

CFOP 170-15

FEDERAL AND STATE FUNDING ELIGIBILITY

DRAFT UPDATES

JENNIFER MACDONALD

OFFICE OF CHILD AND FAMILY WELL-BEING

MAY 2022 STATEWIDE TRAINING



CHAPTER 1: GENERAL INFORMATION

SECTION 1-9: QUALITY ASSURANCE

DCF IS CONDUCTING REVIEWS OF GAP, EGAP, AND EMAS CASES ANNUALLY.

RESULTS OF THE REVIEW ARE PROVIDED TO BOTH CBC PROGRAM AND ELIGIBILITY POINTS OF CONTACT.

REVIEW TOOL WILL IDENTIFY ACTIONS REQUESTED FOR EACH ERROR.

CBC MUST RESPOND TO ACTIONS ON THE TOOL AND RETURN TO DCF.





CHAPTER 2: MEDICAID

SECTION 2-5: MEDICAID FOR CHILDREN IN OUT-OF-HOME CARE

UPON ENROLLMENT OF THE CHILD IN CIC MEDICAID, A CBC DESIGNEE SHALL COMPLETE THE MEDICAID MANAGED CARE (MMC) PLAN SELECTION PROCESS.

FOR CHILDREN CURRENTLY ENROLLED IN A MMC PLAN UPON ENROLLMENT IN CIC MEDICAID, THE MMC PLAN SHALL REMAIN THE SAME IF THE CHILD IS RECEIVING TREATMENT OR SERVICES WHICH WOULD BE DISCONTINUED DUE TO A PLAN CHANGE UNLESS DEPARTMENT APPROVAL IS OBTAINED.





CHAPTER 2: MEDICAID

SECTION 2-18: FSFN DOCUMENTATION

PERMANENT GUARDIANSHIP – GUARDIANSHIP ASSISTANCE PROGRAM

TO CHANGE PAYEE NAME AND ADDRESS FROM CBC TO PERMANENT GUARDIAN'S, COMPLETE STEPS IN ORDER:

1. Discharge Out-of-Home Placement
2. Create/Approve Non-Placement Service w/ Service Category of 'Guardianship'

Note: This must occur even if GAP payment is Zero.

3. Submit Medicaid 'Change' Row

INFORMATION WILL UPDATE TO THE NAME OF CAREGIVER 1 ON THE PROVIDER AND PROVIDER'S PHYSICAL ADDRESS.





CHAPTER 2: MEDICAID

SECTION 2-18: FSFN DOCUMENTATION

CHILD TURNED 18 AND NOT IN EFC

TO PROVIDE ESS WITH THE YOUNG ADULT'S NAME AND ADDRESS FOR ONGOING MEDICAID COMMUNICATION, COMPLETE STEPS IN ORDER:

1. Ensure Primary Address on young adult's Person Management page is accurate, active (no End Date)
2. Discharge Out-of-Home Placement
3. Submit Medicaid 'Change' Row

INFORMATION WILL UPDATE TO THE YOUNG ADULT'S NAME AND ADDRESS FROM FSFN PERSON MANAGEMENT.



NEW CLOSURE REASONS AS OF FEBRUARY 2022

Adoption
Began Receiving SSI
Child Turned 18
Death
Incarceration
Moved Out of State
Other - ESS Review Required
Permanent Guardianship
Reunification
Young Adult Turned 21

Adoption – Used in pre-adoption case before creating post-adoption case.

Began Receiving SSI – Used for an any case to terminate CIC Medicaid when child or young adult starts to receive SSI.

Child Turned 18 – Used for any case where child turns 18 and is no longer eligible for CIC Medicaid, including termination from EMAS or EGAP prior to age 21.

Death – Used in any case where child/young adult is deceased.

Incarceration – per policy update, do not utilize.

Moved Out of State – Used in an any case to terminate CIC Medicaid when child or young adult moves out of Florida.

Other – ESS Review Required – Used in OOH cases that discharge for Transfer to Licensed Private Agency. Details as to closure must be included in Notes field for ESS review. Any other usage should be reviewed by OCFW.

Permanent Guardianship – Used in OOH cases that do not enter GAP.

Reunification – Used in OOH cases where child is reunified.

Young Adult Turned 21 – Used for any case where young adult turns 21 and is no longer eligible for CIC Medicaid.





