



## Memo

**Date:** June 21, 2023

**To:** Family Foster Care Providers

**CC:** Child and Family Services  
Developmental Disabilities – Child  
Court Services/Juvenile Corrections

**From:** Michelle Freiderich  
Child Foster Care Placement Coordinator  
(507)328-6413

### **RE: Child Foster Care Rates (Northstar Care for Children) – Effective July 1, 2023**

**On July 1, 2023, child foster care rates will be increasing based on changes in the USDA *Estimates of the Cost of Raising a Child*. If you currently have a child placed in your home, you will notice an increase in your July payment. Reminder, payment for July is received in August.**

Northstar Care for Children rates are based on the Minnesota Assessment of Parenting for Children and Youth (MAPCY) tool. The MAPCY is more comprehensive than previous tools and assesses two areas of care: the child's needs and what the caretaker is doing to meet those needs. The MAPCY allows for a more consistent and less subjective assessment. It also takes into consideration the child's strengths and needs, and the extra parenting provided by the caregiver to meet the child's needs. Foster parents will have an active role in completing the MAPCY tool.



### Northstar Care for Children

Age of Child	Daily Basic Rate	Ongoing Clothing and Personal Needs	Initial Clothing Allowance
0 to 5 years	\$24.03	\$149	\$731.00 (\$365.50/Year)
6 to 12 years	\$28.47	\$177	\$866.00 (\$433.00/Year)
13 to 20 years	\$33.63	\$227	\$1023.00 (\$511.50/Year)

**Supplemental Level rates** are determined using the Minnesota Assessment of Parenting for Children and Youth (MAPCY). The child's social worker, foster parent, and the Northstar Specialist will complete the MAPCY together. The foster parents will then receive a letter, informing them of the rate.

<b>Emergency Rate</b> – If the foster parent is given less than a 24-hour notice of placement, then the emergency rate is paid for the first, eight days of care.	
Age of Child	Daily Rate
0 to 5 years	\$54.28
6 to 12 years	\$58.72
13 to 20 years	\$63.88

**Ongoing Clothing & Personal Needs** – Foster parents must set aside a portion of the monthly rate for ongoing clothing and personal needs. The recommended amount (shown in this column) is 20% of the monthly rate (based on 31 days).

**Initial Clothing Allowance** – Clothing allowance is based on need, and foster parents must have prior approval of the child's social worker.

**Childcare** – The MAPCY assessment includes a childcare allowance when the foster parents are working and/or attending school and need childcare during those hours. The foster parent will be responsible for paying the childcare allowance directly to the childcare provider.



Ages 0-6		
Hours	Foster Parent's Payment to Childcare Provider – Month 1 ONLY	Foster Parent's Payment to Childcare Provider - After Month 1
< 10 hours/week	\$0/month	\$0/month
10-19 hours/week	\$0/month	\$100/month
20-29 hours/week	\$0/month	\$200/month
30-39 hours/week	\$0/month	\$300/month
40 or more hours/week	\$0/month	\$400/month

Ages 7 through 12		
Hours	Foster Parent's Payment to Childcare Provider – Month 1 ONLY	Foster Parent's Payment to Childcare Provider - After Month 1
< 20 hours/week	\$0/month	\$0/month
20-39 hours/week	\$0/month	\$100/month
40 or more hours/week	\$0/month	\$200/month

**Respite Rates:** If the foster parent or the child's social worker feels that a higher rate is warranted, the social worker can complete an additional assessment.

Age of Child	Daily Rate
0 to 5 years	\$54.28
6 to 12 years	\$58.72
13 to 20 years	\$63.88

**Relief Rates:** Foster parents can receive up to 30 days of relief care per year. The relief provider receives the same daily rate that the regular provider receives for the child. The regular provider should also bill the daily rate for the child while he/she is in relief care. In other words, both the relief provider and the regular provider are paid for those days.



