



ChildNet, Inc. Enhanced Services Tier Matrix

Date of Request: _____ Request Made By: _____ Licensing Agency: 4KIDS

Child's Name: _____ DOB: _____ SSN: _____

Foster Parent Name: _____ FSFN Provider ID: _____ Date of Placement: _____

Initial Request Redetermination, current rate _____ and end date _____

Tiers may be modified up or down from time-to-time as the criteria associated with the placement changes. Please select only one item in the tier you are requesting. Please note any required supplemental documentation and provide that with the request. ALL decisions are final and at the discretion of ChildNet.

Respite Tier - The agency reimbursement rate will be based on established Tier I or Tier II rates (\$13/\$20 per day)

Check If Requesting	Tier Information/Documentation
<input type="checkbox"/>	Can be provided by any licensed foster parent to a Level 1 or Level II foster parent. Dates of Respite – From: _____ To: _____ Child's Current Tier Level: _____

Tier I – Agency Rate \$13 per day / Foster Parent Rate \$25 per day

Check If Requesting	Tier Information/Documentation
<input type="checkbox"/>	Child under the age of 6 weeks at the time of placement
<input type="checkbox"/>	Support foster parent child care choice – Child care center ELC cost gap for single working parent or two parent working household. Name of Child Care Provider: _____
<input type="checkbox"/>	Sibling groups comprised of three (3) or more siblings under the age of 12

Tier II – Agency Rate \$20 per day / Foster Parent Rate \$35 per day

Check If Requesting	Tier Information/Documentation
<input type="checkbox"/>	Child in need of before and after school supervision that is not covered by an ELC payment and the foster parent is paying for the cost of before or after school supervision
<input type="checkbox"/>	Child requiring transportation to remain in home school – transportation provided by foster parent
<input type="checkbox"/>	Child with physical or medical disability necessitating assistance with routine daily care, increased supervision and/or frequent medical intervention and appointments – Must attach medical documents

Tier III – Agency Rate \$36 per day / Foster Parent Rate \$40 per day

Check If Requesting	Tier Information/Documentation
<input type="checkbox"/>	Child who needs a foster home with additional training and support at an enhanced level
<input type="checkbox"/>	Child stepping down from TFC Level 1 or Level 2 or STGC
<input type="checkbox"/>	Sibling groups comprised of both genders who are required to have separate bedrooms
<input type="checkbox"/>	Child with a Child Placement Agreement which requires placement in own bedroom or requires additional supervision CPA must be attached
<input type="checkbox"/>	Child who exhibits oppositional or defiant behaviors without significant aggression, which may be younger children who exhibit frequent kicking/biting behaviors Must have documentation – treatment plan etc
<input type="checkbox"/>	Child currently using or have a recent history of alcohol and/or drug abuse or addiction and may have a DSM V diagnosis related to substance abuse
<input type="checkbox"/>	Child with some DJJ history – primarily misdemeanors
<input type="checkbox"/>	Child with mild Intellectually Development Disorder (IDD) with cognitive functioning between 50 and 70 Proof of IQ must be attached
<input type="checkbox"/>	Child with a Child Placement Agreement that requires special accommodations, responsibilities, or supervision for a child presenting with behavioral and emotional difficulties CPA must be attached
<input type="checkbox"/>	Child with potentially disabling diagnosis or chronic long-term illness which requires specialized care, and ongoing medical follow-up Must have medical documentation attached



**ChildNet, Inc.
Enhanced Services Tier Matrix**

<input type="checkbox"/>	Agency Foster Homes
--------------------------	---------------------

Tier IV – Agency Rate \$49 day / Foster Parent Rate \$50 per day

Check If Requesting	Tier Information/Documentation
<input type="checkbox"/>	Sibling groups comprised of three (3) or more with at least one child age 13 or older
<input type="checkbox"/>	Pregnant teen or teen caring for her own child who requires additional supervision and support
<input type="checkbox"/>	Child with medical needs who do not qualify for CMS, however condition requires significant transportation to and from appointments and specialized training to the foster parent Must include medical documentation
<input type="checkbox"/>	Child with aggressive and inappropriate sexual behaviors (sexually reactive youth – i.e. watching porn / foundling w/self) as documented in the child placement agreement CPA must be attached

Tier V – Agency Rate \$76 day / Foster Parent Rate \$55 per day

Check If Requesting	Tier Information/Documentation
<input type="checkbox"/>	Child stepping down from or awaiting a RTC/SIPP setting
<input type="checkbox"/>	Child with moderate Intellectually Development Disorder (IDD) with cognitive functioning between 35 and 50 Proof of IQ must be attached
<input type="checkbox"/>	Child alleged sexual offender; sexually aggressive; sexual behavior problems; physically assaultive; arson, and requires crisis intervention as documented in the child placement agreement (CPA must be attached)
<input type="checkbox"/>	Child who has been confirmed a victim of domestic minor sex trafficking as documented by the child placement agreement CPA must be attached
<input type="checkbox"/>	Child with serious behavioral or emotional problems <u>and</u> disruptive behaviors which requires increased supervision and support. The necessary safety actions are to be documented on the child placement agreement. Child must meet one of the following criteria: <ul style="list-style-type: none"> • An adjudication of delinquency and be on conditional release status or on active probation with the Department of Juvenile Justice. • A history of physical aggression or violent behavior toward self or others, animals, or property within the past year • A history of unprovoked destruction of property • A history of fire setting with the intent to cause harm to person or property CPA must be attached
<input type="checkbox"/>	Child with diagnosis of Oppositional Defiant Disorder, Conduct Disorder, or Intermittent Explosive Disorder Documentation of one of these three diagnoses must be attached
<input type="checkbox"/>	Child with Severe and Persistent Mental Illness (i.e. schizophrenia / schizoaffective disorder / DMDD) Proof of diagnosis must be attached
<input type="checkbox"/>	Child with multiple referrals to DJJ up to and including probation or youth stepping down from DJJ commitment program.
<input type="checkbox"/>	Child with substance abuse related diagnosis (DSM V / ICD 10) – interferes daily living / school work CPA or other proof must be attached

Tier VI – Agency Rate \$61.80 day / Foster Parent Rate \$50 per day

Check If Requesting	Tier Information/Documentation
<input type="checkbox"/>	Neighborhood Foster Homes

Approval Information

Rate Denied

Reason for Denial:

Rate Approved

Date Rate to Begin:

Date Rate Approved Until:



ChildNet, Inc.
Enhanced Services Tier Matrix

Director of Intake and Placement/Director of Service Coordination Signature

Date

Chief Program Officer or Chief Clinical Quality Officer, *as applicable*

Date