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 | ADMINISTRATIVE DIRECTIVE |
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TRANSMITTAL: 95 ADM-7

TO: Commissioners of Social Services
 Directors of Authorized Agencies

DIVISION: Services and
 Community
 Development

DATE: April 28, 1995

SUBJECT: Amendment to Model Contract for Local Purchase of Child
 Foster Care Services and Maintenance Agreements

 SUGGESTED

DISTRIBUTION: | Directors of Social Services
 | Children's Services Staff
 | Staff Development Coordinators

CONTACT

PERSON: | Joseph Della Rocca, Bureau of Resource Management,
 | (518) 473-1496, or User ID AX4520

ATTACHMENTS: | None

FILING REFERENCES

| Previous ADMs/INFs | Releases Cancelled | Dept. Regs. | Soc. Serv. Law & Other Legal Ref. | Manual Ref. | Misc. Ref. |
|-----------------------|-----------------------|------------------|-----------------------------------------|-------------|------------|
| 88 ADM-28 | | 350, 427, 462 | 20 34 398 398a | | |

I. PURPOSE

To advise you about an amendment to the model contract for local purchase of foster care and maintenance agreements which is effective immediately.

II. BACKGROUND

Since the previous directive on model contracts was issued, a federal review of contracts with private non-medical institutions indicated that the contracts did not clearly describe district and agency activities which are related to third party health insurance.

We have included this requirement in this amendment.

III. PROGRAM IMPLICATIONS

With this amendment, the model contract meets State and federal regulatory requirements. In addition, it provides the basis for social services districts to claim federal and State participation for Medical Assistance payments on behalf of foster children.

IV. REQUIRED ACTION

- A. All social services districts shall amend their foster care services and maintenance agreements by adding the following:

The Department shall determine initially the availability of any third party insurance resources upon entry of the client into the system during the client eligibility process, pursuant to 87 ADM-40. When such resources are determined to exist the Department should properly code each case and provide the Agency with as much information as is available.

The Agency receives a roster of the children in its care each month. This roster also provides information on third party health insurance through the placement of a code in the column named "Other Insurance." The Agency should consult the Child Care MMIS Provider Manual for a complete listing of other insurance codes. The Agency shall pursue all third party health insurance available to children in its care. If the Agency contracts with a health care provider, it shall ensure that the provider makes diligent efforts to determine if the foster children have third party coverage, and shall attempt to utilize such coverage when applicable.

These paragraphs must be added to Section VI - "General Responsibilities for Parties," found on page 27 of 88 ADM-28.

It is mutually agreed between the Department and the Agency that the Agency shall provide foster care services and provide or obtain appropriate medical services in accordance with the standards prescribed by the New York State Department of Social Services and as prescribed by federal and New York State laws and regulations, including, but not limited to sections 20(3) (d), 34(3) (f) of the Social Services Law and 18 NYCRR 350(1) (g), 427, 462 and by Schedule A which is attached hereto and incorporated herein.

This paragraph replaces the first paragraph under Section III - "Scope of Services," found on page 8 of 88 ADM-28.

B. Contracts currently in effect should be amended to include the paragraphs as soon as possible, but in no event later than July 1, 1995.

V. SYSTEMS IMPLICATIONS

None

VI. ADDITIONAL INFORMATION

The agency will be permitted to retain 100% of the collections from the health insurance carriers, but is required to report this income annually on the DSS-2660 form, "Medical Services Expenditure Distribution Sheet." This third party resource information and the expended health care costs reported for that twelve-month period (July through June) is then subsequently used by the Child Care Rate Methodology system in establishing the agency's General Care and Special Program Medicaid Rates.

VII. EFFECTIVE DATE

This directive is effective June 1, 1995, retroactive to July 1, 1994.

Anona Joseph
Deputy Commissioner
Division of Services &
Community Development