CHAPTER 2: MEDICAID

SECTION 2-18: FSFN DOCUMENTATION

DISCHARGED FOR REUNIFICATION

TO SEND THE CHILD'S PARENT/NEW CAREGIVER'S NAME AND ADDRESS FOR AN EX PARTE DETERMINATION, COMPLETE STEPS IN ORDER:

1. Discharge Out-of-Home Placement
2. Create Living Arrangement
3. Submit Medicaid 'Closure' Row

Adoption
Began Receiving SSI
Child Turned 18
Death
Incarceration
Moved Out of State
Other - ESS Review Required
Permanent Guardianship
Reunification
Young Adult Turned 21

INFORMATION WILL UPDATE TO THE NAME OF CAREGIVER 1 ON THE LIVING ARRANGEMENT AND THE PRIMARY ADDRESS FROM CAREGIVER 1'S FSFN PERSON MANAGEMENT.





CHAPTER 2: MEDICAID

SECTION 2-18: FSFN DOCUMENTATION

ADOPTED CHILD TURNS 18 (NOT ENROLLED IN EMAS OR ELIGIBLE FOR PEES)

TO ENSURE A SUCCESSFUL CLOSURE SUBMISSION AND SEND THE ADOPTIVE PARENT'S NAME AND CURRENT ADDRESS FOR AN EX PARTE DETERMINATION, COMPLETE STEPS IN ORDER:

1. Submit Medicaid 'Closure' Row
2. Terminate Non-Placement Service w/ Service Category of 'Adoption' and Adoption Assistance Agreement

NOTE: A ZERO RATE 'ADOPTION' NON-PLACEMENT SERVICE MAY BE OPENED TO AID THE SUCCESSFUL PROCESSING OF A CLOSURE ROW IF THE ABOVE STEPS ARE NOT FOLLOWED. DON'T CREATE A LIVING ARRANGEMENT.



Adoption
Began Receiving SSI
Child Turned 18
Death
Incarceration
Moved Out of State
Other - ESS Review Required
Permanent Guardianship
Reunification
Young Adult Turned 21



CHAPTER 2: MEDICAID

SECTION 2-18: FSFN DOCUMENTATION

GAP CHILD TURNS 18 (NOT ENROLLED IN EGAP OR ELIGIBLE FOR PESS)

TO ENSURE A SUCCESSFUL CLOSURE SUBMISSION AND SEND THE LEGAL GUARDIAN'S NAME AND CURRENT ADDRESS FOR AN EX PARTE DETERMINATION, COMPLETE STEPS IN ORDER:

1. Submit Medicaid 'Closure' Row
2. End the Non-Placement Service w/ Service Category of 'Guardianship' and terminate the Guardianship Assistance Agreement

NOTE: A ZERO RATE 'GUARDIANSHIP' NON-PLACEMENT SERVICE MAY BE OPENED TO AID THE SUCCESSFUL PROCESSING OF A CLOSURE ROW IN THE EVENT THIS ABOVE STEPS ARE NOT FOLLOWED. DO NOT CREATE A LIVING ARRANGEMENT



Adoption
Began Receiving SSI
Child Turned 18
Death
Incarceration
Moved Out of State
Other - ESS Review Required
Permanent Guardianship
Reunification
Young Adult Turned 21



CHAPTER 2: MEDICAID

SECTION 2-18: FSFN DOCUMENTATION

YOUNG ADULT TURNS 21 (WHILE IN EFC)

TO PROVIDE ESS YOUNG ADULT'S NAME AND ADDRESS FOR AN EX PARTE DETERMINATION FOR FORMER FOSTER CARE (ACA) MEDICAID COVERAGE UNTIL AGE 26, COMPLETE STEPS IN ORDER:

1. Ensure Primary Address on young adult's Person Management page is accurate, active (no End Date)
2. Discharge Out-of-Home Placement
3. Submit Medicaid 'Closure' Row

INFORMATION WILL UPDATE TO THE YOUNG ADULT'S NAME AND ADDRESS FROM FSFN PERSON MANAGEMENT.



Adoption
Began Receiving SSI
Child Turned 18
Death
Incarceration
Moved Out of State
Other - ESS Review Required
Permanent Guardianship
Reunification
Young Adult Turned 21



CHAPTER 2: MEDICAID

SECTION 2-18: FSFN DOCUMENTATION

YOUNG ADULT TURNS 21 (WHILE IN PESS OR AFTERCARE)

TO PROVIDE ESS YOUNG ADULT'S NAME AND ADDRESS FOR AN EX PARTE DETERMINATION FOR FORMER FOSTER CARE (ACA) MEDICAID COVERAGE UNTIL AGE 26, COMPLETE STEPS IN ORDER:

1. Ensure Primary Address on young adult's Person Management page is accurate, active (no End Date)
2. Submit Medicaid 'Closure' Row
3. Close (enter End Date) Living Arrangement

INFORMATION WILL UPDATE TO THE YOUNG ADULT'S NAME AND ADDRESS FROM FSFN PERSON MANAGEMENT.



