

# Minnesota Assessment of Parenting for Children and Youth

## General MAPCY Tips

1. Check and make sure that the correct placement and placement vendor is pulled in to the MAPCY
2. EFC-SIL MAPCY is not available for youth under the age of 17.75 years
3. Children are eligible for a 30 day emergency rate of level D, until a MAPCY is approved (within the 1<sup>st</sup> 30 days of their continuous placement)
4. A new MAPCY must be completed under a child's new post-adoption identity for Post Permanency reassessments; these are generated from the Post Permanency Reassessment Log from DHS
5. Data fixes for MAPCYs will only be completed if there is no other option
6. Northstar statute: [MN Statute 256N](#).

## Common MAPCY Questions and Answers | Worker

- Q.** The wrong placement was selected, now what?  
**A.** You can "COPY" the MAPCY and select the correct Placement.
- Q.** Can a MAPCY be "un-approved"  
**A.** No. A Revision might be the best way to resolve the issue in these circumstances. (A Revised MAPCY always has the same effective date as the original.)
- Q.** Should a MAPCY be completed if there is no payment and placement was within 30 days.  
**A.** A MAPCY doesn't have to be completed if the placement is less than 30 days. If it's within the first 30 days of the continuous placement and no MAPCY is completed, the provider is to be paid the Emergency Level D. If a MAPCY is not completed and it's past the first 30 days of the continuous placement, the system will default to Level B.
- Q.** How does the emergency level work?  
**A.** Initial MAPCY Assessment – Effective Date
- Effective date is typically the beginning of the placement.
- SSIS sets the effective date according to business rules relating to the Emergency Level D (do not try to override!)
- Emergency Level D

- Available to agencies within the first 30 days of a child’s continuous placement, but does not have to be used;
  - If the MAPCY is completed *within or after* the first 30 days and the amount is *greater* than Level D, the higher rate will go back to the first date of placement (SSIS will keep the effective date)
    - Service Arrangement – use Special Cost Code 19 (MAPCY adjustment)
  - If the MAPCY is completed *within* the first 30 days and the amount is *lower* than Level D, the lower rate will become effective the date of the approval (SSIS will adjust the effective date automatically – do not try to override)
    - Service Arrangement – use Special Cost Code 10 (Reduced foster care rate)
  - If the MAPCY is completed *after* the 30 days of the initial placement and the MAPCY is *lower* than Level D, the lower amount will be paid effective the 31st date of placement (SSIS will adjust the effective date automatically – do not try to override)
  - (M.S. § 256N.26, subd. 6)

**Q.** Can you just delete this MAPCY?

**A.** We recommend MAPCY’s are not deleted; the local agency can typically correct the issue without it being deleted. If a MAPCY is in draft status, it can be deleted. The SSIS Help desk does not delete MAPCYs. They can be reset to draft so the local agency can make changes or delete the MAPCY when appropriate. Analysis must be completed first to determine any effects on payments made by the agency and if payment adjustments must also be made by the local agency.

**Q.** What Levels are extraordinary levels?

**A.** Levels G-Q (An approved Extraordinary Level can be as low as a Level G: - the first entry test as one launches into the EL is based on a minimum score of 62 (for children 0-6 this is a G, for children 7-12 this is an H and for youth 13+ this is an I)

**Q.** How does child care (domain H) work?

**A.** Child care is needed for when the caregiver works outside the home or is enrolled in a training or educational program. Ratings are based on an average of the child care needed throughout the calendar year.

Need	Hours Per Week	Level Increase 0-6 year old	Level Increase 7-13 year old
a	>10	0	0
b	10-19 (or needed for summer only)	1	0
c	20-29	2	1
d	30-39	3	1
e	40+	4	2

Table 1 – Rating standards as determined by the average hours per week that child is to receive child care.

- Q.** Do I have to complete a MAPCY for a correctional facility placement?
- A.** A MAPCY needs be completed for all children in out of home care for 30+ days in Minnesota in a Northstar applicable placement location – a secure/locked correctional facility for youth is not a Northstar eligible location (service 180- treatment foster care, 181- child family foster care, and 188 Supervised Independent Living).

### **How to do a post-permanency reassessment MAPCY**

- Q.** When completing a post permanency MAPCY for child who was adopted; when the child is in the reassessment log how do we complete the MAPCY?
- A.** Family or county contacts DHS Adoption/Kinship worker to request a reassessment
- Must be 6 months since the last assessment
  - Must be in writing from the family
- DHS locates the child in SSIS-DHS and initiates a reassessment to the county of financial responsibility
  - County manages the log for new requests
    - Log in SSIS-Worker that allows agency to view pending reassessments (Searches/Logs – Post Permanency Reassessment Log)
  - Request to county will include both the pre-adoptive and post-adoptive names and SWNDX numbers and current MAPCY level
  - Financially responsible agency conducts person search on post adoptive/post kinship child/youth
    - If child/youth does not exist in the county, the county worker creates a new person record for the post adoptive/kinship identity and clears to the county and SWNDX. The Post Permanency Reassessment must be completed under the child’s new SWNDX number as reflected on the Post Permanency Reassessment Log.
  - SSIS-Worker allows the completion of a new MAPCY and compares the results of the original MAPCY
  - Notifications within SSIS-Worker to notify adoptive parent/relative custodian if MAPCY results are the same or lower
  - If a higher benefit level is determined and approved, SSIS-Worker automatically sends a notification with the proposed benefit level increase to SSIS-DHS
    - Financially responsible agency must send a copy of the MAPCY Rating Report to the DHS Adoption Assistance worker.
    - DHS reviews the MAPCY Rating Report
    - DHS creates and sends out an amendment to the adoption/kinship benefit agreement to the family for signature.
    - Once signed and returned, DHS signs the amendment, sets up new payment and issues back payment if necessary.
      - New rates goes into effect the date DHS Adoption Assistance signs the amendment.

