

DEPARTMENT OF SOCIAL SERVICES

CHILDREN'S DIVISION

P. O. BOX 88

JEFFERSON CITY, MISSOURI

November 18, 2014

M E M O R A N D U M

What's Inside:
Medical Services
Authorization
Information Letter

TO: REGIONAL DIRECTORS, FIELD SUPPORT MANAGERS,
CIRCUIT MANAGERS, SPECIALISTS AND SUPERVISORS

FROM: TIM DECKER, DIRECTOR

SUBJECT: MEDICAL SERVICES AUTHORIZATION INFORMATION
LETTER

DISCUSSION:

The Children's Division (CD) participates in the development and implementation of coordinated social and health services including preventive, on-going and long-term medical and mental health care for children placed in the legal custody of the Children's Division.

Services for medical and mental health needs of foster youth **must** be provided by service providers who are enrolled in the state Medicaid plan, MOHealthnet or MOHealthNet Managed Care. If medical service providers who are not enrolled with MO HealthNet or a MO HealthNet Managed Care Plan are used for a foster youth, the resource provider may have to pay for the services out-of-pocket. Any invoice or paid receipt received by the resource provider for services provided to a foster youth in their home must be submitted to the foster youth's case manager immediately. Any reimbursement to the resource provider will be from Children's Treatment Services (CTS) funds.

The purpose of this memorandum is to introduce a new form, Medical Services Authorization Information Letter, CD-27. The purpose of the CD-27 is to assist resource providers seeking medical services for foster youth from service providers who are not enrolled with MO HealthNet or a MO HealthNet Managed Care Plan.

In the event that a resource parent uses a medical or mental health provider who is not enrolled with MO HealthNet or a MO HealthNet Managed Care Plan the CD-27 must be presented prior to the foster youth receiving services.

If a resource family makes plans to travel out of state with a foster youth(s) placed in the home, the foster youth(s) case manager should provide the resource parent with a CD-27. The worker should explain the reimbursement review process when a resource

provider receives an invoice or has a paid receipt and letter from the medical provider, if applicable, for medical services provided to a foster youth placed in their home.

NECESSARY ACTION	
<ol style="list-style-type: none"> 1. Review this memorandum with all Children’s Division staff. 2. Review revised Child Welfare Manual chapters as indicated below. 3. Review new Children’s Division form. 4. All questions should be cleared through normal supervisory channels and directed to: 	
PDS CONTACT Elizabeth Tattershall 573-522-1191 Elizabeth.Tattershall@dss.mo.gov	PROGRAM MANAGER Amy Martin 573-751-3171 Amy.L.Martin@dss.mo.gov
CHILD WELFARE MANUAL REVISIONS Section 4 Chapter 6 subsection 1 Section 1 Chapter 3 Subsection 3 Section 4 Chapter 24 Subsection 3 Section 4 Chapter 30 Subsection 4	
FORMS AND INSTRUCTIONS Employee Access Only on CD Desk Top Medical Services Authorization Information Letter, CD-27	
REFERENCE DOCUMENTS AND RESOURCES N/A	
RELATED STATUTE N/A	
ADMINISTRATIVE RULE N/A	
COUNCIL ON ACCREDITATION (COA) STANDARDS (List or put N/A if not applicable.)	
CHILD AND FAMILY SERVICES REVIEW (CFSR) N/A	
PROTECTIVE FACTORS N/A Parental Resilience Social Connections Knowledge of Parenting and Child Development Concrete Support in Times of Need Social and Emotional Competence of Children	
FACES REQUIREMENTS N/A	