Adoption
Began Receiving SSI
Child Turned 18
Death
Incarceration
Moved Out of State
Other - ESS Review Required
Permanent Guardianship
Reunification
Young Adult Turned 21



CHAPTER 2: MEDICAID

SECTION 2-18: FSFN DOCUMENTATION

YOUNG ADULT TURNS 21 (WHILE IN EMAS OR EGAP)

TO ENSURE A SUCCESSFUL CLOSURE SUBMISSION AND SEND ADOPTIVE PARENT/LEGAL GUARDIAN'S NAME AND CURRENT ADDRESS FOR AN EX PARTE DETERMINATION, COMPLETE STEPS IN ORDER:

1. Submit Medicaid 'Closure' Row
2. End the Non-Placement Service w/ Service Category of 'Adoption' or 'Guardianship' and terminate the EAAA or EGAA

NOTE: A ZERO RATE NON-PLACEMENT SERVICE MAY BE OPENED TO AID THE SUCCESSFUL PROCESSING OF A CLOSURE ROW IF ABOVE STEPS ARE NOT FOLLOWED. DO NOT CREATE A LIVING ARRANGEMENT.



Adoption
Began Receiving SSI
Child Turned 18
Death
Incarceration
Moved Out of State
Other - ESS Review Required
Permanent Guardianship
Reunification
Young Adult Turned 21

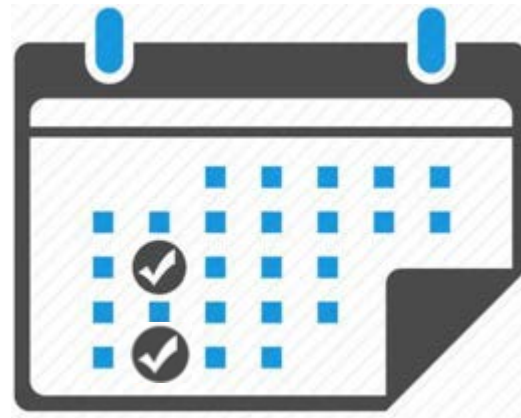


CHAPTER 3: TANF

SECTION 3-5: FSFN DOCUMENTATION

THE 'TANF ELIGIBILITY DETERMINATION DUE' REPORT IN FSFN MUST BE UTILIZED BI-WEEKLY, AT MINIMUM, TO IDENTIFY CASES WHICH REQUIRE THE COMPLETION OF A TANF ELIGIBILITY DETERMINATION.

For ICPC cases, a Legal Record must be created and a Legal Action Initiated of 'Custody of Other State – Begin' with a Legal Custody Status as 'Custody of Other State' to prevent the case from appearing on the Report.





CHAPTER 4: TITLE IV-E

SECTION 4-3: TITLE IV-E FOSTER CARE

- a. TITLE IV-E FOSTER CARE MAINTENANCE PAYMENTS (FCMP) MADE TO LICENSED OUT-OF-HOME CARE PROVIDERS COVER:
 - (1) The cost of (and the cost of providing) food, clothing, shelter, daily supervision, child care costs for working foster parent(s), school supplies, a child's personal incidentals, allowance, liability insurance with respect to the child, reasonable travel to the child's home for visitation, and reasonable travel for the child to remain in the school in which the child is enrolled at the time of placement; and,
 - (a) Child care costs may be included in the FCMP paid to the foster parent or paid directly to the licensed child care provider.
 - (2) In the case of residential group care, payments may include the reasonable costs of administration and operation of such facility necessary to provide the items noted under paragraph (1) above.





