

Section 4 Overview

This section pertains to the policy and procedures necessary when an out-of-home placement of a child is imminent or has occurred.

Chapter 15 Overview

This chapter addresses the placement procedures for Children's Service Workers placing a foster youth in a medical foster home. Expectations of resource providers providing care for a foster youth in medical foster care are also included.

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Chapter Memoranda History: (prior to 1/31/07)

CS85-59

Memoranda History:

[CD10-96](#), CD11-87

15.1 Definition

A youth in foster care with medically diagnosed extraordinary medical condition(s) and or mental or physical disabilities is eligible to be placed in a resource provider home that is contracted to provide medical foster care if the following statements regarding the foster youth is supported with documentation:

- The youth must have a diagnosed medical, mental, or physical condition that requires twenty-four (24) hour availability of a resource provider specifically trained to meet the elevated medical needs.
- The diagnosed condition significantly and substantially impairs the youth's ability to function on a daily basis.
- The youth's diagnoses and conditions must be included on the Medical Foster Care Assessment Tool, CS-10, or a physician's certification for medical foster care.

15.2 Procedure for Placement

The Children's Service Worker will complete the [Medical Foster Care Assessment Tool](#), CS-10, according to directions. The CS-10 is the tool used by the worker to present the medical/developmental needs of the foster youth and to refer that foster youth, through supervisory channels, for approval of placement in the home of a licensed resource provider contracted for medical foster care placements. This form should be used, in conjunction with other appropriate information, to document the youth's eligibility for Medical Foster Care, MFC.

The worker will use their knowledge of the youth, information supplied by the birth family, the resource provider, other professionals, the foster youth, and medical documentation the worker has obtained to realistically document the needs of the foster youth. The more comprehensive the documentation, the more likely a decision can be made as to the eligibility of the foster youth.

The form shall be completed based upon the child's disability and not his/her age.

The Medical Foster Care Referral tool, CS-10, provides two sections in which to identify eligibility for medical resource home placement;

Section II:

Section II consists of subsections A through E. If the foster youth has any one (1) condition in Section II, the foster youth qualifies for a placement in a medical resource home. Additional documentation to support the statement must be attached.

Documentation will be included but is not limited to the following:

- Medical documentation of existing problems including a written statement by the foster youth's physician or designee of the foster youth's special needs.
- Written documentation from other professionals (i.e., physical therapist, speech therapist, nurse) which outlines the tasks and responsibilities of the resource parents and the needs of the foster youth.
- Prior hospitalizations specific to the condition identified.
- List of required medical equipment and/or medication to meet the foster youth's needs.

Section III:

Section III is completed by the referring physician. This section is only completed **if** the Family Support Team believes medical foster care is needed, but the foster youth did not meet any of the standards listed in section II on the CS-10. The Physician Certification Letter, CD-144, is the cover sheet for submitting the CS-10 to the treating physician. A physician's response of "yes" with supporting documentation in section IV is sufficient for eligibility.

Re-evaluation

The CS-10 shall be reviewed annually regarding the status of the foster youth's eligible conditions.

The CS-10 does not need to be reviewed if the eligibility for medical foster care was determined using **only** Section II subsection A, unless the medical condition has changed.

The CS-10 can be reviewed at anytime regarding the status of the foster youth's eligible conditions if a FST member requests.

15.3 Qualifications of Medical Foster Home

To be awarded the Amendment to Provide Medical Foster Care, CM-3 (MDFC), the medical resource parent must have the following currently signed and entered:

- Cooperative Agreement for the Purchase of Professional Parenting Services, CM-14, or
- Cooperative Agreement for the Purchase of Foster Care Services, CM-3.

Medical Resource Home Providers agree to the following:

- To provide care to foster youth with acute medical problems or severe physical/mental disabilities who have been determined eligible for medical foster care by the Division;

- To only maintain a total of 4 placements in the home;
- To maintain only 2 foster youth in the home simultaneously with acute medical problems or severe physical/mental disabilities who have been determined eligible for medical foster care by the Division.
- To participate in the screening process of the foster youth to be placed in the home by discussing the referral information and holding pre-placement visits;
- To schedule a comprehensive medical assessment for the foster youth to take place within thirty (30) days of the foster youth being placed in the home;
- To work closely with, and accept special training from, the health care professionals attending the foster youth in placement;
- To provide day-to-day implementation and monitoring of the medical or developmental treatment plan and services as agreed upon with other treatment staff;
- To participate in any training requested by the Division;
- To assist in training/education of the natural parent(s) on how to care for the specified foster youth, depending upon the involvement of the natural parent;
- To assist the child to understand and manage his/her condition; and
- To provide transportation for foster youth in medical foster care to and from necessary appointments, treatment facilities, medical care, daily activities, etc.

The Division agrees to reimburse the licensed resource provider with a current Cooperative Agreement for the Purchase of Medical Foster Care Services Amendment maintenance for foster youth approved for medical foster care at the current rate as specified in policy. The amount of maintenance reimbursement shall be pro-rated if a child is in care for less than a calendar month. Special expenses, if any, shall be paid in accordance with Division policy.

The Division will provide the resource provider with any medical documentation in the current case file.

Related Subject: [Special Expense Payment, Section 4 Chapter 11 Attachment C.](#)
[Standard Payment Rate for Foster Family Alternative Care, Section 4 Chapter 11 Attachment A.](#)

Title: Child Welfare Manual
Section 4: Out-of-Home Care
Chapter 15: Medical Foster Care
Effective Date: October 12, 2011
Page: 4

Chapter Memoranda History: (prior to 01-31-07)
CS85-59

Memoranda History:
[CD08-50](#), CD10-96