



State of South Carolina

Department of Social Services

Work Aid 512.1: Medically Therapeutic Foster Home Services (MTFHS) Eligibility Determination

Supplemental to DSS Policy 512: Chapter 5 – Foster Care

A. Eligibility Determination Process	1. The assigned DSS Nurse Care Coordinator shall review all documentation received within two business days of receipt. 2. Documentation is reviewed for eligibility within the following four categories: a. Medical Qualifiers: i. Serious, ongoing illness, expected to last at least 12 months or longer. ii. Previous hospitalizations. iii. Ongoing monitoring or the use of assistive technology devices. iv. Covered by a Medicaid Waiver or Supplemental Security Income (SSI). b. Anticipated Therapies/Appointments: i. Speech Therapy. ii. Occupational Therapy. iii. Physical Therapy. iv. Direct Nursing Services. c. Anticipated transportation required by the caregiver to related appointments: i. Appointment schedule. ii. Appointment frequency. d. Anticipated caregiver duties, including but not limited to: i. School interventions (e.g., Individualized Education Plan (IEP), 504 plan). ii. Medical equipment or supplies prescribed by a licensed healthcare professional. iii. Early Intervention Services. iv. Medication administration and monitoring. v. Extensive hands-on-assistance. vi. Extensive medical care required. 3. Each category is scored based upon the unique needs of the child in foster care. 4. Once the review of documentation is completed and eligibility is determined, the assigned DSS Nurse Care Coordinator shall reply all on the initial notification email chain to inform of the determination decision and the approved level of MTFHS to the following: a. Case manager; b. Team leader; c. Regional Nurse Care Coordinators;
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	d. Regional Well-Being Manager; e. Therapeutic Services Coordinator; f. Regional Clinical Specialists; g. Regional Placement Services Division; and h. Regional Contract Administrators.
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