**Additional Reimbursement for Full-Time Placements:** Please note that these additional funds are NOT available for respite placements

Clothing	
<b>Initial</b> Clothing	
<ol style="list-style-type: none"><li>1. All children receive an initial clothing allowance (please refer to the enclosed chart). This is a two-year allowance.</li><li>2. Use of the clothing allowance must be <b>PRE-APPROVED</b> by the child's social worker.</li><li>3. Foster parents can either purchase the clothing and submit the receipts with their monthly voucher or request a voucher to Children's Exchange.</li><li>4. A voucher for Children's Exchange can only be used <b>ONE TIME</b>. For example, the voucher is for \$250.00 and you only purchase \$150.00 of clothing. You cannot return to Children's Exchange a month later and use that same voucher for the remaining \$100.00. You must request a new voucher.</li></ol>	
<b>Ongoing</b> Clothing and Personal Needs	
Because a clothing allowance is only issued once every two years, it is recommended that foster parents set aside 20% of their monthly reimbursement for the child's ongoing clothing and personal needs.	
Incidental Expenses	
<ol style="list-style-type: none"><li>1. \$35.00 per child for Christmas (the child must be in care during the month of December),</li><li>2. \$25.00 per day, up to 7 days per year, for vacations (when the foster child accompanies the foster family), and up to \$195.00 per child for miscellaneous expenses (e.g., driver's education, one-half the cost of music lessons). Use of the \$195.00 must be <b>PRE-APPROVED</b> by the child's case manager</li><li>3. Incidental funding is renewed yearly.</li></ol>	



### Mileage Reimbursement for Medical/Therapy Appointments

1. The child must be receiving Medical Assistance.
2. Please use the separate voucher entitled "MA Mileage Reimbursement".
3. You must include the appointment date, address where the child was picked up and dropped off, the number of miles and the health care provider's name and address. Then mail the voucher to Family Support & Assistance, MA Transportation, 2117 Campus Drive SE, Suite 100, Rochester, MN 55904 or fax the voucher to 507-328-7956 or email the voucher to [marides@co.olmsted.mn.us](mailto:marides@co.olmsted.mn.us).
4. **Please bring this form with you to the appointment as the healthcare provider will need to sign/verify each appointment.**

### **BILLING POLICIES:**

- **REGULAR PLACEMENTS:**

Payment is made for the day that the child enters your care. Payment is not made for the day that the child leaves your care, unless he/she leaves after 3:00 P.M.

**Example 1:** A child enters placement on Friday, 2/14/23 at 6:00 P.M. and leaves on Friday, 2/21/23 at 2:30 P.M. The payment would be for 7 days of care.

**Example 2:** A child enters placement on Friday, 2/14/23 at 6:00 P.M. and leaves on Friday, 2/21/23 at 5:00 P.M. The payment would be for 8 days of care.

**Note to foster parents and social workers:**

- Please indicate on the reimbursement form and the "Notice of Change in Placement" form when a child leaves the foster home after 3:00 P.M. Then Accounting can pay for the extra day.
- Record the day that the child was placed in care and the day that he/she left care. Accounting will adjust for the day that the child left care unless you indicate that the child left after 3:00 P.M.
- If the child is picked up from school after 3:00 P.M., the foster parent is not paid for the day that he/she leaves care because the child actually left the foster home earlier in the day.)

- **EMERGENCY PLACEMENTS:**

Payment is made for both the day that the child enters care and the day that the child leaves care. It does not matter if the child leaves before or after 3:00 P.M.



- **RESPITE PLACEMENTS:**

**Payment is made per half day.**

Drop-off before 12 PM = full day

Drop-off after 12 PM = ½ day

Pick-up before 12 PM = ½ day

Pick up after 12 PM = full day

**Example:** A child enters care on Friday, 2/14/23 at 6:00 P.M. The child leaves care on Sunday, 2/16/23 at noon. The payment would be for 2 days of care (2/14/23 = ½ day, 2/15/23 = 1 day, and 2/16/23 = ½ day).

