SUBCHAPTER 71L – MATERNITY HOME FUND

10A NCAC 71L .0101 NATURE AND SCOPE

(a) "Application for State Maternity Fund" Form DSS-6187, which may be accessed at https://policies.ncdhhs.gov/divisional/social-services for an individual needing out-of-home care during pregnancy must be submitted by a county department of social services or a North Carolina licensed private adoption agency to the North Carolina Division of Social Services for review and approval.

(b) The State Maternity Fund may assist with residential housing costs for up to 183 days, including up to two weeks of post-partum care for the mother only.

(c) The State Maternity Fund shall not be utilized for hospitalization and delivery services or other medical services. All medical services for State Maternity Fund clients residing in alternate living arrangements must be provided through other resources.

(d) The State Maternity Fund may be used to pay for residential care for a pregnant minor who is in the protective custody of a county department of social services when the minor is placed in a facility that is not approved to receive foster care funds.

(e) Living arrangements for which State Maternity Fund payments may be utilized to pay for the cost of residential care include:

- (1) A maternity home licensed by or meeting the maternity home standards of the State of North Carolina;
- (2) A foster family home for children licensed in North Carolina and used in accordance with the license issued for that home;
- (3) The home of a non-legally responsible relative in North Carolina jointly approved for a specific client by the North Carolina Division of Social Services and the agency requesting State Maternity Fund payments; or
- (4) For individuals 18 and over, a boarding arrangement in North Carolina jointly approved for a specific client by the North Carolina Division of Social Services and the referring agency.

History Note: Authority G.S. 143B-153; Eff. April 1, 1978; Amended Eff. July 1, 1990; January 1, 1983; Readopted Eff. September 1, 2021.

10A NCAC 71L .0102 APPROVAL CRITERIA

(a) A county department of social services or a North Carolina licensed private adoption agency shall provide information, develop a service plan, and coordinate services for pregnant clients for whom they are requesting State Maternity Fund payments.

(b) Marital status and age shall not affect eligibility for State Maternity Fund payments.

(c) The client must be a resident of the State of North Carolina to be eligible for State Maternity Fund payments.

(d) State Maternity Fund payments shall supplement any other funds available from applicants, county departments of social services, families or private agencies. The agency requesting State Maternity Fund payments must review all financial resources available to the client. The agency must establish that resources available to the client are not adequate to meet residential costs.

(e) State Maternity Fund payments to licensed maternity homes is based on the actual per diem cost of care. A maternity home shall maintain a valid maternity home license for a consecutive one year period and submit an audited financial statement to the North Carolina Department of Health and Human Services, Controller's Office (2019 Mail Service Center, Raleigh, NC 27699-2019) before the per diem rate is assigned. A licensed maternity home is eligible for reimbursement from maternity home funds in the second year of operation if this criteria is met and maternity home funds are available.

(f) State Maternity Fund payments for care in a foster home is the North Carolina standard board rate for foster care assistance set by the General Assembly.

(g) State Maternity Fund payments for care in the home of a non-legally responsible relative or in a boarding arrangement shall be the same as the North Carolina standard board rate for foster care assistance.

History Note: Authority G.S. 143B-153; Eff. April 1, 1978; Amended Eff. November 1, 2009; July 1, 1990; January 1, 1983;

Readopted Eff. September 1, 2021.

10A NCAC 71L .0103 APPLICATION PROCESS

(a) County departments of social services and North Carolina licensed private adoption agencies shall submit applications on behalf of an eligible individual for the State Maternity Fund in writing on the "Application for State Maternity Fund" Form DSS-6187, which may be accessed at https://policies.ncdhhs.gov/divisional/social-services. The original must be submitted to the State Maternity Fund Coordinator, Family Support and Child Welfare Services Section, Division of Social Services and shall include the following information:

- (1) the reasons the client cannot remain in her own home (own home includes a foster care facility in which a child resides);
- (2) a description of the client's financial resources;
- (3) household gross monthly income(s), names and ages of other minor children in household, and statement of US citizenship or immigration status;
- (4) a description of the recommended living arrangement and why it is appropriate;
- (5) the proposed plan of services for the biological parents and the child;
- (6) an explanation of why the necessary services cannot be obtained for the client in a communitybased living arrangement;
- (7) a tentative agreement to accept the client by the individual responsible for maintaining the recommended living arrangement; and
- (8) the anticipated date of admission and the expected date of delivery (month, day, and year for both).

(b) Applications shall not be delayed because the actual admission date has not been confirmed. The service agency must notify the North Carolina Division of Social Services when the admission date is confirmed so that review and action on the application can be completed. Incomplete applications will not be processed.

(c) Applications that do not contain all information required by this Rule shall not be processed.

(d) Funds shall not be approved to offset residential costs incurred prior to the North Carolina Division of Social Services' receipt of the actual application with original signatures.

(e) Upon receipt of notice that funds have been approved, unless the placement is to be in a licensed maternity home, the agency requesting funds must negotiate with the individual responsible for maintaining the living arrangement a written agreement setting out mutually agreed upon responsibilities.

