

North Carolina Programs Serving Young Children and Their Families

■ Pam Silberman, JD, DrPH

NORTH CAROLINA INSTITUTE OF MEDICINE

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About *North Carolina Programs Serving Young Children and their Families*

While many programs exist to assist children and families, the often disjointed and overlapping nature of the programs makes it difficult for service providers, social workers, and advocates—much less families—to navigate the system to find the right programs to meet the families needs. *North Carolina Programs Serving Young Children and Their Families* was written to help families and service providers (including local Smart Start partnerships, Resource and Referral agencies, Departments of Social Services, Area Mental Health, Developmental Disabilities, and Substance Abuse Services agencies, local Public Health departments, Head Start, and United Way agencies) understand some of the basic program rules for the programs available to serve young children and their families.

The book is divided into six parts: Financial Security, Child Care, Health, Social Services, Nutrition, and Other programs. Each chapter includes most or all of the following sections:

- *Overview*—This section includes a brief description of the program, who it is designed to serve, and where to apply. By looking at the brief description and introduction, you may be able to discern whether the program will be of assistance.
- *Introduction*—This section gives some background about the program including the underlying purpose of the program, the agency that administers the program, and a summary of the benefits or services which the program provides.
- *Benefits and Services*—This section describes the benefits and services available to families with young children. Depending on the program, this section could describe the amount of assistance or subsidies available to support young children and their families, the services provided, or the types of health care services covered. This section also lists where the programs are offered, if the programs are not statewide.
- *Application*—This section explains where a family can apply for services or assistance. Not all programs require formal applications. If no application is required, it is noted.
- *Eligibility requirements*—Most programs have some eligibility requirements, although the scope of the requirements vary significantly across programs. For example, most programs require the child to be a US citizen and NC resident. Other programs are restricted to low income families, and set certain financial

eligibility restrictions such as limits on the family's income and resources (assets). Other programs are limited to children who have a medical or psycho-social need.

- *Numbers served*—Information on the number of people or children (when available) served during the course of a year.
- *Prioritization system*—Many programs have limited funding and resources. Some programs create waiting lists or have other means of prioritizing the children and families they will serve if they have insufficient resources to serve all in need. This section describes any system the program has to prioritize the people it serves.
- *Appeal rights*—Some programs have appeal procedures so that a family can contest adverse eligibility decisions or complain about the quality or scope of services they receive. If the program has an appeal or grievance procedure, it is described in this section.
- *Financing*—This section helps describe how programs are financed in North Carolina. Where exact dollar amounts were easily available, these have been included. Other chapters just give an overview of how the program was financed (for example, listing the percentage of funds that come from different sources).
- *Administration*—This section identifies the agencies responsible for overseeing the program, at the federal, state, and local levels (if applicable).
- *Sources of law*—This section lists the federal and state legal authority for the program. For example, most programs are governed, at least in part, by federal laws. Federal laws have citations such as “42 USC 1396 *et. seq.*” This means that the law can be found in Title 42 of the United States Code in section 1396 and following sections. The United States Code can be found in all law schools, federal depository libraries (in most universities) and in some public libraries. Federal legislation can be accessed through the Internet at: <http://www4.law.cornell.edu/uscode/> (and pending legislation can be accessed through Thomas Legislative Information: <http://thomas.loc.gov/>) Occasionally, the section includes a public law number. Public laws will have citations like PL 105-123 which means it is the 123rd bill passed in the 105th Session of Congress.

Federal regulations will generally have a citation such as “42 CFR 441 *et. seq.*” This means that the regulations are in Title 42 of the Code of Federal Regulations. The number following the CFR is the part or section of the code. Federal regulations will generally be available at the same places as the United States Code. The Code of Federal Regulations can be accessed through the

internet at <http://www.access.gpo.gov/nara/cfr/index.html>. The federal register (which publishes proposed rules) can be accessed through http://www.access.gpo.gov/su_docs/aces/aces140.html.

State laws have similar references. NCGS refers to the North Carolina General Statutes and can be accessed through <http://www.ncga.state.nc.us/>. NCAC refers to the North Carolina Administrative Codes (the state regulations). The NCAC cites can not be accessed through the Internet at the time of this writing, so you may need to call the state agency responsible for administering the program to get a copy of any relevant regulations.

- *For More Information*—Finally, each chapter includes state-level contacts for a family or service agency to call if they have questions about the operation of a particular program.

At the end of the book, we have included a reference section that includes the names, addresses and phone numbers of many of the agencies referenced in this book (listed by county).

We identified more than 30 publicly-funded social services, public health or mental health programs available to serve young children and their families in North Carolina. We tried to include chapters for most of the programs that provide services or assistance to young children and their families. We also included some chapters on programs targeted to older children (such as the Adolescent Pregnancy Prevention program). There are, undoubtedly, other publicly-funded programs that we should have included, as well as countless other nonprofit organizations that serve young children and their families. This book, for example, does not include publicly-funded housing or energy assistance programs, or other education, skills-training or employment related programs that may indirectly affect children (by enhancing the education or skills of the parents). While not fully comprehensive, we are hopeful that this manual provides useful information.

One important note: extensive efforts have been made to check all these chapters for accuracy. However, the rules governing many of these programs change regularly. Thus, some of the information in the book quickly will become obsolete. Therefore, please use the information in this book as a starting point in your efforts to identify programs and services available to assist families with young children, not as the definitive authority on program rules. If in doubt, contact the agency governing the program.

We hope that this book will assist you in identifying services and programs that may be available to assist young children and their families.

Pam Silberman, JD, DrPH
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Overview of Programs

Overview of Program Requirements

The multiplicity of programs, agencies administering programs, and eligibility requirements make it difficult for any one person to know where they can obtain needed assistance. Different programs have different eligibility criteria: some programs are based on the age of the child (e.g., Smart Start); other programs are available based on the financial needs of the family (e.g., Work First, Food Stamps, Medicaid or Legal Services); still other programs are limited to those children or families who have a psycho-social, developmental or medical need (e.g., Child Protective Services or Foster Care). Many programs require multiple eligibility factors (e.g., Supplemental Security Income which is based on both medical and financial needs of the child, or the Infant-Toddler program which is based on the child's age and developmental or medical needs). There are only a few programs which are universally available to all children (e.g., Child Support Enforcement, Child Immunization program, and where available, Migrant and Community Health Centers and Family Resource Centers).

To help workers and families quickly identify programs that may be available to serve particular needs, we have created a matrix of the primary eligibility requirements for the different programs discussed in this book.

| | Available to all children | Eligibility based on age of child | Eligibility based on financial need | Eligibility based on medical or psycho-social needs | Eligibility includes multiple requirements |
|-----------------------------------|---------------------------|---|--|--|--|
| FINANCIAL SECURITY PROGRAM | Child Support Enforcement | | Work First SSI | SSI | SSI |
| CHILD CARE PROGRAMS | | Child Care Subsidy Head Start Smart Start | Child Care Subsidy Head Start Smart Start* | Child Care Subsidy* Head Start* Smart Start* | Child Care Subsidy Head Start Smart Start* |
| HEALTH PROGRAMS | | | Medicaid Health Check NC Health Choice Children Special Health Services Developmental Evaluation Centers | Children Special Health Services Developmental Evaluation Centers | Children Special Health Services Developmental Evaluation Centers |

| | Available to all children | Eligibility based on age of child | Eligibility based on financial need | Eligibility based on medical or psycho-social needs | Eligibility includes multiple requirements |
|------------------------------------|--|--|---|--|---|
| HEALTH PROGRAMS (cont'd) | Immunizations Adolescent Pregnancy Prevention Programs Community, Migrant and Rural Health Centers | Child Service Coordination Early Intervention Services | CAP/C CAP-MR/DD | Child Service Coordination Early Intervention Services CAP/C CAP-MR/DD | Child Service Coordination Early Intervention Services CAP/C CAP-MR/DD |
| SOCIAL SERVICES PROGRAMS | | Adolescent Parenting Program | Adolescent Parenting Program | Child Protective Services Family Preservation Foster care Adoption Assistance Adolescent Parenting Program Support Our Students | Adolescent Parenting Program |
| FOOD AND NUTRITION PROGRAMS | | WIC Child and Adult Care Food Program School Breakfast and lunch | Food Stamps WIC Child and Adult Care Food Program School Breakfast and lunch | WIC | WIC Child and Adult Care Food Program School Breakfast and lunch |
| OTHER PROGRAMS | Family Resource Centers | | Legal Services | Guardian Ad Litem | |

* Some of the parts of the programs or funding may be based on specific eligibility criteria, while other parts of the program/funding may be available to a broader population.

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North Carolina Programs Serving Young Children and Their Families is a collaborative effort involving many people. This book began more than a year ago, as a spin-off of another project for the Women's and Children's Health Section within the NC Department of Health and Human Services. The Cecil G. Sheps Center for Health Services Research at the University of North Carolina at Chapel Hill (UNC-CH), had a contract with the state to help develop models to better integrate children's services. As part of this project, we recognized the need to write a book about some of the publicly funded programs that are available to serve young children and their families. We undertook this initiative as part of the NC Institute of Medicine.

Many individuals and agencies have been helpful in providing information for the book and in reviewing (and often, re-reviewing) the chapters for accuracy. I owe special thanks to JoAnne Bailey, a masters student in the Department of Health Policy and Administration, School of Public Health, UNC-CH, who helped gather information for the book, wrote some of the chapters, and generally helped move the project to completion. Jane Wettach, who wrote *The Advocate's Guide to Assistance Programs in North Carolina* (1993) deserves special recognition. The inspiration for this book, as well as the format, some of the underlying information, and even some of the text (with her permission) comes from her guide.

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Work First

OVERVIEW

What is it?

Work First, North Carolina's TANF program, provides temporary financial support and employment-related services to certain low-income families with children. The goal is to help families find and keep suitable employment and move toward self-sufficiency. The program replaced the Aid to Families with Dependent Children (AFDC) program and is funded under the federal Temporary Assistance for Needy Families (TANF) block grant. Unlike AFDC, *Work First is not an entitlement program.*

Who is it for?

Families with children whose income and assets are below the Work First limits and who meet certain other requirements.

Where are applications taken?

The county Department of Social Services. Beginning in 1999, some counties will operate different programs (called "electing" counties). These counties may have different locations where applications are taken.

INTRODUCTION

Work First replaced the Aid to Families with Dependent Children (AFDC) program. Work First, unlike AFDC, is a time-limited program that emphasizes helping families move from welfare-to-work. For many participants, cash assistance is limited to a two-year period (24 months). Only families that are actively participating in Work First employment services are subject to the 24-month time limit. All participants have a lifetime limit of five years (60 months). The 60-month lifetime limit applies to all families that have received TANF assistance in North Carolina or other states. The time limit is a cumulative total and includes any month in which assistance was received (whether continuous or not).

Work First requires families to sign contracts called Mutual Responsibility Agreements that specify how the family will move from welfare to self-sufficiency. Caretaker relatives must participate in job search and employment related activities, and teenage parents are required to live at home and stay in school. In return, the Department of Social Services provides the family with employment and other services, often including day care, Food Stamps and Medicaid.

Each county is required to develop a county plan for how it will help families move from welfare to self-sufficiency. These plans specify what services will be provided to whom.

**ELECTING
COUNTIES**

Some counties are allowed to establish a different Work First system. These counties are called “**electing counties**” because they elected to establish their own Work First system. (All other counties are called “**standard counties.**”) The following counties are “electing counties” for the 1998-2000 fiscal years:

| | |
|-----------|--------------|
| Alamance | McDowell |
| Caldwell | New Hanover |
| Caswell | Polk |
| Chatham | Randolph |
| Cherokee | Rutherford |
| Davie | Sampson |
| Forsyth | Stokes |
| Henderson | Surry |
| Iredell | Transylvania |
| Lincoln | Wilkes |
| Macon | |

Electing counties may establish their own eligibility criteria and methods for calculating benefits. All counties may establish outcome and performance goals in addition to required state-wide goals. They must develop an appeals process (that substantially follows the process described below), and evaluate the program to determine its impact on the economic security and health of children and families.

Cabarrus County operates a separate welfare program, however, it is not an electing county. This program is called “Work over Welfare.”

The following program description applies to “standard counties.” Many of the electing counties offer different services and benefits, have differences in their basic eligibility requirements, their sanctions, and in how they calculate benefits.

**BENEFITS/
SERVICES**

At the initial interview, families may be given a choice of either Work First Diversion Assistance or Work First Family Assistance. In addition, in some counties, families with a temporary crisis may be eligible for emergency assistance or one-time work-related expenses (these services are provided at county option). Each county can operate Work First differently, but the basic program options are described below:

Work First Diversion Assistance is a one-time lump-sum payment of up to three months of Work First cash assistance payments (see payment standard below). The program also provides employment services and child care, if needed. Families will also receive Medicaid and, if eligible, Food Stamps. The Diversion Assistance program is designed to help families with a temporary, non-recurring situation associated with employment or a short break in employment, or for families in the process of receiving financial assistance from another source (such as disability payments). Receipt of Diversion Assistance does not count toward the state’s two-year Work First time limit, or the 60-month federal lifetime limit on cash assistance benefits.

Work First Family Assistance includes a monthly cash payment to support the family and, for most families, employment related services. The family’s cash

assistance payment is dependent on the number of family members and the amount of other countable income. The maximum monthly cash assistance payment is listed below. In addition, most families are required to participate in 35 hours of work related activities per week, beginning within 12 weeks (three months) of receiving assistance (see Work section, below).

