

	Division/Section	Child Welfare
	Chapter No./Name	6 - Foster Care (FC)
	Part No./Name	16 - Payments, Expenditures and Approvals
	Section No./Name	Payments, Expenditures, and Approvals
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I. STATEMENT OF POLICY

Monthly board rates are made to foster parents and relatives whose homes are certified for children in the custody of the State. Board rates are intended to help meet the daily needs of the child for shelter, food, clothing, allowance and incidental expenses. The board rates shall not be used by foster parents or relatives for expenditures * which are not related to meeting the daily care needs of the child. Any funds which are not used within the month, such as the clothing allotment, child's allowance, personal items or gift allowance should be held for the child to be utilized when needed by the child. Any unused funds remain the property of the child, and should follow the child to the next placement or be provided to the child at discharge from foster care. **

II. PROCEDURES

A. REGULAR BOARD RATES FOR FOSTER FAMILY HOMES

A breakdown of the average monthly payment, based on a thirty day month, giving the amount generally intended for the various items, established by the Department of Children and Family Services for payment to DCFS certified foster family homes is as follows:

- For a child birth up to age two years:

\$313.77 – room and board
 61.50 – diapers and formula
 61.50 – clothing
 9.72 – child's monthly allowance
 15.37 – personal items
 5.54 – gift allowance

 \$467.40 = average monthly payment (\$15.58 per day)

- For a child age two through age five years:

\$314.76 – room and board
 61.50 – clothing
 9.93 – child's monthly allowance
 15.38 – personal items
 5.53 – gift allowance

 \$407.10 = average monthly payment (\$13.57 per day)

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- For a child age six years through age 12 years:

\$324.47 – room and board
 73.80 – clothing
 29.62 – child’s monthly allowance
 15.37 – personal items
 5.54 – gift allowance

 \$448.80 = average monthly payment (\$14.96 per day)

- For a child age 13 years of age or older:

\$351.31 – room and board
 80.38 – clothing
 46.70 – child’s monthly allowance
 16.33 – personal items
 6.28 – gift allowance

 \$501.00 = average monthly payment (\$16.70 per day)

* The breakdown of the board rate and the assessment of the utilization of the board for the allocated purposes should be discussed by the foster care worker with the foster caretaker at each monthly contact. **

B. PROCEDURE FOR PAYMENT OF PLACEMENTS AND TRACKING PLACEMENT HISTORY FOR PAYABLE AND NON-PAYABLE PLACEMENTS

This information shall be coordinated with TIPS procedures for data entering client information for a foster child and authorizing payment for a certified foster family care or other placements. Steps to initiate an automatic monthly board rate payment for a child placed in a foster family home are as follows:

- The child shall be correctly entered into the Foster Care Program with the [TIPS 100](#) (Client Information Form). Refer to [Appendix D](#), TIPS LARE Data Entry Foster Care Child and TIPS Procedural Manual Forms for instruction on completion of the [TIPS 100](#), Client Information Form.
- The provider data must be entered into TIPS or TIPS/LARE and a provider number must be assigned. Home Development enters data for certified foster homes. Refer to the *** [Form 431, Provider Foster Family Source Document](#), for information to be entered on certified foster homes in TIPS/LARE. State Office enters data for private child care provider agencies and then Home Development enters data on private foster families for those agencies. Refer to the [TIPS 300, Provider Information Inventory Form](#), for required information to be entered on private providers and vendors. The

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Foster Care case manager enters noncertified caretakers into TIPS or completes the TIPS 300 for data entry according to local office procedures.

