

# Bridges



Association of Administrators of the Interstate Compact on Adoption and Medical Assistance

Summer 2001

## Minnesota's Public/Private Adoption Initiative

*By, Connie Caron, Social Services Program Consultant  
Minnesota Department of Human Services*

Almost five years ago Minnesota established the Public/Private Adoption Initiative (PPAI), a collaboration between the Minnesota Department of Human Services (DHS), county social services and eleven licensed private adoption agencies. Faced with the shorter timelines for moving children to permanent homes mandated by the Adoption and Safe Families Act (ASFA) and the large number of children awaiting adoption, DHS staff looked to find a new way to provide adoption services to children and their adoptive families. Because Minnesota is a county-administered, state-supervised social service system, DHS believed that a partnership between the State, county, and private agencies could dramatically improve services. It was thought that the private agencies would bring additional resources and expertise that would supplement the work of the county agencies. Despite the many challenges in defining and sharing roles and responsibilities, PPAI has been the key to Minnesota's success in increasing the number of children placed with adoptive families. In the past few years, more than 1,500 children in Minnesota have found a permanent family through adoption.

DHS requested funding for the PPAI in the then-Governor Arne Carlson's budget in 1997 and the Legislature allocated \$3 million to fund the initiative. The program has been funded at that

same level since 1997. The State has since entered into performance-based contracts with private agencies to provide adoption services not typically available to children in the care of the county child welfare agencies. Getting the legislative support to fund the effort was, perhaps surprisingly to some, the easier part. The more difficult challenge was how to develop and form new relationships between the State, the county agencies, and private agencies.

The first step was to establish a planning task force which included adoptive parents, adopted adults, adoption advocates, county agency staff and private agency personnel. In a series of facilitated meetings, the planning task force developed guidelines for all involved in the partnership (see sidebar, page 2).

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## Challenges Lead to Success

Initially, DHS, the counties and the private agencies struggled to implement the program. Many county social workers had concerns about moving children out of long-term foster placements, fearing that placing a child in a new home, school and community could create disruptions. There were also difficulties expanding placement options beyond traditional families. While rural and non-traditional families were being identified as prospective adoptive parents, they were not always being considered. Large families, gays and lesbians, and to a lesser extent, singles were sometimes overlooked as prospective adoptive parents even though they represented a large pool of available families.

The PPAI brought every one together and has led to improved practices. One worker no longer makes all placement decisions. Instead teams that include both county agency workers and others directly involved in the case consult with families and make choices on appropriate placement for children. The state maintains oversight, reviewing any placement that separates siblings or any other cases where concerns are raised. By using this collaborative approach PPAI has significantly increased placements, including those with non-traditional families. According to Wendy Cook of Crossroads Adoption Services, one of the private agencies involved in PPAI, "The Permanency Task Force meetings, monthly gatherings between county and private agencies to present cases for placement or for issue discussions, have been most helpful in reducing barriers. Some of the best stuff happens when somebody takes a chance and says something controversial. There is no one way to practice social work or one way to ethically handle a case. Some real friendships have been forged through this process."

There were also difficulties in getting agencies to implement performance based contracts. Having always provided services based on a fee-for-service model, private agencies involved in the PPAI were concerned about basing payment on the achievement of specific outcome measures. These measures, however, included not only finalized adoptions, but also payment for the provision of intermediate services to achieve permanency for certain children. Some of these intermediate measures include payment for each person or couple receiving adoptive parent training, recognizing that many of those trained would not go on to adopt; payment for completed adoption studies following the placement of the family on the State Adoption Exchange and payment

## Task Force Program Guidelines

### Minnesota Department of Human Services will:

- monitor each child's status quarterly
- establish an advisory committee to provide ongoing recommendations to the state
- reimburse private adoption agencies directly for services provided
- establish minimum guidelines for each service area

### County Social Service Agencies will:

- continue to provide adoption services for children under state guardianship
- identify and request adoption services for individual children
- select appropriate providers (private adoption agencies)

### Private Adoption Agencies will:

- recruit (general, targeted, child-specific) adoptive families
- provide adoption placement activities for new adoptive families
- handle foster parent adoptions
- provide post adoption services

### Private agencies will provide the following specific services:

#### *Services to the families include:*

- adoption training and education
- adoption studies
- adoption study updates
- partner with county agency to match potential adoptive parents with children under state guardianship
- registration of prospective families on the State Adoption Exchange

#### *Child-specific services available to families, upon the request of the county, include:*

- life planning services that may include child-specific recruitment, life book preparation and parent/child disengagement work
- foster parent adoptions
- relative adoptions
- adoption placement activities
- post adoption services, including assisting families with plans for ongoing services and developing a crisis plan

#### *Checklists and other assistance to families to submit documents and secure services such as:*

- application for a new social security card
- application for medical assistance
- application for child welfare services
- work with the child's school to review or develop the child's Individual Education Plan (IEP)
- contact information to learn about state-wide organizations
- application to the Minnesota DHS to initiate child care, respite services and special needs camp services through the Adoption Assistance Program

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(Minnesota Continued)

of one half of the placement fee upon placement. In practice, some agencies have found that this approach provides funding stability and enhanced commitment to the initiative. "With this program you get paid along the way as you complete specific services. You do not have to wait for finalization, and risk that a placement will not work out and you will not get paid" said Wendy Cook.

Even with these challenges, PPAI has been a success. From February 1998 to December 31, 2000, the PPAI contracting agencies made 505 new adoptive and 165 foster placements. Further, there has been a shift in attitudes. County social service agencies and private agencies are now true partners in finding adoptive homes for Minnesota's children.

