



PCL PROGRAM ELIGIBILITY VERIFICATION
Portland Children's Levy Funded Foster Care Services

Instructions:

PCL Funded foster care service providers complete section 1. Eligibility Verification Request for children/youth who are referred to services by a source other than DHS. Send form to:

CAF-SDA2.PDXChildrensLevy@dhsosha.state.or.us

See complete instructions on pages 3 and 4 of this form.

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| 1. ELIGIBILITY VERIFICATION REQUEST (to be completed by PCL-funded Program) | |
| Child/Youth Name: _____ DOB: _____ | |
| PCL-funded Program Name: _____ Contact: _____ | |
| Phone: _____ Fax: _____ Email: _____ | |
| Sent Eligibility Verification Request to: CAF-SDA2.PDXChildrensLevy@dhsosha.state.or.us Date: _____ | |
| 2. DHS ELIGIBILITY DETERMINATION (to be completed by DHS) | |
| Child/Youth is Determined Eligible <input type="checkbox"/> Yes <input type="checkbox"/> No Birth Parent Zip Code: _____ | |
| Name of Person Who Determined Eligibility: _____ Phone: _____ | |
| DHS Approval to Enroll in PCL-Funded Service <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | |
| If child/youth is determined eligible but DHS does not approve enrollment, list reason(s): _____ _____ | |

Please complete additional information on page 2

Eligibility Verification for Portland Children's Levy

3. DHS Caseworker/designee to complete for children referred to PCL funded services by sources other than DHS and determined to be eligible by DHS:

OrKids 7-digit Person Number: _____ Date of Birth: _____

DHS Caseworker: _____

I approve the enrollment of this child/youth in the above PCL-funded program. Yes N/A

DHS Caseworker/Designee Signature: _____

If Designee signing, Designee's Name: _____

Date referred to PCL-funded services/determined eligible: _____

DHS Caseworker/designee to complete Items 2 and 3 on this form as appropriate and return to the PCL-funded program contact who requested eligibility verification. See additional instructions on page 4 of this form.

4. PCL-funded Program to complete:

Program Name: _____ Program Contact: _____

Date child/youth enrolled in PCL-funded program: _____

Once complete, PCL-funded program to send Page 2 of the completed Eligibility Verification form to Joel Broussard at joel.broussard@portlandoregon.gov.

Do not send page 1, it includes children's names and other confidential information.

INSTRUCTIONS FOR PCL-FUNDED PROGRAMS

Initiate Request for Eligibility Verification/Enrollment Approval

If a PCL-funded program receives a referral requesting services from a source other than DHS, DHS needs to determine eligibility (is the child/youth in sub-care in Oregon, aged out of foster care in Oregon, or for New Avenues for Youth participants was in sub-care for at least 180 days after age 14 and exited Oregon DHS sub-care after age 16) and approve enrollment in services. Eligibility determination is needed for all cases. However, in some situations, approval to enroll in PCL-funded services is not required (e.g. services for youth who have aged out of foster care, services for youth who are no longer in foster care but meet New Avenues for Youth eligibility requirements).

Complete the section of the form titled “1. Eligibility Verification Request”. Send the form and the list of PCL-funded foster care programs to the following DHS mailbox:

CAF-SDA2.PDXChildrensLevy@dhsola.state.or.us.

Designated DHS staff will forward the materials to the caseworker/designee. Within 3 days of receiving the request, DHS will provide written eligibility verification and enrollment approval as appropriate. If DHS determines the child/youth is eligible and approves enrollment or indicates approval is “N/A”, complete the section titled “Eligibility Verification for Portland Children’s Levy” (section designated for PCL-funded Program).

If a child is in DHS’s legal custody and guardianship, DHS will not need a release of information signed by the parent prior to confirming eligibility. DHS may request the PCL-funded program to submit a release of information from the child’s guardian, or the youth (if a youth is age 18 or older or an emancipated minor) under the following conditions:

- If a child is not currently in DHS’s Legal custody and guardianship (e.g. child is in temporary custody, case is closed), DHS will request the PCL-funded program obtain and submit to DHS an Authorization for Disclosure, Sharing and Use of Individual Information form (MSC 3010) signed by the parent or guardian so that DHS can disclose the child’s information to the service provider.
- If a youth is age 18 or older and not in DHS’s legal custody and guardianship, an Authorization for Disclosure, Sharing and Use of Individual Information form (MSC 3010) will need to be signed by the youth.
- In all cases where the parent or the PCL program wants DHS to disclose child welfare information about a parent, the referral must be accompanied by a release signed by each parent to disclose that parent’s information and must state, with particularity, the information/records that are subject to the release agreement.

Eligibility Verification for Portland Children’s Levy

When both sections of the “Eligibility Verification for Portland Children’s Levy” are complete, send a copy of page 2 of the form to joel.broussard@portlandoregon.gov. **Do not send page one of the form as it contains children’s names and other confidential information.**

INSTRUCTIONS FOR DHS STAFF

Receive Request from PCL-funded Program for Eligibility Verification/Enrollment Approval

When a PCL-funded program receives referrals from a source other than DHS, DHS will be asked to verify eligibility (e.g. is the child/youth in DHS sub-care, aged out of foster care, or for New Avenues for Youth participants was in sub-care for at least 180 days after age 14 and exited DHS sub-care after age 16) and approve enrollment in services. Note: There are some situations where eligibility verification is needed but approval to enroll in PCL-funded services is not required (e.g. services for youth who have aged out of foster care or are legal adults, services for youth who are no longer in foster care but meet New Avenues for Youth eligibility requirements).

PCL-funded programs will request eligibility verification by sending the Eligibility Verification form to CAF-SDA2.PDXChildrensLevy@dhs.oha.state.or.us. Designated DHS staff will review and route as appropriate.

Instructions for DHS staff designated to route Eligibility Verification forms:

- Check to see if the child/youth is currently in foster care
 - If child/youth is currently in foster care, forward the Eligibility Verification form and the list of PCL-funded foster care programs to the caseworker.
 - If the youth is not currently in foster care, complete the DHS Eligibility Determination section of the Referral and Eligibility Verification form and send to the PCL-funded program contact.
 - If the eligibility determination was requested by New Avenues for Youth and the youth is no longer in foster care but was in sub-care for at least 180 days after age 14 and exited sub-care after age 16, complete the section of the form titled “DHS Eligibility Determination” and the DHS portion of the section titled “Eligibility Verification for Portland Children’s Levy”. Send completed form to the PCL-funded program contact who requested eligibility verification.

Instructions for DHS Caseworker/designee:

- Within 3 days of receiving the request, complete the form as appropriate (see below) and return to the PCL-funded program contact who requested eligibility verification.
 - If the child/youth is eligible and DHS approves enrollment in the PCL-funded program or if DHS approval isn’t needed (see note above), complete the section of the form titled “3. DHS Eligibility Determination” and the DHS portion, item 4, of the section titled “Eligibility Verification for Portland Children’s Levy”.
 - If the child/youth is not eligible and/or if DHS does not approve enrollment in the PCL-funded program, only complete the section of the form titled “3. DHS Eligibility Determination”.

QUESTIONS

Portland Children’s Levy Contact: Joel Broussard; joel.broussard@portlandoregon.gov or 503.865-6786.