

New Jersey Department of Children and Families Policy Manual

Manual:	CP&P	Child Protection and Permanency	Effective
Volume:	IV	Out of Home Placement	Date:
Chapter:	Α	General Placement Considerations	
Subchapter:	1	Federal and State Requirements for Children in Placement	11-9-2009
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Federal and State Requirements for Children in Placement 8-30-99

Case management and monitoring for compliance with federal and state requirements for children in placement are CP&P responsibilities. Activities directed toward these responsibilities are:

- a case record is established and appropriately maintained for each child in placement;
- each parent's capacity to contribute to his or her child's support is evaluated; see CP&P-IX-F-1-225;
- each child's medical needs are evaluated prior to placement;
- the health needs of each child in placement continue to be evaluated and met;
- each child has adequate clothing appropriate to his/her age;
- a determination of Title IV-E FC eligibility is completed for each child in placement; see <u>CP&P-IV-F-1-100</u>;
- the initial and on-going requirements of the Child Placement Review Act are met, see <u>CP&P-IV-A-3-200</u>;
- all involved community agencies and schools are informed of each child's placement and appropriate transfers are arranged; and
- a review is conducted every 6 months according to the placement review process, see <u>CP&P-IV-A-3-200</u>.

Requirements apply to children from out-of-state in placement in New Jersey, with CP&P providing courtesy supervision (see <u>CP&P-VIII-D-2-200</u>) and New Jersey children residing in placement out-of-state (see <u>CP&P-VIII-D-1-300</u>).

Case Processing 11-9-2009

When the child is not under CP&P supervision at the time that placement is determined necessary, complete all forms and screens necessary to add the child to the electronic case record. The Worker ensures that the child's identifying information is complete and accurate by:

- Requesting the long form birth certificate from the DCF Bureau of Vital Statistics
 (BVS) Liaison within thirty (30) days of the child's placement (see <u>CP&P-III-C-6-100</u>, Requesting Long Form NJ State BVS Certificates from DCF BVS Liaison, and CP&P Form <u>26-8</u>, Request for NJ Birth/Death/Marriage/Civil Union/Domestic Partnership Certificate);
- Filing the original (Bureau of Vital Statistics) copy of the long form birth certificate in the medical section of the paper case record;
- Ensuring that accurate identifying information is recorded in the electronic case record in NJ SPIRIT;
- Placing a copy of the long form birth certificate in the child's Life Book;
- Recording the child's Social Security number in NJS;
- Initiating corrections of birth data with BVS, when appropriate (see <u>CP&P-III-C-9-100</u>); and
- Keeping NJS information current in accordance with NJS policy and procedures (see NJS Desktop for support materials).

Support 6-19-96

In accordance with N.J.S.A. 30:4C-29.1, legally responsible persons (LRP) of children in placements where maintenance is provided by CP&P are evaluated to determine capacity to support. LRPs include natural or adoptive parents of minor children and spouses of minor children.

The parent is informed of his/her responsibility to contribute to the financial support of his/her child in placement. See <u>CP&P-IX-F-1-225</u>, Support Procedures.

Medical Coverage 6-19-96

Children in foster care are provided Medicaid Services through the Medicaid Program if eligible. When a child is placed in foster care, eligibility is evaluated for the Medicaid Program in accordance with CP&P-V-A-2-200, Medicaid Eligibility Determination for CP&P Children. The foster parent is advised to take the child for health services to participating Medicaid providers only. According to Title XIX, third party insurance coverage is utilized before Medicaid will cover the costs of medical services on behalf of a foster child. In compliance with this requirement, a determination is made whether the child entering foster care is covered under any private health insurance plan, and that Medicaid and the foster parent are advised of the status of private health insurance coverage for the child. The availability of coverage is redetermined every 6 months.

If the child has a serious medical condition or tests positive for the HIV virus, the Worker consults with the Pediatric Nurse Consultant to determine if the child may be eligible for a Medicaid Waiver Program. See CP&P-V-A-1-100.

Continued Eligibility for WFNJ TANF 11-22-2004

In accordance with N.J.A.C. 10:90-2.16, a child placed in foster care for less than 30 consecutive days does not affect eligibility or the level of the grant; a child placed in foster care for 90 days or less, may remain eligible to be continued on the grant. The County Board of Social Services will review the situation if the child's CP&P out-of-home placement will last longer than 30 days.

PROCEDURES RELATED TO FEDERAL AND STATE REQUIREMENTS FOR CHILDREN IN PLACEMENT 11-1-2005

RESPONSIBILITY	ACTION REQUIRED
Worker	1. Ensure that CP&P has proper legal authority at the time the child enters placement. If the child in placement in New Jersey is from out-of-state, with CP&P providing courtesy supervision, ensure that the sending state has custody pursuant to the Interstate Compact on the Placement of Children. See CP&P-VIII-D-2-200.
	Ensure that the child's birth data is complete and correct.
	Inform the parent of support requirements.

	Determine Medicaid eligibility and enroll the child.
	5. Determine whether the child is covered by a private health insurance plan and update the Medicaid Status File using the CP&P Form 11-69, Medicaid Eligibility File Demographic Changes. Advise the resource parents of private coverage.
	6. For each child initially entering out- of-home placement, obtain a medical examination within 24 hours prior to the placement. Determine and arrange for the appropriate payment method.
	7. Provide the physician with relevant health information regarding the child.
	8. Establish a health care record for each child and provide the resource parent with a health care record which documents health information concerning the child, using CP&P Form 11-10, Health Passport and Placement Assessment.
	Arrange for follow-up medical treatment when appropriate.
	10. Ensure that appropriate referrals for EPSDT or Medicaid Waiver programs are initiated. (Consult with the CP&P Local Office Child Health Unit Nurse, as necessary, for waiver programs.)
	11. Determine the child's clothing needs.
Worker Supervisor	12. Prepare a Special Approval Request, CP&P Form <u>16-76</u> , if initial

	clothing allotment is necessary.
Worker	13. Determine whether the resource parent has a child passenger restraint system or booster seat if the child is less than eight years of age and weighs less than 80 pounds; ensure that it is properly installed in the back seat of the vehicle. See

child's CP&P education record at the time of initial placement and any re-placements.
20. Ensure that the child is enrolled in and attending school within 72 hours of initial placement and replacement, if age appropriate.
21. The child is automatically referred for a regional placement conference before the regional reviewer, as long as the appropriate service lines are entered into NJS. Ensure that the conference date coincides with the due date of the progress report which CP&P provides to the sending state. See CP&P-VIII-D-2-200 .