Maximum monthly cash assistance. The maximum monthly cash assistance payment is based on the number in the family unit:

| Family Size | Maximum Monthly Payment |
|------------------------|-------------------------|
| 1 | \$181 |
| 2 | 236 |
| 3 | 272 |
| 4 | 297 |
| 5 | 324 |
| 6 | 349 |
| 7 | 373 |
| 8 | 386 |
| 9 | 406 |
| 10 | 430 |
| 11 | 448 |
| 12 | 473 |
| 13 | 496 |
| 14 | 521 |
| Each additional person | add \$25 |

Families who receive Work First Family Assistance payments in standard counties will automatically receive Medicaid benefits. In electing counties, the family may need to apply for Medicaid separately. In addition, most families who receive Work First Family Assistance payments will also qualify for Food Stamps. Families will also be evaluated for child care services and be referred to the Child Support Enforcement unit (if appropriate).

Emergency Assistance. Counties must operate an emergency assistance program to help families through short-term crises. Each county has the authority to decide how much assistance to provide and which families to assist. However, counties may not provide emergency assistance to families with incomes greater than 200% of the federal poverty guidelines. A one-time cash payment to help a family cope with an emergency is not considered a Work First payment (and therefore, does not count towards the 24 month or 60 month time limits).

Work Related Services. Counties may provide assistance to families in obtaining skills training, education or other services needed to obtain employment.

Work Related Expenses. Counties may provide help with one-time work related expenses to enable an applicant or recipient to get and keep a job. For example, a county may help a family pay for car insurance or repairs, or buy work tools or a work uniform if needed to secure employment.

Support Services. Families may also receive certain support services to help them obtain and keep employment. These services include substance abuse services, child care, transportation, case management and follow-up services. Support and retention services are available to current and former Work First recipients whose family income does not exceed 200% of the federal poverty guidelines. Counties also have the option to provide these services to other families who have never received Work First, as long as their income does not exceed 200% of the federal poverty guidelines.

Transitional Medicaid. Every county must provide transitional Medicaid for up to 12 months after a family loses Work First cash assistance due to earnings. Beginning October 1, 1999, families will be eligible for 24 months of transitional Medicaid. To qualify, families must have received assistance during at least three of the six months prior to having their cash assistance benefits terminated (see Medicaid chapter 7).

APPLICATIONS

In standard counties, applications for Work First programs are usually taken at the county Department of Social Services. Electing counties may designate another agency or agencies where applications will be taken. All applicants must register for First Stop with the Employment Security Commission (in some counties this is required prior to application). Work First applications should be processed within 45 days. Benefit Diversion applications should be completed the same day the request is made. If a family moves to another county, they must reapply in their new county of residence if they want to continue receiving assistance.

The county Department of Social Services can accept the family's statement as verification of their situation for the Benefits Diversion program. However, more information and verifications are required if the family is applying for Work First Family Assistance.

The family's situation must be reassessed at least once every 12 months if the family submits quarterly Work First Family Assistance reports (see below), or once every six months for all other families.

ELIGIBILITY REQUIREMENTS

Applicants who apply for Work First Family Assistance must meet certain eligibility requirements including general requirements, income and resource eligibility requirements. In addition, the applicant must register for work at the Employment Security Commission, sign a Mutual Responsibility Agreement, and participate in work requirements unless exempt. Each eligibility requirement is discussed more fully below.

General Eligibility Requirements

Work First families must meet the following eligibility requirements:

- *Family members must live in North Carolina* with the intent to remain (this includes homeless families with no fixed mailing address). DSS can accept the family's statement of their residence unless questionable;

- *The family must include a child that is 17 years or younger (the child's age must be verified by birth certificate, hospital records, government records, or other knowledgeable sources);*
- *The child(ren) must meet kinship/living with requirements (see below);*
- *All family members must have a social security number or apply for one;*
- *Each family member must be a US citizen or a qualified alien (see citizenship/immigrations status below);*
- *The caretaker relative must assign rights to child support to the NC Department of Health and Human Services and must cooperate with child support activities unless he/she has good cause;*
- *Minor parents must live with their parent, legal guardian, or in another adult supervised arrangement, and must attend school (see minor parent rules below);*
- *All Work First applicants are screened to assess their risk of substance abuse (see below);*

Kinship/Living With. To receive Work First Family Assistance, children must live with certain relatives (called the “kinship/living with” rules). A child may live with one of the following people to meet the kinship/living with rule:

- A parent (biological or adoptive);
- An alleged father or other alleged paternal relative;
- A blood or half blood relative or adoptive relative (certain limitations apply);
- A step-relative limited to stepparent or step-siblings;
- A spouse of anyone in the above groups (even after the marriage has been terminated by death or divorce); or
- A non-relative who has custody or guardianship.

Note: A minor parent may live with an adult who is not related if appropriate (see below). Joint-custody arrangements also create special circumstances. If the joint custody is exactly equal (i.e., 50% with each parent), then the family will likely not meet the kinship/living with rule.

Citizenship/Qualified Aliens. Citizens are eligible for assistance under the Work First program. Citizenship need not be verified by the Department of Social Services unless the family's statement is questionable (for example, the family's assertion of citizenship is inconsistent with other information on the application). Certain types of immigrants are also eligible for assistance.

Most immigrants are ineligible for five years from the date they enter the country. The five-year exclusion does not apply to the following groups:

- Legal Permanent Residents (LPR) if admitted on or before August 22, 1996;

- Refugees, Asylees, and persons granted withholding of deportation, Cuban/Haitian entrants, and Amerasians; and
- Veterans/active duty service members and their spouses and unmarried children under age 21.

A child who is a US citizen meets the citizenship requirement regardless of the immigration status of his or her parents.

Minor Parent Rules. A minor parent is a child under age 18 with dependent children. Minor parents must meet all the same eligibility requirements as other Work First participants (i.e., income and resource requirements), and must sign a Mutual Responsibility Agreement. In addition, the minor parent must meet the following additional eligibility requirements:

- *A minor parent must be enrolled in and regularly attending school.* Children who have already completed high school, received a GED, or were suspended or expelled from school must participate in an educational, training or work activity. Minor parents are entitled to child day care services so that they can go to school.
- *A minor parent must live with a parent, legal guardian, or be in another adult supervised arrangement (the adult does not need to be a relative).* There are certain exceptions to this rule, for example when:
 - The minor parent has no parent or legal guardian who is living, or their whereabouts are unknown;
 - The physical health or safety of the minor parent or his/her dependent child would be jeopardized by living with a parent or legal guardian;
 - The minor parent has lived apart from any parent or legal guardian for a period of at least one year prior to either the birth of the child or the date of the Work First Family Assistance application;
 - The parent or legal guardian will not allow the minor parent to live in his/her home; or
 - The county director determines that it would be detrimental to the minor parent to live with her parent or legal guardian; and
 - There is no other adult supervised arrangement where the minor parent may live.

Minor parents cannot receive cash assistance payments in their own names. The payments must be paid to an adult with whom the child is living, or if there is no adult, to a protective payee.

Substance Abuse Services. All Work First Applicants must be screened to assess their risk of substance abuse. If there is suspicion of substance abuse, the person will be referred to a Qualified Substance Abuse Professional (QSAP). The QSAP will conduct a more thorough assessment, and develop a treatment plan (when appropriate).

Financial Need

County Departments of Social Services examine the income and resources of all family unit members in determining financial eligibility and the amount of the payment to the family. Certain family members' income and resources must be included in determining eligibility for Work First payments. Other people may be included as part of the cash assistance payment at the family's request. The following members are always included in the family unit in determining Work First eligibility:

- All minor brothers and sisters (including half brothers and sisters);
- Any parents of the children living in the household (biological, adoptive or step-parents); and
- Minor parents (through age 17) and their children unless the minor is married, in the US Armed Forces or is emancipated by a court.

In addition, the family unit may include other children (other than siblings and half-siblings) residing in the household. Family members who receive SSI, and children who receive foster care assistance cannot receive Work First. Their income is not included when determining financial eligibility for Work First.

A parent may apply separately for assistance when the only child receives SSI. In this instance, the child is ineligible, but the parent may receive assistance as a family unit of one. In addition, children who reside with adults (other than their parents or whose parents are ineligible for Work First) may receive assistance separately as "**child-only**" cases. *Child-only cases are not subject to the 24 month or 60 month time limits, and the adults are not subject to the work requirements.* Caretaker adults in these families may still qualify for Medicaid.

Income Eligibility

Families applying for Work First Family Assistance must have countable income that is less than the payment standard to qualify for Work First. Normally, the family receives additional cash assistance for every member in the family unit. However, *the family will not receive assistance for new children born more than ten months after the family begins receiving assistance* (see "family cap" rules below). In addition, almost all families with earned or unearned income will have to fill out a Family Assistance report form once every three months specifying the amount of income the family receives from all sources (see Family Assistance Report form rules below).

- **Countable Income**—Almost all the income (gross income) from any of the family members is counted. However, there are some sources of income that are not counted in the eligibility determination. These include:
 - Income of a SSI recipient;
 - Earned income of a child;
 - Value of benefits received from other government programs or charitable organizations, such as Food Stamps, housing subsidies, emergency assistance, etc. (government income checks such as

- Social Security, Veterans benefits, Workers' compensation are still counted);
- Earned income tax credit;
 - Adoption assistance or foster care payments;
 - In-kind payments, such as clothing and food contributions;
 - Certain educational loans or grants;
 - Vendor payments; or
 - Work First employment service payments to a family member actively participating for his/her participation expenses (for example, payments to help reimburse the participant for transportation).

In certain instances, the income of other individuals living in the home will be considered or "deemed" available to the other family unit members. For example, the income of the following people is deemed available to family unit members:

- Parents who are excluded from family unit participation because they fail to meet citizenship or alienage requirements, and
- Stepparents who are not part of the family unit.

- **Income Deductions**—A family is entitled to certain deductions from earned income:

Current rules:

- \$90 work disregard;
- \$175 for adult day care expenses (if the family pays for child day care services directly, the family can deduct \$200 for a child under age two, or \$175 for older children);
- The state will disregard \$30 plus 1/3rd of earnings for the first four months; and
- The state will disregard \$30 of earnings for the following eight months.

New income deduction (scheduled to go into effect October, 1999)

- A family is entitled to disregard 27.5% of their earned income. This deduction is subtracted from a family's gross income.

Job bonus (scheduled to go into effect October, 1999)

- 100% of all earnings for the first three months that each individual has earnings.

Note: The 100% income exclusion only applies the first time a Work First recipient becomes employed, and if the employment is at least 20 hours a week and is expected to be permanent. If the applicant has earnings at the time of the application, 27.5% of gross monthly earnings are excluded.

- 27.5% of earnings after the first three months. This exclusion applies for as long as the individual is a Work First participant.

Payment Calculations. The Work First cash assistance payment is calculated by subtracting the family's net earned and unearned income (including deemed income) from the "Standard of Need." The family will receive 50% of the difference between the family's countable earned and unearned income and the standard of need.

| Family Size | Standard of Need |
|--------------------|-------------------------|
| 1 | \$362 |
| 2 | \$472 |
| 3 | \$544 |
| 4 | \$594 |
| 5 | \$648 |
| 6 | \$698 |
| 7 | \$746 |
| 8 | \$772 |

Note: Beginning October, 1999, the state will implement a minimum payment policy. If the difference is \$25 or more, the family will receive a monthly cash payment. If the difference is less than \$25, the family will not receive a payment, but may receive Medicaid benefits.

Example: Ms. Jones has two children. She earns \$600/month in gross income from her employer. She does not pay anything for child care expenses. She has been receiving Work First cash assistance for six months (so is not entitled to the job bonus).

Current calculations:

| | |
|-------------|---|
| \$600 | Gross income |
| <u>-90</u> | Earned income disregard |
| 510 | |
| <u>-30</u> | \$30 earnings disregard |
| \$480 | Countable earned income |
| | |
| \$544 | Standard of Need for three people |
| <u>-480</u> | Countable income |
| \$64 | Difference |
| \$32 | Payment (50% of the difference between the standard of need and countable income) |

New rules (scheduled to go into effect October, 1999):

| | |
|-------------|---|
| \$600 | Gross income |
| <u>-165</u> | Earned income disregard (27.5%) |
| 435 | Countable earned income |
| | |
| \$544 | Standard of Need for three people |
| <u>-435</u> | Countable income |
| \$109 | Difference |
| \$54 | Payment (50% of the difference between the standard of need and countable income) |

- **Family Cap.** Families that have additional children ten or more months after the family begins to receive Work First assistance are subject to a “family cap.” This means that the family will receive no additional cash benefits for the new child. There are some exceptions to the family cap rule under which the family can receive additional cash assistance:

- The child was conceived in a month in which the family unit was not receiving Work First Family Assistance;
- The child is the firstborn of a minor who is a dependent child;
- The child was conceived by rape, sexual assault or incest (this allegation must be verified by law enforcement records, medical providers or other knowledgeable individuals);
- The child has had legal custody transferred to a caretaker other than the parent;
- The child is transferred to a caretaker relative because the parent is no longer able to take care of him/her;
- The child has been adopted; or
- The parent has been incarcerated or institutionalized for at least three months.

A child subject to the family cap will continue to be subject to a family cap if he or she moves to another household that is receiving or applies for Work First cash assistance. However, the child may still be eligible for Food Stamps, Medicaid, Child Support enforcement activities, and day care subsidies.

- **Family Assistance Reporting Requirements.** Certain families are required to fill out quarterly reports to show their continued eligibility for assistance. These families include:

- Families with earned and unearned income (unless the income is limited to Social Security income);
- Families with a recent work history (for a month after the earned income terminates); or
- Families that contain a minor parent who is 16 or 17 years old.

In addition to these quarterly reports, all families are required to report changes that might affect eligibility. Changes must be reported within 10 calendar days of the date the family learns of the change.

Resource Eligibility

A family receiving Work First Family Assistance is allowed \$3,000 in resources. Assets that can be converted to cash within five working days are counted toward the asset limit.