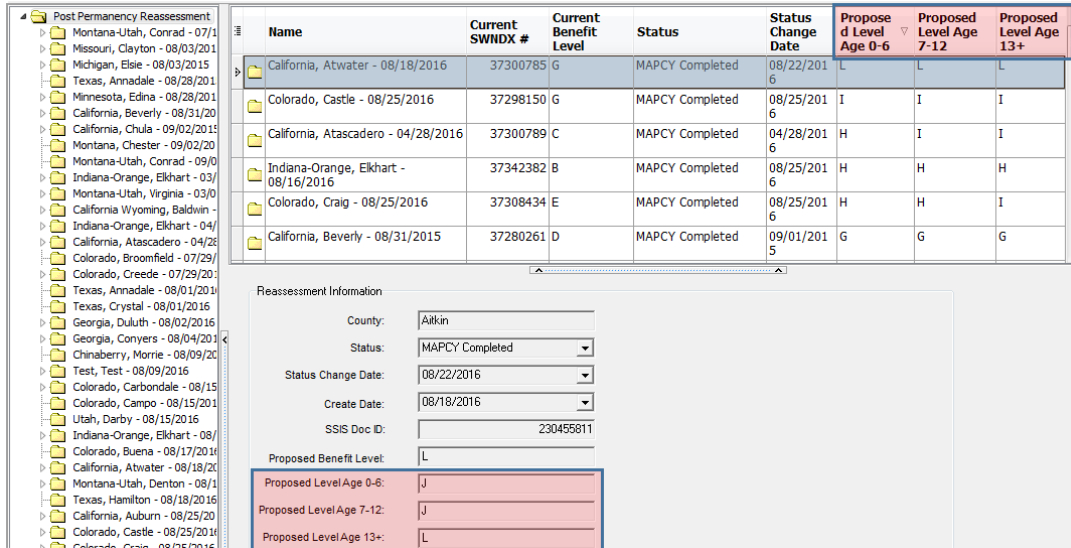


Figure 1 - Screen capture of files within SWNDX showing navigation pane to the left, database files in the upper right of the screen, and a brief synopsis of the selected file in the preview pane beneath the database.

## Common MAPCY Questions and Answers | Fiscal

### MAPCY Warnings and Errors on the Child Foster Care Report

#### Proofing Message 1260

“Warning - MAPCY: A MAPCY Assessment was due on xx/xx/xxxx. The "Supplemental Per Diem" portion of the payment is not reimbursable”

**Long Message:** A MAPCY Assessment was due more than 2 months ago. The "Supplemental Per Diem" is not reimbursable if the MAPCY Assessment is more than three months overdue.

Svc Code	Spec Cost Code	Service Start Date	Service End Date	Warrant/Eff Date	Amount
Client Name : ██████████					
181		12/01/2018	12/31/2018	01/10/2019	\$882.57
Warning - MAPCY: A MAPCY Assessment was due on 08/01/2018. The "Supplemental Per Diem" portion of the payment is not reimbursable.					

Figure 2 – Screen capture of the database warning: “Warning - MAPCY: A MAPCY Assessment was due on xx/xx/xxxx. The "Supplemental Per Diem" portion of the payment is not reimbursable.”

The placement is Northstar Foster Care, and the "Service End Date" is 2 months or more after the MAPCY Due Date, but is within the grace period and the Payment includes a "Supplemental Per Diem."

#### Solution:

Worker: Verify that a MAPCY or DOC Assessment is completed. Approve the MAPCY. Once the MAPCY is approved and if it is higher than a Level B. Depending on the effective date the Supplemental payments will be

eligible to be included in the Northstar Fiscal Reconciliation process. They will be picked up on the next report.

Client Name												
IV-E Service Type	Service Start Date	Service End Date	Warrant / Eff Date	Service Vendor	Rule Code	Vendor Payment Amount	Total Non-Reimbursable Amount	Total IV-E Amount	Northstar Amount	Service Code	Total FFP Amount	
						\$882.57						
Maintenance	12/01/2018	12/31/2018	01/03/2019		1	\$882.57	\$0.00	\$882.57	\$441.28	181	\$441.29	

Figure 3 – Screen capture highlighting payment details in the database.

**Claim Summary**

Client Name: [REDACTED] IV-E Claim:  Yes  No Northstar Claim:  Yes  No

Vendor Payment Amount: \$882.57 Eligible Amount: \$882.57 Total Non-Reimbursable Amount: \$0.00

Total IV-E Amount: \$882.57 Total FFP Amount: \$441.29 Northstar Amount: \$441.28

Service Start Date: 12/01/2018 Service End Date: 12/31/2018 Warrant / Eff Date: 01/03/2019

IV-E Service Type: A - Maintenance Per Diem Type: Northstar Foster Care

Rule Code: 1 - Child family foster home FFP Type: Minnesota

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**Client Details**

SSIS Person #: [REDACTED] PMI #: [REDACTED] Date of Birth: 10/20/2015 Reported Age: 3

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**Claim Details**

Maximum Allowed: \$882.57 Paid Over Maximum: \$0.00

Eligible MAPCY Level: 0 Exclude Supplemental Amount:  Yes  No

IV-E Maintenance %: 100.00% IV-E Maintenance Amount: \$882.57 FFP Maintenance Amount: \$441.29

IV-E Intake & Plan %: 0.00% IV-E Intake & Plan Amount: \$0.00 FFP Intake & Plan Amount: \$0.00

IV-E Training %: 0.00% IV-E Training Amount: \$0.00 FFP Training Amount: \$0.00

IV-E Non-Reimbursable %: 0.00% IV-E Non-Reimbursable Amount: \$0.00 Approved MA %: 0.00%

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**Service Vendor Details**

Name: [REDACTED] County Vendor #: [REDACTED] SSIS Bus Org #: [REDACTED]

License #: [REDACTED] IV-E Sub Code: [REDACTED]

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**Continuous Placement Details**

Start Date: 08/21/2017 Initial Placement Authority: Court ordered

VPA Signed Date: [REDACTED] Initial Best Interest Date: 08/21/2017 Cont Placement #: [REDACTED]

CFC Claim #: 615651045 Maint Claim #: [REDACTED] Legacy IV-E Claim:  Yes  No

Original CFC Claim #: [REDACTED] Payment #: 591552567 Flipped:  Yes  No

State Report #: 605368774

Figure 4 – Screen capture of detailed entry screen, including claim summary, client details, claim details, service vendor details, and continuous placement details.