- "The Permanency Task Force meetings, monthly gatherings between county and private agencies to present cases for placement or for issue discussions, have been most helpful in reducing barriers... There is no one way to practice social work or one way to ethically handle a case. Some real friendships have been forged through this process."***
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## **ACYF-PA-01-01: ADOPTION ASSISTANCE ELIGIBILITY INTERSTATE CASES**

On January 23, 2001, the Administration for Children and Family, Children's Bureau issued a comprehensive policy announcement, ACYF-CB-PA-01-01 (hereinafter PA-01-01). PA-01-01 repealed a number of previously issued policies and provides "comprehensive guidelines for States to use in determining a child's eligibility for the title IV-E adoption assistance program."

Among its many pages is clarification regarding which state is responsible for entering into an adoption assistance agreement for children not involved in the child welfare system. It states,

*If the State agency does not have responsibility for placement and care, it is the adoptive parents' State of residence where the adoption assistance application should be made. In that event, the public child welfare agency in the adoptive parents' State of residence is responsible for determining whether the child meets the definition of special needs, entering into the adoption assistance agreement and paying the subsidy, consistent with the way public benefits are paid in other programs.*

Therefore, the State of residence of the adoptive par-

ents is responsible for entering into the adoption assistance agreement in situations including when (1) a child is adopted through a private agency and (2) when a title IV-E eligible child's adoption dissolves and the child is subsequently adopted without the involvement of the public child welfare agency.

### **Compare with Responsibility For the Provision of Nonrecurring Adoption Costs**

States which enter into agreements for ongoing State or Federal adoption assistance payments have the responsibility for reimbursement of the adoptive parents nonrecurring expenses. In cases where there is no agreement for ongoing adoption assistance payments then **the state where the final decree of adoption is issued** is responsible for reimbursing parents for non-recurring expenses.

Future issues of Bridges will discuss some of the other policy changes/clarifications of PA-01-01. Particularly, the changes in policy regarding (1) the availability of title IV-E adoption assistance for children placed for adoption through private adoption agencies; and (2) eligibility of children adopted by relative caregivers that have not been involved with either a public or private agency will be examined.

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# Family to Family Reform Initiative

By, Nancy Stephens and Ursula Krieger

In 1992, the Annie E. Casey Foundation, together with child welfare professionals throughout the country, designed the *Family to Family* reform initiative in an effort to address some of the challenges confronting the child welfare system and to improve outcomes for the children and families served.

Grounded in the belief that children do best in families, the goals of the initiative are to decrease the overall numbers of children coming into care, reduce the frequency and length of children's stays in foster care, increase safe reunifications whenever possible, and reduce agency reliance on congregate care. These goals are largely addressed by implementing the four core strategies at the heart of *Family to Family*:

- (1) involving parents as well as the broader community in team decision making around placement issues;
- (2) partnering with neighborhood resources to provide families with a range of needed services and supports;
- (3) recruiting foster and adoptive parents from the community to preserve children's connections to their families; and
- (4) improving states' ability to collect and analyze child welfare data to enhance programs and services for families.

In combination, these strategies support child safety and permanency outcomes and serve to increase system capacity and advance reform.

## Building Bridges: Recruiting, Training and Supporting Foster/Adoptive Families

At the outset of the *Family to Family* Initiative, the accepted wisdom among child welfare professionals was that a steady decline in the pool of foster/adoptive families was unavoidable and that disadvantaged communities could not produce good foster families. Initial evaluation results, now available from the Foundation<sup>1</sup> are beginning to show that:

- Dramatic increases in the number of foster and adop-

tive families are possible, with corresponding decreases in the numbers of children placed into congregate care; and

- Good foster and adoptive families can indeed be recruited and supported in the communities from which the children are coming into placement.

Recent national statistics show that foster homes are a primary adoptive resource— more than 60% of adoptions from the public child welfare system are by foster parents. For this reason, under F2F, foster and adoptive family recruitment is conducted as one effort. Traditionally, individuals applied to be either foster or adoptive parents. However, maintaining two separate tracks

contributes to delays for foster parents who want to adopt and duplication of efforts and paperwork for agencies. Combined recruitment brings needed families into the system and allows them the option to decide at a later time

whether to become temporary or permanent families for children. The goal is to find good families for all children who need them.

In *Family to Family* sites, targeted recruitment of foster/adoptive parents is conducted within the children's communities and is followed by comprehensive training and ongoing agency support services. Agencies must be reliable systems of support and information to prospective foster and adoptive parents from the initial contact with the agency through the finalization of adoption. Caregivers and resource families that are well-prepared, respected and supported throughout the foster and adoptive process are more likely to remain. Consequently, through *Family to Family*, agencies are encouraged to develop strong support programs and staff to provide families with caregiving assistance, crisis services, and emotional support.

## Promoting Team Decision Making

Another key feature of the initiative is that foster and adoptive families are trained to become resources for and partners with the agency and birth parents. *Family to Family* underscores the importance of respecting foster and adoptive parents as members of the service

*"Good foster and adoptive families can indeed be recruited and supported in the communities from which the children are coming into placement."*

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*(Family to Family Continued)*

team, making them full partners with the birth parents, agency staff and community professionals in child placement decisions. By building a relationship or bridge between birth and foster parents on the child's behalf, timely and thorough assessment and case planning can be made to return children safely to their birth parents or to move those children who are unlikely to be reunified into permanent adoptive homes as quickly as possible. This cooperative team approach to fostering and adoption provides the child with a stable home, while preserving a relationship with his or her birth family.

Recruitment, training and support services for foster and adoptive parents are closely linked and one supports the other. For additional information on recruitment and retention of foster/adoptive families, see the Annie E. Casey website at [www.aecf.org](http://www.aecf.org)

### **Partnering with the American Public Human Services Association (APHSA)**

Committed to *Family to Family's* strong, family-focused approach to child welfare, the American Public Human Services Association (APHSA) has joined the Annie E. Casey Foundation in its work to advance and support public agency implementation of *Family to Family* at the state and local levels. Specifically, APHSA plays an important role in orienting human service commissioners and child welfare directors to the goals, values and strategies of F2F; assessing readiness of interested sites; developing and disseminating written materials; assisting states in developing implementation plans; and identifying technical assistance needs.