The Department of Social Services will consider the resources of the following individuals in determining resource eligibility:

- Members of the family unit, and
 - Any parent who is not receiving Work First due to his citizenship/alien status or because he/she fails to apply for a social security number, or did not cooperate with child support enforcement.
- **Countable Resources.** Most resources are counted in determining eligibility for assistance. For example, DSS will count:
 - Cash savings,
 - The balance in any bank accounts, excluding the amount deposited monthly to meet monthly needs,
 - Cash value of life insurance policies,
 - Motor vehicles (except as noted below), and
 - Stocks, bonds, mutual funds, etc.
 - **Excluded Resources.** Certain assets are excluded from the resource determination. These include:
 - One vehicle per adult (the equity value of other vehicles is counted);
 - Personal effects and household goods;
 - Personal savings of recipients selected to participate in an Individual Development Account (IDA) demonstration project (IDAs are personal savings matched by the state or other entity to be used for home purchase, investment in a business or self-employment, or costs of post-secondary education or training);
 - The family's home (which includes a house and lot in a town/city, or a house and one acre in a rural area);
 - Other real property (such as land or houses);
 - Non-salable partial interests in real property;
 - Burial insurance and burial spaces;
 - Inaccessible retirement accounts; and
 - Trust funds for minors under age 18.

MUTUAL RESPONSIBILITY AGREEMENT

All families must sign a Mutual Responsibility Agreement (MRA). A family that fails to sign the agreement is ineligible for assistance (both parents must sign the contract if both are living in the household). The contract includes the caretaker's responsibilities to his/her family, work responsibilities, and any other components of the individual plan as determined by the worker(s) and the family.

General, Non-Work Related Requirements

The Mutual Responsibility Agreement includes non-work related requirements. Some caretaker relatives will be subject to all of the requirements below, others to some but not all of these requirements:

- Ensure their children are immunized and obtain regular medical check-ups;
- Ensure their school-age children attend school;
- Cooperate with the Child Support Enforcement Agency;
- Live with a parent or other approved adult (for teen parents);
- Participate in financial management and life skills classes;
- Participate in individualized substance abuse treatment plans if a qualified substance abuse professional has determined they are at risk for alcohol or drug abuse;
- Attend family planning counseling;
- Participate in mental health treatment;
- Attend domestic violence counseling; and
- Participate in rehabilitation services.

Families must bring proof of compliance with these requirements to each review (for example, documentation from the doctor's office that the child has received his/her necessary immunizations and obtained regular medical exams.)

Work-Related Requirements

MRAs for adults that are receiving employment services will include requirements related to work, including requirements to help eliminate the barriers to work. For example, non-exempt adults are required to register for First Stop (at the Employment Security Commission), and may be required to undergo substance abuse counseling. The goal is to help the family to achieve and maintain self-sufficiency.

Agency's Responsibilities

The agency should provide or make available certain services that will help the family engage in work related activities. Agencies have a lot of flexibility in determining how to meet the family's needs.

- *One-time work-related expenses* that pertain to accepting or retaining employment (such as equipment, tools, uniforms, car repairs and insurance). Limits are not required by the state, but counties may set limits on the amount of money that will be paid to participants for one-time work related expenses.
- *Child care* for individuals actively participating in Work First, for employed Work First Family Assistance recipients, and for teenage custodial parents (if enrolled in any activity which meets the school attendance requirement). There are no annual limits for child care per individual or family. Eligibility for child care subsidies is based on the family's income.
- *Transportation services* can be purchased (or reimbursed directly to the participant) to support active program participation when no other transportation

resource is available. Counties may provide assistance with car repairs, vehicle licenses, car down payments, bus tokens, or may help pay for coordinated transportation services, taxis, or volunteer reimbursement. Limits are not required by the state, but counties may set limits on the amount of money that will be paid for transportation services.

- *Payment for component related expenses* such as tuition, fees, books, supplies or examination fees. Limits are not required by the state, but counties may set limits on the amount of money that will be paid for component related expenses.
- *Other payments for participation expenses* including car insurance, excess child care registration fees, payment for meals and refreshments. Limits are not required by the state, but counties may set limits on the amount of money that would be paid for participation expenses.
- *Case management and case management support* including helping the families access needed services, assessment and planning, coordination with other community resources, counseling and problem-solving, evaluation, job development and placement, and program development. Case management support activities are usually provided by staff other than the case manager, and may include instruction in household management, consumer education, time management, provision of transportation, child care coordination and placement. There is no limit on the amount of case management and case management support, whether provided by the agency or contracted staff.
- *Other supportive service* may be available, if local resources permit, and may include: in-home aides, personal and family counseling, individual and family adjustment services, or day care for adults, as well as other non-cash services to noncustodial parent.

WORK REQUIRE- MENTS

Unless exempt, most caretaker relatives receiving Work First Family Assistance payments are subject to mandatory work requirements. Caretaker relatives in active work status must average a minimum of 35 hours a week in employment activities within three months of receiving Work First Family Assistance payments.

Exemptions: Certain Individuals exempt from the work requirements include:

- Single parents with children under age of one (the exemption cannot exceed 12 months per lifetime for each adult);
- Children under age 18 (unless the minor is emancipated); and
- Individuals with children under age six if adequate child care is not available (Families may qualify for this exemption if child care is not available within a reasonable distance from the parent's home or place of employment, if informal child care is unavailable or unsuitable, or if child care subsidy is not available and the cost of the child care is unaffordable.)

Families that do not meet one of these exemptions are considered mandatory work families. However, counties may not have the capacity to work with all families immediately. Each county determines which families will be assigned to "active work status" first.

First Stop Employment Assistance Program

All Work First applicants and recipients, unless exempt, must register with the Employment Security Commission's First Stop Employment Assistance Program. First Stop helps adults with job search, job placement or referral to community services. Some counties have contracted with their local Employment Security Commissions to provide additional services.

Work First Active Work Requirements

All families assigned to Work First "active status" should receive intensive case management and employment services. The family receives an assessment that identifies its strengths and challenges to employment, and results in a plan for immediate, intensive program participation (of at least 35 hours/week). For example, the caseworker will examine the family's strengths and household environment, current employability and job readiness, educational skills, employment skills and interests and supportive services needed.

All active participants are expected to be engaged in 35 hours per week in appropriate work activities. Two-parent families must participate in work or work activities at least 35 hours/week, or 55 hours/week if federally funded child care is provided. After the first three months, two-parent families will not receive a monthly cash assistance check until the family meets its 35/55 hour per week work activity ("*pay after performance*").

By federal law, families that have a 35 hour/week work requirement must spend at least 25 hours (or 30 hours beginning in October 1999) in a combination of the activities in List A. Activities in either List A or List B can be used to complete the remaining hours.

List A Activities

- *Employment*—may be full-time or part-time.
- *Job search*—which helps participants seek employment in a structured setting; recipients must accept any suitable employment or risk losing their cash assistance. Work First participants will not be referred to, or placed on a job, when a non-Work First employee has been laid off from the same (or substantially equivalent) job.
- *On-the-job training*—a subsidized employment opportunity where the employer agrees to hire and train a participant in exchange for a partial subsidy.
- *Work experience/Community service*—an unpaid training opportunity with a public or private non-profit agency. Work experience is generally limited to participants who have been unable to find paid employment, need stronger job references or lack job-entry skills, and is limited to a certain number of hours per week.
- *Job readiness skills*—this program is intended to familiarize participants with workplace expectations and provide families with an array of skills critical to becoming and remaining employed.
- *Vocational training*—short term educational activity that helps prepare the participant for a specific vocation. (Participation and support in graduate and post-graduate programs are prohibited).

- *Providing child care for Work First participants in community service*—an unpaid work activity designed to give work experience to individuals interested in opening their own child care operation.
- *Work supplementation*—counties may use the applicant's food stamp or cash allotment to subsidize the participant in a paid employment position. Employers will receive this payment for up to 12 months to help subsidize the participant's paid employment. Wage supplementation is expected to lead to unsubsidized employment at the end of the agreed upon subsidy period. This activity is typically used for families in which the adult is less job-ready and difficult to place without the subsidy.

List B Activities

- *Job Preparedness activities*—which include Adult Basic Education (ABE), community based literacy programs, high school or GED programs or English as a Second Language (ESL), and Human Resource Development (HRD) programs.
- *Skills training*—this is a short-term training activity intended to prepare an individual for a specific occupation available in the labor market. Skills training should lead to a certificate, diploma, or associate degree.

Note: In the past, families could not count the time they spent in post-secondary education towards their work requirements. However, a recent change in state law (1999) will enable up to 20% of families to count the time they spend in post-secondary education towards their required work hours.

Individuals who do not meet their work requirements are subject to a monetary sanction unless they can show good cause.

SANCTIONS

Families who fail to meet certain programmatic requirements may be subject to sanctions. The sanction differs, depending on the nature of the noncompliance.

- *Mutual Responsibility Agreement.* Parents or caretakers who fail, without good cause, to participate in work or work activities, comply with the terms and conditions of their Mutual Responsibility Agreement, quit a job, are fired from a job, refuse a bona fide offer of employment, or fail to follow-up on a job referral, will be subject to the following sanctions:
 - 1st sanction: 25% reduction for three months;
 - 2nd and subsequent sanction: For a minimum of three months, the family will not receive any cash assistance until after they have completed the activity for which they were sanctioned. If compliance has not been reached at the end of three months, the case will terminate. In practice, this operates like two-parent pay-after-performance described previously.

Good cause is defined as:

- A significant family crisis or change;
- Illness of the caretaker or child, including participation in substance

abuse treatment or medical appointment, civil leave including jury duty, or a required court appearance; or

- Any other reason deemed sufficient by the county director or designee.

- **Child Support Enforcement.** Parents or caretakers who fail to cooperate with child support enforcement will have their Work First payment reduced by 25% until they cooperate.
- **Fraud and Abuse.** Parents or caretakers who intentionally give false information in order to qualify for assistance or otherwise affect the level of their benefits are subject to a sanction. The person who committed the fraudulent activity is disqualified for:
 - 12 months for the first violation,
 - 24 months for the second violation, and
 - Permanently for any subsequent violation.

Note: An individual who is convicted of misrepresenting his or her residence to obtain Work First, Medicaid, SSI or Food Stamps in more than one location is ineligible for Work First family assistance for 10 years, beginning on the date of conviction. The rest of the family can continue to receive assistance.

TIME LIMITS

Families who are active in Work First Employment Services are limited to 24 months of Work First cash assistance. *After the family has received cash assistance for 24 months, that family can not receive additional cash assistance again for 36 months.* However, the family can continue to receive Food Stamps and Medicaid, if eligible, and may qualify for day care subsidies (See Chapters 26, 7, 4).

Note: Child-only cases are not subject to either the 24 month or 60 month time limits.

A family subject to the 24 month time limit on cash assistance may qualify for an extension of the time limit if the family, due to no fault of its own, is unable to obtain employment that provides a basic level of subsistence (defined as the earnings that exceed the maximum family payment). To qualify, the participant must show that he/she actively complied with the Mutual Responsibility Agreement, and that he/she did not reject a bona fide job offer, was not fired or did not quit a job without good cause.

Good cause is limited to:

- The disability of the caretaker as substantiated by a doctor's statement or receipt of disability benefits;
- The disability of a child or other family member which requires the caretaker to remain at home and provide care (this must also be substantiated by a doctor's statement);
- A family crisis or change including, but not limited to, death of a spouse, parent or child;
- A lack of necessary child care; or

- Other unique circumstances as determined by the county Department of Social Services which prevents the Work First active participant from obtaining or retaining employment.

The Department of Social Services must review each family's case three months before the end of the 24 month time limit. Specifically, the agency must ensure that the time limits were calculated properly, determine if the family qualifies for an extension of the 24 months, and must help families prepare for the loss of benefits.

In addition to the 24 month time limit for cash assistance, *all families are subject to a 60 month lifetime maximum on receipt of benefits.* The 60-month time limit only counts cash or cash like assistance the family received after January 1, 1997 (earlier in some states). *The 60 month time limit is a cumulative total, and includes any time that the family received TANF benefits in other states.*

Electing counties can set different time limits, as long as the limits do not exceed the 60 month lifetime maximum.

NUMBERS SERVED

The Work First program served 186,465 individuals on an average monthly basis in SFY 97-98.

PRIORITIZATION SYSTEM

Work First is not an entitlement program, but to date the funding has been sufficient to serve all eligibles.

APPEAL RIGHTS

Any decision regarding Work First—whether an approval, denial, termination, modification of assistance, or the imposition of a sanction by the county DSS—may be appealed. An appeal must be requested, either orally or in writing, within 60 calendar days of the written notice of decision, or within 90 calendar days if good cause is shown for the delay. If the request is made within 10 workdays of the notice of action benefits can continue until the first decision is made. If the family loses the appeal, the continued benefits are considered an overpayment and must be repaid by the family.

Local Hearing

The first level of appeal is a local hearing in all cases except when the issue is whether a parent is incapacitated. The local hearing should be scheduled within five calendar days after it is requested, although the person appealing has the right to request a postponement for an additional 10 days. It will be held at the Department of Social Services, unless the person appealing is bedridden.

The person appealing has the right to be represented. The representative does not need to be an attorney, but may be. (See chapter on Legal Services regarding legal representation). Either the person appealing or his/her representative has the right to see and have free copies of their file at DSS prior to the hearing. The person appealing or his/her representative can ask questions of the DSS worker involved in the initial decision to establish or clarify certain facts. The person appealing can present evidence (documents and/or witnesses) and testify, and they may need to answer questions posed by either the

hearing officer or the DSS worker. Court rules of evidence do not apply, as these hearings are typically informal. The local hearing officer will make a decision within five calendar days of the hearing and mail it to the person who appealed.

State Level Hearing

In standard counties, if the local hearing decision is not satisfactory, a state level hearing may be requested. The state level hearing must be requested, either orally or in writing, within 15 calendar days of the date of the local hearing decision. (In electing counties, the county must hold the second-level review.)

