FOSTER CARE PROVIDER PAYMENT HANDBOOK

MDHHS
Michigan Department of Health & Human Services

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INTRODUCTION

This handbook is designed to help you as Michigan Department of Health and Human Services (MDHHS) foster parents, relative caregivers, placement agency foster care (PAFC) providers, child caring institutions and others who have approved paid placements. This handbook will explain:

- The process for the approval of a service authorization.
- How and when you will validate payment for each billing period.
- The different types of payments that may be available to you.
- What to do or whom to call if errors occur or if you have a question about a payment.

The payments referred to in this book are the MDHHS payments made on behalf of children funded by the state ward board and care, federal title IV-E funds, the child care fund, and general funds. As of Oct. 1, 2019, all child care fund payments are issued out of the Michigan Statewide Automated Child Welfare Information System (MiSACWIS).

TYPES OF PAYMENTS

FAMILY FOSTER CARE PAYMENTS

The family foster care payment rates are determined based on the United States Department of Agriculture (USDA) standard cost of raising a child. These rates are reviewed annually and adjusted according to changes in the cost-of-living standards. The payment rates include normal expenses, such as food, replacement and maintenance of clothing, spending money, and the cost of personal items, such as diapers, deodorant, and shampoo.

PLACEMENT SERVICES AND PAYMENTS

It is the primary case manager's responsibility to record the placement of the child in MiSACWIS. This may include an MDHHS or a PAFC case manager. Recording the placement in MiSACWIS will create a placement service authorization that includes the family foster care rate and the appropriate fund source determined by MDHHS policy and will be routed for necessary approvals. Once approved, this authorization will generate payments for the placement service rate.

ADMINISTRATIVE RATE PAYMENTS

PAFCs and child caring institutions may receive an administrative rate based on the type of care provided and the programs offered. In MiSACWIS, the administrative rate paid to PAFCs and child caring institutions will be paid separately from the family foster care maintenance rate, meaning the provider will receive two electronic fund transfer (EFT) deposits or checks/warrants.

For independent living youth who are supervised by PAFCs, the administrative rate paid to the PAFC will continue to be paid separately from the youth's independent living payment. The youth's payment will continue to be payable only to the youth and can be mailed to the youth, the PAFC or the MDHHS office based on the mail-to code the primary case manager chooses in the service authorization.

DETERMINATION OF CARE SUPPLEMENT FOR FAMILY FOSTER CARE

A determination of care (DOC) supplement may be justified when additional care or expense is required of the foster parents or relative (foster care provider) who is eligible for a foster care payment or based on the need of the child. The appropriate DOC forms are available in the MDHHS Forms Library and on the MDHHS Foster Care Forms public webpage and must be completed and uploaded in MiSACWIS for every child in a paid foster home or relative placement. DOC forms are to be completed with active foster parent/relative provider involvement.

If the foster parent/relative and case manager disagree on the DOC level being requested, **the foster parent/relative's request must be submitted**. If the case manager disagrees with the assessment, they may add comments listing their reasoning to the DOC form. The foster parent/relative approves the level requested by signing the DOC. If the originally requested rate is not approved, the foster parent/relative is eligible to appeal the decision through the administrative review process.

A DOC assessment must be completed in MiSACWIS at the initial case opening **and** at least every six months or if the child's care needs or level changes or the child moves. This applies to all foster care/relative providers eligible for payment, regardless of the fund source. In all case situations, the foster care case manager is to involve the foster care/relative provider in completion of the form, and the foster care/relative provider must sign the assessment form. Each signed DOC assessment must be uploaded in MiSACWIS and filed in the child's case record. The foster parent/relative placement must also be provided with a copy of the DOC assessment once it has been signed by MDHHS. The DOC assessment contains the information regarding the foster parent/relative placement's right to an appeal if they do not agree with the DOC decision.

All completed/approved DOC forms must be provided to the foster care/relative provider. Parts of the form, such as the foster care/relative provider administrative review process, are now included in the DOC assessment forms. If the foster care/relative provider requests an administrative review either in writing or verbally, the process must be initiated. The foster care/relative also has the option to submit a request to appeal the DOC determination by sending an email to MDHHS-FosterCarePayments@michigan.gov.

NOTE: A DOC level IV request that has been denied by either the local office or Business Service Center (BSC) director is not eligible for an administrative review.

For PAFC-supervised family foster care, the agency must initiate the request for the administrative review on behalf of the foster parent or relative placement. The foster parent/relative placement has a right to the administrative review. The request must be submitted even if the PAFC provider agrees with the MDHHS decision.

Any time the needs of the child or the foster parent activities change, a review of the DOC should be initiated. The effective date of the escalation or de-escalation of the DOC is the date the change in circumstance occurred.