- **RELIEF PLACEMENTS:** The relief provider receives the same daily rate for the child that the regular foster parent receives for the child.

**Payment is made per half day.**

Drop-off before 12 PM = full day

Drop-off after 12 PM = ½ day

Pick-up before 12 PM = ½ day

Pick up after 12 PM = full day

**Example:** A Child enters care on Friday, 2/14/23 at 6:30 P.M. The child leaves care on Sunday, 2/16/23 at 5:00 P.M. The payment would be for 2 ½ days (2/14/23 = ½ day, 2/15/23 = 1 day, and 2/16/23 = 1 day).

## **HOW DO I SUBMIT A REQUEST FOR PAYMENT?**

- Reimbursement forms are completed on-line.  
([Foster Care Provider Reimbursement Form \(link opens to DocuSign form\)](#))
- Please do not submit your reimbursement form until the 1<sup>st</sup> of the month. For example, you can request payment for October the 1<sup>st</sup> of November.
- To complete the reimbursement form:
  1. Click "Foster Care Provider Reimbursement Form"
  2. Complete required information (name, address, city, state, ZIP, phone number)
  3. Enter information for which you are requesting payment
  4. Enter amounts, which will calculate automatically (there is a slight delay)
  5. Attach receipts, if applicable
  6. Electronically sign
  7. Submit
- Accounting staff pays to the exact cent. Please note that your monthly reimbursement check will vary depending on the number of days in a given month. The reimbursement that you receive each month is determined by multiplying the daily rate times the number of days in the month.



- Please limit each reimbursement form to six entries. Siblings can be placed on the same reimbursement form. However, if you are caring for children from several different families, each family should be placed on a separate reimbursement form.
- Make sure to record the **exact dates** that the child was in your care in the "Dates (from-to)" column of the reimbursement form. When a foster parent reports dates of care from 3/1/23 to 3/31/23, for example, but then asks to be reimbursed for only 10 days of care, it causes problems for accounting staff.

## **HOW WILL I RECEIVE PAYMENT?**

- You have two options for payment. You will receive payment within 35 days of receipt of your request for payment with either option.
- **Option 1:** You can have a check mailed to the address that you have provided.
- **Option 2:** You can sign up for direct deposit. **This option requires that you create an account through Olmsted County's Vendor Self Service system.** In addition to direct deposit, the Vendor Self Service system allows you to inquire about pending payments or payment history, view tax information (if applicable) and related payment information, and update address information, phone information, etc.

### **How do I create an account through Olmsted County's Vendor Self Service System?**

- Begin by clicking on this link [Vendor Self Service \(olmstedcounty.gov\)](https://olmstedcounty.gov).
- You will be prompted to create a username and password. Please be sure to write these down, as you will need them later to activate your account.
- You will then need to wait for an activation code. **The code is typically sent within an hour on business days but can take up to 24 hours!! If you attempt to create an account on the weekend, you will not receive the code until the next business day (Monday).**
- When you receive the code and log on for the first time, choose the option stating that you are an existing provider. That will bring up a search screen. Enter your tax identification number (typically your social security number). When your name appears, claim the account. For additional information, see the guide or video on the site "How to claim and existing Olmsted County vendor account documentation".
- **If you enter your tax identification number and were not recognized as an existing provider, you will be prompted to go back and complete the process for a new vendor.** See the guide or video on the site "How to register for a new Olmsted County vendor account documentation".
- If further assistance is needed, reach out to the Vendor Self Service Team at [vsshhelp@olmstedcounty.gov](mailto:vsshhelp@olmstedcounty.gov).
- **NOTE: YOU CANNOT SUBMIT REQUESTS FOR PAYMENT THROUGH THE VENDOR SELF-SERVICE SYSTEM. YOU MUST FOLLOW THE INSTRUCTIONS PROVIDED IN THE PREVIOUS SECTION "SUBMITTING A REQUEST FOR PAYMENT."**