A state hearing officer based in Raleigh holds the state level hearing at the county Department of Social Services. It will be scheduled by the hearing officer, and usually held within three to six weeks after the request. The state level hearing is similar in format to the local hearing. The state hearing officer will issue a written decision and mail it to all parties. The decision is initially tentative. Either party has ten days to request that the Chief Hearing Officer review it. If neither party requests a review, the hearing officer's decision becomes the final agency decision which can be appealed to Superior Court. All electing county hearings will be held locally.

If either party requests it, the Chief Hearing Officer will accept additional written or oral arguments supporting or opposing the decision. The Chief Hearing Officer will then issue a final decision in writing and mail it to all parties. The final decision should be issued within 90 days of the initial request for an appeal.

Judicial Review

The final agency decision can be appealed to Superior Court by filing a Petition for Judicial Review within 30 days of the receipt of the final decision. As a practical matter, this can rarely be accomplished successfully without the services of an attorney. Free legal help may be available from the local Legal Services program (see Chapter on Legal Services). The procedures for Judicial Review are controlled by NCGS 108A-79(k) and the Administrative Procedures Act at NCGS 150B Part 4.

Note: Electing counties must have substantially similar appeal procedures.

FINANCING

Work First is financed through federal, state and county appropriations. Approximately 60% of the program costs are financed by the federal government, 20% by the state, and 20% by the counties. In SFY 1997-98, a total of \$419.7 million in federal, state and local funds were spent on the program. This includes both cash payments to the families as well as the costs of services.

ADMINISTRATION

The program is administered on the federal level by Administration for Children and Families within the US Department of Health and Human Services. At the state level, the Economic Independence Section of the Division of Social Services within the NC Department of Health and Human Services administers the program. The program is administered at the local level by the county Departments of Social Services (although

beginning in 1999, other public or private agencies may have responsibility for administering the program in Electing Counties).

| | | |
|-----------------------|----------------------|--|
| SOURCES OF LAW | Federal statute: | 42 USC 601 <i>et. seq.</i> As amended by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, PL 104-193 |
| | Federal regulations: | Being developed |
| | State statutes: | NCGS 108A-24 <i>et. seq.</i> |
| | State policy: | Work First Manual |
| | State plan: | www.state.nc.us/DHR/DSS/ |

FOR MORE INFORMATION

Economic Independence Section
Division of Social Services
NC Department of Health and Human Services
325 N. Salisbury St.
10th Floor Albemarle Bldg.
Raleigh, NC 27603
919-733-7831

CARELINE: 1-800-662-7030

Child Support Enforcement

OVERVIEW

What is it?

A program that helps anyone who has custody of a minor dependent child obtain child support from absent parent(s).

Who is it for?

Any custodial parent/adult. There are no financial eligibility criteria, although some families have to pay a small application fee.

Where are applications taken?

At Child Support Enforcement offices, often located at the county Department of Social Services.

INTRODUCTION

The Child Support Enforcement Program assists parents in obtaining child support from absent parents. It is commonly referred to as the “IV-D” program (pronounced “4-D”), because it was created by Title IV-D of the Social Security Act. The services offered through the Child Support Enforcement program are available to any custodial parent, regardless of the custodial parent’s income or resources.

BENEFITS/ SERVICES

The IV-D program offers five basic services. They are:

Absent parent location. The IV-D office will try to locate parents whose whereabouts are unknown. IV-D must access all resources available to locate the parent within 75 days of when a child support file is opened. A variety of methods can be used, including federal and state parent locator services. The IV-D office may search records from other governmental agencies, such as the Internal Revenue Service, Social Security Administration, Employment Security Commission, Division of Motor Vehicles, and Department of Corrections. If the IV-D office is unable to locate the absent parent initially, the office must conduct quarterly searches of the databases thereafter.

Establishment of paternity. This service is necessary when the father’s paternity has not been officially established. Paternity can be established through an acknowledgment of paternity, a legitimization process, or either a civil or criminal paternity proceeding. Both the acknowledgment and the legitimization processes require the voluntary cooperation of the father. The court proceedings are used in contested cases. Blood tests or other genetic tests are used in court proceedings to prove paternity. The IV-D office generally has 90 days to establish a paternity and child support award after the absent parent is located. If the absent parent contests paternity or is unwilling to voluntarily enter a child support order, then court proceedings must be initiated within the same 90 day period.

Establishment, review and adjustment of a child support obligation. After paternity has been established, the next step is to obtain an order establishing the amount of the child support obligation. This is done by court order, and must usually be done within 90 days of when the parent is located. There are standard amounts of child support that are presumed to be appropriate “child support guidelines,” depending on the incomes of the parents and the number of children involved. A child support order can deviate from the guidelines if it can be shown that they would not be equitable in a particular case. Each parent’s income is taken into account, and each are expected to contribute to the support of the children. The guidelines are available from the Administrative Office of the Courts in Raleigh.

In addition, the IV-D office must periodically review and adjust the child support order. The IV-D office must review each child support award at least once every three years, or more frequently if either the custodial or non-custodial parent requests a review and can show a significant change in circumstances.

Collection and distribution of child support payments. The statewide Child Support Enforcement office coordinates the collection and distribution of child support payments. Absent parents living in North Carolina subject to a court order concerning support must pay the support to the Clerk of Court in the county in which they reside (unless their wages are being withheld, in which case the employer sends the money to the Clerk of Court). When the clerks receive the money, they turn it over to the state Child Support Enforcement office. The IV-D office sends the custodial parent the child support check within 24 hours of receiving the funds from the Clerk’s office. If the child is receiving Work First payments, the money is sent to the state to reimburse the state for the public assistance payments paid to the family. Any payment in excess over the monthly child support payment will first be sent to the family to pay for any past-due payments owed the family. If the family is not owed for past-due payments, then the excess payment will be retained by the state, if needed to pay for Work First or AFDC payments which the family received in the past.

Beginning October 1, 1999, child support payments will be sent directly to a centralized collection office within the NC Department of Health and Human Services instead of the local Clerk of Court. The centralized collection office will distribute the money to the custodial parent or to the state to reimburse the state for public assistance payments, whichever is appropriate.

Enforcement of the child support obligation. The IV-D system has a variety of methods to enforce child support orders. Most employed parents will have part of their wages withheld to pay for child support. In addition, the IV-D offices have an array of other enforcement mechanisms to use when the non-custodial parent’s wages can not be garnished (i.e., if the parent does not work regular jobs or changes jobs frequently). These include: interception of tax refunds, revocation of drivers or professional licenses, contempt proceedings, credit reporting, liens, and the revocation of suspended sentences (in criminal child support enforcement cases). The IV-D office must ordinarily start enforcement actions within 30 days of identifying the noncompliance or locating the parent. However, IV-D has 60 days to serve a parent with court papers, if the IV-D office is required to go to court to enforce the order.

Not all of these services will be appropriate in every case, and even the appropriate ones may not be successful.

APPLICATIONS

Anyone who wishes to take advantage of the child support services offered may apply at the local Child Support Enforcement office. There are 86 child support enforcement offices statewide, 69 of which are county-operated (through the department of social services), and the remaining 17 are state-operated. The 17 state-operated programs are located in the following places:

| County | Child Support Enforcement Office |
|---------------|---|
| Anson | Anson/Richmond Child Support Enforcement, Rockingham |
| Avery | WAM Counties Child Support Enforcement, Boone |
| Bertie | Bertie-Hertford Child Support Enforcement, Ahoskie |
| Camden | Albermarle Child Support Enforcement, Elizabeth City |
| Carteret | Carteret Child Support Enforcement, Morehead City |
| Clay | Swain County Child Support Enforcement, Bryson City |
| Craven | New Bern Child Support Enforcement, New Bern |
| Cumberland | Cumberland Child Support Enforcement, Fayetteville |
| Currituck | Manteo Child Support Enforcement, Manteo |
| Dare | Manteo Child Support Enforcement, Manteo |
| Franklin | Franklin County Child Support Enforcement, Louisburg |
| Gates | Albermarle Child Support Enforcement, Elizabeth City |
| Graham | Swain County Child Support Enforcement, Bryson City |
| Harnett | Harnett Child Support Enforcement, Erwin |
| Hertford | Bertie-Hertford Child Support Enforcement, Ahoskie |
| Hyde | Manteo Child Support Enforcement, Manteo |
| Macon | Swain County Child Support Enforcement, Bryson City |
| Mecklenburg | Mecklenburg County Child Support Enforcement, Charlotte |
| Mitchell | WAM Counties Child Support Enforcement, Boone |
| Pamlico | New Bern Child Support Enforcement, New Bern |
| Pamlico | Child Support Enforcement, Bayboro |
| Pasquotank | Albermarle Child Support Enforcement, Elizabeth City |
| Pender | Pender County Child Support Enforcement, Burgaw |
| Perquimans | Albermarle Child Support Enforcement, Elizabeth City |
| Randolph | Randolph County Child Support Enforcement, Asheboro |
| Richmond | Anson/Richmond Child Support Enforcement, Rockingham |
| Swain | Swain County Child Support Enforcement, Bryson City |
| Tyrrell | Manteo Child Support Enforcement, Manteo |
| Union | Union County Child Support Enforcement, Monroe |
| Watauga | WAM Counties Child Support Enforcement, Boone |
| Warren | Warren County Child Support Enforcement, Warrenton |

An application should be provided the day the individual appears at the department, or mailed within five days of a written or phone request. The IV-D unit must open a case file and solicit any additional information that is needed from the applicant within 20 days of receiving a completed application.

Persons who receive Work First or Medicaid do not need to fill out an application. They are automatically referred for services, and there is no application fee required. Other persons must pay an application fee, depending on their household income. Families with incomes at or below the federal poverty guidelines must pay a \$10 application fee; families with higher incomes must pay a \$25 application fee.

**ELIGIBILITY
REQUIREMENTS**

Anyone who has custody of a minor dependent child is eligible for services. There are no financial eligibility criteria. However, there is an application fee depending on the custodial parent's income.

**NUMBERS
SERVED**

The Child Support Enforcement Agency had about 484,445 cases statewide on March 31, 1999. There may have been multiple children per case.

APPEAL RIGHTS

There are no clear appeal rights for individuals who are not satisfied with the services of the IV-D unit. Individuals who are dissatisfied with the services provided by the IV-D unit should make a complaint to the local director of the office or to the state Child Support Enforcement Agency.

Custodial parents/adults who believe they have not received all the collected support money that is due should call CARELINE (1-800-662-7030) and ask for an informal review. If not satisfied, she/he can file a petition with the state Office of Administrative Hearings. Anyone wishing to file such a petition would be wise to seek the services of an attorney before engaging in such a process. Free legal representation may be available for low income families. See Chapter 31.

FINANCING

There are two sources of funding for this program: federal and state/local. The federal government pays 66% of program costs, with the remaining 34% is paid by the state or county government (depending on whether the state or county administers the program at the county level). In FY 1998, the following moneys were expended in North Carolina for the program:

Federal: \$73,049,289
State/county: \$37,631,452

The Child Support Enforcement Agency collected \$351 million in child support during FY 1998.

ADMINISTRATION

At the federal level, the program is administered by the Office of Child Support Enforcement within the US Department of Health and Human Services. The Child Support Enforcement program is administered at the state level by the Child Support Enforcement Office within the NC Department of Health and Human Services. Locally, the program is administered by the state in 31 counties. In the remaining 69 counties, it is administered through either the county Department of Social Services, the County Manager, or the County Tax Department. The Child Support Enforcement office is often known as the IV-D office.

SOURCES OF LAW Federal statute: 42 USC 651 et. seq.
Federal regulations: 45 CFR Part 301 et. seq.
State statute: NCGS 110-128 et. seq.
State policy: Child Support Enforcement Manual (available at IV-D offices)

FOR MORE INFORMATION The Child Support Enforcement Section
NC Department of Health and Human Services
100 E. Six Forks Road
Raleigh, NC 27609-7750
919-571-4120
1-800-992-9457 (voice response unit)

CARELINE: 1-800-662-7030

Supplemental Security Income (SSI)

OVERVIEW

What is it?

A federal program that provides monthly cash payments to supplement the income of certain blind and disabled individuals and older adults.

Who is it for?

Blind and disabled individuals (as well as adults 65 years or older) who meet financial and other eligibility requirements.

Where are applications taken?

Applications are taken at Social Security Administration (SSA) offices. Applicants can call 1-800-772-1213 to make an appointment, or can apply without an appointment at a local district office of the Social Security Administration.

INTRODUCTION

The Supplemental Security Income (SSI) program began in 1974 as a national program to provide subsistence level income to aged, blind and disabled persons with limited income and resources. The SSI program is an entitlement program, so all eligible individuals who apply will receive benefits (i.e., there are no waiting lists for this program). Children can receive checks if they are disabled or blind and their family meets the income and resource requirements.

The program is administered both nationally and locally by the Social Security Administration. SSI should be distinguished from Social Security benefits, also administered by the Social Security Administration. Social Security benefits, which are more technically known as OASDI (Old Age, Survivors, and Disability Insurance) are not based on financial need, but upon employment and the payment of Social Security taxes. SSI recipients are not required to pay Social Security taxes to be eligible.

BENEFITS/ SERVICES

SSI recipients receive a monthly check. The check supplements any other income available to the recipient, up to a monthly maximum. If the recipient has no other countable income, he or she will get the maximum amount. If the recipient has other income, such as the earnings of parents, then he or she will receive the difference between the countable income (after certain allowable deductions) and the monthly maximum. *Any individual who receives at least \$1 of SSI benefits will automatically receive Medicaid benefits.*

Payment Levels

The maximum benefit amount is adjusted annually, usually in January. The monthly maximum for 1999 is \$500/month for an eligible individual. A family with two or more disabled children can receive a maximum of \$500/month for each disabled child.