**Proofing Message 1261:**

MAPCY / DOC Warnings: A MAPCY Assessment was due on "Date." The "Supplemental Per Diem" portion of the Payment is not reimbursable.

**Long Message:**

The MAPCY Assessment was due more than three months ago. The "Supplemental Per Diem" is not reimbursable when the MAPCY Assessment is more than three months overdue.

Client Name	Svc Code	Spec Cost Code	Service Start Date	Service End Date	Warrant/Eff Date	Amount
Client Name : [REDACTED]	188		02/01/2019	02/08/2019	01/24/2019	\$351.68
Warning - MAPCY: A MAPCY Assessment was due on 09/01/2018. The "Supplemental Per Diem" portion of the payment is not reimbursable.						

Figure 5 – Screen capture of the database MAPCY / DOC warning: A MAPCY Assessment was due on “Date.” The “Supplemental Per Diem” portion of the Payment is not reimbursable.

**Solution:**

Worker: Verify that a MAPCY or DOC Assessment is completed. Approve the MAPCY. Once the MAPCY is approved and if it is higher than a Level B. Depending on the effective date the Supplemental payments will be eligible to be included in the Northstar Fiscal Reconciliation process. They will be picked up on the next report.

**Proofing Message 1262:**

“MAPCY / DOC: The "MAPCY Level" paid is higher than the "Eligible MAPCY Level" for the service dates.”

**Long Message:**

Verify the MAPCY Assessment and the Payment are correct. Split the Payment to claim the "Eligible MAPCY Level" on one Payment. Use "Special Cost Code" (96 – Additional Foster Care (Non-reimbursable) on the second Payment.

Client Name	Svc Code	Spec Cost Code	Service Start Date	Service End Date	Warrant/Eff Date	Amount
Client Name : [REDACTED]	181		11/30/2018	11/30/2018	12/19/2018	\$1,113.60
MAPCY: The "MAPCY Level" paid (D) is higher than the "Eligible MAPCY Level" (Basic) for the service dates.						

Figure 6 – Screen capture of the database MAPCY / DOC warning: The "MAPCY Level" paid is higher than the "Eligible MAPCY Level" for the service dates.

The Child Foster Care Claims tab on the Child Foster Care report does indicate the generated claims. Even though a claim is generated, there can still be payment proofing warning messages for the claim those warning messages should still be addressed. For the MAPCY level errors, if you paid MAPCY level D but also had an eligible MAPCY level higher than that during the service dates of the payment, make sure the correct MAPCY level was selected.

**Solution:**

Split the Payment if appropriate. Use "**Special Cost Code**" (96 – **Additional Foster Care (Non-reimbursable)**) on the non-reimbursable portion of the payment.

Steps:

- Create Adjustment Reversal on the original payment.
- Create a 2 Creating Entry Adjustments (CEA)
  - 1<sup>st</sup> CEA with new lower approved rate.
  - 2<sup>nd</sup> CEA for the different with Special Cost Code 96.
    - Note: Payments must equal the original adjustment.

Payment Type	Payment Status	Warrant / Eff Date	Amount	Service Vendor	Service Start Date	Service End Date	Client Name	Spec Cost Code
Correcting entry adjustment	Paid	12/19/2018	\$185.60		11/26/2018	11/30/2018		96
Correcting entry adjustment	Paid	12/19/2018	\$928.00		11/01/2018	11/25/2018		
Adjustment reversal	Paid	12/19/2018	(\$1,113.60)		11/01/2018	11/30/2018		
Payment request	Paid	12/12/2018	\$1,113.60		11/01/2018	11/30/2018		

Figure 7 – Screen capture showing the split cost adjustment for payments higher than the MAPCY Level will allow.

**Proofing Message 1263:**

MAPCY / DOC Warnings: The "MAPCY Level" paid is **less** than the "Eligible MAPCY Level" for the service dates.

**Long Message:**

If the MAPCY Assessment is correct, create a Payment using "Special Cost Code" (19 – MAPCY Adjustment).

Svc Code	Spec Cost Code	Service Start Date	Service End Date	Warrant/Eff Date	Amount
Client Name : [REDACTED]					
181		12/11/2018	12/13/2018	01/10/2019	\$90.84
Warning - MAPCY: The "MAPCY Level" paid (Basic) is less than the "Eligible MAPCY Level" (E) for the service dates.					
181		12/14/2018	12/31/2018	01/10/2019	\$545.04
Warning - MAPCY: The "MAPCY Level" paid (Basic) is less than the "Eligible MAPCY Level" (E) for the service dates.					

Figure 8 – Screen capture of the database MAPCY/DOC Warning: The "MAPCY Level" paid is **less** than the "Eligible MAPCY Level" for the service dates.

"MAPCY Level" is less than the Eligible MAPCY Level and a MAPCY Adjustment for the Eligible MAPCY Level does not exist

Error when creating payment: “No Matching Service Arrangement to Adjust”

**Solution:**

Split the payments using the correct service dates. An additional payment should be created to pay the provider the difference between the two MAPCY assessments. Use "**Special Cost Code**" (19 – MAPCY Adjustment) on the additional payment. Leave the service arrangement # blank on the new payment adjustment for the difference between the basic MAPCY level and MAPCY new level. There isn't a way to make the Service Arrangement match at this point because the MAPCY was effective earlier than the End date of the original Service Arrangement and a Payment was already made. However, they should inactivate the original Service Arrangement.