Examples of reasons for DOC supplements include:

- Physical disabilities requiring foster parents to provide measurably greater supervision and care.
- Psychological or psychiatric needs requiring extraordinary time and attention.

> **Note:** Determination of care supplements are time-limited and require MDHHS approval at the supervisor or above level both initially and at each review.

SEMI-ANNUAL CLOTHING ALLOWANCE AND HOLIDAY ALLOWANCE

The semi-annual clothing allowance is sent automatically to providers for children who are in state-paid family foster care placements on Feb. 28 and Aug. 31. The holiday allowance is sent automatically for children who are in state-paid placements such as family foster care or child caring institutions on Nov. 30. These allowances will be paid in the next payroll ***after*** these dates.

CASE SERVICES AND PAYMENTS

A case service is a request for payment for such things as an initial clothing allowance, tutoring, graduation expenses, limited mental health, medical and dental services not covered by Medicaid, and transportation expenses. Each category of case service payments has its own requirements regarding age, documentation, legal status of the youth and necessary approvals.

A child placement service authorization must be in place for the same time period for a case service payment to be made. The assigned primary case manager processes these payment requests, generally at the beginning of the case service when prior approval, if needed, is obtained. Questions regarding a request for case service payments should be discussed with the child's case manager prior to incurring the expense. Upon approval, the payments are included with the next regularly scheduled payroll. If you are not sure of the funding source or from where you will receive payments for a child in your care, ask the child's primary case manager.

PAYMENT PROCESSING

SERVICE PAYMENT AUTHORIZATION

It is the primary case manager's responsibility to record the placement of the child in MiSACWIS. This may include an MDHHS or a PAFC case manager.

Initial payments should be received within 30 calendar days of placement of the child; however, the length of time for receiving an initial payment may take longer due to the payment approval process after a child is placed in your care. Depending on each child's circumstances, needs and placement type, various approvals are required. At minimum, this will include the MDHHS case manager and supervisor, but could extend to the county director, or MDHHS central office. If attempts are made to validate payments and they are not available for validation, the child's case manager should be contacted. Payments may also be delayed due to state holidays or postal delays.

PLACEMENT DATES

It is important that you keep accurate records of the child's placement. Write down the child's actual placement begin date and the placement end date.

PAYMENT VALIDATION

There are two ways to validate payment requests in MiSACWIS. Payment requests can be validated either through the MiFoster interactive voice response (IVR) system or from within the MiSACWIS application.

VALIDATING THROUGH MiFOSTER INTERACTIVE VOICE RESPONSE

The following providers will validate their payment requests through the MiFoster IVR via a touchtone phone:

- MDHHS licensed foster parents who are supervised by MDHHS, regardless of fund source.
- Unlicensed relatives supervised by MDHHS.
- Non-contracted providers regardless of whether they have a contract.
- PAFC foster parents who are supervised by MDHHS.
- Out-of-state providers (all provider types).

For you to receive payment for placement, you must validate the days in care for each child under your care during the billing period. All payment billing periods for placement are eligible for payment every 14 calendar days. Case service placements, such as an Adult Foster Care (AFC), do not need to be validated prior to payment. Reference Exhibit A, Children's Foster Care Payment Schedule, for the billing period dates.

> **Note:** Youth in independent living do not need to validate their payments. Reference Exhibit B, Independent Living Payment Schedule, for the billing period dates.

The MiFoster IVR telephone number is 1-855-MiFoster or 855-643-6783.

To validate the days in care through the MiFoster IVR, providers will need two pieces of information:

- Their Bridges Provider ID.
- A unique MiFoster IVR personal identification number (PIN).

New providers will receive a correspondence when they are enrolled in Bridges that includes their provider ID. A Provider PIN Letter including the provider's unique PIN will be mailed separately to the provider. See Exhibit C for an example of the PIN letter.

The IVR is a simplified process for verifying payments. Providers will be able to validate one child at a time; they will also be given at least three opportunities to correct any information entered into the IVR, such as the phone-in PIN. Providers can always call back if they do not have time to validate the days in care of all the children placed in their care.

As a part of the validation process, providers must certify that they have provided the days in care for the children listed on the MiFoster IVR. The certification statement reads:

> This is to certify that I or the agency I represent have provided the above care. I understand that payment will be made and that if I have made false statements, submitted false billings, or left out necessary information on purpose, I may be prosecuted for fraud under applicable federal or state laws.

The MiFoster IVR will be available for payment validation 24 hours a day on business days, beginning Mondays at 8 a.m. through Fridays at 5 p.m.

VALIDATING FROM WITHIN THE MiSACWIS APPLICATION

Contracted PAFC and child caring institutions will complete their verification of child payment requests within the MiSACWIS application. The MiSACWIS application will generate a payment roster for each organization, and a separate payment roster for any child care fund payments. Once MDHHS has approved the payment service authorization, the agency's payment roster will be available for verification by the roster verifier in accordance with the payroll schedule. This will continue without interruptions, barring any changes to a child's eligibility, every two weeks until the payment service authorization has ended. PAFC and child caring institution staff will also have access to their agency's payment history, which allows for tracking of all payments and the ability to troubleshoot any problems.

