 VERMONT DEPARTMENT FOR CHILDREN AND FAMILIES Family Services Policy Manual		<h1>268</h1>
Chapter:	Administrative Issues	
Subject:	Foster Parent Reimbursement	Page 1 of 5
Approved:	Aryka Radke, Deputy Commissioner	Effective: 4/12/2021
Supersedes:	Family Services Policy 268	Dated: 11/1/2020

Purpose

To outline the parameters of allowable expenses for foster parents and the tasks involved in approving expenses.

Related Policies

Family Services [Policy 267](#): Vendor Authorizations
Family Services [Policy 270](#): Damage Claim Expenses

Policy

Foster Parent Reimbursement Schedule

The Commissioner of the Department for Children and Families (DCF) determines reimbursement amounts and procedures annually, including the rate of reimbursement for mileage. The department will inform all licensed and approved foster parents of any changes involving reimbursement.


Foster care maintenance payments cover the cost of caring for a child – food, clothing, incidentals (e.g., shower and hygiene products, school supplies), shelter, supervision, and money for the child to use for personal spending.

Generally, foster parents can expect that:

- All new DCF custody entrants will receive an emergency rate for 30 days;
- All emergency (unplanned) placement changes will receive the emergency rate;
- The emergency rate will not be used for planned placement changes;
- Emergency rates are issued for up to 30 days, and then the system will automatically revert to a standard rate; and
- If warranted, use of the [Caregiver Responsibilities Form \(CRF\) \(FS-268\)](#) may be initiated during the emergency rate period.

The Internal Revenue Service (IRS) considers the monthly foster care reimbursement of expenses as non-taxable income.

The division will reimburse persons providing foster care by the 15th of the month following the month of service. If the 15th of the month occurs on a state or federal holiday, payment will be delayed until the following day.

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When a child has run away or is temporarily absent from a foster home or other placement, payment may continue for up to 15 days if the plan is for the child to return to that placement. Foster care payments will end upon the child's return home or discharge from custody. When a child in custody is living with their own parents or with individuals who were guardians before the child came into DCF custody, the parent or guardian will be financially responsible for all aspects of the child's care.

Caregiver Responsibility Form (CRF)


The [Caregiver Responsibilities Form \(CRF\) \(FS-268\)](#) is a tool designed to assess the enhanced caregiving responsibilities required to support the safety and well-being needs of a specific child or youth for a specified period of time. It is anticipated that with enough support, a child or youth will stabilize and be able to maintain placement stability with a lesser level of intensive care. This should be clearly articulated to the involved foster parent(s) to not lead to later disruption of the placement if subsequent assessments reduce the designated reimbursement rate.

Use of the [CRF \(FS-268\)](#) should be initiated when a child's presentation requires enhanced caregiving beyond what is expected from someone caring for a typical child or youth in foster care. The CRF process should be initiated when a need for increased caregiver intervention is identified to promote placement stability and to ensure the safety and well-being needs of the child are being met in support of the case plan.

When a child is new to DCF custody, the caregiver automatically receives an emergency rate for the first 30 days of placement. During this timeframe, the family services worker and the caregiver should be communicating regularly to determine if the child has enhanced needs that the caregiver will be supporting. CRFs are not typically initiated until after the first 30 days of care. However, there are instances when this may occur:

- When a child has complex medical needs or is at risk of death because of their health; or
- When a child is transitioning out of a residential level of care with significant needs; or
- In situations where a child comes into DCF custody and the district office has existing knowledge of their heightened level of needs.

In cases that are moving towards a permanency goal of adoption, division staff should ensure the CRF is completed before an intent to adopt is signed. An adoption assistance rate is required to be equal to or less than the rate of reimbursement if the child or youth remained in foster care. For this reason, we do not generally establish CRFs after the intent to adopt has been signed. There are two exceptions:

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1. When a child is exiting a residential treatment program and stepping down into a foster home for the purpose of adoption or guardianship; or
2. When a child has been served on a developmental services waiver and they are exiting to permanency through adoption or permanent guardianship.

The decision to initiate a CRF must be initially supported by the supervisor and district director. Ideally, the CRF is completed by the family services worker and the caregiver in a face-to-face meeting. Resource coordinators may team with family services workers to support the CRF process if capacity exists within the office to do so. The level of care definitions and foster parent expectations should be utilized when deciding what level of responsibility is expected of the caregiver. Enhanced rates of caregiver reimbursement are connected to increased caregiver responsibilities.