For additional information:

Contact Suzanne Barnard, Director, or Ursula Krieger, Assistant to the Family to Family Reform Initiative at (202) 682-0100.

<sup>1</sup> For evaluation results see:

[www.aecf.org/familytofamily/resources/res-evaluation.htm](http://www.aecf.org/familytofamily/resources/res-evaluation.htm).

Initial sites included in the evaluation were: Alabama, New Mexico, Ohio, Maryland, and Pennsylvania.



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## **TITLE IV-B REQUIREMENTS OF THE HAGUE IMPLEMENTING REGULATIONS**

President Clinton signed the Intercountry Adoption Act of 2000 (IAA) into law on October 6, 2000. The IAA provides the framework for implementation in the United States of the Hague Convention on Protection of Children and Cooperation in Respect to Intercountry Adoption (Hague Adoption Convention). The IAA, among its many provisions, amended title IV-B, subpart 1, by adding paragraphs 13 and 14 to section 422(b). These paragraphs are as follows:

*“Each plan for child welfare services under this subpart shall—*

*13. contain a description of the activities the State has undertaken for children adopted from other countries, including the provision of adoption and post-adoption services; and*

*14. provide that the state shall collect and report information on children who are adopted from other countries and who enter into State custody as a result of the disruption of a placement for adoption or the dissolution of an adoption, including the number children, the agencies who handled the placement or adoption, the plans for the child, and the reason for the disruption or dissolution.”*

Number 13 means that States must describe the adoption and post adoption services that they have developed that can be accessed by children from other countries and their adoptive families. It is not a mandate to States to develop new services targeted to this population of children and families. In contrast, number 14 is a new mandate. States must now collect and report information regarding disruptions and dissolutions of international adoptions which result in children entering foster care.



## FROM THE SECRETARIAT'S DESK

### ACYF-CB-IM-03: HEALTH INSURANCE COVERAGE AND RECEIPT OF ADOPTION INCENTIVE PAYMENTS

On March 7, 2001, the Department of Health and Human Services, Administration on Children, Youth and Families (ACYF), Administration for Children and Families (ACF), Children's Bureau (CB) issued an information memorandum (ACYF-CB-IM-01-03) on "Health Insurance Coverage and Receipt of Adoption Incentive Payments." This memorandum reminds States that Section 473A of the Social Security Act (the Act) requires that States

*provide health insurance coverage to any child with special needs [as determined under section 473(c) of the Act] for whom there is in effect and adoption assistance agreement between a State and an adoptive parent or parents [emphasis added].*

Clearly this provision is concerned with children with special needs who are the subject of an adoption assistance agreement (other than Title IV-E) and are living outside of the state that has entered into the adoption assistance agreement. States are already mandated to provide Medicaid to children receiving Title IV-E adoption assistance whether or not they are the state that entered into the adoption assistance agreement. Second, all States provide some form of medical assistance to children receiving state-funded adoption assistance from their state who reside in their state; they do so through the Medicaid program or a program developed by the state and funded solely by state dollars.

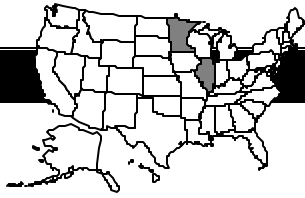
How then can States meet this mandate? First the "health insurance" that must be provided may be provided either through Medicaid or a state health insurance program. However the medical benefits provided must be of the same kind and type provided under Medicaid. The easiest way, perhaps, for States to meet the mandate is a three-step process. First, elect the Medicaid option providing for children who are the subject of a state-funded adoption assistance agreement and cannot be placed for adoption without Medicaid because they have special needs for medical or rehabilitative care. This optional category of children is provided for in Section 1902(a)(10)(A)(ii)(VIII) of the Social Security Act (hereinafter, the "COBRA option"). Second, institute a policy/regulation that provides that:

Medicaid will be provided to any child with special needs residing in their state, for whom it has been determined by another state that the child has special needs for medical or rehabilitative care, and who is the subject of an adoption assistance agreement with another state, when a certified copy of the adoption assistance agreement from the adoption assistance state has been received by the residence state (hereinafter, "reciprocity"). Third, become a party to the Interstate Compact on Adoption and Medical Assistance (ICAMA). ICAMA is the interstate agreement that is necessary for States to provide this coverage on an interstate basis. (42 CFR 435.403(k)).

As of July 1, 2001, 37 states provide Medicaid to children residing in their state who meet the eligibility criteria for the COBRA option, receiving state-funded adoption assistance from another state. These states include: Alaska, **Alabama**, Arkansas, California, Colorado, Delaware, Georgia, Idaho, Indiana, Iowa, Kansas, **Kentucky**, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, **Montana**, **North Carolina**, **North Dakota**, Ohio, Oklahoma, Oregon, **Rhode Island**, South Carolina, South Dakota, Texas, **Utah**, Vermont, **Virginia**, Washington, West Virginia, Wisconsin and Wyoming. Eight of these states, however, currently limit reciprocity to children whose state-funded adoption assistance agreements are with states that are members of the Interstate Compact on Adoption and Medical Assistance (ICAMA). These states are the states in bold.

The other options might include purchasing private health insurance plans, reimbursing families for medical expenses, or assisting the provider in the families residence state in becoming a licensed Medicaid provider for your state and issuing the family a Medicaid card from your State. Each of these options have their benefits. Electing the COBRA option, instituting a policy of reciprocity, and becoming a party to ICAMA, however, may be the best way to ensure that these children receive medical assistance in interstate situations since a significant number of States are already using this avenue.

If you have any questions or need assistance in electing the COBRA option and instituting a policy of reciprocity, please contact me, Liz Oppenheim, Program Director, AAICAMA at (202) 682-0100 or [loppenheim@aphsa.org](mailto:loppenheim@aphsa.org).



# Illinois' Adoption Success: *The Inside Story*

By Jane Elmore and Roland Kulla

When President Clinton signed the Adoption and Safe Families Act into law in 1997, he challenged States to double their adoptions by 2002.