For further training on verifying a roster, please complete the Roster Verifier computer-based training.

As part of the validation process, providers must certify that they have provided the days in care for the children listed in MiSACWIS. The certification statement reads:

> This is to certify that I or the agency I represent have provided the above care. I understand that payment will be made and that if I have made false statements, submitted false billings, or left out necessary information on purpose, I may be prosecuted for fraud under applicable federal or state laws.

The MiSACWIS application will be available for payment validation on business days, Monday through Friday, 8 a.m. to 5 p.m. Reference Exhibit A, Children's Foster Care Payment Schedule, for the payment validation dates. The MiSACWIS payroll runs after 5 p.m. on the last business day of every week.

Note: PAFCs will continue to pay their foster homes according to their individual systems outside of MiSACWIS.

HOW TO COUNT THE DAYS IN CARE

The MiSACWIS system will calculate payments based on the service authorization begin date and each billing period thereafter based on the payment schedule. As mentioned previously, the service authorization begin and end dates are set based on the placement record in MiSACWIS.

It is particularly important to be aware of the placement end dates when you are validating payments for the billing period. You will be paid for the first day the child is placed in your care. When the case manager ends the placement, the payment ends effective the day the child left your care. You will not be paid for the last day the child is in your care as payment is authorized for the day placed in a home or facility and not the day out.

If a date is included in the MiFoster IVR or on a payment roster for a child who was not in your care on that date, you should not validate the billing period. Instead, you should immediately contact the child's primary case manager. If you validate claim periods for a period a child was not in your care, recoupment will be necessary.

The following are examples of how to count days of care:

Example 1
The 14-day billing period is Oct. 1, 2025, to Oct. 14, 2025: Sandy Hill has been in your care for several prior billing periods. She has been in your care the entire 14-day billing period. For this billing period, you are eligible for 14 days of payment.

Example 2
The 14-day billing period is Oct. 1, 2025, to Oct. 14, 2025: Patty Peppermint has been in your care for several prior billing periods. During this billing period, she left your care on Oct. 12. For the billing period, you are eligible for 11 days of payment.

Example 3
The 14-day billing period is Oct. 1, 2025, to Oct. 14, 2025: Tom Thumb entered your care on Oct. 13, and he left on Oct. 15. For the billing period, you are eligible for two days of payment (Oct. 13 and 14).

> **Note**: Do not count the actual day the youth left your care as a day of care.

APPROVED DAYS OF ABSENCE

An approved absence is any planned temporary break, such as attending summer camp or a home visit. MDHHS policy may allow you to receive payment, as long as the placement is maintained, the child is returned to your care, and prior MDHHS approval is received. If the child is absent from your care more than five days, additional prior approvals are required per MDHHS policy. This may delay payment processing and validation. You must have prior approval from the child's primary case manager **before** the leave begins.

Example 4
The 14-day billing period is Oct. 1, 2025, to Oct. 14, 2025: Sam Stone was in your care on the first day of the billing period, he went on an approved home visit for three days and returned to your care. For the billing period, you are eligible for 14 days of payment.

TEMPORARY BREAK/BED HOLD PAYMENTS

Placement with a foster home or institutional care provider is on a continuous basis. **Shelter care placements are considered emergency temporary placements, and not subject to bed hold requests.**

Unapproved days of absence are also known as truancies, absent without legal permission (AWOLP), or escape. These are situations when a child leaves a placement **without permission and remains absent overnight**. You must report unapproved absences to the child's case manager immediately.

Other types of temporary break situations include detentions, jail, medical hospitalization admission or psychiatric hospitalization admission.

Many times, after leaving a placement, a child will be returned to the same placement. This could occur within the same billing period. However, the payment authorization stopped effective the day the child left your care. If you are to receive payment for the temporary break, the MDHHS Federal Compliance Division will complete a manual payment request for the temporary break dates upon receiving the completed MDHHS-5406 Bed Hold Payment request from the primary case manager, which does not require MiFoster IVR verification. The MDHHS Federal Compliance Division will complete the payment for the unapproved leave dates. For MiFoster IVR users, there is no payment validation needed for these payments.

Example 5
The 14-day billing period is Oct. 1, 2025, to Oct. 14, 2025: Frank Smith was in your care on the first day of the billing period. On Oct. 3, 2025, he left your home on an unapproved leave home for three days and returned to your care on Oct. 6, 2025. On the payment roster or MiFoster IVR, there will be two payment billing periods Oct. 1, 2025, to Oct. 2, 2025, and Oct. 6, 2025, to Oct. 14, 2025.