No assurances should be given to the caregiver that the CRF will be approved until the district office receives official notification from the CRF Review Team of approval. Additionally, family services workers will inform caregivers of the limited nature of CRFs and that the rate will be reviewed in six months. As young people stabilize in placement, it is expected that the enhanced caregiving responsibilities will lessen, and the rate of reimbursement will decrease. The most intensive rates of reimbursement are reserved for children and youth during the timeframe in which they require the most intensive level of care. Enhanced rate setting is intended to be fluid and a reflection of the intensity of need. Caregivers should be informed of the timeframe for rate review so they can plan accordingly regarding financial management.

At a minimum, the caregiver must be engaged in the information gathering that supports the writing or rewriting of a CRF. The caregiver's signature on the CRF is required and represents agreement with the caregiver responsibilities outlined in each of the eight domains.

Those eight domains are:

1. Medical/Physical Health & Well-Being
2. Family Relationships/Cultural Identity
3. Supervision/Structure & Behavioral
4. Education/Cognitive Development
5. Socialization/Age Appropriate Expectations
6. Support/Nurturance/Emotional Wellbeing
7. Transportation
8. Case Plan Participation

CRFs are not completed retroactively. CRF rates are inclusive of most transportation and respite costs. There are two exceptions:


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- If a child’s placement changes and the district office is supporting educational stability through the Every Student Succeeds Act (ESSA), the caregiver may submit for mileage reimbursement to and from school using the designated ESSA school stability transportation funding.
- Transportation to medical, dental, therapy, and specialist appointments are covered through Medicaid. The caregiver should be provided with directions and support to access those resources.

If a planned placement change occurs during the six-month period of a CRF, the district office should assess whether the new caregiver also needs a CRF. If a child or youth’s placement disrupts while a CRF is in place, the emergency rate should be used, and the district office should initiate the process for a new CRF.

CRF Approval & Review Process

- All CRF proposals are submitted to the following alias: **AHS - DCF FSD CRF (AHS.DCFFSDCRF@vermont.gov)**
- The CRF will be assigned to one person within a team of individuals who will review the proposal.
- The CRF narrative and case notes within FSDNet will be reviewed to arrive at a score, thus highlighting the importance of ensuring case notes are reflective of the description in the CRF.
- A team member may reach out to the assigned family services worker directly to request a conversation about the details of the CRF proposal.
- A CRF needs to be submitted by the third Friday of the month to ensure that it will be processed in time for the next foster parent payroll. A CRF submitted after that date will not be approved until the following month.
- Caregivers will receive an email notification of the rate adjustment from the CRF Review Team.
- The district office team will receive an email notification once the CRF is in place. The email will also indicate when the CRF will be due for review.
- CRFs are required to be reviewed, revised, and re-submitted by district office staff every six months and with placement changes to determine if an enhanced rate is still appropriate for the situation.
- It is the district office’s responsibility to update the caregiver of any changes made to the originally submitted CRF.
- If the CRF Review Team reviews the CRF and they disagree with the assessment or have questions, they will contact the family services worker. A final decision on the CRF will not be made until additional information is gathered from the district office.

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Foster Parent Expenses

Bills for items covered by this policy are normally be paid through the *Foster Parent Expense Account Form (FS-333)*. In some instances, expenses will be paid through a vendor authorization process as directed in Family Services [Policy 267](#).

The district director or designee will approve expense accounts. Completed and signed expense account forms should be submitted monthly. Expense account forms submitted more than three months after the expense was incurred will not be honored.

Foster parents may submit expense account reports monthly for the following expenses:

Transportation	Transportation for: <ul style="list-style-type: none"> • Court hearings; • Trips to the police station to pick up a child, to have a child questioned, etc.; • Trips to residential facilities, group homes, Woodside, etc. to visit a child or to transport a child; • Hospital emergency room visits; • Visits with primary family; and/or • School meetings if foster parent attendance is written into the case plan or if a member of the team asks the foster parent to attend.
Telephone Calls	Planned telephone calls specifically related to the case plan. A copy of the telephone bill with calls identified must be attached to the expense form.

Other reimbursements require the prior approval of the district director, and are subject to available dollars. Reimbursement requiring district director approval include:

Case Plan Services or Meeting Unusual Needs	Expenses related to the delivery of the case plan services and meeting unusual needs. Including, but not limited to: <ul style="list-style-type: none"> • A prescription not covered by Medicaid; or • Physical therapy or occupational therapy equipment or supplies.
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Damage Claim Expenses

See Family Services [Policy 270](#).