- The *** CW Form [106b, Client Service Authorization](#), or [FAST III, Change Redetermination Form](#), placement authorizations must be data entered within five working days of the placement or the last day of the month. For the payment to be automatically generated by TIPS, the data must be entered by the first of the month following the month in which payment is due. Board rates, if applicable, are paid in arrears, with payment made on or around the seventh of the month following the month for which payment is made. When the placement provider data is not entered timely for the board authorization to be entered, a payment can be made using the TIPS Form 211, Provider Manual Payment, to manually enter the data for the placement.
- Manual payments are not necessary unless an automatic board payment was not authorized prior to the deadline or an error on the provider record prevented automatic payment. Refer to TIPS Manual for the TIPS Form 211 and instructions for payments.
- Placement is authorized for payment and/or placement history tracking in TIPS by:
 - entry of the Foster Care Client Service Authorization Form, [TIPS 106b](#) or [FAST III](#); or ,
 - direct entry by the case manager who signs a copy of the screen printout verifying accuracy of the data and authorizing the placement.
- The placement authorization has a begin and end date and a major/minor service code, which TIPS uses to automatically generate a payment on a monthly basis, if applicable, and/or track placement history. The begin date is the first day of the placement. The exact end date of placement may not be known at the time of placement. The end date is initially entered according to the expected length of placement, but shall not exceed 12 months. A monthly TIPS report (Worker Service Authorization Report) is issued to notify staff of service authorizations due to expire. The authorization must be extended if the child remains in the same placement beyond the maximum placement authorization period. The authorization can be extended in the month it expires, by changing the end date of the existing service authorization to the new end date of the expected placement period. Placement codes must be entered in order to extend the authorization period. The end date is the last full day the child remained in the placement, not the day of departure from the placement. Two placements may not be paid for caring for the same child on the same date due to a prohibition on duplicate board payments except in the following circumstances:
 - When payments * are ** made for respite care – (refer to [6-920, Respite Care and Alternative Child Care Plans](#)); or
 - When a bed is being held for a child receiving drug or psychiatric treatment, not to exceed 60 days (refer to [6-1135, Psychiatric Hospitalization/Inpatient Services – Acute Care](#)).

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C. FOSTER PARENT SPECIAL BOARD RATES

Special board requires assessment of the time, efforts and events that a foster parent spends based on the special needs of the child, which is over the normal amount required for a child within their appropriate developmental stage. Special board shall be assessed within the first 30 days of placement in a certified foster home and is documented on the case staffing form and case notes. * However, when a child is entering a placement either at initial foster care entry or after disruption of a previous placement, the foster care worker's knowledge of pre-existing medical or behavioral care needs of the child which are challenging to sustaining a stable care setting, may be utilized as justification to make a local level decision for an exception to the 30 day assessment period. Upon monthly reassessment by the foster care worker during monthly contacts of the level of care required by the foster caretaker the worker may determine at a later date it is possible to reduce or eliminate the special board. ** Approval for special board compensations shall not exceed a six-month period at any given time and the child's special needs must be identified within the case plan. Requests for special board should coincide with case plan reviews and include supporting documentation.

In addition to receiving the regular board rate, DCFS foster homes, Private Foster Care (PFC) Homes and Specialized Family Foster Homes may receive a special board compensation for their foster child(ren). Alternate Family Care (AFC) may receive a special board under specific circumstances. Refer to [6-525, Treatment Foster Homes Alternate Family Care/Therapeutic Foster Care and Medical Therapeutic Foster Care Programs](#). Diagnostic and Assessment (D&A) homes do not receive special board payments.

If a child is in a medical facility for a calendar month, the board payment can be paid providing the foster parent is planning to have the child returned to their home. However, special board cannot be paid during the child's hospitalization. The authorization for special board ends and is reassessed upon the child's discharge from the hospital.

The progress of the child and the amount of time, tasks and efforts that the foster parent spends should be reviewed on an ongoing basis. The child's progress or lack thereof should be addressed in the case plan. Some special needs of a child may be related to a condition * which ** requires consistent or increased time and efforts of the foster parent to support or maintain the child's level of functioning. When the degree of need has changed or no longer exists, the special board payment should be adjusted accordingly.

The special board compensation is paid automatically each month.

1. REQUESTS FOR SPECIAL BOARD

The foster care case manager shall make a written request for special board compensation * on behalf of the ** foster parent. The following is included in the request:

- Foster child's name, date of birth, and TIPS number;
- Foster family's name, TIPS number, and type of certification;

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- A description of the current condition, need or difficulty of care is required by:
 1. Documenting each area * of child functioning requiring specialized attention and care;
 2. Attaching any pertinent information, such as the daily specialized care needed for the child from medical providers; and
 3. Providing an explanation of the foster parent's time, tasks, efforts, and services being provided to remedy or address the child's care needs. **

- A statement concerning the level of care recommended:
 1. For Specialized, Alternate, and Therapeutic Foster Homes, the circumstances supporting the need for a special board * beyond what is covered by the difficulty of care subsidy already being provided; and,
 2. Resources explored and/or approved to meet the child's special needs such as Early Periodic Screening Diagnostic Treatment (EPDST), Early Steps, Human Services District, Medicaid Waiver, Personal Care Services and Personal Care Attendant, special support services at school etc.; if resources are providing services, list the specific services and timeframes for those services; also describe how and when the foster caretaker will be providing additional, special services which necessitate a special board. **

- Recommended beginning and end dates with appropriate authorizations; and,

- A statement explaining retroactive payment requests will only be approved for two months prior to date of request. A case manager should assess the child's special needs and time and effort of the foster parent during each contact. When a foster parent must exert time and effort beyond what is expected for the developmental functioning of a child and the time and efforts are expected to last over two months, special board should be assessed and a request for * special board made along with any justified ** retroactive payment ***.