> **Note**: If the child returns to your care, the case manager will create a new placement record. The service authorization and the DOC, if applicable, must be reapproved to restart payments.

Example 6
The 14-day billing period is Oct. 1, 2025, to Oct. 14, 2025: Jill Walker was in your care on the first day of the billing period, she left the placement without approval Oct. 6, 2025. For the billing period, you are eligible for five days of payment.

RECEIVING PAYMENTS

At the end of the billing period, you will be able to validate payments through the MiFoster IVR or in MiSACWIS on the payment roster. After payment validation, payment requests will be sent to the state's accounting system for payment processing.

Normally, a check will be received approximately one week after the Friday payroll. The electronic fund transfer (EFT) payment will also be deposited to your account in approximately one week. Reference Exhibit A, Children's Foster Care Payment Schedule, for the tentative delivery/deposit dates.

> **Note**: Federal and state holidays or postal delays can slow the payment process.

REGISTERING WITH SIGMA VENDOR SELF SERVICE (VSS)

All providers must be registered in the Statewide Integrated Government Management Applications (SIGMA) Vendor Self Service (VSS) prior to receiving a payment from MiSACWIS. Providers who are enrolled in Bridges or licensed through the Department of Child Welfare Licensing (DCWL) cannot

receive a payment from MiSACWIS until the VSS account has been activated. Upon creation of the VSS account, please ensure that you retain your SIGMA Vendor Code and Address ID as it may need to be provided to your case manager or the MDHHS Bureau of Grants and Purchasing. Payments verified in MiSACWIS for providers who do not have a SIGMA Vendor Code and Address ID will experience a delay in payment until this information is received by MiSACWIS. Because of this, it is crucial that all providers are registered in VSS as soon as possible. For more information or to sign up, visit SIGMA VSS.

ELECTRONIC FUNDS TRANSFER

EFT is available for direct deposit of State of Michigan payments to your bank account.

It is important to keep your address information current in VSS. Youth who are receiving independent living payments are not eligible for EFT payments.

For more information or to sign up, visit SIGMA VSS.

HELPFUL TIPS

- Do not try to validate the dates of care until after the entire 14-day billing period has ended.
- Remember the placement payment rule: Always count the first day of placement but not the day the placement ends; that is, the day the child leaves your care.
- Approved leaves must have prior approval from MDHHS and your PAFC case manager, if applicable, before the leave begins. The primary case manager will be responsible for updating this information in the MiSACWIS system, if necessary.
- You must report unapproved absences to the child's case manager as soon as possible. If you are eligible for a payment, the payment and approvals are processed at a higher level than your child's case manager.

OTHER GOVERNMENT BENEFITS

Receipt of foster care maintenance payments may impact other government benefits that the child and/or relative provider is able to receive. Please see the table below for directions on how to handle existing benefits.

Benefit Type	Effects to Benefits/Action Needed
Family Independence Program (FIP)	The relative provider cannot receive FIP in conjunction with foster care maintenance payments. The relative should contact their case manager and assistance payments (AP) specialist to ensure this benefit is closed prior to receipt of foster care maintenance payments.
Food Assistance Program (FAP)	The foster child can be included or excluded from the FAP group. If the child is included in the FAP group, the foster care maintenance payments would be included in the FAP budget. The relative provider should contact their AP specialist immediately following receipt of their first foster care maintenance payment.

Child Day Care (CDC)	Foster care maintenance payments are exempt per CDC policy and will not count against CDC benefits. No action by the relative provider is needed.
Child Support	The relative provider cannot receive child support payments in conjunction with foster care maintenance payments. This change will occur automatically once foster care maintenance payments begin being issued. No initial action by the relative provider is needed; the relative provider should contact their case manager if child support payments continue following the receipt of their first foster care maintenance payment.
Supplemental Security Income (SSI)/ Retirement, Survivor, Disability Insurance (RSDI)	Effective Jan. 1, 2026, relative foster care providers are eligible to receive both foster care maintenance payments and SSI/RSDI benefits for youth in their care. Relative foster care providers are responsible for notifying the Social Security Administration (SSA) of any change that could affect the beneficiary's eligibility or benefit amount and compliance with SSA renewals and reviews as the representative payee. *Youth who are 18 or older and living in an independent placement, including youth in the Young Adult Voluntary Foster Care (YAVFC) program, can apply to become their own payee for SSI and/or RSDI. The SSI/RSDI funds will be available to the youth directly through SSA, bypassing MDHHS.
Other	The relative provider should inquire with their case manager if there are other benefits being received to determine what action should be taken.

Relative providers must work with their case manager and assistance payments specialist to ensure that existing benefits are closed or modified within the appropriate timeframe as a result of becoming eligible for, and beginning to receive, foster care maintenance payments. **NOTE:** A relative provider may be responsible for the repayment of any overpayments that result from inappropriate receipt of other government benefits that cannot be received at the same time as foster care maintenance payments.

