training.mp4>

- **Master Contract Training held on Sept. 1, 2021**

<https://www.odjfs.state.oh.us/tutorials/OFMS/Master-Contract-Webinar.mp4>

- **SACWIS Knowledge Base – search by topic**

<https://jfskb.com/sacwis/>