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2. APPROVAL LEVEL AND TIPS CODES FOR SPECIAL BOARD

Foster Children	Up to \$300	\$300.01-\$600	Over \$600
DCFS Regular Foster Home * (02-FH or FR) or Regular Private Foster Care (06-FH)	010-010 Parish/Regional Supervisor	010-011 Parish/Regional Child Welfare Manager for (02-FH and 02-FR) or State Office Residential Unit for (06-FH)	010-017 State Office Foster Care Unit
Specialized Home (02-FS)	010-015 Parish/Regional Child Welfare Manager	010-017 State Office Foster Care Unit	010-017 State Office Foster Care Unit
AFC (02-FA)	010- 009 Parish/Regional Child Welfare Manager	010-017 State Office Foster Care Unit	010-017 State Office Foster Care Unit
TFC (06-RS)	010-013 State Office Residential Unit **	010-016 State Office Residential Unit	010-016 State Office Residential Unit

Once a special board request is approved, the authorization with required approval signatures is scanned into the child's record in Onbase.

3. DETERMINING THE AMOUNT OF SPECIAL BOARD FOR SPECIAL NEEDS

An assessment is required to determine the special board rate appropriate to meet the child's needs and considers the foster parent's time, tasks and efforts in helping the child with special needs. The table for the special board is a guide to assist staff in determining eligibility for and deriving an appropriate amount for special board compensation. Foster care staff should include foster parents in the assessment. When services are provided by other agencies the special board should be adjusted to reflect the services.

Specialized, TFC and AFC home assessments are to exceed Level 1 and perhaps Level 2 for a special board request, as they already receive compensation to care for children with a higher level of need through their monthly stipend.

The table that follows lists areas for the case manager to consider for special board compensation and the corresponding amounts for each level. If the child is functioning below his/her developmental stage in relation to his/her chronological age for House Care, Supervision and/or Education, the following table is a good reference to accurately assess the child's delays. A brief description will precede each category.

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Education

This category assesses the average number of hours per week the foster parent is required to spend with the child providing assistance to improve specific, identified deficiencies in the child's development or education.

TYPE OF CARE	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
EDUCATION	<p>Is behind in school and requires extra help at home of an average of 5 hours per week</p> <p>-or-</p> <p>Help a pre-schooler who is behind in self help skills at least one hour a day</p> <p>-or-</p> <p>An adolescent that the foster parent is actively helping learn independent living skills.</p>	<p>Is behind at least one grade level and requires extra help at home of an average of 5 hours per week and contact with the teacher and other professional educators 1-2 times per week.</p>	<p>Is behind at least two grade levels or in pre-category school for interventions, requires extra help at least 8 hours a week at home, contact with the teacher and going to school concerning educational issues and behaviors 3-4 times per week and an IEP has been completed.</p>	<p>Home Bound and foster parent spends a minimum of 20 hours per week working with child, receiving assistance from school as directed by an IEP to help alleviate the deficiencies –or- 20 hours per week working with the child due to expressive language delay, learning sign language to assist the child's communication skills and must be directed by an IEP.</p>
	(\$34.50)	(\$62.00)	(\$87.00)	(\$137.50)

House Care

This category is for extraordinary house care maintenance caused by the foster child's conduct and/or condition. A certain level of destructiveness, cleaning and repairs are normal for all children, for example, young children are particularly messy at the table as they learn to feed themselves. Children who are developmentally delayed in their fine motor skills are also messy at the table and the cleaning required would be considered extraordinary house care. If a child's damage can be prevented by supervision, then a plan should be developed to remedy the situation and should not be counted under House Care. When the social assessment determines that the child can learn new self help skills and/or should be participating in the cleaning, then a judgment must be made regarding

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the appropriateness of the application of this category and/or the length of time it should be applied.