YOUTH ELIGIBLE FOR GOVERNMENT BENEFITS

MDHHS will apply to become the payee for children who are in unrelated foster care and eligible for RSDI and/or SSI.

Effective 1/1/2026, relative foster care providers are eligible to receive both foster care maintenance payments and SSI/RSDI benefits for youth in their care. Relative foster care providers are responsible for notifying SSA of any change that could affect the beneficiary's eligibility or benefit amount and compliance with SSA renewals and reviews as the representative payee.

Youth who are 18 or older and living in an independent placement, including youth in the YAVFC program, should apply to become their own payee for SSI and/or RSDI benefits. If they cannot be their own payee, they should identify another person or agency to assume this role. In addition, youth will also receive the independent living stipend. This dual support will help youth transition successfully into adulthood, with case managers assisting them in navigating the SSA system, applying to become their own payee, working with the SSA, and budgeting their funds.

RECORD KEEPING

It is suggested that you keep copies of all children's foster care State of Michigan remittance advice documents/check stubs. Exhibit D contains copies of a remittance advice document for providers who receive a check/warrant. Exhibit E contains a screen print of the payment information obtained in VSS for providers who receive their payments via EFT.

The remittance information will help you maintain your records. If you need assistance understanding your remittance information, contact the child's case manager with any questions or problems related to a payment. If after contacting your child's case manager, you continue to have questions, contact the Federal Compliance Division at MDHHS-FosterCarePayments@Michigan.gov.

PAYMENT ISSUES

OVERPAYMENTS

It is the responsibility of the assigned case manager to ensure that the child's placement dates and payment service authorization dates are correct. It is important that you verify payments for the correct number of days of placement for each child. The payment system is designed to avoid making overpayments. MDHHS may issue collection letters for any overpayments. In the event you receive a collection letter, please make your check payable to State of Michigan – MDHHS and mail to the following address:

Overpayment Collections Unit
PO Box 30437
Lansing, MI 48909

If an overpayment has occurred and you have not received a collection letter from MDHHS, please contact the Overpayment Dispute Resolution Unit at 1-800-419-3328 and provide the period of the overpayment, client information and possible amount.

If you have payment questions, please contact the Federal Compliance Division at MDHHS-FosterCarePayments@Michigan.gov.

ADJUSTING FOR AN UNDERPAYMENT

Occasionally an underpayment occurs. A common reason for an underpayment would be if the case manager authorizes the standard daily rate and conditions later indicate that a DOC is appropriate. After completion of the DOC documentation with the foster parent and obtaining required approvals, the case manager can make a retroactive payment adjustment.

You will not need to validate the payment roster or call the MiFoster IVR a second time for the same billing period. In this situation, you have already verified you provided care for the child during the billing period. The payment adjustment for the underpayment will be included in a future EFT or check.

REPLACING A LOST OR DESTROYED CHECK

If a check (which is also referred to as a warrant) becomes lost, destroyed, stolen or undelivered, there are certain steps that must be followed.

If it was received and lost, call the child's case manager to verify that a payment was made and the status of the check. The case manager cannot start the process to replace the check until four calendar days have passed since the check was mailed.

If you believe your check was stolen, you must report the theft to the police.

If the check was destroyed, save the remains of the check. It must be attached to the affidavit referenced below.

Checks that are reported as lost, destroyed, not received, or stolen may be replaced/rewritten after recovery is made on the original warrant. Recovery means that the value of the warrant has been credited back to the account it was written from, or if a forged warrant has cleared Treasury, the person who cashed the forged warrant has reimbursed the state.

An *Affidavit Claiming Lost, Destroyed, Not Received or Stolen State Treasurer's Warrant* or an *Affidavit Claiming Forged Endorsement* is required to replace a warrant. In most cases, the affidavit must be notarized. These forms are available at the local MDHHS office. There are several procedures involved in a check replacement. If a check is lost or destroyed, contact the child's case manager to initiate the replacement process.

To avoid lost, destroyed or stolen warrants, foster parents are strongly encouraged to register for

EFT payments directly into a designated checking account. For more information or to sign up, visit SIGMA VSS.

PAYMENT QUESTIONS OR PROBLEMS

Resources are available to you as an MDHHS provider. These include the child's case manager, the Federal Compliance Division if you are a contracted provider, or MDHHS-FosterCarePayments@michigan.gov if you are a foster parent.

Call the child's case manager when you:

- Notice an error on a payment roster or on the MiFoster IVR.
- Do not know whether you should validate a payment for the child using a payment roster or the MiFoster IVR.
- Want to determine whether a check was issued and when it was mailed.
- Need to know whether the payment authorization has been approved in the system.
- Need to report a lost, destroyed, stolen or undelivered check.