Client Name	IV-E Service Type	Service Start Date	Service End Date	Warrant / Eff Date	Service Vendor	Rule Code	Vendor Payment Amount	Total Non-Reimbursable Amount	Total IV-E Amount	Total FFP Amount	Northstar Amount	Service Code
Client Name: [REDACTED]	Maintenance	12/11/2018	12/13/2018	01/10/2019	[REDACTED]	NYL	\$90.84	\$0.00	\$0.00	\$0.00	\$90.84	181
	Maintenance	12/14/2018	12/31/2018	01/10/2019	[REDACTED]	1	\$545.04	\$0.00	\$545.04	\$272.52	\$272.52	181

Figure 9 – Screen capture of database records list.

Claim Summary  
 Client Name: [REDACTED] I-V-E Claim:  Yes  No Northstar Claim:  Yes  No

Vendor Payment Amount: \$90.84 Eligible Amount: \$90.84 Total Non-Reimbursable Amount: \$0.00  
 Total IV-E Amount: \$0.00 Total FFP Amount: \$0.00 Northstar Amount: \$90.84

Service Start Date: 12/11/2018 Service End Date: 12/13/2018 Warrant / Eff Date: 01/10/2019

I-V-E Service Type: A - Maintenance Per Diem Type: Northstar Foster Care  
 Rule Code: NYL - Not yet licensed FFP Type: Minnesota

Client Details  
 SSIS Person #: [REDACTED] PMI #: [REDACTED] Date of Birth: 05/26/2003 Reported Age: 15

Claim Details  
 Maximum Allowed: \$121.62 Paid Over Maximum: \$0.00  
 Eligible MAPCY Level: E Exclude Supplemental Amount:  Yes  No  
 I-V-E Maintenance %: 0.00% I-V-E Maintenance Amount: \$0.00 FFP Maintenance Amount: \$0.00  
 I-V-E Intake & Plan %: 0.00% I-V-E Intake & Plan Amount: \$0.00 FFP Intake & Plan Amount: \$0.00  
 I-V-E Training %: 0.00% I-V-E Training Amount: \$0.00 FFP Training Amount: \$0.00  
 I-V-E Non-Reimbursable %: 0.00% I-V-E Non-Reimbursable Amount: \$0.00 Approved MA %: 0.00%

Service Vendor Details  
 Name: [REDACTED] County Vendor #: [REDACTED] SSIS Bus Org #: [REDACTED]  
 License #: [REDACTED] I-V-E Sub Code: [REDACTED]

Continuous Placement Details  
 Start Date: 09/22/2017 Initial Placement Authority: Court ordered  
 VPA Signed Date: [REDACTED] Initial Best Interest Date: [REDACTED] Cont Placement #: [REDACTED]

CFC Claim #: 615644474 Maint Claim #: [REDACTED] Legacy I-V-E Claim:  Yes  No  
 Original CFC Claim #: [REDACTED] Payment #: 583693855 Flipped:  Yes  No  
 State Report #: 605368774

Figure 10 – Screen capture of detailed information for line one in Figure 9.

Claim Summary  
 Client Name: [REDACTED] I-V-E Claim:  Yes  No Northstar Claim:  Yes  No

Vendor Payment Amount: \$545.04 Eligible Amount: \$545.04 Total Non-Reimbursable Amount: \$0.00  
 Total IV-E Amount: \$545.04 Total FFP Amount: \$272.52 Northstar Amount: \$272.52

Service Start Date: 12/14/2018 Service End Date: 12/31/2018 Warrant / Eff Date: 01/10/2019

I-V-E Service Type: A - Maintenance Per Diem Type: Northstar Foster Care  
 Rule Code: 1 - Child family foster home FFP Type: Minnesota

Client Details  
 SSIS Person #: [REDACTED] PMI #: [REDACTED] Date of Birth: 05/26/2003 Reported Age: 15

Claim Details  
 Maximum Allowed: \$729.72 Paid Over Maximum: \$0.00  
 Eligible MAPCY Level: E Exclude Supplemental Amount:  Yes  No  
 I-V-E Maintenance %: 100.00% I-V-E Maintenance Amount: \$545.04 FFP Maintenance Amount: \$272.52  
 I-V-E Intake & Plan %: 0.00% I-V-E Intake & Plan Amount: \$0.00 FFP Intake & Plan Amount: \$0.00  
 I-V-E Training %: 0.00% I-V-E Training Amount: \$0.00 FFP Training Amount: \$0.00  
 I-V-E Non-Reimbursable %: 0.00% I-V-E Non-Reimbursable Amount: \$0.00 Approved MA %: 0.00%

Service Vendor Details  
 Name: [REDACTED] County Vendor #: [REDACTED] SSIS Bus Org #: [REDACTED]  
 License #: 1095496 I-V-E Sub Code: [REDACTED]

Continuous Placement Details  
 Start Date: 09/22/2017 Initial Placement Authority: Court ordered  
 VPA Signed Date: [REDACTED] Initial Best Interest Date: 09/22/2017 Cont Placement #: [REDACTED]

CFC Claim #: 615644473 Maint Claim #: [REDACTED] Legacy I-V-E Claim:  Yes  No  
 Original CFC Claim #: [REDACTED] Payment #: 583693855 Flipped:  Yes  No  
 State Report #: 605368774

Figure 11 – Screen capture of detailed information for line two in Figure 9.

**Proofing Message 1264:**

MAPCY / DOC: An "Agency approved" MAPCY does not exist. The "Service End Date" must be on or before last day to pay "MAPCY Level" (D).

**Long Message:**

MAPCY / DOC: An "Agency approved" MAPCY does not exist. The "Service End Date" must be on or before last day to pay "MAPCY Level" (D).

Svc Code	Spec Cost Code	Service Start Date	Service End Date	Warrant/Eff Date	Amount
Client Name: [REDACTED]					
181		01/01/2018	01/10/2018	05/10/2018	\$320.30
Payment: An "Agency approved" MAPCY does not exist. The "Service End Date" (01/10/2018) must be on or before 01/09/2018 to pay "MAPCY Level" (D).					