The Illinois Department of Children and Family Services (DCFS) met that goal in the first year of the challenge. Performance for Illinois' fiscal year 1999 is even more amazing. The number of adoptions has tripled in just two fiscal years!

In fiscal year 1997, which ended June 30, DCFS recorded 2,229 adoptions. For the just-completed fiscal year 1999, the number of adoptions stands at 7,315. In Cook County alone, 5,806 adoptions were completed. The adoptions completed by Illinois in fiscal year 1999 are the most adoptions reported by any state in the nation. Illinois received the Adoption 2002 Award for excellence in Adoptions in 1998 and 1999.

The performance in the last two fiscal years stands in sharp contrast to adoption performance for the previous decade. While the number of adoptions showed a very gradual rise, the rate of children adopted from the foster care case load actually declined. All of this changed in fiscal year 1998 when the rate of adoptions nearly doubled to 8 percent, up from 4.5 percent the previous year. In fiscal year 1999, the rate doubled again.

This change in the rate of adoptions has had a direct impact on the number of children in foster care. The Illinois foster care population peaked at over 51,000 children in fiscal year 1997. As of April 2000, the case load was less than 33,400.

### Progress through Partnership

The Department credits its success largely to successful partnerships—from the courts, to private child welfare providers, to businesses—a shared commitment to permanency has made quite an impact.

A notable example can be found within the Cook County court system. Under the leadership of Presiding Judge Nancy Sidote Salyers, who also received an Adoption 2002 Award, the Cook County court successfully took up the challenge to eliminate backlogs and delays and

increase court resources to free children for adoption.

In addition to close attention to intake and case closings, Judge Salyers reorganized and streamlined court calendars resulting in a shrinking of the court's docket for the first time in recent memory. As a result, children move much more quickly through the system.

The DCFS adoption turnaround largely reflects the turnaround in Cook County. In 1994, there were nearly 10,000 cases opened in Cook County Juvenile Court and less than 4,000 were closed. In 1999, nearly 13,000 cases were closed and less than 3,000 were opened. Cook County had 78 percent of the case load in fiscal year 1997 and completed 65 percent of the adoptions. In fiscal year 1999, 77 percent of the case load was in Cook County and they achieved over 79 percent of the adoptions.

### Legislative Progress

Legislation was crucial to the increase in permanency for children. The Governor's office convened a remarkable coalition comprised of private interest groups, such as the Child Care Association; the Illinois Foster Parent Association; the Council of Adoptable Children; and representatives from the Judiciary, DCFS, and legislative leaders. This coalition proposed and passed reform legislation a year prior to the passage of ASFA. The legislative leadership was in place for the revisions necessary to bring Illinois promptly into compliance with ASFA when the time came. The legislation tightened time frames, streamlined judicial procedures and established criteria for concurrent planning and expedited termination of parental rights.

### Changing the Role of Relative Caregivers

Studies of the Department's practice of using relative caregivers led to reforms that have increased the number of children achieving permanency. In 1995, the Department initiated a change in law that redefined neglect. Prior to the change, it had been common practice to take custody of children who were successfully being raised by kin solely because their birth parents were not caring for them. With the current policy, relatives with related children living with them are provided information, referral, and onetime services to assist them, without taking custody of the children.

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**Success Story** continued

Similarly, the Department sponsored studies that examined the willingness of kin to adopt. Prior to these studies, staff believed that relatives did not want to adopt. The studies revealed that relatives were very interested in adoption, but no one had asked them. The number of adoptions by relatives has increased from 875 in fiscal year 1996 to 4,179 in 1999. In fiscal year 1999, relative adoptions were 57 percent of all adoptions.

Illinois was awarded a federal waiver in fiscal year 1997 to create a subsidized guardianship permanency option. The availability of this permanency alternative has helped over 4,000 more children leave the foster care system.

More significantly, initial findings of the project evaluation show that the availability of the guardianship option actually increases the levels of adoption as well. The program is targeted to relative caregivers who represent over 90 percent of the caregivers that choose this option.

### **Incentives for Right Outcomes**

An outcome-based approach was incorporated into the foster care contracts of the private agencies that provide over 70 percent of these services in Illinois. DCFS is held to the same outcomes. DCFS agreed to fund staff for adoption, education, and recruitment, and increased aftercare funding in exchange for increased permanencies, including return home, adoption or guardianship and increased stability.

The program began with the providers of relative foster care in Cook County on July 1, 1997, and was expanded to the relative and regular foster care programs statewide over the next two years. Performance contracting includes incentives for meeting and exceeding targets as well as disincentives if expected targets are not met. Performance-based contracting could only happen without close collaboration with service providers. Private providers and public managers endorsed this plan because of their commitment to help children achieve permanency despite the fact that, if successful, it would result in a smaller foster care system.

### **Focus on Quality & Accreditation**

In order to improve the quality of its social work skills, the Department is pursuing accreditation of all public

and private sector programs through the Council on Accreditation. The goal is to assure that all programs meet the "industry standards" for child welfare practice.

Fifty-four DCFS offices and satellites are now accredited, which represents nearly 80 percent of the public sector case load. All private homes of relative foster care agencies contracting with DCFS had until July 1999 to apply and have until July 2000 to get accredited. All other private foster care agencies have until July 2001.

High case loads were also a barrier to permanency. Illinois' 1991 B.H. Consent Decree required case loads of 25 children in substitute care per caseworker. Hundreds of Department and private agency staff were added to comply with this provision. Most case loads now average less than 25 cases per worker.

***"The studies revealed that relatives were very interested in adoption, but no one had asked them. The number of adoptions by relatives has increased from 875 in fiscal year 1996 to 4,179 in 1999."***

The Department quickly realized that it was not sufficient to simply reduce the numbers. Caseworkers, supervisors and managers at the field level had to learn the needed skills and change their practice to facilitate adoptions. The Department required that all DCFS supervisors have a master's degree in Social Work or a related field and paid for the education for staff that did not meet this new requirement. It conducted extensive clinical retraining of supervisory and casework staff to ensure that staff have the skill and expertise to perform their responsibilities.