Email MDHHS-FosterCarePayments@michigan.gov **when you:**

- Forgot your MiFoster IVR PIN.
- Have non-child-specific payment questions.
- Want to determine whether a check was issued or when it was mailed.

If you are a contracted provider and you need assistance, please contact Federal Compliance Division. If you are a foster parent or a youth, please send an email to MDHHS-FosterCarePayments@michigan.gov.

FREQUENTLY ASKED QUESTIONS AND ANSWERS

What is a billing period?

A billing period is a 14-day period of time; there are 26 billing periods in a year. All children's foster care billing periods begin on a Monday and end two weeks later on a Sunday. The Children's Foster Care Payment Schedule (Exhibit A) at the end of this document shows the begin and end dates of the billing periods.

How often will I receive payment?

When you verify a payment roster or a payment through the MiFoster IVR, payment will usually be deposited in your bank account via EFT or mailed to you within one week.

During a billing period, another child is placed into my care. When will they appear on my payment roster or the MiFoster IVR? When will I be able to validate the day in care for this child?

The days of care will follow the same billing cycle and process as mentioned above; you should be able to validate the days in care the Monday after the billing cycle ends. However, since the service authorization requires, at a minimum, the MDHHS supervisor's approval, and if there is a delay in approving the service authorization, there may also be a delay in payment processing. If there is a significant delay, you should contact the child's case manager.

As a reminder, payments may be delayed due to federal and state holidays or postal delays.

Several weeks ago, we had a child placed with us, but we still have not been able to validate the days in care for the child. What should we do?

Contact the child's case manager to inquire about the payment service authorization.

What should I do if I identify errors when I call the MiFoster IVR?

You should not verify or approve a payment for a child listed on the MiFoster IVR if the days in care are incorrect. You must contact the child's case manager. If you have more than one child listed on the MiFoster IVR, you are still able to validate the days in care for the other children as long as the information is correct.

What should I do if I identify errors on the payment roster?

You should not verify or approve the payment on the roster; you can remove and delete the payment from the roster and then contact the primary case manager. The child's placement may need to be corrected in MiSACWIS.

What should I do if the check/warrant is lost or destroyed?

If a check is not received, lost, destroyed, or stolen, there are specific steps that you must take to replace the check. You should contact the child's case manager.

Should I keep copies of the State of Michigan Remittance Advice documents?

If you receive a check, keep all the payment information you receive in a secure area for future reference should there be any questions on a payment. It is very important for you to review every remittance advice/check stub you receive for foster care and report errors to the child's case manager immediately (Reference Exhibit D).

Your EFT payment history is available in SIGMA VSS.

What should I do if I receive an overpayment or experience an underpayment?

Contact the child's case manager.

Do I need to ask the child's case manager to receive the semi-annual clothing allowances, holiday allowances, or case services payments?

Semi-annual clothing allowances and the holiday allowance are automatically sent based on payment authorizations in effect for the billing period in which these payments are made. If you do not receive these payments as expected, contact the child's case manager. You will need to discuss case services payments with the child's case manager.

EXHIBIT A:CHILDREN'S FOSTER CARE PAYMENT SCHEDULE

December 2025 – December 2026

BILLING PERIOD BEGIN	BILLING PERIOD END	PAYMENT VALIDATION BEGIN	PAYMENT VALIDATION END	TENTATIVE WARRANT/EFT APPROXIMIATE DELIVERY DATE
12/01/2025	12/14/2025	12/16/2025 12/23/2025	12/19/2025 12/26/2025	12/26/2025 * 01/02/2026 *
12/15/2025	12/28/2025	12/30/2025 01/06/2026	01/02/2026 01/09/2026	01/09/2026 01/16/2026
12/29/2025	01/11/2026	01/13/2026 01/20/2026	01/16/2026 01/23/2026	01/23/2026 * 01/30/2026
01/12/2026	01/25/2026	01/27/2026 02/03/2026	01/30/2026 02/06/2026	02/06/2026 02/13/2026
01/26/2026	02/08/2026	02/10/2026 02/17/2026	02/13/2026 02/20/2026	02/20/2026 * 02/27/2026
02/09/2026	02/22/2026	02/24/2026 03/03/2026	02/27/2026 03/06/2026	03/06/2026 03/13/2026
02/23/2026	03/08/2026	03/10/2026 03/17/2026	03/13/2026 03/20/2026	03/20/2026 03/27/2026
03/09/2026	03/22/2026	03/24/2026 03/31/2025	03/27/2026 04/03/2026	04/03/2026 04/10/2026
03/23/2026	04/05/2026	04/07/2026 04/14/2026	04/10/2026 04/17/2026	04/17/2026 04/24/2026
04/06/2026	04/19/2026	04/21/2026 04/28/2026	04/24/2026 05/01/2026	05/01/2026 05/08/2026
04/20/2026	05/03/2026	05/05/2026 05/12/2026	05/08/2026 05/15/2026	05/15/2026 05/22/2026
05/04/2026	05/17/2026	05/19/2026 05/26/2026	05/22/2026 05/29/2026	05/29/2026 * 06/05/2026
05/18/2026	05/31/2026	06/02/2026 06/09/2026	06/05/2026 06/12/2026	06/12/2026 06/19/2026 *
06/01/2026	06/14/2026	06/16/2026 06/23/2026	06/19/2026 06/26/2026	06/26/2026 07/03/2026 *
06/15/2026	06/28/2026	06/30/2026 07/07/2026	07/03/2026 07/10/2026	07/10/2026 07/17/2026
06/29/2026	07/12/2026	07/14/2026 07/21/2026	07/17/2026 07/24/2026	07/24/2026 07/31/2026
07/13/2026	07/26/2026	07/28/2026 08/04/2026	07/31/2026 08/07/2026	08/07/2026 08/14/2026
07/27/2026	08/09/2026	08/11/2026 08/18/2026	08/14/2026 08/21/2026	08/21/2026 08/28/2026