TYPE OF CARE	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
HOUSE CARE	<p>The foster parent's daily house care maintenance is increased by <u>four</u> hours per week due to the foster child's maladaptive behavior, developmental delays, and/or physical condition.</p> <p>Examples: additional laundry and/or clothes due to enuresis/encopresis, cleaning child, table, floor after every meal due to developmental delays or lack of social training, cleaning bathroom after child's use.</p> <p>(\$24.50)</p>	<p>The foster parent's daily house care maintenance is increased by <u>eight</u> hours per week due to the foster child's maladaptive behavior, developmental delays, and/or physical condition.</p> <p>Example: excessive laundry for children over three years old.</p> <p>(\$44.50)</p>	<p>The foster parent's daily house care maintenance is increased by <u>14</u> hours per week due to the foster child's maladaptive behavior, developmental delays, and/or physical condition.</p> <p>(\$87.00)</p>	<p>The foster parent's daily house care maintenance is increased by <u>20</u> hours per week due to the foster child's maladaptive behavior, developmental delays and/or physical condition.</p> <p>Examples: child between ages 3-10 in diapers; adolescent who urinates or defecates where cleaning is over and beyond the norm at least three times per week.</p> <p>(\$125)</p>

Treatment

This category assesses the amount of time that a foster parent is required to participate in scheduled appointments with or on behalf of the child with professionals engaged to work regarding physical, emotional, and psychological problems of the child. The giving of medication would only count in exceptional situations that consistently take prolonged periods of time.

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TYPE OF CARE	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
TREATMENT	At least one trip a week that the foster parent is required to participate in appointments (counseling, speech, physical therapy, etc.) or therapy completed in the home with participation; Giving of medication as defined above. (\$15)	At least two trips per week that the foster parent provides transportation and the foster parent participates in the treatment; Implementing a behavioral plan to assist the child as recommended by the therapist. (\$30)	At least three trips a week that the foster parent provides transportation and is available to participate in the treatment; Implementing a behavior plan by a professional's recommendation and using techniques to assist the child in making changes. (\$50)	Over 12 trips a month that the foster parent provides transportation and is available to participate and daily use some of the techniques (speech, physical therapy, etc.) at home. (\$100)

Birth Family Involvement

This category involves the time and task that the foster parent provides between the child and the biological family. It requires the foster parent to be available and/or participate in the visit and not just drop the child off for the visit.

TYPE OF CARE	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
BIRTH FAMILY	Foster parent brings child to visit with biological family and participates at least one time per month. (\$10)	Foster parent brings child to visit and participates in visit at least twice per month (modeling). (\$20)	Foster parent has biological family come to their home at least once a month, models parenting to the family and participates in other family visitations. (\$40)	Foster parent has biological family come to home for extended visits of at least 4 hours that occur more than once per month and foster parent mentors or foster parent brings child to biological family home and mentors/ parents in providing safety, well-being and nurturance to the child. (\$70)

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Supervision

The supervision category of difficulty of care assessment provides documentation to support the impact on the foster parents and the foster home due to the foster child's extraordinary needs and/or behavior.

PE OF CARE	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
SUPERVISION	Foster parent must provide at least hourly supervision which is above that required for a normal age and developmental child.	Foster parent must have eye contact with the child every 30 minutes during the day and several times at night due to the child's disruptive behaviors.	Foster parent must provide direct supervision every 15 minutes during the day because of disruptive behaviors and inability to get along with others and supervision at night for sexually acting out, stealing, violence, runaway behaviors, and sneaking out at night.	Child must be in constant eye contact with foster parent due to child's behaviors or due to the child's medical condition and being dependent on a device that the foster parent must monitor and maintain and provides many of the functions of a Personal Care Attendant. Example: lifts the child from the bed to a wheelchair to a vehicle for service trips.
	(\$35)	(\$70)	(\$105)	(\$150)

D. PAYMENTS TO OUT-OF-STATE FOSTER HOMES

DCFS will provide a monthly board rate to foster homes in another state in the following circumstances.

1. Receiving State Requests Board Rates for Home DCFS Selects

If the home in which the foster child is placed in another state requests a board rate, the home must meet certification standards for foster homes in that state before a board rate can be authorized. A need for financial assistance shall be part of the assessment made prior to placement of the child.