(f) Payments shall not exceed the amount initially approved.

History Note: Authority G.S. 143B-153; Eff. April 1, 1978; Amended Eff. January 1, 1983; Readopted Eff. September 1, 2021.

10A NCAC 71L .0104 ADDITIONAL REQUIREMENTS FOR THE PRIVATE AGENCY

History Note: Authority G.S. 143B-153; Eff. April 1, 1978; Amended Eff. January 1, 1983; March 1, 1982; Repealed Eff. August 1, 2021.

10A NCAC 71L .0105 PROCEDURE FOR APPROVAL AND PAYMENT

(a) All State Maternity Fund forms, correspondence, and monthly billing statements shall be addressed to the State Maternity Fund Coordinator, whose contact information can be found on the "Application for State Maternity Fund" Form DSS-6187, which may be accessed at https://policies.ncdhhs.gov/divisional/social-services.

(b) Upon receipt of a completed "Application for State Maternity Fund" Form DSS-6187, the North Carolina Division of Social Services shall make a decision regarding approval for State Maternity Fund payments and the recommended type of living arrangement per the application. Notice of action taken shall be communicated to the county department of social services or to the private adoption agency submitting the application with a copy routed to the applicable maternity home, or the approved living arrangement.

(c) County departments of social services and North Carolina licensed private adoption agencies shall submit notification to the Division of Social Services when the client is admitted to or discharged from the approved living arrangement.

(d) If the approved living arrangement is other than a maternity home, the service agency shall submit a completed copy of the "State Maternity Fund Residential Care Provider Agreement" Form DSS-6189 negotiated with the individual responsible for maintaining the living arrangement, to the North Carolina Division of Social Services before payment may be made to the residential care provider.

(e) At the end of each month the State Maternity Fund Coordinator will generate a monthly reimbursement worksheet for each maternity home or alternate living arrangement. An authorized individual from the maternity home or authorized living arrangement shall review, correct, and certify information reported. The authorized individual shall then mail the worksheet to the North Carolina Division of Social Services for a signature by the State Maternity Fund Coordinator for approval and submission to the North Carolina Department of Health and Human Services Controller's Office (2019 Mail Service Center, Raleigh, NC 27699-2019).

History Note: Authority G.S. 143B-153; Eff. April 1, 1978; Amended Eff. January 1, 1983; Readopted Eff. September 1, 2021.

10A NCAC 71L .0106 DEVELOPMENT OF SERVICE PLAN

(a) The Pregnancy Services caseworker shall complete a needs assessment. If during the process of assessing the needs of a pregnant minor, abuse or neglect is suspected, the Pregnancy Services caseworker shall notify the agency's Child Protective Services Unit. After the assessment is completed, the caseworker and the client shall jointly finalize a specific plan for services, building in time frames for action and identifying channels for accessing resources to be provided by outside agencies.

(b) The service agency's plan for providing services to the client and her child shall be transmitted to the North Carolina Division of Social Services as part of the "Application for State Maternity Fund" Form DSS-6187, which may be accessed at https://policies.ncdhhs.gov/divisional/social-services.

(c) As needed and appropriate, the plan shall address the following:

- (1) Counseling needs;
- (2) Medical Care;
- (3) Medical Assistance;
- (4) Nutritional Needs;
- (5) Residential or Housing needs;
- (6) Educational needs;
- (7) Employment Training;
- (8) Parenting Education;
- (9) Financial planning;
- (10) Child Care; and
- (11) Family Planning.

(d) While the client is in residential care, the supervising agency shall maintain contact with the client.

History Note: Authority G.S. 143B-153; Eff. September 1, 2021.

10A NCAC 71L .0107 ASSESSING THE APPROPRIATENESS OF ALTERNATIVE TYPES OF LIVING ARRANGEMENTS FOR INDIVIDUAL CLIENTS

(a) The Pregnancy Services caseworker shall evaluate the appropriateness of any community living arrangement based upon the aspects set forth in Paragraph (c) of this Rule for which the State Maternity Fund is requested, whether it is a boarding arrangement, the home of a non-legally responsible relative, or a licensed family foster home.

(b) When residential care in a family foster home is being considered for a minor, the Pregnancy Services caseworker shall request the assistance of the Foster Care Services staff in determining whether a home is available, and complete an assessment of the placement for the pregnant client and for all other persons residing in the home. A decision shall be reached by the Foster Care worker and the Pregnancy Services caseworker as to the individual assuming responsibility for case management.

(c) The following aspects of a community living arrangement shall be explored in determining the appropriateness for individual placements:

(1) Location and surroundings;

- (2) Physical environment;
- (3) Emotional environment;
- (4) Stability of living arrangement; and
- (5) Emergency transportation.

(d) Living arrangements for an expectant mother for whom the State Maternity Fund is being requested shall be selected on the basis of an assessment of the client's individual circumstances and service needs.

History Note: Authority G.S. 143B-153; Eff. September 1, 2021.