Figure 12 – Screen capture of the database message: An "Agency approved" MAPCY does not exist. The "Service End Date" must be on or before last day to pay "MAPCY Level" (D).

No MAPCY Level “D” Associate with Client

ini	Bus Org/Provider	Effective Date	Status	Standard Benefit Level	Score	Agency Approval Date	Current Approved Level
LM		01/01/2018	Agency approved	F	40	07/10/2018	F

Figure 13 – Screen capture showing the “Standard Benefit Level” and the “Current Approved Level” at “F.”

- The Emergency Foster Rate (MAPCY Level D” is only available in the first 30 days of continuous placement.
- An approved MAPCY does not exist, and the service dates are not within the first 30 days of the Continuous Placement.

Continuous Placement Start Date 12/11/17

ini	Name	Start Date	Discharge Date	Supervising Agency	Reason Discharged
LM	Cont plcmt - 12/11/2017	12/11/2017	03/14/2018	County social services	Reunification with parents/primary caretakers

Figure 14 – Screen capture showing that the record has a continuous placement start date of 12/11/2017.

**Solution:**

An approved MAPCY does not exist, and the service dates are not within the first 30 days of the Continuous Placement. Worker should Verify MAPCY Level for service dates.

Client Name												
IV-E Service Type	Service Start Date	Service End Date	Warrant / Eff Date	Service Vendor	Rule Code	Vendor Payment Amount	Total Non-Reimbursable Amount	Total IV-E Amount	Total FFP Amount	Northstar Amount	Service Code	
Maintenance	01/01/2018	01/10/2018	05/10/2018		NVL	\$320.30	\$0.00	\$0.00	\$0.00	\$320.30	181	

Figure 15 – Screen capture of record entry in database.

Claim Summary			
Client Name:	<input type="text"/>	IV-E Claim: <input type="radio"/> Yes <input checked="" type="radio"/> No	Northstar Claim: <input checked="" type="radio"/> Yes <input type="radio"/> No
Vendor Payment Amount:	<input type="text" value="\$320.30"/>	Eligible Amount:	<input type="text" value="\$320.30"/>
Total IV-E Amount:	<input type="text" value="\$0.00"/>	Total FFP Amount:	<input type="text" value="\$0.00"/>
Service Start Date:	<input type="text" value="01/01/2018"/>	Service End Date:	<input type="text" value="01/10/2018"/>
IV-E Service Type:	<input type="text" value="A - Maintenance"/>	Per Diem Type:	<input type="text" value="Northstar Foster Care"/>
Rule Code:	<input type="text" value="NYL - Not yet licensed"/>	FFP Type:	<input type="text" value="Minnesota"/>
Client Details			
SSIS Person #:	<input type="text"/>	PMI #:	<input type="text"/>
Date of Birth:	<input type="text" value="08/18/2005"/>	Reported Age:	<input type="text" value="12"/>
Claim Details			
Maximum Allowed:	<input type="text" value="\$387.30"/>	Paid Over Maximum:	<input type="text" value="\$0.00"/>
Eligible MAPCY Level:	<input type="text" value="F"/>	Exclude Supplemental Amount:	<input type="radio"/> Yes <input checked="" type="radio"/> No
IV-E Maintenance %:	<input type="text" value="0.00%"/>	IV-E Maintenance Amount:	<input type="text" value="\$0.00"/>
IV-E Intake & Plan %:	<input type="text" value="0.00%"/>	IV-E Intake & Plan Amount:	<input type="text" value="\$0.00"/>
IV-E Training %:	<input type="text" value="0.00%"/>	IV-E Training Amount:	<input type="text" value="\$0.00"/>
IV-E Non-Reimbursable %:	<input type="text" value="0.00%"/>	IV-E Non-Reimbursable Amount:	<input type="text" value="\$0.00"/>
		FFP Maintenance Amount:	<input type="text" value="\$0.00"/>
		FFP Intake & Plan Amount:	<input type="text" value="\$0.00"/>
		FFP Training Amount:	<input type="text" value="\$0.00"/>
		Approved MA %:	<input type="text" value="0.00%"/>
Service Vendor Details			
Name:	<input type="text"/>	County Vendor #:	<input type="text"/>
License #:	<input type="text"/>	SSIS Bus Org #:	<input type="text"/>
IV-E Sub Code:	<input type="text"/>		
Continuous Placement Details			
Start Date:	<input type="text" value="12/11/2017"/>	Initial Placement Authority:	<input type="text" value="Court ordered"/>
VPA Signed Date:	<input type="text"/>	Initial Best Interest Date:	<input type="text"/>
		Cont Placement #:	<input type="text"/>
CFC Claim #:	<input type="text" value="596553046"/>	Maint Claim #:	<input type="text"/>
Original CFC Claim #:	<input type="text"/>	Payment #:	<input type="text" value="549417161"/>
State Report #:	<input type="text" value="585203129"/>	Legacy IV-E Claim:	<input type="radio"/> Yes <input checked="" type="radio"/> No
		Flipped:	<input type="radio"/> Yes <input checked="" type="radio"/> No

Figure 16 – Screen capture of detailed entry screen for record, including claim summary, client details, claim details, service vendor details, and continuous placement details.

**Proofing Message 1264:**

MAPCY / DOC: The MAPCY is invalid for the age of the client. The MAPCY must be appropriate for the age of the client.

Child's age on the "Effective Date" of the MAPCY is invalid for the MAPCY template used.

**Solution:**

Worker: Verify that the correct MAPCY Template was used for the client.

**Proofing Message 1305:**

Other Claim Warnings: "IV-E Claim" on the Service claim is "No" and "IV-E Claim" on the corresponding maintenance claim is "Yes." This edit does not apply to Northstar claims.

**Long Message:**

When "IV-E Claim" on the corresponding maintenance claim is "Yes," the Service claim is usually eligible for IV-E reimbursement.