Overpayments

Sometimes, SSI recipients receive benefits to which they are not entitled. These payments may later be considered overpayments because the individual was not eligible when the check was received. When Social Security discovers the overpayment, it will send a notice that the overpaid amount must be repaid.

The overpayment may be recovered by reducing future benefits over a period of time or by a refund. The overpayment may be recovered from the child's check or from OASDI benefits payable to the overpaid SSI recipient.

Repayments may be waived by the Social Security Administration if two conditions are met:

- The recipient was found to be “without fault” in causing the overpayment, *and*
- Recovery would “defeat the purpose of the Social Security Act or would be against equity and good conscience.”

An individual will be considered to have fault if he or she knowingly failed to provide required information or knowingly provided incorrect information. Conversely, a person who provided correct information will usually be considered to be without fault, if for example, there was a calculation mistake by the Social Security Administration. Recovery will be found to defeat the purposes of the Social Security Act if it would cause the recipient to be without funds to pay routine expenses, or to drop below the SSI income and assets limit. Recovery is considered to be “against equity and good conscience” if the recipient relied, to his or her detriment, on the correctness of the payments.

In general, if the overpayment is less than \$500, it can be waived administratively without a determination of fault or ability to repay. The overpaid individual must request a waiver to take advantage of this rule.

There is no time limit within which an individual must request that an overpayment be waived. Denial of the request for waiver may be appealed.

When an individual receives notice that an overpayment occurred, two issues should be examined. The first is whether the SSA was correct in determining that an overpayment occurred. If the individual was entitled to receive the payment, then no overpayment occurred. If a mistake was made, and the individual was not entitled to the payment, then the individual's ability to meet the waiver requirements should be examined.

Advance Payment

An emergency grant of up to one month's benefit is available if an applicant is presumptively eligible and has a financial emergency. Presumptive eligibility means there is a strong likelihood that the applicant will be considered disabled and all other eligibility requirements will be met. Financial emergency means that the applicant has insufficient income or resources (assets) to meet an immediate threat to health and/or safety. The

advanced amount is to be recouped in six (or fewer, at the individual's request) equal installments from the SSI payments for the first six months. If the applicant is not ultimately approved for benefits, the amount is considered an overpayment.

Payments of up to six months of regular benefits may be paid pending a final determination to an applicant who is presumptively blind or presumptively disabled, and who is eligible in all other respects. Presumptive disability or blindness means a high degree of probability that the person will be determined to be blind or disabled. These prepayments, too, are recouped from the applicant's benefits once the application is approved. If the application is eventually denied, the benefits will not need to be repaid unless the applicant was denied for reasons other than disability (such as excess income or resources), or the amount of the payment was computed in error.

APPLICATIONS

To apply for SSI, an applicant may choose any of three options:

- 1) Call the Social Security Administration at 1-800-772-1213 to request an appointment at the local office;
- 2) Walk in to a local Social Security district office (or another office designated by SSA to receive applications) and request an opportunity to apply; or
- 3) Call either the toll-free number or the local district office and request an appointment for a phone application. After a phone interview, the applicant will be mailed the application form. The applicant must sign it and return it to the local district office.

Usually, the filing date is the date the application is signed. Payment of benefits will be retroactive to the first of the month following the month in which the application is made, if the applicant is eventually determined to be eligible. The date of an initial phone inquiry about SSI can be considered the filing date if a written application is submitted within 60 days of that date. An applicant is wise to make a record of the date of the initial phone call and confirm it in writing if there is some reason to believe that Social Security is using some other date.

The following information is generally required for the application:

- Social Security number;
- Names, addresses, phone and fax numbers of doctors, clinics, hospitals, etc.;
- Medical records from doctors, therapists, hospitals, clinics, and caseworkers (the Social Security Administration will obtain copies of the applicant's past medical records after receiving a signed release form from the applicant);
- Any laboratory test results;
- Names of all medications; and
- School records regarding the child's disability.

In addition, the Social Security Administration may schedule the applicant for a consultative examination to help determine whether the applicant meets the Social Security disability or blindness definitions. These examinations will be scheduled at no cost to the family.

The average SSI application takes between two-to-four months to make the disability determination. Depending on the complexity of the case, processing can take even longer. If an application is being delayed, the applicant should call the district office to determine the reason for the delay. Applicants should keep written notes of the phone calls.

ELIGIBILITY REQUIREMENTS

General Eligibility Requirements

To receive SSI benefits, an applicant must be:

- Blind, disabled or aged (65 or older),
- A US citizen residing in the US, a certain eligible immigrant or a child living overseas with a parent in the armed services,
- Have countable income that is less than the maximum monthly payment amount, and
- Have countable resources that are less than the maximum resource limit.

Individuals who are residents of public or private institutions are generally not eligible to receive SSI payments (with certain exceptions). A child is only eligible for \$30 monthly SSI payment if he or she lives in an institution where private health insurance or Medicaid pays for the care.

Blindness

For SSI purposes, a person who is considered blind has:

- Best corrected vision of no better than 20/200 in the better eye,
- Tunnel vision in the better eye with a field of vision restricted to less than 20 degrees, or
- A combination of poor visual acuity and tunnel vision.

Disability

To be considered “disabled” for SSI purposes, an individual must have a severe mental or physical impairment that:

- Can be verified by a doctor on the basis of lab tests, physical examination, or other objective medical procedures;
- Has lasted or is expected to last a minimum of twelve consecutive months or result in death; and
- Prevents the individual from doing his or her previous work or any other substantial gainful activity (defined as earning at least \$500 per month in 1999 for a person with disabilities or \$1,110 per month for a person considered blind). In determining whether a person can engage in substantial gainful activity, factors such as age, education, and work experience may also be taken into account.

Disability Definition for Children

On August 22, 1996, the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 changed the definition of disability for children under the SSI program. The new definition requires a child to have “a physical or mental impairment which can be medically proven and which results in marked and severe functional limitations,” and which can be expected to result in death, or which has lasted or can be expected to last, for a period of not less than 12 months.

Children with certain severe health problems may qualify if their health condition meets one of the Social Security Administration’s “listings of impairment.” Other children may qualify even if their condition does not meet a prescribed listing, if their functional limitations are disabling. For example, a child will be considered disabled if his or her functional limitations are the same as a disabling functional limitation(s) caused by a listed impairment. The Social Security Administration will also look to see whether a combination of limitations, episodic impairments or impairments which may be compounded by treatment or medication effects constitute a marked and severe functional limitation that would be the same as a functional limitation caused by a listed impairment. A child may also be considered disabled if he or she has a *extreme limitation*¹ in one broad area of development or functioning, such as social, motor, or personal functioning, or a *marked impairment*² in two broad areas of development.

The Social Security Administration will need a complete medical and functional history of the child. Parents can expedite the process by collecting the child’s health records (from doctors, clinics, mental health professionals or other health care providers), school records that describe the child’s activities and limitations (including results of school evaluations), and written reports or letters from other people who see the child regularly. In addition, parents may want to keep a diary of their child’s activities, problems, pain or other difficulties. The Social Security Administration can assist parents in preparing the SSI application.

Children who were receiving SSI payments may have had their benefits terminated based on this new “marked and severe functional limitations” definition. The Social Security Administration agreed to review cases around the country where children lost SSI benefits as a result of this new law. Any family whose child’s SSI benefits were cut-off as a result of this new law should contact the Social Security Administration to file an appeal or to file a new claim. *If an appeal is filed, benefit continuation may be requested.* A family may also want to obtain advice from or be represented by a trained advocate (such as a lawyer, paralegal, or other representative) who specializes in Social Security law.

¹ An extreme limitation is a valid standardized test score three standard deviations or more below the norm for the test; or for children birth through age 2, functioning at one-half chronological age or less; or from age 3 to age 18, a limitation that prevents meaningful functioning in an area of function.

² A marked impairment is a valid standardized test score two standard deviations or more below the norm for the test; or from children birth through age 2, functioning at more than one-half but not more than two-thirds of chronological age; or from age 3 to age 18, a limitation that interferes seriously with the child’s functioning.

Note: Children who are terminated from SSI on the basis of the new disability definition are still entitled to continue receiving Medicaid.

Continuing Disability Reviews

The Social Security Administration will review the cases of all children under age 18 who are receiving SSI payments for conditions that are likely to improve. In general, these continuing disability reviews are conducted at least once every 6-to-18 months if the condition is expected to improve, or at least once every three years if medical improvement is possible. The Social Security Administration also reviews the cases of children when medical improvement is not expected. These reviews are scheduled no less frequently than once every seven years, but not more frequently than once every five years. In addition, all children will have their disability determination reviewed after the child turns 18, to determine if the child meets the adult disability rules.

Citizenship/Immigration Status

The welfare reform bill that was signed into law on August 22, 1996 made most immigrants ineligible for SSI benefits. Although there are some exceptions, many noncitizen children with disabilities are no longer able to receive SSI benefits.

There are several important groups who still can qualify for SSI benefits. These include:

- Certain children of permanent resident aliens, if the parents have a substantial work history in the US (must have “40 quarters” of qualifying work).
- Unmarried dependent children (under age 21) of US armed forces veterans who were honorably discharged or active duty military personnel.
- Refugees, asylees, those granted withholding of deportation, Cuban/Haitian entrants and Amerasians for their first seven years after admission to the US
- American Indians born in Canada and other tribal members born outside the US Members of Hmong/Laotian tribes, their spouses, widows and unmarried dependent children are also eligible.
- In addition, those qualified immigrants (including legal permanent residents) who were in the US on August 22, 1996 and who were either receiving SSI or who become disabled at a later date, are now eligible for SSI. Although these individual were initially cut off by the welfare reform bill, they were later made eligible by the Balanced Budget Act which was passed in August 1997.
- Immigrants who were “permanently residing in the US under color of law” (PRUCOL) who were receiving SSI benefits on August 22, 1996 can also receive SSI benefits indefinitely.

It does not matter if the parents or representative payees are immigrants. Only the beneficiary's immigration status matters. Children who were born in the US, even those born to immigrant parents, are citizens and thus are eligible for SSI benefits if they otherwise

qualify. Immigrant parents may serve as the representative payees for their citizen children.

Income Eligibility

In order to be “income eligible” for SSI, the applicant must have net countable income of less than the monthly SSI benefit.

Because most children do not have a separate source of income, the child’s eligibility is usually based on the income of the parent(s). A portion of the parent(s) income is “deemed” available to the child. In addition, any income that the child receives directly will be counted in determining eligibility (unless the income is specifically excluded from the eligibility determination).

Income is defined as anything received in-cash or in-kind in a calendar month that can be used to meet food, shelter or clothing needs. However, not all income is counted and certain deductions apply.

Excluded Income

Certain income is excluded from the eligibility determination. These exclusions generally apply whether the child or the parent(s) receive the money. The following are some of the most common income exclusions:

- Income excluded by federal laws;
- Any public income maintenance payments such as Work First (or income used to determine the amount of payment) will be excluded when determining countable income of an ineligible spouse or parent subject to deeming rules;
- Earnings of a blind or disabled child who is a student in a school, college or university, or in a vocational or technical training program (if the school or agency states the course includes some formalized instruction). The earnings exclusion is limited to \$400/month or no more than \$1,620 per year;
- SSI payments made to eligible parents;
- Any portion of a grant, scholarship or fellowship used to pay tuition or fees;
- Foster care payments for a SSI-ineligible child;
- The value of Food Stamps or surplus commodities;
- Home products used by the household, i.e., agricultural products grown and consumed by the household;
- Home energy assistance payments;
- Tax refunds on income, real property or food purchased by the family;
- Income used to fulfill an approved plan for achieving self-support;
- Court-ordered support paid for children in another family;
- The value of in-kind support and maintenance (excluded when determining countable income of an ineligible spouse or parent subject to deeming rules);
- Disaster assistance;
- Irregular or infrequent income (no more than \$10 per month of earned income or \$20 per month of unearned income);
- Work expenses if the parent is blind;
- Income that a governmental program paid to provide an eligible child with

- chore, attendant or homemaker services;
- Certain support and maintenance assistance that the parent receives;
- Payments related to subsidized housing, such as utility allowances or HUD Section 8 payments;
- Earned Income Tax Credit;
- Victims assistance payments;
- Relocation assistance;
- Impairment related work expenses (if the parent receives disability payments);
- Interest earned on excluded burial funds;
- Cash received from the sale of a resource (this is considered a resource);
- The proceeds of a loan;
- The value of social services furnished by any government or private agency;
- Amounts paid by a third party for bills owed by the recipient or parent, unless the bill is for food, clothing or shelter;
- Rebates or refunds; and
- VA payments that a parent receives that are directly based on need.

Countable Income

Most of a parent(s) income will be counted in determining the child's eligibility for SSI. Countable income includes earned income from a job or self-employment, unearned income such as public or private retirement or disability checks, and in-kind income. In-kind is non-cash support given by someone who has no obligation to support the parent or recipient.

Earned income include:

- Gross wages, tips, commissions, etc., prior to any deductions;
- Net earnings from self employment (gross income minus operating expenses);
- Wages from work in a sheltered workshop; and
- In-kind payments in lieu of wages.

Unearned income includes:

- Social Security benefits, Veterans benefits or any other type of public or private pension;
- Annuities, payments from insurance companies that individuals receive based on policies for which they paid;
- Worker's Compensation;
- Unemployment Insurance;
- Railroad Retirement benefits;
- Proceeds from a life insurance policy payable as a result of another's death, or other death benefit, minus the expenses of the deceased's last illness and burial expenses if paid by the recipient;
- Gifts, inheritances, prizes or awards;
- Child support (a child receiving SSI is entitled to have one-third of any payment received for his or her support from an absent parent excluded);
- Alimony or spousal support, received in-kind or in cash;

- Rental income, minus operational expenses; and
- Dividends, interest or royalties.

