

CHILD FOSTER CARE PLACEMENT ~ REQUIRED ACTIONS

PURPOSE: (1) Opening a child in foster care services, (2) Starting the SSI application process, and (3) Opening medical eligibility.				
Document/Task	Who Completes/ Collects	Where to Send	Deadline	Technical Support Contact
1. CF 1415 - ODDS Notification Form for Children Entering Foster Care* ;	CDDP	Children’s Foster Care (CFC) Unit	No later than the 14 th of the month to open the 1 st of the following month.	CFC Unit: Julie Van Nette PH: 503-378-5001 julie.l.vannette@state.or.us Skyla Bendorf PH: 503-378-5676 skyla.a.bendorf@state.or.us
2. County’s Statement of Eligibility* ; <u>and</u>	CDDP			
3. Court Order* <u>or</u> DSH 0032 - DD Child Placement Agreement *	CDDP acquires from CW CDDP with parent/guardian	ATTN: Skyla Bendorf via fax 503-378-5297 <u>or</u> secure email		
4. SSA-827 - Authorization to Disclose Information to the Social Security Administration (children 12 and older only)	CDDP obtains signature of child age 12 or older			
5. When requested, other documents as required by SSI Unit for initial SSI application.	CDDP	SSI Unit (Fax number provided w/request of additional documents)		
*These documents are shared with the SSI Unit and provide the required information for the SSI application process to begin. <u>The SSI application process cannot begin until the child is living in the foster home.</u>				
1. SDS 0539D - Children’s Medical Eligibility Unit Application;	CDDP	Children’s Medical Eligibility Unit (CMEU) Via ODDS secure email system only; contact CMEU worker to request a secure email.	MUST BE SENT TO CMEU at the same time the above documents are sent to the CFC Unit.	CMEU: Barbara Carroll (A-K) PH: 503-378-5795 barbara.e.carroll@state.or.us Consuelo DeCamp (L-Z) PH: 503-378-5768 consuelo.decamp@state.or.us
2. Copy of SS Card and Birth Certificate**;	CDDP			
3. Copy of CF 1415 - ODDS Notification Form for Children Entering Foster Care;	CDDP			
4. SDS 0620CH - Presumptive Medical Disability Approval; and	CDDP			
5. MSC 0415H - Notification of Other Health Insurance with copy of private insurance card (#5 required only if child has private insurance).	CDDP			
**If SS card or BC is unavailable, contact CMEU for assistance with determining citizenship/SS status.				

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PURPOSE: To provide required waiver information to open a comp services waiver, and provide information for changes such as a change of address or new provider.				
Document/Task	Who Completes/ Collects	Where to Send	Deadline	Technical Support Contact
1. LOC (Level of Care) Assessment for DD58 (initially);	CDDP (Regional Crisis may complete crisis enrollment)	Provider Technical Assistance Unit (PTAU) via eXPRS	No later than the 14 th of the month.	Provider Technical Assistance Unit (formerly known as Wavier and Enrollment Unit). Contact PTAU staff member assigned to your county.
2. DD Eligibility/Enrollment/ Update; and				
3. Completed and approved SNAP budget sheets.				

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PURPOSE: To assign a Medicaid provider number to new providers. It is a federal requirement that foster care providers be set up as Medicaid providers in order to be paid with Medicaid waiver funds.

NOTE: The PEA is required for new children’s foster care providers. The PEA must be signed on or before the date that Medicaid funds will begin for foster care services.

Document/Task	Who Completes/ Collects	Where to Send	Deadline	Technical Support Contact
SDS 0738 - Foster Home Medicaid Provider Enrollment Agreement (PEA)	CDDP	Children’s Foster Care (CFC) Unit ATTN: Skyla Bendorf via fax 503-378-5297 <u>or</u> secure email	<u>Five days prior</u> to child entry when possible or ASAP	<u>CFC Unit:</u> Skyla Bendorf PH: 503-378-5676 skyla.a.bendorf@state.or.us or Julie Van Nette PH: 503-378-5001 julie.l.vannette@state.or.us

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PURPOSE: To allow youth ages 18 + to remain in their current certified child foster home.

NOTE: Youth 18+ may remain in their current certified child foster home until age 21 if the ISP team decision reflects that it is in the child's best interest to remain in the current certified child foster care home and a Safety Assessment (SDS 4541) has been completed (Safety Assessment required unless child is in the custody of CW).

