

Children and Family Services (CFS) hosted a training for providers and case workers specific to provider reimbursement. There were questions submitted after the training, below is a FAQ for your review.

**1. Where do I get more information about this training?**

- a. Training Center website [Foster Provider Education](#)
- b. ND Child Welfare Policy [Children and Family Services Policy and Resources](#)

**2. In January 2026, I received a 1099 MIS from HHS for mileage reimbursement for medical appointments for a child I provided respite to in 2025. That should not be income, right?**

- a. Correct, if you receive a 1099 from HHS for foster care reimbursement of any kind you need to contact CFS at 701-328-2076 and we will look into it. If you are providing foster care, respite care or shelter care under the CFS reimbursement structure you will not be taxed. If you are registered as a non-emergent medical services transportation provider, that is different than foster care and questions should be routed to Medical Services.

**3. Under the title "activities" can it cover a pass to the community Recreation Center?**

- a. Yes, if approved by the case worker, activities can include the annual fee for an individual/student at the recreation center. If the child transitions from the provider home, the individual pass would follow the child and be used while at home or in the new placement.

**4. What are the shelter care daily rates?**

- a. All rates are found online at [nd-child-welfare-payment-rates-exclusion.pdf](#)
- b. Shelter care in a family home is \$55/day.

**5. Can the payment schedule be sent out?**

- a. CFS will post the payment schedule once the new documentation moratorium is lifted. For now the payment schedule will be attached to this FAQ.

**6. Are there reimbursements available for teenage youth driver's insurance should foster care providers allow them to drive?**

- a. The irregular payments would not be made available for drivers insurance, however, communicate with the custodial agency case worker to see if there are insurance policies the parent or agency can take out on behalf of the youth.

**7. Are youth in the 18+ program eligible for the \$1,200 Irregular payment, or does that stop when they enter 18+?**

- a. Yes! \$1200 is their annual maximum until they exit foster care.

**8. Are there examples of completed forms with Jane Doe listed as the child for newer or first-time foster care providers to make sure forms are filled correctly?**

- a. CFS will look into creating examples. If you have a specific form that you would like an example of, please email HHS CFS FCSA Unit [cfsfcsaunit@nd.gov](mailto:cfsfcsaunit@nd.gov).

**9. Can I submit receipts for baby formula?**

- a. No. Formula is included in the standard maintenance daily rate of \$60 per month for food/incidentals. Workers and providers should be working with the local WIC office to special order formula.

**10. Does post-adopt help with childcare?**

- a. Yes. Adoption subsidy can negotiate the childcare expenses into the current subsidy. The maximum allowable amount is subject to the current CCAP maximums. Sub-adopt Negotiators use the CCAP part-time/full-time as a guide to have consistency statewide, but the families are not enrolled in CCAP. Adoptive families cannot be receiving CCAP and have childcare embedded in their adoption subsidy at the same time.

**11. Are diapers and wipes included in irregular payments?**

- a. Yes and No. Diapers and wipes are included in the standard maintenance daily rate and range between \$60-\$80 dependent on the age of the child. However, there may be special circumstances in which an older child continues to require diapers. In some cases, the appropriate size must be special ordered, resulting in significantly higher costs. Under these circumstances, the case worker may authorize assistance through Category 10 to help offset the additional expense. When the need for diapers is related to a medical condition, such as incontinence or another diagnosed condition, a medical professional may be able to provide a prescription. If eligible, Medicaid may cover all or a portion of the medically necessary incontinence supplies.

**12. Does the foster care provider pay the daycare cost and get reimbursed after they pay it, or does the payment go directly to the daycare?**

- a. Foster care providers pay the daycare, submit the SFN 920 to the case worker and are reimbursed by CFS for the childcare costs. It is understood this is a barrier for foster care providers due to the varied costs associated with childcare statewide. CFS has been working to create a solution to pay the childcare provider directly. However, the current foster care payment system does not have the ability to make payment to agencies or individuals who are not licensed foster care providers. Thank you for your patience. If needed, you may submit a SFN 920 each week to allow for ongoing and timely reimbursement from CFS.

**13. How is Title-IV funding determined and used? I need to know if my clients are Title-IV eligible and I don't know much about it or why it makes a difference. I get that it's a funding source. So what? Why is it a different funding source than any other kid would have?**

- a. Title IV-E is a federal funding program that helps states pay for certain costs associated with children who are in foster care, have been adopted from foster care, or are under guardianship. Not every child in foster care is eligible for Title IV-E funding. Eligibility is determined by CFS Foster Care Sub Adopt Eligibility Unit who are trained to review the parents income/assets, court order language, child's placement, legal status, and more. Case workers are not responsible for determining Title IV-E eligibility, but they are required to collect the pertinent information from the family for CFS FCSA Eligibility Unit can make a determination.
- b. While eligibility does not control the quality or type of services a child should receive, eligibility is an important step in accessing a federal funding to maximize available state funding. Although a case worker does not need to approve Title IV-E eligibility, it is helpful to understand why it

matters. When a child is Title IV-E eligible, the federal government reimburses the state for a portion of eligible foster care maintenance payments (\$0.50-\$0.83 to the dollar) and certain administrative and training costs. This federal reimbursement helps the state maintain state funding resources to stretch dollars to better support children and families.

**14. Why can't items be purchased prior to a specific placement? I had a situation this spring where a child in foster care was transitioned from a treatment level foster home to a regular foster home. As part of that transition, the new foster parents signed him up for a spring activity as registration was closing and the new home ordered him a bike so that he would be immediately able to ride and not feel left out. Both purchases were denied because they were paid for three days prior to his arrival into their home.**

- a. Preparing in advance for a child's arrival helps make the transition smoother. However, Child and Family Services (CFS) cannot authorize payments to a licensed provider for expenses incurred before the child's official placement date. The payment system requires the child to be assigned to the licensed provider before reimbursement can be authorized. Until the placement is effective, there is no mechanism to connect the expense to that provider for payment.
- b. In situations like the one described, the preferred approach would have been for the sending foster home (where the child was still officially placed) to make the purchase and request reimbursement. If not possible, the purchase must wait until the child's placement begins so the receiving foster home can be reimbursed. While this can be frustrating, the payment process is intended to ensure that public funds are used only for children who are officially placed with the licensed provider at the time the expense is incurred. Case workers are encouraged to communicate with both the sending and receiving foster homes before a transition to identify anticipated needs and develop a plan that complies with reimbursement requirements while supporting the child's successful move.

**15. Who should I contact if I have questions about provider reimbursement?**

- a. For questions regarding irregular payments or provider reimbursement discuss with the agency case worker or contact the CFS Foster Care and Sub-Adopt Eligibility Unit at [cfsfcsaunit@nd.gov](mailto:cfsfcsaunit@nd.gov) or 701-328-2076 or toll-free 833-551-2021.