Deemed Income

The Social Security Administration will count a portion of the parent(s) income (and resources) in determining the child's eligibility for SSI and the amount of benefits to be awarded. (This deeming rule only applies to children under age 18, or students under age 22 who are regularly attending school or college or training that is designed to prepare them for a paying job and who are neither married or the head of a household.) Only the income of a natural or adoptive parent and his or her spouse who live in the same household with the child will be considered.

Not all of a family's income is deemed available to the disabled child. Some types of income and resources are totally excluded from consideration, such as the value of food stamps, home energy assistance payments and federal student loans (see excluded income above). Also, the deeming rules permit some income to be allocated (set aside) to meet the food, clothing and shelter needs of other children in the household.

To determine the amount of the parent(s) income that is considered available to the child, the Social Security Administration will first determine the parent(s) earned and unearned income. Then, it will subtract the following from the parent(s) countable income.

- An allocation for each ineligible child, unless the child is receiving public assistance payment (in which case, there is no allocation). The 1999 allocation for each ineligible child is \$251. The amount of each ineligible child's allocation is reduced by any income the child receives.
- An allocation for the ineligible parent(s). Parent(s) can deduct the following amounts from their earned and unearned income before deeming the rest as available to the child.
 - \$20 from unearned cash income or from earned income if there is less than \$20 in unearned income;
 - \$65 plus one-half the remainder of the earned income; and
 - An amount equal to the federal benefit rate for a couple (if both parents live in the home) or an individual (if only one parent lives in the home). The 1999 federal benefit rate is \$751/month for a couple, and \$500/month for an individual.

After deducting exclusions and allocations, SSA calculates the parents' countable income and resources. Anything above the allowable limit is deemed available to the child and thus is counted as the child's income. If there is more than one eligible child in the house, the parent(s) income will be divided among all the eligible children. Parental income and resources that are deemed to the child are added to any income and resources that the child may have of his or her own to determine the child's financial eligibility.

Adding the Deemed Income to the Child's Direct Income

The parent's income will be added to any independent income that the child receives to determine the child's income eligibility for SSI. Children are also entitled to certain deductions from income. Social Security will deduct the following amounts from the child's independent income:

- \$20 from unearned cash income or from earned income if there is less than \$20 in unearned income;
- Up to \$400 per month, but not more than \$1,620 in a calendar year from the earnings of a blind or disabled student child (under age 22);
- \$65 plus one-half the remainder of the earned income; and
- The cost of any work expenses for a blind recipient.

Example: Henry, a disabled child, lives with his mother and father and a 12-year-old ineligible brother. His mother receives a pension (unearned income) of \$365 per month and his father earns \$1,465 per month. Henry and his brother have no income. First, SSA will deduct an allocation of \$251 for Henry's brother from the unearned income. This leaves \$114 in unearned income. SSA reduces the remaining unearned income further by the \$20 general income exclusion, leaving \$94. SSA will reduce the earned income of \$1,465 by \$65 leaving \$1,400, and will then subtract one-half the remainder, leaving \$700. To this, SSA will add the remaining unearned income of \$94, resulting in \$794. From this, SSA will subtract the parent allocation of \$751 (the federal benefit rate for a couple), leaving \$43 to be deemed as Henry's unearned income. Henry has no other income. SSA will apply Henry's \$20 general income exclusion which will reduce his countable income to \$23. Since that amount is less than the \$500 federal benefit rate for an individual, Henry is eligible. Henry will receive \$477 in SSI payments.

Some children will have their benefits reduced by up to one-third of the federal benefit rate if they are living with their parents and another person who provides food and shelter, or when a non-household member buys food, clothing or shelter for the household. This reduction will not apply in certain instances, such as when everyone in the household is a recipient of public assistance, or the parents pay the family's pro rata share of food and shelter expenses. If the full one-third reduction applies, then the child will have their benefit reduced by \$166.66 per month. Children can have a smaller benefit reduction, for example, if the parent makes a partial contribution for the child's share of food and shelter expenses.

There are also special deeming rules that apply to the income of an immigrant's sponsor, if the child is an eligible immigrant. Contact the nearest Social Security office for more information if the child is an eligible immigrant.

Resource Eligibility

In addition to meeting the income test for SSI, a potential recipient must also meet a resource test. Resources are defined as personal or real property that an individual, spouse or parent:

- Owns; and
- Has the right, authority or power to convert to cash (if it is not already cash); and
- Is not legally restricted from using for his/her support and maintenance.

A SSI recipient may not own more resources than the limit. The maximum allowable resource limit for a one-parent household is \$2,000; for a two-parent household, the maximum limit is \$3,000. The values of any non-excluded resources that exceed this amount are deemed to be available to the child seeking SSI benefits. A child is eligible for SSI if the child's own resources, including any of the parent's resources deemed to be available (thus any amount over \$2,000 or \$3,000 depending on whether the child lives with one or two parents) is less than \$2,000.

Valuation of Resources

Resources are evaluated as of the first moment of the first day of the month. *If the person is under the limit on the first moment of the month, he or she will be eligible for the entire month. Likewise, if the individual is over the limit on the first moment of the month, he or she is ineligible for the entire month.*

Resources are considered to be worth their equity value, which means the price the item can reasonably be sold for on the open market, minus encumbrances (i.e., loan balances, taxes due). The Social Security office may assign a value to a resource based on the tax value, but that value can be rebutted with evidence of current market value and/or some kind of encumbrance against the property.

The Social Security Administration allows families with excess resources to dispose of their excess resources so that a child may become eligible. Proceeds from the sale must be used to repay benefits paid by the Social Security Administration; the remaining proceeds are considered liquid assets (and will be counted in the resource determination).

Excluded Resources

Not all of a person's resources are counted for SSI purposes. The following are the main types of resources that are not counted.

- The home where the individual resides, together with all the land it sits on and related buildings;
- Funds obtained from the sale of a home, if used within three months to buy another home;
- Household goods and personal items, up to a limit of \$2,000 in resale value;
- One wedding ring and one engagement ring per person;
- Medical or rehabilitation equipment;
- Real property co-owned with others if the sale of the property would cause a loss of housing to a co-owner;
- Real property that an individual has made a reasonable effort to sell during a nine-month period of conditional benefits, so long as the property remains on the market;
- Certain Indian lands;

- Any automobile necessary for employment, necessary to obtain medical care, modified for transportation of a person with disabilities, or necessary for the performance of essential daily activities. If no automobile is excluded under those circumstances, then one automobile is excluded up to a market value (regardless of encumbrances) of \$4,500;
- The cash surrender value of life insurance policies, if the total face value of all policies does not exceed \$1,500;
- \$1,500 each, for the recipient (and spouse, if an adult), in separately identifiable burial funds, which can include cash, revocable burial contracts or trusts, bank accounts, or other financial instruments;
- One burial space (or agreement which represents the purchase of a burial space) for the recipient and each member of the immediate family;
- Up to \$6,000 of an individual's equity in business or trade property which is necessary to self-employment. This exclusion applies to both real property (such as land on which the business sits) and personal property, including tools, equipment, supplies, motor vehicles, etc.;
- Other income producing property with an equity value of not more than \$6,000 and a rate of return of at least six percent per year;
- Resources set aside by a blind or disabled individual necessary to participate in a Plan for Achieving Self-Support (PASS);
- Awards of retroactive SSI or Social Security benefits, for a period of six months following receipt;
- Federal disaster assistance; and
- Cash or other resources received for the repair or replacement of lost, stolen, or damaged excluded resources, for a period of nine months after receipt.

Countable Resources

Any other property owned by the child or parent, or sponsor of an alien is counted toward the limit. The following are the most common types of countable resources:

- Real property not used as the home,
- Cash or bank accounts,
- Stocks, bonds, mutual funds, or other investments,
- Promissory notes, loans and property agreements,
- Cash value of life insurance when the face value exceeds \$1,500,
- Cash received from the sale of a resource, and
- Vehicles not otherwise excluded.

Jointly owned financial resources are counted if it can be converted to cash without the consent of the other joint owner. However, jointly-owned resources are not counted if they cannot be converted to cash without the consent of the co-owners.

There is no penalty for transferring resources to become eligible for SSI, but before an individual gives away anything, he or she should be thoroughly familiar with how the transfer could affect other benefits, such as Medicaid or Food Stamps.

NUMBERS SERVED

There were 28,893 blind and disabled children receiving SSI in North Carolina at the end of 1997.

**PRIORITIZATION
SYSTEM**

Because SSI is an entitlement program, all eligible children who apply will receive assistance.

APPEAL RIGHTS

Decisions by the Social Security Administration regarding eligibility, payment, overpayment, and most other issues affecting SSI may be appealed. SSA provides written notification of its decision and spells out the individual's right to appeal. There are several levels in the appeals process: reconsideration, hearing, Appeals Council review, and judicial review.

An individual may be represented during the appeals process by a representative. Representatives do not need to be lawyers in the first three appeal stages, but should be specialists in SSI representation. Only a lawyer can represent the individual if the case is appealed to federal court. Because of the complexity of the system, it is often advisable to obtain the services of a representative before the case is scheduled for a hearing.

Reconsideration

An applicant has 60 days from the receipt of a notice of the Social Security Administration decision to file a request for reconsideration. The request must be in writing, but often a claims representative will accept a request by telephone and confirm the request with a written form. Recipients who have their SSI benefits terminated, reduced or suspended can also file an appeal; and in certain situations, the benefits can be continued pending the appeal. To have the benefits continued, the recipient must file an appeal within 10 days of the receipt of the notice of adverse action, and the recipient must specifically request that the benefits be continued. Any payments that the child receives while on appeal will be considered overpayments if the child ultimately loses his or her appeal. However, people who can show that they appealed the termination or reduction of SSI benefits "in good faith" do not have to repay the benefits.

Reconsideration means that Social Security Administration will review the case and make a new decision. The appealing party can choose a case review (one worker reviews the file and considers new evidence), or an informal conference (appealing party can present testimony of witnesses and SSA provides an informal summary). In the appeal of a termination, suspension or reduction of benefits, the appealing party has the additional option of requesting a formal conference (including witnesses, cross-examination, and subpoenas).

The Social Security Administration has no binding time limits for issuing a decision on reconsideration.

Hearing

If the individual disagrees with the decision after Reconsideration, he or she has 60 days from the receipt of the notice of decision to request a hearing before an Administrative Law Judge (ALJ). All benefits will continue pending the hearing if the issue is the cessation of disability and the request is filed within 10 days of the notice.

The hearing is run by the ALJ who both represents the Social Security Administration and decides the case. The appealing party or his or her legal representatives may

review and copy the documents in the SSA file ahead of time (without charge). New evidence can be submitted at the hearing, and sometimes, at the discretion of the judge, the record can be held open for submission of documents after the hearing. The ALJ may question witnesses and listen to oral argument. The hearing is recorded, and, together with the documents in the file, is the official record of the case if it is appealed further.

The ALJ will issue a written decision after the hearing and mail it to the appealing party and his or her representative. There are no binding time limits within which the ALJ must decide the case, and it often takes several months.

Appeals Council Review

If the hearing decision is unfavorable, the individual has 60 days to request review by the Appeals Council. Sometimes the Appeals Council reviews the ALJ's decision without a request. There is only one Appeals Council for the entire country. The review at this stage is done based on the record and written legal arguments; there is almost never an oral presentation.

The Appeals Council will issue a written decision and mail it to the parties involved. There are no binding time limits within which the Appeals Council must make a decision, and it often takes several months.

Judicial Review

If the Appeals Council decision is unfavorable, the individual may file an appeal in Federal District Court within 60 days of the notice of the Appeals Council decision. The case will be reviewed by a judge or federal magistrate based on the evidence already submitted during the agency appeal process. The court's duty is to determine if the law was properly applied and if the Social Security Administration decision was based on "substantial evidence" in the record.

FINANCING The program is financed solely by the federal government.

ADMINISTRATION The program is administered on the national level by the Social Security Administration within the US Department of Health and Human Services. Disability determinations are made by the Disability Determination Section, within the NC Department of Health and Human Services.

SOURCES OF LAW Federal statute: 42 USC 1381 et. seq.
PL 104-193 Sec. 211(b)(1996 Personal Responsibility and Work Opportunity Act) which changed the definition of disability for children
Federal regulations: 20 CFR 416 et. seq.
20 CFR 416.911 et. seq. (new regulations dealing with Children's disabilities)

Federal policy: Social Security Program
Operations Manual System (POMS)

**FOR MORE
INFORMATION**

Social Security Administration
US Department of Health and Human Services
300 N. Greene St.
Baltimore, MD 21201

Technical information is available by calling the Social Security Administration at: 1-800-772-1213 from 8:00 am to 8:00 pm

The ARC has useful information on the child's disability process:
<http://thearc.org/faqs/SSIQA.html>

Subsidized Child Day Care Program

OVERVIEW

What is it?

A program that provides subsidies to help with the cost of day care for low income and other needy families.

Who is it for?

Day care subsidies are available to certain families on the basis of financial need, and other families on the basis of a family crisis or the developmental needs of the child.

Where are applications taken?

A parent, foster parent, or other adult responsible for the care of a child may apply for day care subsidies at the local Department of Social Services. In some counties, other agencies, such as the Smart Start or Child Care Resource and Referral offices, may also take applications.

INTRODUCTION

The Subsidized Child Day Care Program provides subsidized child day care to certain low income and other needy families. Parents may choose the type of provider which best fits their circumstances. The amount the state pays for each child depends on the family's situation, the family's income, the cost of the care provided, and the type of public funds from which the payment is made.

BENEFITS/ SERVICES

Eligible families receive a child day care voucher. The county DSS or local purchasing agent issues the voucher, which indicates the hours that care is needed, and whether the family is responsible for a portion of the fee. The family may use the voucher to select the provider of his/her choice. Families may change child care providers, although local purchasing agencies may limit the number of times a family may do so.