Note: This message can apply to MAPCY Adjustments

SSIS Person #	Payment #	Svc Code	Spec Cost Code	Service Start Date	Service End Date	Warrant/Eff Date	Service SSIS Bus D	Service Vendor	License #	
Client Name: [REDACTED]	[REDACTED]	305488607	181	19	02/13/2017	02/28/2017	03/30/2017	300815945	[REDACTED]	1084530
Warning - Claim: "IV-E Claim" on the "MAPCY Adjustment" claim is "No" and "IV-E Claim" on the corresponding maintenance claim is "Yes." This edit does not apply to Northstar claims.										

Figure 17 – Screen capture of database warning: "IV-E Claim" on the Service claim is "No" and "IV-E Claim" on the corresponding maintenance claim is "Yes." This edit does not apply to Northstar claims.

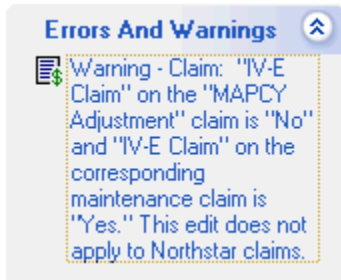


Figure 18 – Screen capture of “Error and Warnings” notification: "IV-E Claim" on the Service claim is "No" and "IV-E Claim" on the corresponding maintenance claim is "Yes." This edit does not apply to Northstar claims.

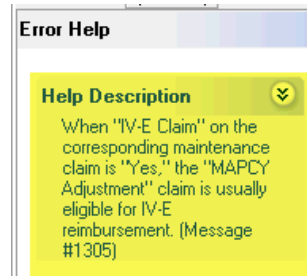


Figure 19 – Screen capture of “Error Help” notification: Help Description – When “IVE-E Claim” on the corresponding maintenance claim is “Yes,” the “MAPCY Adjustment” claim is usually eligible for IV-E reimbursement. (Message #1305).

Flipped Payment:

SSIS Person #	Payment #	IV-E Service Type	Service Start Date	Service End Date	Warrant / Eff Date	Service Vendor	Rule Code	Vendor Payment Amount	Non-Reimbursable Amount	Total IV-E Amount	Total FFP Amount	Northstar Amount	IV-E Sub Code	License #	Service Code	IV-E Claim	Flipped
[REDACTED]	[REDACTED]	Maintenance	02/13/2017	02/28/2017	03/06/2017	[REDACTED]	1	4457.76	\$0.00	\$0.00	\$0.00	\$457.76	[REDACTED]	1084530	181	No	No
[REDACTED]	[REDACTED]	Maintenance	02/13/2017	02/29/2017	03/06/2017	[REDACTED]	1	(\$457.76)	\$0.00	(\$457.76)	(\$226.88)	(\$226.88)	[REDACTED]	1084530	181	Yes	Yes

Figure 20 – Screen capture of a payment adjustment or “flipped payment.”

Client IV-E Eligibility from MAXIS has this client as non-reimbursable during February 2017:

PMI	Reimb Year-Month	Cont Plcmt #	Cont Plcmt Start Dt	Reasonable Efforts to Finalize Dt	Timestamp	Test Result
[REDACTED]	2017-02	[REDACTED]	2/1/2017		8/3/2017 2:44:25 PM	Non reimbursable
[REDACTED]	2017-03	[REDACTED]	2/1/2017		8/3/2017 2:44:25 PM	Reimbursable

Figure 21 – Screen Capture highlighting the non-reimbursable status of a client.

**Solution:**

Maintenance claim is Northstar after flip and message says it doesn’t apply to Northstar claims. They can put an **exclusion** if they don’t want to see it again. The "IV-E Claim" on the DOC Adjustment, MAPCY Adjustment or

Educational Transportation is "No" and the IV-E claim on the Maintenance Claim is "Yes."

Fiscal/Worker: Change the IV-E reimbursable indicator to "Yes" on the Payment.

**Proofing Message 91127:**

MAPCY / DOC: An "Agency approved" MAPCY exists with an "Effective Date". The "Service End Date" must be before that date.

**Long Message:**

The service dates of the Payment must be between the MAPCY "Effective Date" and the next MAPCY "Effective Date." Split the Payment based on the "Effective Date" of the later MAPCY Assessment.

Client Name	Svc Code	Spec Cost Code	Service Start Date	Service End Date	Warrant/Eff Date	Amount
188			01/01/2019	01/31/2019	12/13/2018	\$1,025.00
MAPCY: An "Agency approved" MAPCY exists with an "Effective Date" (01/19/2019). The "Service End Date" (01/31/2019) must be before 01/19/2019.						

Figure 22 – Screen capture of the database warning: An "Agency approved" MAPCY exists with an "Effective Date". The "Service End Date" must be before that date.

**MAPCY’s Associate with Client:**

Bus Org/Provider	Effective Date	Status	Standard Benefit Level	Score	Agency Approval Date	Current Approved Level
LPM	09/27/2017	Agency approved	Basic	16	10/02/2017	Basic
LPM	04/01/2018	Agency approved	Basic	16	05/17/2018	Basic
LPM	07/01/2018	Agency approved	C	20	06/17/2018	C
LPM	01/19/2019	Agency approved	I	40	01/27/2019	I

Figure 23 – Screen capture highlighting the errors of Current Approved Levels in relation to Effective Date.

The service dates are not between the MAPCY Effective Date and the next MAPCY effective date.

**Solution:**

Split the Payment if appropriate.

**Example:**

- First Payment would have service dates of 1/1/19 to 1/19/19 with Level C.
- 2nd Payment would have Service Dates 1/20/19-1/31/19 with Level I with SCC 19.
- Do not use a Service Arrangement on 1/19/19-1/31/19 payment.
- End date existing Service Arrangement, Create new Service Arrangement starting 2/1/19.

*Note:* Workers should always use the 1st of the month for Effective dates on MAPCY’s.