CHAPTER 4: TITLE IV-E FOSTER CARE

SECTION 4-6: REIMBURSABILITY

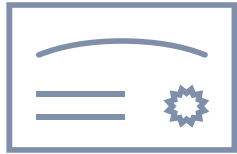
TITLE IV-E FOSTER CARE MAINTENANCE PAYMENTS (FCMP) ARE MADE ONLY ON BEHALF OF AN ELIGIBLE CHILD WHO IS:

1. IN THE FOSTER FAMILY HOME OF AN INDIVIDUAL OR FAMILY; OR
2. IN A SPECIFIED SETTING CHILD CARE INSTITUTION (CCI); OR
3. IN A NON-SPECIFIED SETTING CHILD CARE INSTITUTION (CCI) FOR UP TO TWO WEEKS.
 - ⌚ Applies to new placements with provider made on or after 10/01/2021. Hospitalization, Visitation and/or Missing Child placements and return to same provider continues grandfathering for placements that began prior to 10/01/2021.
 - ⌚ Hospitalization, Visitation and/or Missing Child placements count towards 14-day clock.
 - ⌚ For every placement with a new Non-Specified Setting CCI provider, the 14-day clock restarts. A redetermination is needed to update eligibility status to reimbursable as of new placement begin date.



CHAPTER 4: TITLE IV-E FOSTER CARE

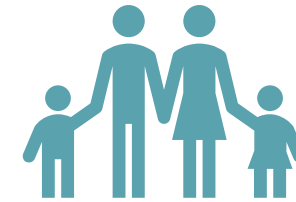
SECTION 4-6: REIMBURSABILITY



The home of the individual or family is licensed by the department.



Child(ren) in foster care are placed with licensed caregivers, who reside with the child, for 24-hour care.

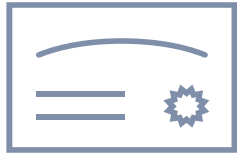


The licensed provider(s) do not provide care for more than 6 foster care children*.



CHAPTER 4: TITLE IV-E FOSTER CARE

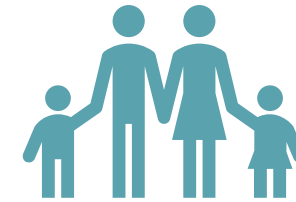
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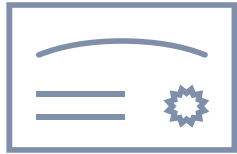
F. S. implemented more restrictive regulations which requires an over capacity waiver when more than 5 foster children are placed, or more than 7 children reside in the home including caregiver's own children.

Family foster homes must meet the criteria of ss. 409.145, 409.1415, and 490.175, F.S., and 65C-45.015, F.A.C.



CHAPTER 4: TITLE IV-E FOSTER CARE

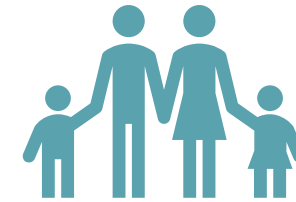
SECTION 4-6: REIMBURSABILITY



The home of the individual or family is licensed by the department.



Child(ren) in foster care are placed with licensed caregivers, who reside with the child, for 24-hour care.



- *Parenting youth to remain w/ their child.
- *Siblings to remain together.
- *Child w/ a meaningful relationship w/ foster family to remain in home.
- *Family w/ special training/skills to provide care to a child who has a severe disability.



CHAPTER 4: TITLE IV-E FOSTER CARE

SECTION 4-6: REIMBURSABILITY

FFPSA SPECIFIED SETTINGS

A Qualified Residential Treatment Program (Q RTP).

A setting specializing in providing prenatal, post-partum, or parenting supports for youth.

A supervised setting in which the youth is living independently (youth who has attained 18 years of age).

A setting providing high-quality residential care and supportive services (*defined by IV-E agency*) to children and youth who have been found to be, or are at risk of becoming, sex trafficking victims.

“At-Risk Home” means a child-caring agency providing care and support services to children and youth who are at risk of becoming sex trafficking victims. Definition of At-Risk categories: family history of or exposure to HT, history of running away, history of sexual abuse or sexually acting out, inappropriate interpersonal or social media, or multiple out-of-home placements.

“Safe House” means a child-caring agency certified by the Department that provides 24-hour care and supervision to care for sexually exploited children, as outlined in Section 409.1678, F.S.



CHAPTER 4: TITLE IV-E FOSTER CARE

SECTION 4-6: REIMBURSABILITY

FFPSA NON-SPECIFIED SETTINGS

Any placement where the Child Caring Institution is licensed as one of the following:

1. Provider is licensed as a CCA with any of the following sub-types:
 - Emergency Shelter
 - Residential Group Care
 - Runaway
 - Runaway/Emergency Shelter
 - Traditional
 - Unaccompanied Alien Child (UAC) Home
 - Wilderness Camp
2. Provider is licensed as a Non-DCF License without QRTP credential.
3. Provider is licensed as a Child Placing Agency (FSFN logic but CPA licensed providers should not have placements attached).