Additional enhancements include changing the casework model to increase the involvement of the child's worker in taking direct responsibility to move them to permanency. Management training and supervision help keep staff focused on outcomes.

Each of these elements has been essential for making the changes that have resulted in Illinois' adoption success. Their cumulative power has even surprised the architects of the reforms. Challenges certainly remain, but the results have far exceeded expectations.

#### *About the Authors*

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## Tuition Waiver Update

**Maryland** has enacted legislation to provide a waiver of tuition for foster care youth and youth adopted out for foster care after age 14. To be eligible, recipients must apply for federal and state financial aid by March 1 of each year. Eligibility continues for 5 years after enrolling at a public institution or until a bachelor's degree has been rewarded.

**Kentucky** has a new law that provides free tuition and fees at Kentucky public universities and colleges to young adults who were adopted in Kentucky or who have been wards of the state there. Applicants must meet the school's entrance requirements, attend school full-time and maintain good grades. Costs for room and board and books are not covered. Students must start college within four years from graduating high school or earning their general equivalency diploma (GED), and eligibility continues for five years. Applicants do not have to live in Kentucky to participate in the program.

**Florida** also has a law that exempts children adopted from foster care from tuition payments at state universities, colleges and vocational training schools. The law effects children adopted from the Florida Department of Children and Families after December 31, 1997.

**Massachusetts** provides adoption tuition waivers to individuals who were in custody of the state's Department of Social Services and adopted by a resident of Massachusetts or by a state employee.

### **LOIS MITCHELL**

**Long Time Advocate for Children  
and Friend to AAICAMA**

#### **RETIRES**

**The staff at AAICAMA would like to  
thank Lois for her service on our  
Executive Committee  
and for all the unique ideas and  
energy poured out on behalf of  
children.**

**HAPPY DAYS, LOIS!**



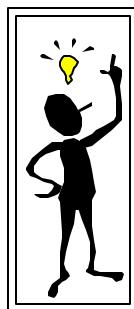
## Illinois DCFS Receives COA Accreditation

The Council on Accreditation (COA) for Children and Family Services has accredited the Illinois Department of Children and Family Services (IL DCFS). IL DCFS is the largest welfare agency to achieve full accreditation and now joins Oklahoma's Department of Children and Family Services as the only two state child welfare agencies to obtain this goal.

According to IL DCFS, changes were made at each site in child protection, intact family services, foster care and foster home licensing. DCFS also now requires social work or human services degrees for caseworkers and Masters of Social Work degrees for supervisors.

COA reports that seven states are now pursuing accreditation and ten others are considering it.

## **CALL FOR ARTICLES**



**DOES YOUR  
AGENCY  
HAVE A  
MODEL  
ADOPTION  
PROGRAM?**

AAICAMA would like to highlight at least one successful adoption program in each issue of  
**Bridges**

If your agency has developed a program for improving the provision, coordination, or evaluation of services to adoptive families and you would like to write an article for  
**Bridges**

we would like to hear from you.  
Please contact Doyle Evans at:  
(202) 682-0100 or  
DEVANS@APHS.org



### Hope for Children Act

On June 7, 2001, as part of the Tax Relief Bill, President George W. Bush signed the Hope for Children Act (H.R. 622, S.148) into law. The law amends the Internal Revenue Code to increase the expenses allowable toward the adoption credit. Effective December 31, 2001, the legislation doubles the current tax credit from \$5,000 to \$10,000 and makes the adoption tax credit permanent for all adoptions. For those families who adopt special needs children, the legislation increases the maximum credit from \$6,000 to \$10,000 regardless of whether the adoption has qualified expenses. The law also increases the income level at which the credit phases out from \$75,000 to \$150,000.

### Child Protection/Alcohol & Drug Partnership Act of 2001

On May 17, Rep. Charles Rangel (D-NY) introduced H.R. 1909, the Child Protection/Alcohol and Drug Partnership Act of 2001. The legislation is a companion to S. 848, which was introduced in the Senate on March 7<sup>th</sup> by Sen. Olympia Snowe (R-ME). The bill will amend Title IV-B of the Social Security Act to create a new five-year, \$1.9 billion state block grant program to address the connection between child welfare and substance abuse.

### Indian and Alaska Natives Foster and Adoption Services Amendment of 2001

The Indian and Alaska Natives Foster and Adoption Services Amendment of 2001 (S. 550) was introduced by Sen. Thomas A. Daschle (D-SD) on March 15, 2001. The bill amends Title IV-E of the Social Security Act to provide access to Federal funding for foster care and adoption services for Indian children under tribal jurisdiction. Tribes would be able to apply directly to HHS for IV-E administrative funds. Furthermore, the bill would allow for IV-E funds to be used for tribal placements, continue to allow tribal-state Title IV-E agreements, recognize tribal standards for foster home licensing, and allow for increased flexibility.



### Family Opportunity Act

The Family Opportunity Act (H.R. 600) was introduced in the House of Representatives by Rep. Pete Sessions (R-TX) and Henry Waxman (D-CA) on February 13, 2001. Senators Chuck Grassley (R-IA) and Edward Kennedy (D-MA) introduced the Act as a companion bill in the Senate (S. 321). The bill is currently cosponsored by 178 Representatives and 69 Senators. At present, the bill has been referred to the Subcommittee on Health in the House and in the Senate the bill is under review by the Senate Finance Committee. The Act would amend the Social Security Act to allow middle class families with disabled children better access to Medicaid services. The bill amends Title XIX (Medicaid) to give States the option to allow families with disabled children to purchase Medicaid coverage for their child and to provide waivers for partial or total psychiatric services persons under age 21. The bill authorizes funding for a demonstration program for States to provide Medicaid coverage for a specified number of children with potentially severe disabilities. It also amends Title V to provide appropriations for development and support of the Family-to-Family health information centers, and amends Title XIX to allow for restoration of Medicaid eligibility to certain SSI beneficiaries under age 21.

