

# **SUPPORT SERVICES**

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A. Diagnosis And Evaluation (D&E) And Mental Health Counseling (MHC) Services For Non-Medicaid Eligible Children/Families

D&E and MHC services can be authorized for children and their families in open protective service cases when the children and their families are not Medicaid eligible and/or the services are not reimbursable through Medicaid. These services can be paid for with county flex funds only when:

- child welfare staff have explored and exhausted all other resources (e.g., free or donated services through community mental health centers or other qualified mental health providers) to provide the service;
- the need for D&E and/or MHC is documented in the narrative; and
- the service is authorized in the safety plan or ISP to meet an identified need.

County Directors are responsible for ensuring that all other resources have been explored and utilized prior to approving payment with flex funds. Payments must not exceed the Medicaid rate (as specified in the Funding Maximization Manual) and can be made only after service delivery has occurred.

B. Medical Expenses Incurred During CA/N Initial Assessments

Children may need medical services (e.g., examinations, treatment) to help child welfare staff determine if abuse/neglect caused the injury or health issue. The payment methods identified below must be sought prior to utilizing flex funds for medical services that are provided to children not in DHR custody or planning responsibility. Child welfare staff must document their efforts to secure payment and when appropriate, authorize the flex fund payment through the safety plan or ISP. Payment methods are listed in order of preference.

1. Parents'/legal custodians' private insurance (including CHAMPUS)
2. Medicaid
3. Direct payment by parents/legal custodians
4. Private donation
5. Local or county flex funds

Payments must not exceed the Medicaid rate (as specified in the Funding Maximization Manual) and can be made only after service delivery has occurred.

C. Protective Services Day Care

This service is designed to provide safe substitute care for a portion of the day for children who are at threat of serious harm due to the family situation. Protective services day care may be authorized only when all the following criteria are met:

- the child needing day care services was identified in a CA/N report as allegedly experiencing abuse/neglect and the child's family is receiving other child welfare

services as an on-going protective services case;

- the day care is being authorized as a result of needs identified in the CA/N assessment;
- day care has been documented in the safety plan or ISP to meet an identified need;
- if day care is not provided, the child will be at risk of abuse or neglect; and
- if day care is not provided, the child will be at risk of placement in foster care.

Child welfare staff must submit a written referral to their local child care management (CMA) agency for children needing protective services day care. The protective services category of eligibility shall be authorized on the written referral as either being “**without regard to income (WRTI)**” or as “**income eligible (PSIE)**.”

Services can be provided under the Protective Services category of eligibility (e.g., WRTI or PSIE) for up to six (6) months, unless child welfare staff requests a shorter authorization period. To request an additional six (6) months or shorter period, child welfare staff must submit a new written referral.

Income requirements apply, unless child welfare staff specifically requests, as indicated on the written referral, for services to be provided WRTI. Parental fee requirements apply, unless child welfare staff specifically waives the fee requirement as indicated on the written referral. Waiting list requirements for protective service day care do not apply.