BILLING PERIOD BEGIN END	PAYMENT VALIDATION BEGIN END	TENTATIVE WARRANT/EFT APPROXIMIATE DELIVERY DATE
08/10/2026 – 08/23/2026	08/25/2026 - 08/28/2026 09/01/2026 - 09/04/2026	09/04/2026 09/11/2026 *
08/24/2026 - 09/06/2026	09/08/2026 - 09/11/2026 09/15/2026 - 09/18/2026	09/18/2026 09/25/2026
09/07/2026 - 09/20/2026	09/22/2026 - 09/25/2026 09/29/2026 - 10/02/2026	10/02/2026 10/09/2026
09/21/2026 - 10/04/2026	10/06/2026 - 10/09/2026 10/13/2026 - 10/16/2026	10/16/2026 10/23/2026
10/05/2026 - 10/18/2026	10/20/2026 - 10/23/2026 10/27/2026 - 10/30/2026	10/30/2026 11/06/2026 *
10/19/2026 - 11/01/2026	11/03/2026 - 11/06/2026 11/10/2026 - 11/13/2026	11/13/2026 * 11/20/2026
11/02/2026 - 11/15/2026	11/17/2026 - 11/20/2026 11/24/2026 - 11/27/2026	11/27/2026 * 12/04/2026
11/16/2026 - 11/29/2026	12/01/2026 - 12/04/2026 12/08/2026 - 12/11/2026	12/11/2026 12/18/2026
11/30/2026 - 12/13/2026	12/15/2026 - 12/18/2026 12/22/2026 - 12/25/2026	12/25/2026 * 01/01/2027 *
12/14/2026 - 12/27/2026	12/29/2026 - 01/01/2027 01/05/2027 - 01/08/2027	01/08/2027 01/15/2027
12/28/2026 - 01/10/2027	01/12/2027 - 01/15/2027 01/19/2027 - 01/22/2027	01/22/2027 * 01/29/2027

**Checks (warrants) may be delayed due to holidays.*
Note: The MiSACWIS payroll runs after 5 p.m. on the last business day of every week.

EXHIBIT B: INDEPENDENT LIVING PAYMENT SCHEDULE

December 2025 – December 2026

BILLING PERIOD BEGIN END	TENTATIVE WARRANT / EFT APPROXIMATE DELIVERY DATE
12/01/2025 - 12/14/2025	12/26/2025 *
12/15/2025 – 12/28/2025	01/09/2026
12/29/2025 – 01/11/2026	01/23/2026 *
01/12/2026 - 01/25/2026	02/06/2026
01/26/2026 - 02/08/2026	02/20/2026 *
02/09/2026 - 02/22/2026	03/06/2026
02/23/2026 - 03/08/2026	03/20/2026
03/09/2026 - 03/22/2026	04/03/2026
03/23/2026 - 04/05/2026	04/17/2026
04/06/2026 - 04/19/2026	05/01/2026
04/20/2026 - 05/03/2026	05/15/2026
05/04/2026 - 05/17/2026	05/29/2026 *
05/18/2026 - 05/31/2026	06/12/2026
06/01/2026 - 06/14/2026	06/26/2026
06/15/2026 - 06/28/2026	07/10/2026
06/29/2026 - 07/12/2026	07/24/2026
07/13/2026 - 07/26/2026	08/07/2026
07/27/2026 – 08/09/2026	08/21/2026

BILLING PERIOD BEGIN END	TENTATIVE WARRANT / EFT APPROXIMATE DELIVERY DATE
08/10/2026 - 08/23/2026	09/04/2026
08/24/2026 - 09/06/2026	09/18/2026
09/07/2026 - 09/20/2026	10/02/2026
09/21/2026 - 10/04/2026	10/16/2026
10/05/2026 - 10/18/2026	10/30/2026
10/19/2026 - 11/01/2026	11/13/2026 *
11/02/2026 - 11/15/2026	11/27/2026 *
11/16/2026 - 11/29/2026	12/11/2026
11/30/2026 - 12/13/2026	12/25/2026 *
12/14/2026 - 12/27/2026	01/08/2027
12/28/2026 – 01/10/2027	01/22/2027 *

**Checks (warrants) may be delayed due to holidays.*
Note: The MiSACWIS payroll runs after 5 p.m. on the last business day of every week.

