

**NORTH DAKOTA DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
**BISMARCK, NORTH DAKOTA**

January 13, 2023

**PI 23-04**

**TO:** Human Service Zones  
Division of Juvenile Services  
Tribal Nations  
Nexus PATH

**FROM:** Deb Lachenmeier, FCSA Eligibility Unit  
Kelsey Bless, Licensing Unit Administrator

**PROGRAM:** Foster Care Maintenance

**SUBJECT:** Forms 623-05-60  
Irregular Payments 623-05-25

**RETENTION:** Until manualized

**EFFECTIVE:** **Immediately**

North Dakota Department of Health and Human Services, Children and Family Services Section (Department) is issuing new policy related to irregular payments and the use of a new form. The SFN 903, Provider Reimbursement Request form was created after much discussion with the CFS FCSA Eligibility and Licensing units, as well as feedback from Zone Sups, ND Provider Task Force and providers asking for a way to better report expenses related to children in foster care. The goal of this form was to support clarity is reimbursement requests and to expedite reimbursement to providers for the right child with the relevant documentation. Regularly, CFS receives one receipt with various purchases for different children on it. When that occurs, it takes a significant amount of time to manage the back-and-forth email exchanges to gain an explanation or identify what items are for each child; which leads to reimbursement delays. Licensed foster care providers will now begin using this form to request reimbursement for irregular payments for each child separately. Foster cre provider are still required to discuss and gain pre-approval from the child's custodial case manager before purchasing and submitting for reimbursement. Receipts for all purchases are required and must be attached to the form for consideration.

[SFN 903](https://www.nd.gov/eforms), "Provider Reimbursement Request" can be found online at <https://www.nd.gov/eforms>

Changes are red/underlined. If you have questions please contact Deb Lachenmeier, FCSA Eligibility Unit at [dlachenmeier@nd.gov](mailto:dlachenmeier@nd.gov), Kelsey Bless, Licensing Unit Administrator, at [kmbless@nd.gov](mailto:kmbless@nd.gov) or contact your local Field Service Specialist.

## Forms 623-05-60

Foster care payment related forms include:

1. Notice of Change, [SFN 45](#)

The Notice of Change, SFN 45, is a required form which must be completed by the foster care case manager when changes occur in the child's case; including placement, foster care status, and parent information. The intent of this form is to immediately update/alert the eligibility worker to make payment authorization adjustments accordingly. Overpayments will occur if the eligibility worker is not notified by the case manager of a placement/status change.

CFS FCSA Eligibility Unit staff must forward a copy of the completed form to Child Support if there is a change in health information or parent information.

2. Credit Form, [SFN 827](#)

Any payments to the Department for foster care refunds and reimbursements must be submitted with Credit Form, SFN 827. The child's name and foster care case number must be included to ensure proper credit. An overpayment or a receivable must exist in the payment system before the SFN 827 is submitted to Fiscal Administration. Fiscal will use the service month, match code, and description of payment provided on the form to properly apply the payment.

3. Foster Care - Child Care Invoice, [SFN 920](#)

The Foster Care – Child Care Invoice, SFN 920, is required for child care providers and foster care providers when claiming child care reimbursement for foster care children in paid foster care placements.

4. Irregular Foster Care Payments, [SFN 1042](#)

Foster care case managers must complete this form when the irregular payment requires special instructions, (ex: max mileage vs gas receipt), payment limitations or the irregular payment category does not require a receipt. Receipts for foster care expenditures that are not subject to special instructions or limitations will be authorized by the CFS Eligibility Unit without the requirement of prior approval. All irregular payments are subject to category maximums for every foster child in a licensed setting. The custodial agency will be responsible for any reimbursement exceeding the child's annual maximums.

## 5. Foster Care Provider Reimbursement Request, SFN 903

The Foster Care Provider Reimbursement Request form is required to be completed by the foster care provider to request reimbursement of receipts and invoices eligible as an irregular foster care payment. Each receipt must be listed, the payment type identified and a description of the items, including the amount per item. Receipts or invoices that include more than one payment type should be separated out per payment type (ex: clothing listed on one line and incidental listed on another for the same receipt date). Receipts and invoices must be attached to the SFN 903 for submission to the case manager

### **Irregular Payments 623-05-25**

Irregular payments are available for ~~a foster~~ child in foster care if placed with a licensed or approved (Tribal Affidavit) foster care provider. Reimbursement can be authorized for expenditures incurred during the dates the child is placed with the licensed provider. The CFS Eligibility Unit will reimburse eligible irregular payments, subject to category maximums, for every ~~foster~~ child in foster care in a licensed setting. Receipts for foster care expenditures that are not subject to special instructions or limitations identified on a SFN 1042, Irregular Foster Care Payments form, will be authorized without ~~the requirement of documented~~ prior approval.

Irregular payments are separated into categories and assigned various codes to ensure proper authorization of payment. Age limits are consistent with foster care payment age categories; however, expenditure limits may vary by category. Some categories are without limit. Each child's expenditure limits will reset:

1. Every twelve months from the initial date of foster care entry or
2. When a child has been discharged from foster care for more than 12 months.

The foster care provider must complete an SFN 903, Foster Care Provider Reimbursement Request. The form is required to be submitted with receipts and invoices. Each form must be child specific and only include one month of expenditures. Each receipt must be listed, the payment type identified and the description of the item must include the amount per item. Receipts and invoices must be attached to the SFN 903 and submitted to the case manager for review. The case manager is responsible to submit the form and receipts to the CFS FCSA Eligibility Unit.

It is the responsibility of the foster care case manager to:

1. Determine which irregular payment expenditures are necessary and appropriate,
2. Budget the age-appropriate expenditure limit to ensure irregular payments are available throughout the year to meet the child's needs.

3. Track irregular payment totals to ensure limits are not exceeded. The custodial agency will be responsible for any reimbursement exceeding the child's annual maximums allowed per policy.
4. Submit receipts or required documentation for all irregular payments to cfsfcsaunit@nd.gov.
5. Submit the SFN 1042, Irregular Foster Care Payments, only when the irregular payment requires special instructions, (ex: mileage vs gas receipt), payment limitations or the irregular payment category does not require a receipt

It is the responsibility of the CFS Eligibility Unit eligibility worker to:

1. Review received documentation and authorize eligible payments,
2. Track irregular payment totals,
3. Maintain receipts and documentation in the child's eligibility file, and
4. Notify the foster care case manager if there are any reimbursements submitted to the unit which cannot be authorized due to category limits, etc.

### **Irregular Payment Categories**

<b>Category</b>	<b>Description</b>	<b>Documentation Needed for Payment Authorization</b>
Category 10	Activities & Incidentals	Receipts & <a href="#">SFN 903</a>
Category 20	Clothing	Receipts & <a href="#">SFN 903</a>
Category 30	Emergency Placement	SFN 1042
Category 40	Child Care for Foster Child	SFN 920
Category 50	Travel for Foster Child	Receipts and documented travel calculations. SFN 1042 if needed.
Category 60	Excess Maintenance Payment (EMP)	SFN 904
Category 70	Parent/Infant Payment	SFN 1042
Category 80	Extra QRTP Supervision	SFN 1042

### **18+ Continued Care Irregular Payments**

Irregular payments are available for a child in 18+ Continued Care. Reimbursement must follow the irregular payment policy with payments being authorized directly to the licensed provider.