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When the assessment for placement includes a need for financial assistance, the case manager shall request documentation the home being considered meets the certification standards for foster homes for that state through the Interstate Compact on the Placement of Children (ICPC) process. Once this documentation is received, the case manager submits a report to the *** Regional **** Home Development Unit that the home be certified in TIPS.

The request to Home Development shall include identifying information on the home and copies of any home studies and/or evaluations.

The home is certified and entered in TIPS by the Home Development Unit. When the child is placed in the home, board payment can be made. Payment authorization is made via TIPS [106b, Client Service Authorization](#), or [FAST III](#), Change Redetermination Form, by the child's case manager.

If the child's case is carried in a different parish from the family's (SP) case, the child's case shall be transferred immediately after placement to the parish carrying the family's case. The case manager carrying the family's case shall be assigned the child's case.

All of the policies concerning regular board rates and special board compensation apply for out-of-state foster homes.

2. Receiving State Requests Board Rate for One of Their Homes

There are situations that may arise in which a Louisiana foster child may be placed in a foster home belonging to another state. This can happen when a placement made by DCFS in the parent's home or relative's out-of-state home breaks down and the child needs to be removed immediately. As a service to Louisiana, the other state makes a temporary placement for the child in one of their homes, until DCFS can make arrangements to return the child to Louisiana.

The other state expects that DCFS will pay their foster parents' room and board for the child. The amount to be paid can be the Louisiana board rate or the other state's board rate, whichever the other state prefers. Payment shall be based on a daily rate and calculated on the number of days the child was in the home.

The case manager is responsible for obtaining identifying information on the out-of-state foster parents and requesting that the State Office Home Development Unit certify the out-of-state foster parents in TIPS once ICPC approval is received.

Home Development shall notify the case manager of the TIPS provider number when the home is certified so that payment can be made. The case manager is responsible for authorizing payment to the provider (foster home). Payment shall be authorized via

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TIPS [106b, Client Service Authorization](#) or [FAST III](#), for automatic payments although manual payments are required for payment in arrears.

In some instances the other state will pay their foster home directly and request that Louisiana reimburse their central or state office. Such payments should be made with a TIPS 212, Vendor Reimbursement, with the other state being paid as a vendor.

3. DCFS Foster Home Moves to Another State with Foster Child

When ICPC approval from the receiving state is given for Louisiana foster parents to move to another state with their foster child, board rates shall continue in the regular manner. The child's case record shall be maintained by the parish carrying the family's case. If there is no SP case, the child's record and foster parent record should be maintained by the parish having court of jurisdiction. Refer to ICPC for further information on out-of-state placement of foster children.

4. Payments to a Louisiana Foster Home by Another State

If a child in the custody of another state is placed in a Louisiana approved foster home, payments for the child's care should be made directly to the foster parent by the other state. The Foster Care case manager assigned to the child's case is responsible for making this arrangement with the other state. The amount to be paid can be the Louisiana rate or the other state's board rate, whichever seems appropriate.

Any payment problems that occur shall be brought to the attention of the Deputy Compact Administrator of the Interstate Compact on the Placement of Children (ICPC). The staff in the ICPC Unit shall work with their counterparts in the sending state to resolve the situation. The only expenses for these children *** are **** for pre-service and in-service training, related babysitting, and the renewal physical examination. The case manager may claim reimbursement for mileage for the child on a TIPS 213, Worker Reimbursement.

III. FORMS AND INSTRUCTIONS

- *** [CW Form FAST III](#), Change Redetermination Form
- *** [CW Form TIPS 100](#), Client Information Form
- *** [CW Form TIPS 300](#), Provider Information Inventory Form
- *** [CW Form TIPS 106B](#), Client Service Authorization
- *** CW Form 211, Provider Manual Payment
- *** CW Form 212, Vendor Reimbursement
- *** CW Form 213, Worker Reimbursement
- *** [CW Form 431](#), Provider Foster Family Source Document

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IV. REFERENCES

- *** CW Policy 6-525, Treatment Foster Homes: Alternate Foster Care, Therapeutic Foster Care and Medical Therapeutic Foster Care Programs
- *** [CW Policy 6-920, Respite Care and Alternative Child Care Plans](#)
- *** [CW Policy 6-1135, Psychiatric Hospitalization Inpatient Services – Acute Care](#)
- *** [CW Policy Appendix D, TIPS-LARE Data Entry Requirements for Foster Care Child](#)