EXHIBIT C: FOSTER PARENT PIN LETTER

STATE OF MICHIGAN
DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

GRETCHEN WHITMER
GOVERNOR

ELIZABETH HERTEL
DIRECTOR

10/01/2023

Flowers Brenda
108 W Knox St.
Lansing, MI 48933

FOSTER PARENT PHONE-IN PIN

Dear FLOWERS BRENDA

The number listed below is your foster parent phone-in pin. You will use this number, along with your Bridges Provider ID, when calling into the phone-in process to validatie all foster care children placed in your household for an identified pay period.

Phone-In Pin #: 12346578

The foster care phone-in number to call to validate your payments is 1-855-MiFoster. We recommend that you keep your phone-in pin secure and not share it with anyone. If you feel your phone-in pin has been compromised or if you have questions, please contact your caseworker.

Thank you.

Michigan Department of Health and Human Services (MDHHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to an MDHHS office in your area.

DHS-1220-MISACWIS (Rev. 5-15)

EXHIBIT D: STATE OF MICHIGAN REMITTANCE ADVICE: Check

STATE OF MICHIGAN
REMITTANCE ADVICE

BANK ID: **000**
VENDOR NO: **M1SC00001**

AGENCY: **X448**

CHECK NO: **12345**
CHECK DATE: **01/05/2023**

INVOICE NUMBER	INVOICE DATE	REFERENCE DOCUMENT		AMOUNT
SWCN000011031706l6CW0153211		GAX9N 491 SWCN00001103		$241.36
Vouch Ref 20170616CW015321 00112233				
Prov-1234567 Candace Smith		0700-General Foster Care		
Auth Amnt: $241.36 Recoup Amnt: $0				
Paid Amnt $241.36 PLEASE KEEP THIS DOC FOR YOUR TAX RECORDS				
Total Payment Amount				$241.36
Net Payment Amount				$241.36
Check Total			$241.36	

FOR QUESTIONS, PLEASE CALL DHHS AT (800) 444-5364

000 200110033

MISC0000 X448
VENDOR NO AGENCY

TWO HUNDRED FORTY ONE AND 36/100 DOLLARS

$241.36

013456

PAY TO THE ORDER OF:

CANDACE SMITH
4444 WEST ST
FLINT, MI 48504-4754

EXHIBIT E: STATE OF MICHIGAN REMITTANCE ADVICE: EFT Statement

Notice: This is not an official check or EFT notification. It may not be used as a substitute for the original document received.

STATE OF MICHIGAN
REMITTANCE ADVICE

Check/EFT No: 12345
Check/EFT Date: 11/22/2023

Vendor Code: CV01111112
Vendor Name: BETH L. ARNOLD
Alias/DBA:
Assignee Name:
Assignee Alias/DBA:

Document ID #: EFT 491 12345678
Check/EFT Amount: 482.72
Amount includes freight and/or is net of discount

DEPARTMENT NAME	INVOICE DATE	VENDOR INV #	INVOICE AMOUNT	LINE AMOUNT	CHECK/EFT DESCRIPTION
Health and Human Services		SWCR00015833171117CW0116711	241.36	241.36	Vouch Ref 20171117CW011671 01234567 Prov-0017040 ARNOLD BETH A Appropriate 10/30/2017-11/12/2017 Auth Amt: $241.36 Recoup Amt: $0 Paid Amt $241.36 PLEASE KEEP THIS DOC FOR YOUR TAX RECORDS
Health and Human Services		SWCR00015833171117CW0116712	241.36	241.36	Vouch Ref 20171117CW011671 001122334 Prov-0017040 ARNOLD BETH A 0700-Age Appropriate 10/30/2017-11/12/2017 Auth Amt: $241.36 Recoup Amt: $0 Paid Amt $241.36 PLEASE KEEP THIS DOC FOR YOUR TAX RECORDS

DHS-Pub-843
Rev. 12/25

The Michigan Department of Health and Human Services will not exclude from participation in, deny benefits of, or discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, gender identification or expression, sexual orientation, partisan considerations, or a disability or genetic information that is unrelated to the person's eligibility.