IV-E Service Type	Service Code	Service Start Date	Service End Date	Warrant / Eff Date	Service Vendor	Rule Code	Vendor Payment Amount	Total Non-Reimbursable Amount	Total IV-E Amount	Total FFP Amount	Northstar Amount
Maintenance	188	01/01/2019	01/31/2019	12/13/2018		SIL	\$1,025.00	\$0.00	\$0.00	\$0.00	\$1,025.00
Maintenance	188	01/01/2019	01/18/2019	12/13/2018		SIL	\$586.90	\$246.93	\$0.00	\$0.00	\$339.97
Maintenance	188	01/19/2019	01/31/2019	12/13/2018		SIL	\$438.10	\$0.00	\$0.00	\$0.00	\$438.10
Maintenance	188	01/01/2019	01/31/2019	12/13/2018		SIL	(\$1,025.00)	\$0.00	\$0.00	\$0.00	(\$1,025.00)

Figure 24 – Screen capture of payment records in database.

### Payment Warnings when MAPCY’s are associated:

**Warning: A MAPCY Does not exist for the Placement, Service Dates and “Service Vendor”.**

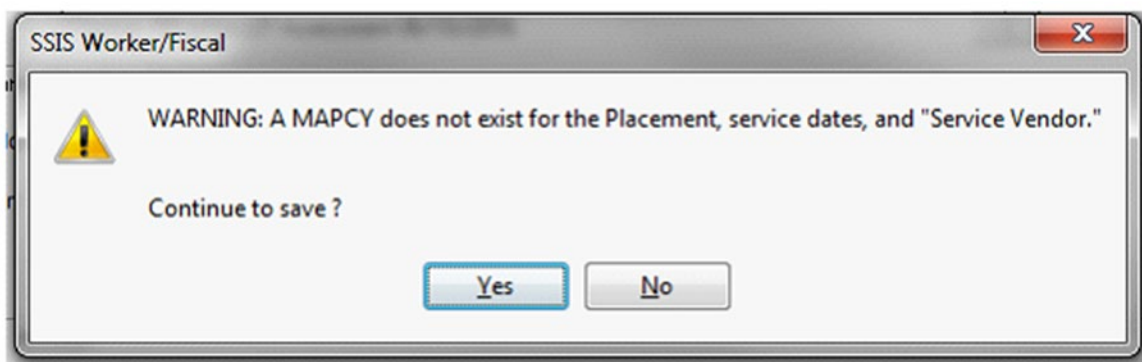


Figure 25 – Image of SSIS Worker/Fiscal pop-up warning: “Warning: A MAPCY Does not exist for the Placement, Service Dates and ‘Service Vendor.’ Continue to save? Yes/No”

“When the arrangement processes, it determines that the placement is Northstar then looks for a MAPCY Assessment for the Start/End Dates and if it’s approved. If no MAPCY Assessment is found that match the dates, vendor and placement, the message displays. Maybe they did one but picked the wrong vendor or the dates on the MAPCY don’t match the dates in this arrangement. Or maybe they really meant to do one but forgot to do it. Or they could have done one on a sibling and didn’t also do one for this child. The processing checks because a MAPCY could be effective all the back to the Start date of the placement if the Level is above Level D.

#### Solution:

This is a Warning message just to alert them that there could be a problem and they should make sure that it is correct before they send for approval or Approve. There are so many different variables it’s kind of a message to double check that everything is correct before continuing. It doesn’t prevent them from continuing but allows them to save and then make any necessary corrections before Sending for approval or Approving. If it was an Error message they wouldn’t even be able to save the arrangement.”

#### **Payment Warning: “NO Matching Service Arrangement to Adjust”**

Agency will not be able to use a service arrangement for the special cost code 19 – MAPCY adjustment payment.

Check the effective dates on the MAPCY's and break apart the payment into two: One prior to the new MAPCY's Effective date.

1. First correcting entry adjustment with Prior MAPCY Effective/service dates
2. Second correcting entry adjustment with service dates of new MAPCY's Effective date.
3. Both of these should remain associated to the service arrangement the original payment is associated to

Agency needs to create a payment with special cost code 19 – MAPCY adjustment for 2<sup>nd</sup> CEA with same service dates. (Do not enter a service arrangement into this payment)

**Warning: MAPCY Level “for the service dates does not match the current value”.**

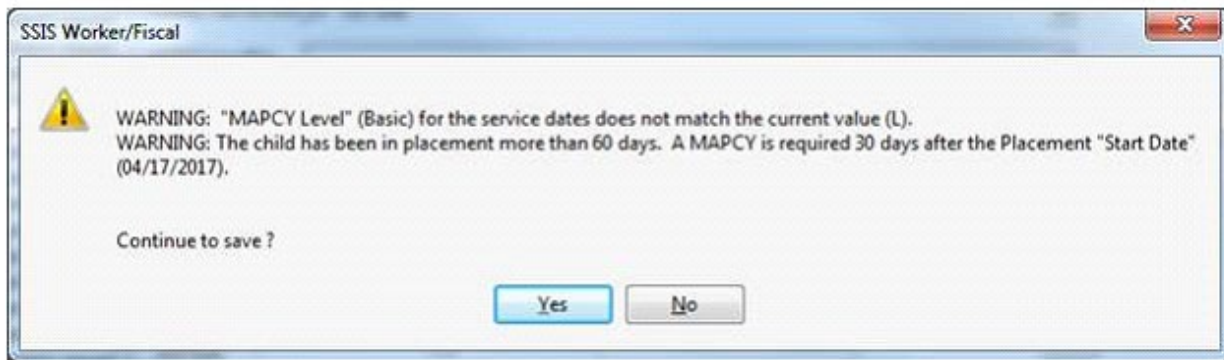


Figure 26 - Image of SSIS Worker/Fiscal pop-up dual warning: “Warning: ‘MAPCY Level’ for the service dates does not match the current value (L). Warning: The child has been in placement more than 60 days. A MAPCY is required 30 days after the placement ‘Start Date’ (04/17/2017). Continue to save? Yes/No.”

