

Division/Section	Child Welfare
Chapter No./Name	8 – Adoption
Part No./Name	7 – Adoption Subsidy Program (State and IV-E)
Section No./Name	Adoption Subsidy Program (State and IV-E)
Document No./Name	8-720 Determination Of The Maintenance and Special Services
	Subsidies
Effective Date	August 2, 2021

### I. STATEMENT OF POLICY

Adoptive families may be eligible to continue receiving assistance from the Louisiana Department of Children and Family Services (DCFS) beyond the point of the legal finalization of an adoption through an adoption subsidy.

#### A. MAINTENANCE SUBSIDY

The amount of the maintenance subsidy payment is determined by the needs of the child at the time of application for an adoption subsidy. Payment may be up to 80% of the foster care board rate.

Once an adoption assistance agreement is signed and in effect, it can be terminated under the following circumstances:

- 1) the child has attained the age of 18;
- 2) the State determines the adoptive parents are no longer legally responsible for support of the child; or
- 3) the State determines the adoptive parents are no longer providing any support to the child:
- 4) upon conclusion of the terms of the subsidy agreement;
- 5) upon request of the adoptive parent(s);
- 6) the child's death;
- 7) the death of the adoptive parent(s) (however, the agreement can be transferred to a legal guardian or tutor); or
- 8) if the family fails to participate in the renewal process.

A parent is considered no longer legally responsible for the support of a child when parental rights have been terminated or when the child becomes an emancipated minor, marries, or enlists in the military. The term "any support" is defined as various forms of financial support. The State may determine payments for family therapy, tuition, clothing, maintenance of special equipment in the home, or services for the child's special needs, are acceptable forms of financial support. Consequently, the State may continue the Title IV-E adoption subsidy if it determines the parent is providing some form of financial support to the child even in situations where the child is placed in some form of out-of-home care.

## **B. SPECIAL SERVICES ADOPTION SUBSIDY**

A Special Services Subsidy is a subsidy that pays for a child's health related expenses when these are the result of a pre-existing chronic, severe medical or mental condition and such expenses are not covered through other sources (i.e., Children's Special Health Services, school system, state hospitals, Title XIX Medicaid, etc.). Special Service Subsidies for agency adoptions are subject to prior approval by the Child Welfare Manager Special Services



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Subsidies for private agency adoptions, independent adoptions, and post-finalization must be approved by the State Office Adoption Child Welfare Consultant.

# II. PROCEDURES

#### A. MAINTENANCE SUBSIDY

1. A determination shall be made as to whether the child is eligible for a IV-E maintenance subsidy or whether the adoptive family meet state-funded (non IV-E) eligibility criteria (refer to Section 8-715). If the child is determined to be eligible for an adoption subsidy, payment may be up to 80% of the foster care board rate. (Refer to Chapter 6. Section 6-1605). The amount will be based upon the per diem rate for the exact number of days in each month. The exact amount applied for will be agreed upon between the family and the caseworker. The family will have the option to apply for the maximum amount or a smaller amount. The current maximum regular subsidy rates are as follows:

AGE

Birth through age 1

Age 2 through age 5

Age 6 through age 12

Age 13 up to age 18

MAINTENANCE SUBSIDY

\* \$15.57 per day

\$13.56 per day

\$14.95 per day

\$16.69 per day

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- 2. The family is eligible to receive the first Maintenance Subsidy payment for the first full month following the month in which the adoption petition was filed.
- 3. The TIPS 106-A authorization of the adoption subsidy shall not be approved by the Child Welfare Manager until CW Form SA-II, Part 2. has been completed. A copy of the Form SA-II for children placed out of state shall be forwarded to State Office to be maintained in the Subsidy record.

The TIPS 106-A will reflect the same effective date as the effective date of subsidy entered on CW SA II Part 2.

It is the worker's responsibility to assure foster care payments are terminated the day before the effective subsidy date entered on the CW SA II, Part 2.