### Strengthening Working Families Act 2001

The Strengthening Working Families Act of 2001 (S. 685) was introduced in the Senate and referred to the **Finance Committee on April 3**. Sen. Evan Bayh (D-IN) sponsors the bill. The bill works to strengthen families by providing amends to Title IV of the SSA, Immigration and Nationality Act, and the Internal Revenue Code.

The Strengthening Working Families Act includes child welfare provisions that reflect those in President Bush's budget blueprint. The bill would reauthorize and extend the curriculum of the Promoting Safe and Stable Families Program, and rename the program "Strong Families, Safe Children" (see below).

The bill, under title IV-E, reauthorizes the John E. Chafee Foster Care Independence program and increases its budget from \$140 million to \$200 million per year for assistance and support for children adopted after age 16. The additional \$60 million would be used specifically for education and training vouchers worth up to \$5,000 for youth who age out of foster care. It also

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eliminates State authority to opt-out of the requirement to conduct criminal background checks on prospective foster and adoptive parents.

Finally, as part of the child support title of the bill, the legislation amends the SSA to allow states to apply the 75% match rate for training under Title IV-E to private providers of child welfare services. Currently, this match rate applies only to public agency staff and workers in child care institutions.

### **Promoting Safe and Stable Families Reauthorization**

President Bush's budget, as well as the House and Senate budget resolutions, call for increased funding for Title IV-B, Subpart 2, the Promoting Safe and Stable Families Program. The program was originally authorized in 1993 as the Family Preservation and Support Services Program, and was first reauthorized in 1997 as part of the Adoption and Safe Families Act. Currently, Promoting Safe and Stable Families is undergoing reauthorization as part of the Strengthening Working Families Act of 2001 (S. 685). The program has four service components - family preservation services, family support services, limited family reunification services, and adoption promotion and support services. Funded at \$305 million for FY 2001, its last year of authorized funding. The presidential, House, and Senate budgets for FY 2002 each provide \$505 million, an increase of \$200 million per year and one billion over five years. The reauthorization allows for more funding and flexibility in how the states use the funds. On May 10<sup>th</sup> the House Ways and Means subcommittee on Human Resources held hearings that addressed how funding is currently used, what services are making a difference, and how to move towards reauthorization of the act. Raymond Torres of Casey Family Services, Betsy Rosenbaum of APHSA, James Beougher of Michigan CFS, Fred Wulczyn of Chapin Hall Center for Children, among others testified in support of reauthorization.

### **Child Protection Services Improvement Act**

Rep. Fortney "Pete" Stark (D-CA) introduced the Child Protection Services Improvement Act (H.R. 1371) on April 3, 2001. The bill would provide matching grants to states to improve the quality of their child welfare work force. The bill authorizes \$100 million over five years for HHS to distribute. State would be able to use these

matching grants to improve child welfare workers' wages, increase the number of child welfare workers, reduce the turnover and vacancy rate of child welfare agencies, increase education and training of child welfare workers, and/or attract and retain qualified candidates and coordinate services with other agencies. The legislation also provides for education loan forgiveness for child welfare workers who complete 2 years of full time work in a child welfare field. The goal of the program is to help recruit and train more highly trained people for the field.

### **106th Congress, 2nd Session Noteworthy**

#### **The Child Citizenship Act of 2000**

The Child Citizenship Act of 2000 (H.R. 2883) was signed into law by President Clinton on October 30, 2000 and went into effect on February 27, 2001. The legislation amends the Immigration and Nationality Act to grant automatic citizenship to children born abroad who are (1) under 18 years of age; (2) admitted to the U.S. as a lawful permanent resident; and (3) in the legal and physical custody of at least one parent who is a U.S. citizen. The bill eliminates the current requirement that the parents of such children submit an application to have their children naturalized. It applies equally to all children of U.S. citizen parents who are lawfully admitted for permanent residence, regardless of whether or not they were adopted.

Under the Act, children adopted from abroad by U.S. citizens receive the same treatment as children born abroad to U.S. citizens. A child whose adoption is completed abroad becomes a citizen immediately upon entering the U.S. as a lawful permanent resident. In cases where the child is coming to the U.S. for purposes of adoption (but has not yet been adopted), the status of the child changes to citizen from lawful permanent resident the moment the adoption becomes final. The legislation will apply to children adopted before the effective date of the bill. Any child who meets the three conditions above as of the effective date will be granted citizenship regardless of the date of the child's adoption or entry into the U.S.



## RESOURCE NOTES

### TAX BENEFITS FOR FOSTER AND ADOPTIVE PARENTS

Many adoptive parents, as well as foster parents and kinship caretakers are eligible for substantial tax benefits – in some cases worth \$1,000-2,000 or more per child. However, complex rules and the lack of available information cause many families to lose substantial refunds. In response to this need, the Casey National Center for Resource Family Support (CNC), a unit of Casey Family Programs, has initiated a national outreach campaign to inform resource families about available tax benefits. CNC has placed a 20-page booklet on its web site: <http://www.casey.org/cnc>. Local foster parent associations and child welfare agencies are welcome to print and distribute this booklet. The web site also features a sample newsletter article, and sample check stuffer messages that can serve as helpful reminders.

The United States Treasury Department has issued a Report to the Congress on Tax Benefits for Adoption. The report provides a general history and overview of federal tax benefits for adoption, as well as, detailed data about adoptions and the use of tax benefits for adoption in 1997 and 1998. The report is available in on the internet at:

[www.treas.gov/taxpolicy/libraryadoption.pdf](http://www.treas.gov/taxpolicy/libraryadoption.pdf).