CHAPTER 4: TITLE IV-E FOSTER CARE / SECTION 4-6: REIMBURSABILITY

Q RTP

30-day assessment by a qualified individual

If not completed within 30 days of start of placement, cannot claim FCMP for the entire placement.

Qualified individual

The term “qualified individual” means a trained professional or licensed clinician who is not an employee of the title agency and who is not connected to, or affiliated with, any placement setting in which children are placed by the title IV-E agency. For example, a qualified individual may be a licensed social worker or a trained child welfare worker.

60-day court review

Within 60 days of the start of each Q RTP placement, the court must consider the assessment, determination, and documentation made by the qualified individual in approving the placement. If the court does not approve the placement timely, i.e., within the 60-day timeframe, the title IV-E agency may only claim title IV-E FCMPs for the first 60 days of the placement in the Q RTP.

Long-term placements

For each Q RTP placement a child aged 13 and older is placed for more than 12 consecutive months or 18 non-consecutive months, the child’s case plan must maintain documentation of the most recent version of evidence/documentation supporting the placement and signed approval of the head of the state agency for the continued placement. For a child under age 13, the same applies for placements more than six consecutive or nonconsecutive months.

Exiting Q RTP

FCMP may continue to be claiming for only 30 days after: the 30-day assessment determines that the Q RTP is not appropriate; a court disapproves placement; or a determination is made that a child in an Q RTP is going to return home or be placed with a relative, a legal guardian, an adoptive parent, or in a foster family home

Administrative costs

Administrative costs for the duration of the placement in the Q RTP regardless of whether the requirements (assessment, documentation and judicial determination requirements for placement in a Q RTP) are met.



CHAPTER 4: TITLE IV-E FOSTER CARE

SECTION 4-8: REMOVAL EPISODE

ONCE THE COURT MAKES A JUDICIAL DETERMINATION THAT IT IS CONTRARY TO THE CHILD'S WELFARE TO REMAIN IN THE HOME, THE CHILD CANNOT REMAIN WITH THE SUBJECT OF THE CTW FINDING UNLESS THE COURT SPECIFIES AN ALTERNATIVE TIMEFRAME.

IF NO ALTERNATIVE TIMEFRAME WAS ESTABLISHED, THE REMOVAL REQUIREMENT IS NOT MET AND THE CHILD IS INELIGIBLE FOR TITLE IV-E.

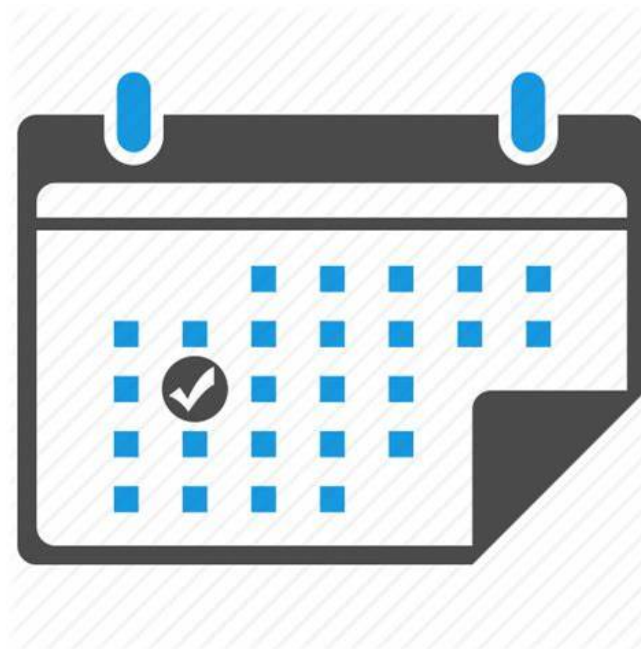
NOTE: FOR INSTANCES OF THIS OCCURRING FOR AN OTHERWISE IV-E ELIGIBLE CHILD, CONSULT WITH OCFW.





CHAPTER 4: TITLE IV-E FOSTER CARE SECTION 4-8: FSFN DOCUMENTATION

THE 'TITLE IV-E ELIGIBILITY DETERMINATIONS DUE' REPORT IN FSFN MUST BE UTILIZED ON A MONTHLY BASIS, AT MINIMUM, TO IDENTIFY 'INITIAL' AND 'REDETERMINATIONS' THAT ARE UPCOMING AS DUE.