#### B. SPECIAL SERVICES ADOPTION SUBSIDY

1. The amount of a Special Services Subsidy will be determined after consideration of the following factors:



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a. The special service is recommended by an appropriate specialist who estimates the length of time the service will be needed, e.g., six months of speech therapy, or psychotherapy; or for how many instances, e.g. surgery on two occasions for a urological problem.

An estimate of the cost of service must be obtained from the appropriate specialist and a copy attached to the adoption assistance application submitted to the Child Welfare Manager or State Office Adoption Child Welfare Consultant. It is recognized that the cost of treatment or surgery may vary among specialists and that increases may occur over time.

- b. The service needed is not available through Children's Special Health Services, Medicaid, or some other community resource. This must be explored by the adoption specialist/child's caseworker before the application is approved. If family resources are a possibility, such as health insurance, this must also be explored with the family by the caseworker.
- c. Payment on a reimbursement basis will be made following the submittal of receipts from the individual or organization offering the services previously approved by the Child Welfare Manager. Payment cannot be for more than would be paid by Foster Care.
- d. The special service subsidy can be for an unspecified amount if based on the child's age, or the complexity of the pre-existing condition, specialists have difficulty in projecting costs into the distant future.
- 2. Special services payment could include the following needs:
  - a. Special medical costs not covered by Medicaid or family's health insurance in connection with any chronic, severe, physical condition which existed prior to the date of the judgment of adoption. Routine medical services such as checkups, dental work and vision screening for example, are therefore not included. These types of services are available through Medicaid. Likewise, routine childhood illnesses, minor conditions, or accidents do not qualify a child as special needs nor for this type of subsidy unless a chronic condition persists which requires regular treatment. These could include such costs as surgery, medication, and drugs.
  - Mental health treatment, or psychological expenses, special equipment, prosthetic devices or speech therapy costs that are associated with a preexisting condition.



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Special medical equipment and prosthetic devices are allowed for payment one-time only - per child, per category of service.

Mental health treatment, psychological services or speech therapy payments may be time limited as prescribed in the child's plan of specialized care.

Initial individual or family assessments, diagnostic interviews, or psychological testing sessions are normally completed prior to the filing of the adoption petition. When prior completion is not possible, however, approval for subsidy payment of these services may be made. When an assessment (referred to as a 90801), etc., is needed, it shall be requested from a Medicaid provider. (Refer to the CW Form BH series and protocol for referral to LA Behavioral Health Partnership (LBHP).

NOTE: The adoptive parent will self-refer their child(ren) for services utilizing the Medicaid card. If the child meets criteria, services will be managed through Medicaid and can be secured by the adoptive family through direct referral to a Medicaid provider or through a call to the Member Services call center. In situations where Medicaid denies the service and therapy for the manifesting behavior is a part of the adoption subsidy agreement, DCFS shall obtain documentation of denial from the adoptive parent, make the referral to a Medicaid provider and inform the provider to bill DCFS directly at the Medicaid rate (see below). No Clinical Advisor (CA) referral is necessary but TIPS entries are required (see below).

The Medicaid rates are for each unit (i.e., 1 assessment is \$109.97 for psychiatrist, even if it requires two sessions to complete). The other categories are per session.

90801 Assessment: \$76.97 For LCSW, LPC, LMFT

\$87.97 for Psychologist \$109.97 for Psychiatrist

90806 Individual Therapy: \$47.64 for LCSW, LPC, LMFT

\$54.45 for Psychologist \$68.06 for Psychiatrist

90847 Family Therapy: \$55.16 for LCSW, LPC, LMFT

\$63.04 for Psychologist \$78.80 for Psychiatrist

90862 Medication Management: \$39.48 for Psychiatrist



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TIPS Coding for Payment: For services denied by Medicaid or that are not covered by the LBHP, DCFS will resolve payment processing through the current TIPS payment process. Staff will need to set up providers in TIPS and input client TIPS 106 service authorizations prior to processing invoices. The major/minor codes which will require TIPS authorizations are: 600/631, 600/634, and 800/881. The currently approved codes for mental/behavior health evaluations, assessments, testing or treatment are as follows:

400/415 – psychotropic medication check (for FC program only) 400/455 – mental/behavioral health evaluation, assessment and testing (CPI, FS, FC and SP programs) 600/631 – therapy (for FS and FC programs) 800/881 – IHBS (for FS, FC and SP programs).