Eligible providers include licensed centers, licensed homes, church operated programs, and informal arrangements such as care by a relative and care in the child's home. To receive public funds, a provider must sign the Child Day Care Voucher and the Provider Agreement and also meet certain health and safety requirements.

A parent may not get their first choice of providers if no space is available, the provider is not operating legally, or the provider does not agree to the terms of the provider agreement or to the subsidized payment rates or policies. In these cases, the parent will be given a choice of other child care options.

APPLICATIONS

A parent, foster parent, or adult responsible for the care of a child may apply for day care subsidies at the local Departments of Social Services. In some counties, a family can apply at a Smart Start or Child Care Resource and Referral Office or other designated local purchasing agency. In addition, applications for day care subsidies can be made at one of the following six state-level contract agencies:

- Blue Ridge Community Action Council, Burke and Caldwell counties
- Buncombe County Child Development, Buncombe county
- Northwest Child Development Council, Davie, Forsyth, Stokes and Yadkin counties
- Region D Council of Government, Avery, Mitchell and Yancey counties
- Southwestern Child Development Commission, Cherokee, Clay, Graham, Haywood, Jackson, Macon and Swain counties
- United Cerebral Palsy of North Carolina, Cumberland, Mecklenburg, Lee, New Hanover, Pitt and Wake counties and children in other counties who live within commuting distance of any of the centers

Families can file an application on the day that they seek assistance. If the county lacks funding to serve additional families, the county must maintain a waiting list that keeps track of the number of children waiting to receive services.

The local agency has 30 calendar days from the date of application to make an eligibility determination. The approval for day care is valid for 12 months, provided the client remains eligible. In certain instances, shorter eligibility periods may be established (for example, to pay for child care during the summer). Families must report any changes that may affect eligibility for day care services to the local purchasing agency within 5 days of the change.

ELIGIBILITY REQUIREMENTS

General Eligibility Requirements

To qualify for assistance, the child must be between the ages of birth and 17. However, subsidies are generally limited to children under age 13 unless the teenager has a special need, is under court-ordered supervision, is receiving child protective or foster care services, or has a developmental need. The person applying for services must be a NC resident; however, there is no requirement on the duration of residency. The residency requirements may not apply in certain cases (such as when child care is needed as part of a treatment plan for child protective services). Families must also meet need and income eligibility requirements (see below).

Need

Subsidized child care can be provided to children who need day care for one or more of the following reasons:

- *The child's parents are working, or attempting to find work.* To receive day care services under this need category, the parent/responsible adult must be employed full or part-time, or be working in an approved activity through the Work First Program or other approved employment program. In addi-

tion, subsidies may be provided when a parent is looking for work, but this is generally limited to situations when the parent was already receiving day care subsidies, or the adult is enrolled in a job search activity as part of an approved employment/training plan.

- *The child's parents are in school or in a job training program.* Day care subsidies are available to enable parents/responsible adults to continue elementary or high school education, basic education or a high school equivalent in a community college or technical institute, Work First Employment Services training-related activities (which may include English proficiency classes, work experience or job readiness), or postsecondary education or skills training (up to a maximum of two years enrollment).
- *The child is receiving child protective services.* To receive day care services under this need category, the child must be receiving child protective services and must need day care in order to remain in his or her own home. The day care worker must have a written referral from the child protective services worker that justifies day care as a necessary part of the treatment plan.
- *The child needs day care to support child welfare services or because the family is experiencing a crisis.* Child day care subsidies may be provided to prevent foster care placement, to reunify families or achieve other permanent placements, or to aid families in crisis (such as when needed to prevent child neglect or abuse, or if a parent is too sick to care for the child and day care services are needed until the parent has recovered).
- *The child is developmentally delayed, or is at risk of being developmentally delayed.* Day care subsidies may also be provided to an eligible child whose social, emotional, physical or cognitive development is delayed, or at risk of delay. The type of developmental delay or risk of delay must be documented in the case record. Social workers may use information from his/her own observations, departmental records, or from other agencies and individuals to determine need.

Income Eligibility

Child day care services are available without regard to income when services are needed to support child protective services (up to a maximum of 12 months); when children meet the eligibility criteria for child welfare services; or for children receiving foster care services who are in the custody of the county Department of Social Services and have been placed with an adult other than their parent.

All other families must meet certain gross income tests. Effective June 1, 1999, the maximum income eligibility limits are as follows:

| Family Size | Maximum Gross Monthly Income |
|--------------------|-------------------------------------|
| 1 | \$1,683 |
| 2 | 2,201 |
| 3 | 2,719 |
| 4 | 3,237 |
| 5 | 3,755 |
| 6 | 4,273 |
| 7 | 4,370 |
| 8 | 4,467 |

There are special rules to determine the number of members in the family and whose income is counted in determining eligibility. In general, the family unit includes the parent(s) and any minor children. Family income includes the income of all the household members who are responsible for the financial support of the child in need of day care services.

Most types of income are counted in determining family income including, but not limited to: earned income, social security benefits, dividends or interest, pensions, workers compensation or unemployment compensation, and child support. However, certain other sources of income are not counted in determining income eligibility, including but not limited to: Work First Family Assistance, SSI, foster care or adoption assistance payments, gifts or contributions, lump sum payments, earnings of a dependent child under age 18, loans or grants, and earned income tax credits.

Income must be verified by copying a source document, such as a paycheck stub, or W-2. Alternatively, the social worker may provide a written statement describing the source document that was reviewed or verified through telephone conversation; or the information can be verified in another existing agency record.

Resource Eligibility

The Child Day Care Subsidy program does not have resource eligibility requirements.

Fees

In general, only the families that have income eligibility requirements are responsible for paying fees. That means that families who need day care to support a child protective services plan or child welfare services or those receiving foster care need not pay fees. In addition, no fees are assessed for children with no countable income (for example, children who reside with grandparents who have no legal financial responsibility), or for families with low incomes that would be responsible for fees of less than \$5.00 per month.

For other families, there is a fee for subsidized child day care. The fee is based on the family size, gross income and hours in care, and is the same regardless of the number

of children in care. To determine a family's fee, the social worker must multiply the family's gross monthly countable income by the following percentages:

| Family Size | Percentage of Gross Monthly Countable Income |
|--------------------|---|
| 1-3 | 9% |
| 4-5 | 8% |
| 6 or more | 7% |

The fees are adjusted for families that have children in day care less than full-time. Children in care less than 3 hours per day only pay 50% of the fee; children in care between 3 and 6 hours pay 75% of the fee. When there are multiple children receiving subsidized day care services, the local purchasing agency will establish the fees based on the child who is in day care for the greatest number of hours/week. The family's fee may be assessed to the youngest child or divided equally among all children in care. The family fee is reassessed when the child care plan substantially changes, when the family size changes, and/or the family's income changes by \$100 or more.

The provider has the responsibility to collect the fee from the parent, and may terminate the day care arrangement if the parent does not pay the fee. If the parent does not pay the required fee within the time period specified, she or he loses eligibility for subsidized day care services. All fees must be paid in full before eligibility can be reestablished.

NUMBERS SERVED

Each county receives an annual allocation of state and federal funding from the Division of Child Development for subsidized child day care services. There were 101,271 children under age six served in SFY 98 (185,651 total children under age 18). This includes 25,760 children served through Smart Start funds and 75,511 served by other state and federal funds administered by the Division.

PRIORITIZATION SYSTEM

If the local purchasing agency does not have sufficient funding to serve all families who apply, the agency may set priorities for how the limited funds will be spent. Agencies may prioritize on the basis of the need eligibility category (see Need Section, above), but may not prioritize according to family income. Many agencies give priority to children receiving child protective services.

Once the funds are exhausted, eligible children are placed on a waiting list. As of June 1999, 4,486 children in NC were on the waiting list.

APPEAL RIGHTS

Families have the right to request a local hearing within 60 days of the effective date on the Child Day Care Action Notice if the parent disagrees with the decision about child care assistance. Hearings must be held within 5 days of the request. Families can appeal this local hearing decision to the state, if the family is not satisfied with the local hearing decision. Families also have the right to be represented at the hearing by a relative, friend or attorney. Families can continue to receive child care until a decision is made at the local hearing.

**PAYMENT TO
DAY CARE
PROVIDERS**

State legislation established maximum reimbursement rates for different types of day care providers.

- *Child Care Centers:* Child care centers are paid the market rate or the private pay rate, whichever is lower. Beginning October 1, 1999, day care centers can begin receiving bonus payments based on the quality of care they provide. Centers will receive a rating from 1 to 5 stars, based on the program standards, the staff's educational history, and the center's compliance with licensing regulations. The higher the center's rating, the higher the monthly payment rate.

The state will establish market rates in each community for Star 1 centers. Centers that were enrolled in the subsidized child care program before October 1, 1999 and received a higher rate than the new market rate will continue to receive that higher rate for a maximum of three years.

Centers that have higher star ratings will receive quality bonus payments for each subsidized child per month. The bonus payments are as follows:

| <u>Rated License</u> | <u>Quality Bonus Payments Per Child Per Month</u> |
|----------------------|---|
| 1 Star | Paid market rate, no supplement |
| 2 Stars | Paid market rate plus \$14 |
| 3 Stars | Paid market rate plus \$17 |
| 4 Stars | Paid market rate plus \$20 |
| 5 Stars | Paid market rate plus \$23 |

In addition, centers that serve children birth through age five can also qualify for a Smart Start quality bonus.

- *Family Child Care Homes:* Family Child Care Homes (FCC) homes will receive the county market rate or the rate charged private paying parents, whichever is lower. The state will also help pay transportation costs. Beginning January 1, 2000, the state will begin to pay FCC according to the same quality supplement listed above.
- *Non licensed homes:* Non licensed homes will receive 50% of the county market rate established for registered homes or the rate charged private paying patients, whichever is lower. The state will also help pay transportation costs. Non licensed home providers are not eligible for the quality supplement.
- *Developmental day centers certified by the Division of Mental Health, Developmental Disabilities and Substance Abuse Services:* these centers are exempt from the ratesetting procedures for other child care centers because of the additional costs involved in providing care for children with special needs. The maximum payment rates, including the costs of transportation and registration fees, are determined by the Division of Mental Health, Developmental Disabilities and Substance Abuse Services.

The purchasing agency may pay a supplemental rate above the provider's approved rates for children with special needs who are being mainstreamed into child day care homes (including nonlicensed homes) and facilities that primarily serve children without special needs, if additional costs are incurred.

If the parent chooses a provider that charges more than the maximum rate the local purchasing agency can pay, the parent may choose to pay the difference between the provider's charge and the rate paid (in addition to any required fee). However, *families are never required to pay the difference between the provider's charge and the rate paid*. If the parent refuses to pay the difference and the provider is unwilling to waive the additional costs, the parent will have to choose another provider.

FINANCING

The state uses a combination of federal and state funds to finance day care subsidies.

- *State Day Care Funds*. These funds can be used alone or in combination with one or more federal funds to subsidize the costs of care for any eligible child. Amount: \$60,853,490 (SFY 98)
- *Social Services Block Grant (SSBG)*. These funds can be used to subsidize the costs of child care for any eligible child. Amount: \$8,897,137 (SFY 98)
- *Federal Child Care and Development Fund (CCDF)*. The CCDF has three funding components: mandatory, matching and discretionary. States must spend 70% of the mandatory/matching allocation for children of low-income parents who are working or seeking employment. Discretionary funds may be used for income eligible families who are in school or in job training. This fund combines the Child Care and Development block grant funds with the At-Risk and Family Support Act funds. State match is required for a portion of the funding. Amount: \$174,836,873 (CCDF) (SFY 98)
- *Smart Start Funds*. State legislation requires Smart Start counties to use at least 30% of their direct service dollars to expand child care subsidies. In addition, some counties use funding to serve eligible families on the waiting list, and/or to increase payment rates beyond statutory maximums to providers who meet higher licensing or accreditation standards. Amount: \$25,089,147 as of Nov. 1998. This amount will increase as more Smart Start agencies become operational and put funds into subsidized child care. In addition, additional subsidy funds may be available through other sources in specified counties.

Note: Counties must set aside a portion of the agency's total allocation to meet the needs of children with special needs.

ADMINISTRATION

The Child Day Care subsidy program is administered on the federal level by Child Care Bureau of the US Department of Health and Human Services (DHHS). The program is administered on the state level through the Division of Child Development of the NC Department of Health and Human Services, and locally by county Departments of Social Services or other purchasing agencies.

SOURCES OF LAW The federal statutory and regulatory authority for the Division of Child Development programs are as follows:

Federal statutes: PL 104-193 (Section 418 of the Social Security Act, Child Care & Development Fund)
42 USC 1397, PL 96-242 (Title XX of the Social Security Act, Section 2352, Social Services Block Grant)

Federal regulations: 45 CFR Parts 98, 99 (Child Care & Development Fund)

State statute: NCGS 110-85 et. seq. (Child Day Care Laws)
NCGS 143B-168 et. seq. (Child Day Care Commission)
NCGS 143B-153 (Social Services Commission)
Sec. 11.65-11.68 of SL 1997-443 (Child Care Subsidies and Allocation formula within 1997 Appropriations Act)

State policy: Child Day Care Services Manual

**FOR MORE
INFORMATION**

Division of Child Development
NC Department of Health and Human Services
319 Chapanoke Road, Suite 120
PO Box 29553
Raleigh, NC 27626-0553
919-662-4499
1-800-859-0829 (toll-free)

CARELINE: 1-800-662-7030

Head Start

OVERVIEW

What is it?

Head Start is a free, comprehensive, early childhood program that offers education, meals, social services, medical and dental care, and mental health services for children, and programs for parents.

Who is it for?