CHAPTER 4: TITLE IV-E FOSTER CARE

SECTION 4-8: FSFN DOCUMENTATION

ONGOING TITLE IV-E ELIGIBILITY DETERMINATIONS.

- (1) WHEN A CHILD IS PLACED IN A FFPSA NON-SPECIFIED SETTING CCI PLACEMENTS AS OF THE 15TH DAY OF A CHILD'S PLACEMENT, A REDETERMINATION MUST BE COMPLETED TO REFLECT AN 'ELIGIBLE, NOT REIMBURSABLE' ELIGIBILITY STATUS.
- (2) AS OF THE 1ST DAY OF A CHILD PLACED IN A QRTP WHEN THE 30-DAY ASSESSMENT (SUITABILITY) BY A QUALIFIED INDIVIDUAL WAS NOT COMPLETED WITHIN 30 CALENDAR DAYS OF THE START OF THE PLACEMENT, A REDETERMINATION MUST BE COMPLETED TO REFLECT AN 'ELIGIBLE, NOT REIMBURSABLE' ELIGIBILITY STATUS.
- (3) AS OF THE 61ST DAY OF A CHILD PLACED IN A QRTP WHEN THE COURT HAS NOT APPROVED THE PLACEMENT WITHIN 60 CALENDAR DAYS, A REDETERMINATION MUST BE COMPLETED TO REFLECT AN 'ELIGIBLE, NOT REIMBURSABLE' ELIGIBILITY STATUS.
- (4) AS OF THE 31ST DAY OF A CHILD PLACED IN A QRTP AFTER THE 30-DAY ASSESSMENT DETERMINES THE PLACEMENT IS NOT APPROPRIATE, COURT DISAPPROVES THE PLACEMENT, OR A DETERMINATION, MADE BY THE MULTI-DISCIPLINARY TEAM, THE CHILD IS TO BE REUNIFIED OR PLACED WITH RELATIVE, LEGAL GUARDIAN, ADOPTIVE PARENT, OR FOSTER FAMILY HOME, A REDETERMINATION MUST BE COMPLETED TO REFLECT AN 'ELIGIBLE, NOT REIMBURSABLE' ELIGIBILITY STATUS.





CHAPTER 4: TITLE IV-E FOSTER CARE

ATTACHMENT 1

AFDC FINANCIAL CALCULATIONS

CHILD SUPPORT RECEIVED FOR A CHILD NOT IN THE HOME IS CONSIDERED A CONTRIBUTION AND SHALL BE ENTERED IN FSN AS 'ALIMONY PAYMENTS (ADULT)' UNDER THE PARENT IN RECEIPT.

http://172.27.16.219:8005/ - Assets and Employment - Internet Explorer provided by DCF

Florida Safe Families Network Hand Book Print Audit Spell Check

General Information

Name: EXAMPLE PARENT Person ID: 107339958 Gender: Female Ethnicity: Other
SSN: Date of Birth: 10/16/1967 Race: White

Assets/Liabilities and Unearned Income Employment Credit Checks

Date Last Updated: 04/15

Assets -- Webpage Dialog

Assets/Liabilities Print

Type

☒ Alimony Payment

Asset Type

Select: Unearned Income Type: Alimony Payments (Adult) ☐ Primary Homestead ☐ Liability ☒ Use in Eligibility Calculations

Source of Verification: Child Support Enforcement (DOR) Verification Date: 04/01/2022

Assets/Liabilities/Financial Benefits

Account: Amount: ☐ Amount Unknown

Estimated Value: ☐ Est. Value Unknown Amt. Owed: ☐ Amt. Owed Unknown

Equity Value: Asset Information:

Monthly Amount: \$350.00 Eff. Start Date: 02/01/2022 Eff. End Date: 00/00/0000

☐ Good Faith Effort to Sell From: 00/00/0000 To: 00/00/0000

Vehicle

Make:

Est. Value:

Equity Value:

Other Insurance

Name

Type:

Assets/Liabilities





CHAPTER 4: TITLE IV-E FOSTER CARE ATTACHMENT 2 DEPRIVATION OF PARENTAL CARE

ABSENCE OF PATERNAL LEGAL OR BIOLOGICAL DETERMINATION.

To determine deprivation, the existence of a legal or biological father must be determined.

The legal relationship of an individual supersedes any allegation of paternity for a biological relationship. In the existence of a legal father, deprivation is assessed based on the legal father.