### Hague Convention Information

Information about the Hague Convention on Protection of Children and Cooperation in respect of Intercountry Adoption recently ratified by the United Senate and signed into law is available at:

<http://hcch.net/e/conventions/menu33e.html>

The site includes the full text of the Convention, an explanatory report, a bibliography, translations of the convention, and a report on the current status of the adoption of the Convention.

### Health Care Utilization in Foster Care

There have been ongoing concerns about the adequacy of the health care services that children in foster care receive. *Health Care Conditions, Utilization and Expendi-*

*tures of Children in Foster Care* is a new study of the health care coverage received by foster children. The study, prepared by Mathematica Policy Research under contract to the U.S. Department of Health and Human Services, uses State Medicaid Research Files assess the health care services provided to children in foster care in three states: California, Florida and Pennsylvania. Key findings include:

- Most children in entering foster care are enrolled in Medicaid, but one-third to one-half lost their Medicaid coverage when they left foster care
- Children in foster care were more likely than other groups of children on Medicaid to have a mental health or substance abuse condition.
- There was considerable variation across the three states studied in patterns of health care utilization.

Inquiries about the report should be directed to the Project Officer, Laurie Radel at 202-690-5938.

### Adoption and Permanency Guidelines

The Permanency Planning for Children Department of the National Council of Juvenile and Family Court Judges has developed a new publication, *Adoption and Permanency Guidelines: Improving Court Practice in Child Abuse Cases*. This new, comprehensive guide is intended to assist juvenile and family courts in assessing and implementing improvements in the handling of child abuse and neglect cases through the termination of parental rights and adoption process. Copies of the Guidelines can be ordered on-line at [ppncjfcj.org](http://ppncjfcj.org), or by calling 775-327-5303.

### Adoption Nation

Adam Pertman, an adoptive parent and Pulitzer Prize nominated journalist for his work about adoption is the author of a new book *Adoption Nation: How the Adoption Revolution is Transforming America*. Combining compelling personal stories and thoughtful analysis Pertman explores the tough issues presented by adoption, as well as, larger social impact that adoption is having on American culture. Issues he addresses include: the role of gay and lesbian adoption in the changing nature of the family, the evolving concept of self identity, and the growing global connections between people exemplified by intercountry adoption. *Adoption Nation* is published by Basic Books.

## Dual Licensure of Foster and Adoptive Families Evolving Best Practices

*Casey Family Programs National Center for Resources Family Support*

The Casey Family Programs National Center for Resources Family Support released the results of a survey that looked at Dual Licensure. The realization that foster parents are often very viable options as adoptive parents and that foster children are commonly adopted by their foster parents has prompted some states to initiate Dual Licensure practices because the process allows for smoother transition from foster parent to adoptive parent. The article examines in depth the dual licensure practices in Missouri, Utah, Texas and Oregon, as well as, provides policy implications.

Contact: [www.casey.org/cnc](http://www.casey.org/cnc)

## Survey Release: Child Welfare Work force Facing Challenges

*Child Welfare League of America, the Alliance for Children and Families, and the American Public Human Services Association*

The American Public Human Services Association, the Alliance for Children and Families, and Child Welfare League of America joined forces to conduct a study of child welfare personnel. As child welfare agencies struggle with high staff turnover rates, they are forced to confront service and management implications this problem produces. Public, private, and non-profit workers were surveyed to determine the scope and nature of child welfare work, and to determine effective practices for recruiting and retaining child welfare workers. This press release summarizes the study and the results of the data.

For More Information: APHSA, [www.aphsa.org](http://www.aphsa.org)

## Study of the Adoption Incentive Bonus Program

Cornerstone Consulting Group has released a study of how states are using their adoption incentive funds. The report, *A Carrot Among the Sticks: The Adoption Incentive Bonus*, presents findings from phone interviews with officials from all fifty states and the District of Columbia about how the incentive program affected adoption practice and how states are reinvesting the incentive funds. The report also briefly outlines the legislative background of the incentive program and a breakdown of the funding that states received for their increases in adoption in 1998 and 1999. To request copies of the report contact Luisa Alvim at Cornerstone at 713-627-2322 or [lalvim@cornerstone.to](mailto:lalvim@cornerstone.to)

## Welfare Reform and Mental Health

The Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, and Administration for Children and Families has released *Welfare Reform: Exploring Opportunities for Addressing Children's Mental Health and Child Welfare Issues*. This report is intended to be a follow-up to *Welfare Reform: Issues and Implications for Children and Families with Mental Health or Substance Abuse Needs* put out by the National Technical Assistance Center for Children's Mental Health. The report highlights issues that have emerged since federal welfare reform legislation first passed. Furthermore, it updates provisions of federal welfare reform, takes a look at policies and practices that have been implemented in some states and counties, as well as reviews major research studies that examine the impact of welfare reform.

Document Available:

National Technical Assistance Center for Children's Mental Health

Georgetown University Child Development Center  
3307 M Street, NW, Suite 401

Washington, DC 20007

(202) 687-5000 phone

(202) 687-1954 fax

e-mail: [deaconm@georgetown.edu](mailto:deaconm@georgetown.edu)

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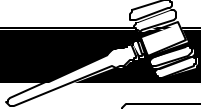
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## CASES OF INTEREST

### ADOPTION, CONSENT

#### **In re K.L.H., 2000 WL 1350662 (La. Ct. App.).**

Trial court improperly dispensed with mother's consent to stepmother's adoption based on mother's failure to pay child support for more than one year because court failed to consider mitigating factors; mother regularly visited the children, had strong bond with them, and her efforts to leave abusive second husband impaired her ability to pay support.

(From ABA Child Law Practice, December 2000)

#### **In re Carrie "GG", 709 N.Y.S.2d 247 (App. Div. 2000).**

Father's consent to child's adoption was unnecessary in dependency proceeding since father knew child had been placed with child welfare agency when she was born, he knew mother had surrendered child for adoption, he provided no financial support, and he showed no ability or desire to have custody of child.