Subsidy payment is allowed for on-going individual, family, or group therapy treatment and for medication management for those children diagnosed with a DSM V (or equivalent classification system) condition. NOTE: Unlike the Foster Care Program, provider reimbursement for mileage associated with inhome mental health treatment is not permitted through the Adoption Subsidy Program.

- c. Sitter services are available and should be offered when it is anticipated that a special needs child will require hospitalization due to a pre-existing medical condition. This service is inclusive of situations when a sitter is needed in the hospital or in the home to allow a parent to visit with the adoption subsidy child in the hospital. Sitter services should be considered only when no other family members or relatives are available. Payment up to \$20.00 per hour is allowed.
- d. Respite care services should be offered to families who adopt children with evidence of extensive medical or psychiatric problems or a diagnosed severely handicapping condition. The condition(s) must be such that it is reasonable to conclude that the family cannot provide the same consistent care without relief. If respite services have already been approved, they are available in specific emergency situations such as death of an immediate family member, illness, or as relief to the adoptive parent(s) before they become exhausted from caring for their special needs child. Respite is not expected to be used on a daily basis. The maximum annual number of respite days approved shall not exceed 25. Service authorization is made by the Regional Adoption Subsidy Supervisor. The code is as follows:

060/062 Substitute relief-ad respite - This code should be used to reimburse adoptive parents at the \$25.00 per day rate.



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#### e. Disallowed Services

The following services shall neither be authorized nor payment approved as an adoption subsidy service:

- Long term inpatient psychiatric or substance abuse treatment provided in a private psychiatric or substance abuse facility;
- ii. Residential care provided in a group home, community home, residential treatment facility, or boarding school;
- iii. Case management services;
- iv. Modifications to the home/motor vehicle of the adoptive family;
- v. Babysitting services
- vi. Orthodontia and tutoring were discontinued on 1-20-2006. However, if these services were approved as part of a subsidy agreement prior to January 20, 2006, they may continue to receive subsidy payment provided the service is still indicated as being needed; and,
- vii. Day Care services were discontinued on 7-31-2008. Day Care services which were approved as part of a subsidy agreement prior to July 31, 2008 may be submitted to State Office every six months for consideration of renewal in keeping with Day Care policy.
- 3. The Special Services Subsidy payment process is as follows:

Requests for expenditures must initially be submitted for payment to the family's health insurance if available, or Medicaid. The Subsidy Program is responsible for the balance of claims not paid by the family's health insurance or not covered by Medicaid if applicable. At no time shall the payments exceed what the agency has established as a limit had the child remained in foster care.

If the family has health insurance, the expenditure shall be submitted within two (2) months of the date of the insurance notice of claim processing. The request must be accompanied with the remittance advice from the family's health insurance indicating scope of coverage and whether the claim was denied, partially paid, or paid in full. If Medicaid pays any amount, it is considered payment in full and the Subsidy Program shall not be billed. If the family does not have health insurance or Medicaid,



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expenditures must be submitted to the Subsidy Program for payment no later than the month following the month in which the service was delivered.

# III. FORMS AND INSTRUCTIONS

CW <u>Form SA-II</u> / <u>Instructions</u> Adoption Subsidy Agreement <u>TIPS 106A Form</u> TIPS Client Service Authorization Adoption Client
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# IV. REFERENCES

There are no references associated with this policy.