For the purposes of deprivation, an individual is considered a legal father if: married to the mother at the time of the child's conception or birth, if he is the biological father who marries the mother after the child's birth and there was no legal father at the time of the marriage, paternity has been legally established, the individual is the adoptive father, or the child's surname (last name) on the birth certificate is the individual's name.



FLORIDA Utilization

To ensure accurate title IV-E determinations, utilization of the below resources is vital.

Demographic and Household Related Information

Title IV-E Eligibility/AFDC FLORIDA Screens			
TRAN Code	Function Description	Summary	Recommended/Optional
AIAN	Application Entry Benefit Selection	Displays details for American Indian/Alaska Native individuals.	Recommended, if Y on AIRE
AJAP	Absent Parent General	Displays demographic and other information for the non-custodial parent	Optional
AICI	Case Information	Displays case address information	Optional
AICZ	Alien Refugee Information	Displays information on noncitizens - Country of origin, Entry Date, INS number, Status, Sponsor	Recommended, if applicable
AIHH	Household Relationships	Displays the relationship between household members	Optional
AIIA	Individual Attributes	Displays SSN Application Date, Citizenship, Place of Birth, Marital Status	Recommended
AIIC	Individual Living Arrangments	Displays living arrangement and temporary absence status - Type 32 represents RCG benefits	Optional
AIID	Individual Demographics	Displays demographic information, SSN verification	Recommended
AILG	AKA Names/SSN Registration	Displays alias name and social security number information	Optional
AIOH	Household Relationships	Displays the relationship of Dependents outside of the household	Optional
AIRE	Race/Ethnicity	Displays race/ethnicity information	Optional
AISA	School Attendance	Displays school attendance information	Recommended, if otherwise unknown
AISI	Alien Sponsor Information	Displays information on Sponsor(s) of noncitizen	Recommended, if Y on AICZ
MNOV	Birth Verification	Displays birth certification information	Recommended, if not available in FSN

Income Related Information

Title IV-E Eligibility/AFDC FLORIDA Screens			
TRAN Code	Function Description	Summary	Recommended/Optional
AALS	Lump Sum	Displays lump sums received or due to be received	Recommended, if Y on AAAQ
AFDP	Child Support Payments (Outside the Household)	Displays dependent care or child support payments for a dependent outside of the house.	Recommended, if Y on AFDQ
AFEI	Employment Information	Displays employment information and reason for refusing/leaving work (Use FS/CASH amount)	Recommended, if Y on AFEQ
AFEQ	Employment Questions	Displays response to Employment Questions	Recommended
AFIN	Earned Income	Displays Pay Dates and Gross Income for each date	Recommended, if Y on AFEQ
AFIQ	Unearned Income Questions	Displays response to Unearned Income Questions	Recommended
AFMI	Monthly Unearned Income	Displays unearned income sources and amounts	Recommended, if Y on AFIQ
AFRE/AFBP	Room and Board Earnings	Displays income received from any roomers or boarders living in the home.	Recommended, if applicable
AFSE	Self Employment Questions	Displays self-employment information	Recommended, if Y on AFEQ
AIAE	Absent Parent Court Order	Displays child support information as to non-custodial parent	Optional
AIAE	Absent Parent Employment	Displays absent parent employment and insurance information	Optional
AIAF	Armed Forces	Displays military service information	Optional
ASEQ	SSI Eligibility Questions	Displays response to SSI eligibility questions	Recommended
ASEV	SSI Eligibility Verification	Displays SSI verification, begin & end dates for current/former recipients	Recommended, if ASEQ identifies a
CLRC	Running Record Comments	Displays comments by staff for a specific case	Recommended
AIAE	Absent Parent Court Order	Displays child support information as to non-custodial parent	Optional

Asset Related Information

Title IV-E Eligibility/AFDC FLORIDA Screens			
TRAN Code	Function Description	Summary	Recommended/Optional
AAAQ	Asset Questions	Displays response to Asset Questions	Recommended
AABE	Business Assets	Displays business information for self-employed individuals	Recommended, if Y on AAAQ
AALA	Liquid Assets	Displays liquid assets such as checking acct, savings acct, burial values	Recommended, if Y on AAAQ
AALI	Life Insurance Assets	Displays life insurance asset information	Recommended, if Y on AAAQ
AARC	Real / Personal Property Assets Con't	Displays real & personal property additional information	Recommended, if Y on AAAQ
AARP	Real / Personal Property Assets	Displays real & personal property information	Recommended, if Y on AAAQ
AAVH	Vehicle Assets	Displays vehicle asset information	Recommended, if Y on AAAQ

