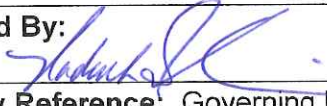


<b>Policy/Procedure/Subject: Foster Parent Expense Reimbursement</b>		
<b>Policy/Procedure No:</b> AP 441	<b>Adoption Date:</b> 08/01/03	<b>Revision Date:</b> 10/20/16
<b>Approved By:</b> 		<b>Title:</b> Chief Executive Officer, Children's Network of SWFL, LLC
<b>Authority Reference:</b> Governing Board		

I. POLICY

Foster parents shall be reimbursed for reasonable expenses that the foster parent incurs as a direct result of caring for the child that has been placed in the home.

II. PROCEDURE

1. Any payments to foster parents other than those payments that normally are processed through the Department of Children and Families FSFN such as foster parent pay, respite pays, clothing and medical must be submitted on an approved Check Request form to be paid. There must be an original receipt attached to support the expense for proper audit documentation.
2. The request will be forwarded to the Utilization Management Unit for review and approval. A service authorization form will be generated and attached to the request which will authorize the expense to be paid on behalf of the child in care and forwarded to Accounts Payable for payment.
3. Expenses of this nature will be reimbursed in a timely manner to assist our foster parent for caring for children placed in their homes for care. Expense reimbursement for damages by foster children will be paid in accordance with AP 444. Mileage reimbursement for foster parents will be paid in accordance with AP 442.
4. All paid documents will be scanned and electronically stored.