**Warning: The child has been in placement more than 60 days. A MAPCY is required 30 days after the placement “Start Date”.**

### Continuous Placement

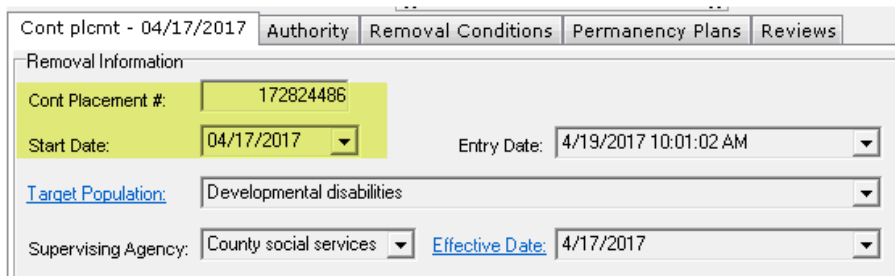


Figure 27 – Screen capture highlighting the continuous placement number and start date.

The current MAPCY is associated with the payee for "The Huntington Home" service provider and this service provider should be on the current MAPCY

SSIS Document #	Placement #	Bus Org/Provider	Effective Date	Status	Standard Benefit Level	Score	Agency Approval Date	Ex Level Status	Standard + Extraordinary	C A
		MY CARE INC	04/17/2017	Agency approved	J	73	04/19/2017	State approved	L	L
		HUNTINGTON HOME, THE	04/17/2017	Agency approved	J	73	05/19/2017	State approved	L	L
		MY CARE INC	11/01/2017	Agency approved	J	73	10/25/2017	State approved	L	L

Figure 28 – Screen capture of database listings for Bus Org/Providers Huntington Home and My Care Inc.

**Solution:**

The problem involves the payee being selected as the Bus Org/Provider on the current MAPCY with the 11/1/17 effective date. You need the Huntington Home service provider selected as the Bus Org/Provider on this current MAPCY, so try doing a **revision** on the current MAPCY making sure that Huntington Home is selected on the setup tab.

**Miscellaneous Warnings & Scenarios:**

**Can an Agency make a payment for a lesser daily amount than the approved MAPCY Level?**

- Ex. Per Diem is \$28.50 per day
- Per Diem rate = \$20.00/day

**Solution:**

Complete the MAPCY. If the MAPCY is higher rate than \$28.50, Special Cost code “10-Reduced Foster Care rate” can be used on the payment so they would be able to pay the \$20.00 per day.

- 1 Service arrangements and Payments are needed
- 1 payment - the approved MAPCY Level (SCC10)

**Can an Agency make a payment for a higher amount than the approved MAPCY Level?**

- Ex. MAPCY is a different Rate= \$30.00/day
- Per Diem rate = \$48.00/day

**Solution:**

Complete the MAPCY. If the MAPCY is higher rate than \$30.00, Special Cost code “96- Additional Foster Care (Non- Reimbursable)” can be used on the payment so they would be able to pay the \$48.00 per day.

- 2 Service arrangements and Payments are needed
  - 1 payment - the approved MAPCY Level
  - 1 payment- additional foster care (SCC 96)

**MAPCY “send for approval” option is not enabled**

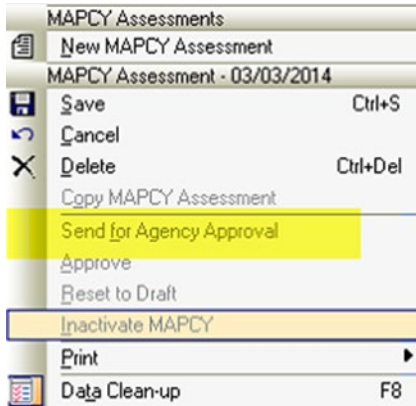


Figure 29 – Screen capture that highlights "Send for Agency Approval" as it appears when the option is disabled.

**Solution 1:**

Agency cannot send a MAPCY for approval unless there is at least one caregiver listed on the setup tab. Set up Caregiver in the Placements tab.

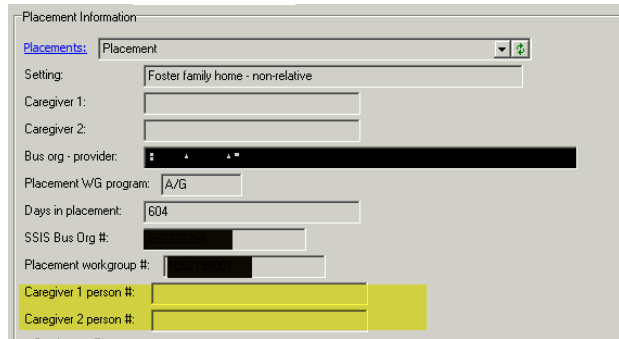


Figure 30 – Screen capture of Caregiver phone number entry fields that are empty in the Placements tab.

**Solution 2:**

Worker does not have “Assess MAPCY” Function in roles.

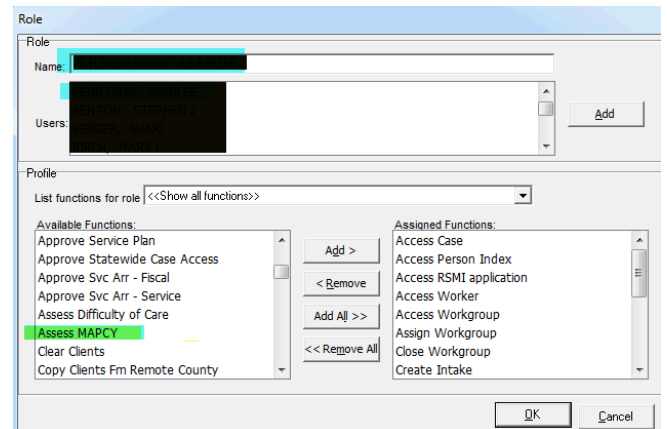


Figure 31 – Screen capture that highlights where "Assess MAPCY" would appear in the Available Functions list in order to add to the "Assigned Functions" list.