Miscellaneous Related Information

Title IV-E Eligibility/AFDC FLORIDA Screens			
TRAN Code	Function Description	Summary	Recommended/Optional
AFDE	Dependent Care Expenses	Displays care expenses information	Recommended, if Y on
AFDQ	Dependent Care Questions	Displays responses to Dependent Care Questions	Recommended
AFMC	Medical Insurance Coverage	Displays information about the individuals who are covered under insurance entered on AFMD	Optional
AFMD	Medical Insurance Coverage	Displays private/third-party insurance coverage	Optional
AIAE	Absent Parent Employment	Displays absent parent employment and insurance information	Optional
CLRC	Running Record Comments	Displays comments by staff for a specific case	Recommended
CRPC	Prior Contact Check	Obtain ACCESS Case Number	Optional
IQAA	Assistance Group Inquiry	Overview of benefits approved on case	Optional
IQEL	Individual Eligibility History	Displays history of cases	Optional

CHAPTER 4: TITLE IV-E FOSTER CARE ATTACHMENT 8 FLORIDA UTILIZATION





CHAPTER 6: EXTENDED FOSTER CARE

SECTION 6-8: CHILDREN OF YOUNG ADULTS

SECTION 475(4)(B) OF THE ACT REQUIRES THAT FOSTER CARE MAINTENANCE PAYMENTS FOR A YOUNG ADULT IN FOSTER CARE COVER THE FOSTER CARE MAINTENANCE COSTS FOR THE YOUNG ADULT'S CHILD IF THAT CHILD IS PLACED WITH THE YOUNG ADULT IN THE SAME SUPERVISED LIVING ARRANGEMENT (SLA) SETTING.

- (1) Child care costs may be included in the foster care maintenance payment paid to the SLA provider, young adult, or paid directly to the licensed child care provider.





CHAPTER 8: GUARDIANSHIP ASSISTANCE PROGRAM

SECTION 8-5: GUARDIANSHIP ASSISTANCE AGREEMENT

IF A CHILD RECEIVES SSI, THE GAP PAYMENT AMOUNT MUST EQUAL ZERO.

- (1) The guardian must be advised to contact the CBC if a child loses eligibility for SSI to initiate a GAA Update to begin receiving a GAP payment. The GAP payment must be effective from the date the written request was made.
- (2) No other government benefit or private payment received on behalf of the child shall cause the GAP payment to be reduced or eliminated.
- (3) If the anticipated enhanced GAP payment will be greater than the amount being received as an SSI payment, the guardian may elect to receive a GAP payment. In turn, the guardian must report the GAP payment as income to the social security administration office. This income may reduce the SSI payment received as determined by the social security administration office.





CHAPTER 8: GUARDIANSHIP ASSISTANCE PROGRAM

SECTION 8-8: FSFN DOCUMENTATION

INITIAL FUNDING TYPE DETERMINATION.

THE GAP FUNDING ELIGIBILITY DETERMINATION MUST BE COMPLETED IN FSFN PRIOR TO THE COMPLETION OF GAP PROGRAM ELIGIBILITY DETERMINATION WHICH CONSISTS OF:

A FOSTER CARE TITLE IV-E ELIGIBILITY DETERMINATION SHALL BE COMPLETED IN FSFN WITHIN 15 CALENDAR DAYS OF NOTIFICATION BY THE CHILD WELFARE PROFESSIONAL. ALL SUPPORTING DOCUMENTATION SHALL BE UPLOADED INTO THE FSFN FILE CABINET UNDER THE RELEVANT IMAGE CATEGORY AND IMAGE TYPE.

IF FOSTER CARE TITLE IV-E INELIGIBLE, A TANF ELIGIBILITY DETERMINATION SHALL BE INITIATED IN FSFN PRIOR TO THE EXECUTION OF THE GAA. A FUNDING DETERMINATION SHALL BE PROVIDED TO THE CHILD WELFARE PROFESSIONAL. ALL SUPPORTING DOCUMENTATION SHALL BE UPLOADED INTO THE FSFN FILE CABINET UNDER THE RELEVANT IMAGE CATEGORY AND IMAGE TYPE. THE TANF ELIGIBILITY DETERMINATION **WITH AN EFFECTIVE FROM DATE THAT REFLECTS THE SAME DATE THE GAA IS EFFECTIVE**, MUST BE APPROVED IN FSFN WITHIN TEN CALENDAR DAYS FROM THE GAA EFFECTIVE DATE.





QUESTIONS?