(From ABA Child Law Practice, December 2000)

#### **In re M. T., 21 S.W.3d 925 (Tex. App. 2000).**

Court granted former foster parents' adoption of two sisters over child welfare agency's objection because agency's refusal to consent was without good cause; while children were initially removed from foster parents because of abuse allegations, investigation did not confirm abuse and children's subsequent preadoptive placements all failed.

(From ABA Child Law Practice, December 2000)

### ADOPTION, RES JUDICATA

#### **In re R.Y. 2001 WL 204046 (Miss.).**

First set of adoptive parents were barred by doctrine of res judicata from filing claim that court's failure to appoint guardian ad litem for child in adoption proceeding with second set of adoptive parents rendered second adoption void; first set of adoptive parents should have brought their guardian ad litem claim in earlier proceeding in which they challenged second adoption by claiming their consent to the adoption was insufficient.

(From ABA Child Law Practice, June 2001)

### ADOPTION, FEES

#### **In re K.M.J., 758 So. 2d 402 (Miss. 2000).**

In unsuccessful termination of parental rights and

adoption action brought by couple, not child welfare agency, to adopt a child in agency custody, trial court did not abuse its discretion by ordering agency to pay portion of guardian ad litem and investigation fees if parent could not afford to pay it.

(From ABA Child Law Practice, October 2000)

### ADOPTION, GRANDPARENTS

#### **In re C.D., 729 N.E.2d 553 (111.App.Ct. 2000).**

Court properly applied foster parent preference in determining that adoption by foster parents was in child's best interests despite grandmother's desire to adopt and mother's consent to grandmother's adoption; child had lived with foster parents for two years after entering care because of sexual abuse by mother's brother, grandmother's son.

(From ABA Child Law Practice, November 2000)

### ADOPTION, JURISDICTION

#### **Adoption of Asente, 734 N.E.2d 1224 (Ohio 2000).**

Ohio court lacked jurisdiction over adoptive parents' petition to adopt child born in Kentucky; under Uniform Child Custody Jurisdiction Act and Parental Kidnaping Prevention Act, Kentucky court had jurisdiction since Kentucky was child's home state, and Kentucky court had exercised its jurisdiction.

(From ABA Child Law Practice, December 2000)

### ADOPTION, OPEN ADOPTION

#### **In re Vito 728 N.E.2d 292 (Mass. 2000).**

Court's order of post-adoption contact was not in child's best interests because it was based on speculation that child might benefit from contact with biological family later in life because child was African American and adoptive parents were white; child had lived with adoptive parents since one month after his birth and was now eight years old.

(From ABA Child Law Practice, December 2000)

### ADOPTION, FRAUD

#### **Gruett v. Nesbitt, 2001 WL 294276 (Or.Ct. App.).**

In case in which adoption was set aside after adoption agency engaged in fraud, adoptive parents were not entitled to remand to raise additional legal arguments regarding agency; remand is not a vehicle for reargument or collateral attack and would unnecessarily prolong and exacerbate the litigation in this case.

(From ABA Child Law Practice, June 2001)

## FREQUENTLY ASKED QUESTIONS

### Nonrecurring Adoption Costs International Adoption

**Q: Can a foreign adoption qualify for payment of nonrecurring adoption expenses?**

**A:** Yes, a foreign adoption can qualify for payment of nonrecurring adoption expenses. The Federal Register of Wednesday, December 14, 1988 on page 50218 states that "The statute provides no basis for excluding these [foreign adoptions] cases if they otherwise satisfy the statutory requirements of Section 473(c)." Hence, foreign adoptions are not excluded from qualifying for nonrecurring adoption costs.

Internationally adopted children must meet the same criteria as children adopted domestically to qualify for payment of nonrecurring adoption expenses. The eligibility criteria for payment of nonrecurring expenses can be found in the Code of Federal Regulations (CFR). According to the CFR, the following criteria must be met:

- "The agreement for nonrecurring expenses must be signed prior to the final decree of adoption" [45 CFR 1356.41(b)].
- "There must be no income eligibility requirement (means test) for adopting parents in determining whether payments for nonrecurring expenses of adoption shall be made. However, parents cannot be reimbursed for out-of-pocket expenses for which they have otherwise been reimbursed" [45 CFR 1356.41(c)].
- "For purposes of payment of nonrecurring expenses of adoption, the State must determine that the child is a 'child with special needs' as defined in section 473(c) of the Social Security Act (see below), and that the child has been placed for adoption in accordance with applicable State and local laws" [45 CFR 1356.41(d)].

Sec. 473(c) of the Social Security Act defines a child with special needs as follows:

- (1) "the State has determined that the child cannot or should not be returned to the home of his parents; and
- (2) the State had first determined (A) that there exists with respect to the child a specific factor or condition (such as his ethnic back-

ground, age, or membership in a minority or sibling group, or the presence of factors such as medical conditions or physical, mental, or emotional handicaps) because of which it is reasonable to conclude that such child cannot be placed with adoptive parents without providing adoption assistance under this section or medical assistance under title XIX (Medicaid), and (B) that, except where it would be against the best interests of the child because of such factors as the existence of significant emotional ties with prospective adoptive parents while in the care of such parents as a foster child, a reasonable, but unsuccessful, effort has been made to place the child with appropriate adoptive parents without providing adoption assistance under this section or medical assistance under title XIX (Medicaid)."

### Section 8 and Public Housing

**Q: If a family applies for Section 8 Project Based Assistance for Public Housing, should adoption assistance payments be included as annual income?**

**A:** According to the Code of Federal Regulations at 24 CFR 5.609(c)(12), annual income does not include adoption assistance payments in excess of \$480 per adopted child. Therefore, if a family receives \$480 or less in adoption assistance, it is counted as income. If a family receives more than \$480 in adoption assistance, only \$480 is counted as income.

### Fair Hearings

**Q: If a family requests a fair hearing, by when must it be held?**

**A:** 45 CFR 205.10(a)(16) states that "prompt, definitive and final administrative action shall be taken within 90 days from the date of the request for a hearing."



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