Document/Task	Who Completes/ Collects	Where to Send	Deadline	Technical Support Contact
CDDP may need to review adult eligibility	CDDP	PTAU	Prior to turning 18	Contact PTAU staff member assigned to your county
DHS 60-01, Variance Request (if DD certified)	CDDP	Email or fax to Licensing for variance approval (only if DD certified) Fax: 503-373-2228	Prior to turning 18	<u>Licensing:</u> Gary Williams PH: 503-373-2201 gary.williams@state.or.us
SDS 4541 - Safety Assessment for Children and Adults Living in the Same Home*	CDDP	CFC Unit via fax 503-378-5297 <u>or</u> secure email	Prior to turning 18	<u>CFC Unit:</u> Skyla Bendorf PH: 503-378-5676 skyla.a.bendorf@state.or.us or Julie Van Nette PH: 503-378-5001 julie.l.vannette@state.or.us

*In the event the child is in the custody of CW, it is best practice to work with CW and have the CW worker sign off on the Safety Assessment.

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PURPOSE: To change the payee when a child turns 18.				
Document/Task	Who Completes/Collects	Where to Send	Deadline	Technical Support Contact
<p>Confirm the foster provider, family member, or representative (other than ODDS) has applied to become the child’s representative payee for SSA benefits;</p> <p style="text-align: center;"><i>and</i></p> <p>Inform the new payee that SSA may send them documents to complete; these documents must be completed or the youth could lose SSI eligibility.</p>	CDDP	N/A	<p><u>Upon the child turning 18*</u> (This allows the new payee time to process the change of payee application)</p> <p>*ODDS pays the Room & Board SSI for one month after the child turns 18.</p>	<p><u>SSI Unit:</u> Carol Hitchen PH: 503-378-5352 carol.hitchen@state.or.us</p> <p>or</p> <p>Jay Clark PH: 03-378-5325 jay.w.clark@state.or.us</p>

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PURPOSE: To make changes to a foster care child's medical case. Provides change of information to be added to a child's medical case, such as a change of address or new provider.				
Document/Task	Who Completes/ Collects	Where to Send	Deadline	Technical Support Contact
DD Eligibility/Enrollment/ Update	CDDP (Regional Crisis may complete crisis enrollment)	eXPRS	ASAP	<u>CMEU:</u> Barbara Carroll (A-K) PH: 503-378-5795 barbara.e.carroll@state.or.us Consuelo DeCamp (L-Z) PH: 503-378-5768 consuelo.decamp@state.or.us

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Glossary of Terms

1. **CFC (Children's Foster Care) Unit**: Opens foster care services; processes PEAs; updates placement and enrollment changes; provides technical assistance.
2. **CMEU**: Children's Medical Eligibility Unit, Branch 5517. This is the branch where the medical case for children in foster care or residential services is set up.
3. **Foster Home Medicaid Provider Enrollment Agreement (PEA)**: The form completed by the foster home provider that allows a Medicaid provider number to be assigned. A provider must have a Medicaid number to receive payment for providing Medicaid services such as foster care.
4. **ODDS**: Office of Developmental Disability Services.
5. **Provider Technical Assistance Unit (PTAU)**: Formerly known as the Waiver and Enrollment Unit, the PTAU is where the LOC and DD Eligibility/Enrollment are processed via eXPRS.
6. **Regional Crisis**: Your CDDP Region that coordinates services and funding for individuals in crisis.
7. **SSA**: Social Security Administration.
8. **SSI Unit**: Applies for and maintains SSI/SSB on behalf of the child until age 18.

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Forms in use:

- Authorization to Disclose Information to the Social Security Administration (SSA-827)
- Children's Medical Eligibility Unit Application (SDS 0539D)
- DD Child Placement Agreement (DHS 0032)
- DD Foster Care Data Change Form (SDS 4547)
- Foster Home Medicaid Provider Enrollment Agreement (SDS 0738)
- Notification of Other Health Insurance (MSC 0415H)
- ODDS Notification Form for Children Entering Foster Care (CF 1415)
- Presumptive Medical Disability Approval (SDS 0620CH)
- Safety Assessment for Children and Adults Living in the Same Home (SDS 4541)
- Variance Request (DHS 60-01)

Transmittals:

- CMEU Information Memorandum (SPD-IM-10-036)
- Annual Functional Needs Assessment (APD-PT-15-044)
- DD58 Children's Foster Care Enrollment: Required Form for Room & Board (APD-AR-15-031)
- Services for children under 18 years old, with intellectual or developmental disabilities (I/DD) and residing in a child-welfare funded foster family setting (APD-PT-14-038)

How to access forms:

- Department Forms
<https://apps.state.or.us/cf1/FORMS/>
- Social Security Administration Form SSA-827 (required only for children ages 12 and older)
<http://www.socialsecurity.gov/forms/ssa-827.pdf>

How to access transmittals:

- <http://www.dhs.state.or.us/policy/spd/transmit/transmit.htm>