Specialized foster homes may be used to bridge the transition of a child with special needs from a higher level of care back into the community, or to prevent placement in a higher level of care.

A specialized foster home may not be licensed for more than one child without prior approval of the regional administrator.

Specialized foster homes (SFH) are licensed foster homes that provide care and treatment for children with problems that cannot be adequately addressed through the regular foster care services.

A child who requires specialized foster care includes a child who:

- has a medical condition making the child non-ambulatory;
- a colostomy or feeding tube;
- receives prescribed physical therapy;
- has severe or profound mental retardation;
- has a terminal illness;
- cancer;
- blood disorders;
- multiple handicaps;
- burns;
- serious emotional disturbance;
- HIV or AIDS;
- has been exposed to drugs or alcohol; and exhibits moderate to severe symptoms;
- has been diagnosed with fetal alcohol syndrome or effect and exhibits moderate to severe symptoms; or
has other severe physical or mental health problems but whose needs are more appropriately met in a family setting. The child protection specialist will determine if the child’s needs require specialized foster care.

A professional support person is a person who has experience and training related to the type of medical problem for which the specialized foster parents are expected to provide care. The professional support person is available to consult with the foster parents on specific concerns.

The child protection specialist will:

- assess the child’s needs and eligibility for specialized foster care and enter the special needs on SPND;

- obtain supporting documentation (including SSI referral);

- identify and approve the professional support person;

- submit a request for approval of specialized foster care along with supporting documentation to the appropriate regional administrator or designee.

Once the regional administrator has provided written approval of the specialized foster care rate for the child, the worker shall:

- work with the FRS to determine the ability of the prospective specialized foster family to meet the needs of the child, or to identify a family able to meet the child’s needs.

When a foster home able to meet the child’s special needs as determined by the FRS is recommended for approval as a specialized foster home for the child, the recommendation is submitted to the FRS supervisor.

The FRS should notify the placing worker when the specialized license has been approved. The specialized license must be approved before the worker will be able to enter the specialized foster care service on SERP.
Once the specialized license has been approved, the worker should close regular foster care and open foster care at the specialized rate on SERP, service code PFSPC.

**NOTE:** The child protection specialist shall not request clothing, transportation or diaper allowances (for children under 3) for children placed in a specialized foster home. These allowances are already included in the specialized rate.

### Intensive Training and Supervision

In addition to meeting the training requirements for a foster home license, the specialized foster parents must have a demonstrated ability to meet the specific needs of the child or receive pre-service training on the special problem area.

### CAPS

The training must be approved by the FRS and will be recorded in the same manner as regular foster parent training on PRTD (Provider Training Detail).

The specialized foster parents must have regular contact with their professional support person and participate in any other required training.

### Case Plan

The placing worker should review the case plan with the foster parents and discuss mutual expectations. A written agreement between the foster parents and the agency regarding mutual expectations is recommended.

### Ongoing Review for Appropriate Placement CAPS

The child protection specialist shall review the child's continuing special needs on an ongoing basis. A formal assessment shall be entered on the ACTD as a supervisory review (SPR) every six months. If the identified problems are eliminated, payments will be reduced to the regular foster care rate.

### Payment CAPS

The specialized foster care rate will be paid only for those children named on the license specifically identified as requiring specialized foster care. Payment will be entered on SERP, service code PSFPC. **This payment must also be approved by the Regional Administrator on CAPS.**

### SSI Referral

Any child considered for specialized foster care must also be referred to the SSI unit. This referral should be documented and included as part of the supporting documentation to the Regional Administrator. If the child is eligible for SSI, SSB, VA benefits or other monthly financial
payments, these payments will be made payable to the Department. A trust account must be established per policy section 403-2, Trust Accounts.

**Hospitalization**

If a child in specialized foster care needs hospitalization, the foster parents may continue to receive payment for up to one month or longer with the approval of the regional administrator. During the child’s hospitalization, the foster parent is expected to continue regular contact with the child, such as visitation in the hospital.

**Respite**

Respite care funding is not part of the enhanced rate for specialized foster care. Respite care is arranged and paid for by the foster parent. Respite is defined as short-term supervision or care of a foster child in an emergency or on an intermittent basis.

Families must advise the placing worker of the identity of the respite care provider and the location of the foster child if the child is staying overnight at a home other than that of the licensed foster parents. Foster parents will advise the respite care provider of health information pertinent to the child, the child’s child protection specialist’s name and telephone number, and emergency numbers. Foster parents are responsible to assure the respite care providers can adequately provide for the needs of the child.

More detailed information regarding respite is in section 405-10, Respite Care Allowance.

**Medicaid**

**Medicaid will only pay for medically necessary service.** The DPHHS Health Policy and Services Division determine the definition of medically necessary services, not the physician. If a worker has a question as to whether Medicaid will provide payment for a particular medical service, treatment or travel, the worker and foster parent may refer to the recipient booklet entitled, Medicaid - Your Health Care Program and What You Need to Know (DPHHS-MA-65). Copies of this booklet are available at the county Office of Public Assistance (OPA).

**Travel**

Medicaid travel reimburses only necessary covered services from the nearest provider, and is limited to the least costly means to meet the child’s needs. Reimbursement is only available when there is no other way of reimbursing the travel.
If emergency transportation is needed, call the Medicaid Transportation Hotline (1-800-262-1545) as soon as a medical appointment is made and before the travel occurs.

General Information

Medicaid information regarding the coverage of any service may be obtained by calling 1-800-362-8312 or accessing the Division’s web site at https://dphhs.mt.gov/publichealth. If the worker is unable to get the necessary information, they may call the Health Policy and Services Division at 444-4540.

Mental Health Services

Financial eligibility will be determined by the OPA. Clinical assessments must be provided by a licensed mental health professional to determine the mental health needs. Travel is approved in the same manner as authorizing Medicaid travel.

For information on Mental Health covered Services or for problems accessing services, call 1-888-866-0328 toll free.

Community Support Services

Each foster parent should be advised of support services available in the community, and other types of financial and educational assistance for children with severe problems who are in foster care.

The placing worker makes appropriate referrals to other programs. These programs may provide services such as purchase of equipment, supplies, clothing, physical therapy, occupational therapy, gastrostomy feeding, tracheostomy care and debridement.

References

Mont. Admin. R. 37.50.310-320