Head Start programs serve low-income children who are at least three years old. The program is available until the child reaches compulsory school-age. Certain other children with disabilities may participate. Some programs in the state also accept younger children.

Where are applications taken?

Applications for Head Start are available at local Head Start programs. There are currently Head Start programs in every county except Polk.

INTRODUCTION

Head Start was established by Congress in 1965. It is a comprehensive early childhood education program offering a wide array of services both to low-income children and their families. Parental involvement is of particular importance, because parents are acknowledged as the primary educators of their children. Head Start programs may be classroom-based or home-based. There are also migrant Head Start programs available to serve families who are working in the migrant stream.

BENEFITS/ SERVICES

Head Start provides children the opportunity to participate in an interdisciplinary program designed to foster development and remedy problems. Individual programs are allowed flexibility to design their own curriculum to develop a greater degree of social competence in the children of low-income families.

Most Head Start programs operate six hours a day (from 8:30 am to 2:30 pm), and generally only during the months school is regularly in session. Some programs may operate “wrap-around” plans, allowing them to be open longer hours or during the summer to accommodate working parents.

Each Head Start program should contain the following early childhood development and health services, and family and community partnerships services.

Early Childhood Development and Health Service

- *Education.* A learning environment should be provided, individualized to meet each child’s needs. The educational environment should take into

consideration the ethnic, linguistic, and cultural characteristics of the community. If, for example, a program has a majority of bilingual children, then at least one of the teachers or aids must speak their native language.

- *Health.* Each child should receive a complete physical exam, including immunizations, vision and hearing tests, identification of disabilities, and a dental exam. Follow-up is provided to ensure that the child's identified health needs are being met.
- *Mental Health.* A mental health professional is available in all Head Start programs to provide mental health training to parents and staff, and to make them aware of the need for early attention to the special problems of children.
- *Nutrition.* Free snacks and lunches are provided to children in Head Start programs, making up at least one third of the daily nutritional requirements. In addition, nutrition counseling and education are provided to parents.
- *Additional Services for Children with Disabilities.* Children with disabilities and their families receive the array of services listed above. In addition, Head Start program staff members receive special training to address the needs of children with disabilities, and work closely with community agencies to ensure that the needs of the children are being met.

Family and Community Partnerships

- *Social Services.* Head Start social services staff work with parents to obtain needed assistance in such areas as housing, Food Stamps, Work First, and job training and may also serve as advocates with area agencies serving the low-income community.
- *Family Literacy Services.* Head Start programs offer literacy training to parents, in addition to the other array of other services.
- *Parent Involvement.* Parents are strongly encouraged to participate in the Head Start programs. Parents can serve as volunteers in the classroom, make decisions about the direction of the program through the Head Start policy council, and take advantage of training opportunities in child development, health and social services. Also, parents receive preference for employment if qualified.

In addition, some Head Start programs operate Early Head Start programs for younger children. These programs work with parents and children, helping to prevent developmental deficits and strengthening the family unit by providing the array of services listed above and working to improve parenting skills.

APPLICATIONS

A family interested in participating in Head Start should contact the local program nearest to them about application procedures. Families can contact the Child Care

Resource and Referral Agencies, local Smart Start partnerships or the NC Head Start Collaboration Office within the NC Division of Child Development to find out about the Head Start programs in their community.

**ELIGIBILITY
REQUIREMENTS**

General Eligibility Requirements

Federal law mandates that at least 90% of the children enrolled in Head Start programs come from low income families (incomes that are at or below the federal poverty guidelines). At least 10% of the enrolled children should be children with disabilities. There are no resource requirements, citizenship or immigration restrictions in the program.

Income Eligibility

Most children who participate in the Head Start program must have family incomes that are at or below the federal poverty guidelines. The federal poverty guidelines are revised every year in the spring. The current income guidelines in effect from April 1, 1999 to March 31, 2000 are as follows:

| Family Size | Monthly Income |
|------------------------|-----------------------|
| 1 | \$ 687 |
| 2 | 922 |
| 3 | 1,157 |
| 4 | 1,392 |
| 5 | 1,627 |
| 6 | 1,862 |
| 7 | 2,097 |
| 8 | 2,332 |
| Each additional person | add \$235 |

The Head Start program will verify each family's income to ensure eligibility. Verification may include: individual income tax form (1040), W-2 forms, pay stubs, pay envelopes, written statements from employers, or documentation showing that the family is receiving public assistance (Work First or Food Stamps).

Once a child has been admitted into the program, he or she will remain eligible for that year as well as the following year regardless of changes in family income.

Disability Requirements

Programs must make at least ten percent of their slots available to children with disabilities. Children with disabilities may be served in Head Start programs even if their family income exceeds the federal poverty guidelines. To qualify, a 3-5 year old child must have one of the specified disabilities and must therefore need special education and related services. The specific conditions which meet the Head Start disability definition include: mental retardation, hearing impairment (including deafness, speech or language impairment), visual impairment (including blindness), serious emotional

disturbance, orthopedic impairment, autism, traumatic brain injury, other health impairment, specific learning disability, or multiple disabilities.

Fees

There are no fees for this program.

NUMBERS SERVED

There were 17,168 children served in February 1998. In SYF 1998, North Carolina served 860 children in Early Head Start and 17,283 children in the regular Head Start program. The state estimates that Head Start programs served approximately 60% of all eligibles.

PRIORITIZATION SYSTEM

Each program establishes its own priority system to use in enrolling eligible children when there is a waiting list. Preference is usually given to children from the lowest income families.

APPEAL RIGHTS

There are no specific appeal or grievance mechanisms in this program.

FINANCING

North Carolina received a total of \$98.7 million in Head Start funds in FY 1998. Of this:

| | |
|---------------------|---------------|
| Early Head Start: | \$ 8,220,459 |
| Regular Head Start: | \$ 90,488,232 |
| Total: | \$ 98,708,691 |

ADMINISTRATION

The program is administered on the federal level by the Administration on Children, Youth and Families, Administration for Children and Families, within the US Department of Health and Human Services. The NC Head Start Collaboration Office within the Division of Child Development, NC Department of Health and Human Services, acts as liaison between local Head Start programs and various state agencies.

A priority in the management of the funds is the involvement of parents and community members in the decision making and design of the local program. Each grantee or delegate agency must have an established policy group and a well-functioning governing body. The policy councils are comprised of parents (51%) and community representatives (49%) and are empowered to actively participate in a shared decision making process with the local program.

SOURCES OF LAW

| | |
|----------------------|----------------------|
| Federal statute: | 42 USC 9801 et. seq. |
| Federal regulations: | 45 CFR 1301-06, 1308 |

**FOR MORE
INFORMATION**

NC Head Start Collaboration Office
Division of Child Development
319 Chapanoke Road, Suite 120
PO Box 29553
Raleigh, NC 27626-0553
919-662-4499

Careline: 1-800-662-7030

NC Partnership for Children (Smart Start)

OVERVIEW

What is it?

Smart Start is a program designed to give every young child in North Carolina birth through age five access to high quality, affordable child care, health care and other critical services to ensure that they begin school healthy and ready to succeed.

Who is it for?

All young children, birth through age five, may benefit from some of the programs funded through local Smart Start programs, although some services may be targeted to certain children based on the family's income or the medical or psycho-social needs of the children.

Where are applications taken?

Smart Start agencies fund different services offered to young children by local governmental agencies or non-profit organizations. Typically, the agency that operates the program will take applications for the services offered (if an application is needed). Decisions about which services are provided in a community are made by a local planning board, the Local Partnership for Children.

INTRODUCTION

The Smart Start program began in 1993, as a comprehensive public-private initiative to provide every young child in North Carolina with access to high quality, affordable child care, health care and other critical services. The program targets children birth through age five, to ensure that these young children begin school healthy and ready to succeed. Local Smart Start partnerships have community boards to guide the program, which include parents, educators, child care providers, non-profit agencies, churches, business and government leaders. Each local partnership must conduct a needs assessment to determine the needs of young children in their area and to develop a plan to address those needs. By law, most of the funds must be spent on improving access or quality of child care services available to young children. Smart Start partnerships operate in all 100 counties.

BENEFITS/ SERVICES

Smart Start partnerships have implemented programs in three areas to help prepare children for school: Child Care and Education, Health Care and Education, and Family Support Services. Under state legislation, local Smart Start partnerships must spend 70% of all direct service dollars on child care related activities (in the aggregate across all Smart Start partnerships) of which, at least 30% in each county must be spent to expand child care subsidies. Each area is discussed below:

Child Care and Education

One goal of the local partnerships is to improve the quality and accessibility of child care services. The child care services funded include:

- *Paying child care subsidies*, for example, by increasing the maximum rate paid by the Child Care Subsidy Program (see Chapter 4), raising the eligibility limits for subsidies, or increasing the availability of subsidies to cover more working poor families;
- *Increasing the accessibility of child care services*, for example, by paying for transportation, funding Child Care Resource & Referral organizations, and helping to target child care spaces for children with special needs;
- *Improving the quality of child care*, for example, by assessing the quality of care provided in child care classrooms and providing funds to purchase needed equipment and materials, or by special initiatives to improve the training and pay of child care teachers; and
- *Working to meet the unique requirements of children with special needs in traditional child care settings*, for example, by providing teachers with technical assistance to work effectively with children with disabilities.

Health Care and Education

Another goal of the Smart Start program is to ensure that children are healthy. To accomplish this goal, Smart Start partnerships help fund:

- *Needs assessments* regarding the health of young children and their families;
- *Health consultations* with child care facilities to develop systems to ensure that children have medical homes and receive appropriate preventive care and immunizations, and that children with special needs are linked to early intervention services;
- *Parenting and health education* for families with young children;
- *Home visitation and family support services* (if other funding sources are not available); and
- *Direct care services*, such as vision screenings, developmental screenings, prenatal care, dental care, or immunizations (if other funding sources are not available; these funds are generally in the form of start-up funding until other funding is secured).

Family Support Services

Smart Start partnerships also provide families with information, education, and other services to ensure that the needs of their young children are met. These services include:

- *Child Care Resource & Referral Services* which help families locate available and quality child care;
- *Family Resource Centers* which help increase the availability of services for children and families, typically by offering a variety of services to families in one convenient location;

- *Family Literacy Programs* which help family members learn to read and encourage them to read to their young children; and
- *Transportation* to enable children and families to obtain needed services.

APPLICATIONS

Each Smart Start partnership operates differently, depending on the needs and resources available in the community. Some of the partnerships fund other agencies to deliver programs and services while other partnerships provide many of the services in-house. Typically, the agency that operates the program or provides the services will take applications for the services offered (if an application is needed).

Smart Start partnerships usually have a listing of the programs and services available to meet the needs of young children in their community. For more information about the array of services offered, and where applications are taken, contact the local Smart Start partnership. A complete listing of partnership offices is provided in Appendix A.

ELIGIBILITY REQUIREMENTS

The eligibility requirements for different programs vary. Some services are available on the basis of the family's financial needs, some services are provided based on the medical or psycho-social needs of the child or family, and some services are available to any family with a young child.

NUMBERS SERVED

As of June 1998, Smart Start had an impact on the following services and/or families:

- 38,500 new child care spaces were created;
- 60,000 families received child care subsidies;
- 121,000 children received early intervention or preventive health screenings;
- 130,000 children received child care in programs with quality enhancements;
- and
- 77,000 parents received parenting or health education.

PRIORITIZATION SYSTEM

Priority systems vary depending on the type of services offered and the agency that provides the services.

FINANCING

In SFY 1998-99, the NC Partnership for Children received \$150 million in state appropriations, \$20 million in cash and in-kind donations.

ADMINISTRATION

The program is administered at the state level by the NC Partnership for Children, a statewide nonprofit organization that provides oversight and technical assistance for local partnerships and sets guidelines for Smart Start programs and services. The program is administered at the local level by local Smart Start partnerships, each of which is governed by a board comprised of community, business, religious and governmental leaders, parents, educators and child care providers.

SOURCES OF LAW State law: Sec. 11.55 of SL 1997-443 (Appropriations Act)
NCGS 143B-168.12(a) (NC Partnership)

**FOR MORE
INFORMATION** NC Partnership for Children
1323 Capital Blvd., Suite 102
Raleigh, NC 27603
919-821-7999
<http://www.smartstart-nc.org>

Medicaid

OVERVIEW

What is it?

A governmental health insurance program that pays for medical services for certain low- and moderate-income people.

Who is it for?

To qualify, a child under the age of 21 must meet certain financial eligibility requirements. Adults have an additional requirement to meet—they must either be pregnant, receiving Work First payments, be an older adult (65 or older), blind or disabled.

Where are applications taken?

All local Departments of Social Services (DSS) take Medicaid applications, as do some hospitals, public health departments, community, migrant or rural health centers. Applications for children are also available by mail by calling 1-800-367-2229.

INTRODUCTION

Medicaid is a governmental health insurance program that provides assistance with medical costs to certain low- and moderate-income individuals and families. The federal government sets the broad guidelines for the program. A state is then given considerable latitude to establish eligibility criteria and to determine what services will be covered for the state's Medicaid population.

In North Carolina, a child can qualify for Medicaid under one of six different programs. These programs generally provide the same services. The primary difference between the programs is whether other family members qualify. The programs also have different income and resource guidelines.

This chapter begins with general information about Medicaid. The Medicaid programs for children are then discussed separately. (For more information about Medicaid programs for adults, contact CARELINE, 1-800-662-7030).

- 1) Medicaid for Infants and Children Under Age 19 (MIC)
- 2) Families Receiving Work First Payments or Transitional Benefits
- 3) Families Who Would Have Been Eligible for Aid to Families with Dependent Children (AFDC)
- 4) Disabled or Blind Children
- 5) Medically Needy
- 6) Medicaid for Pregnant Women/Teens (MPW)

General Information About Medicaid

INTRODUCTION The following information applies to all the Medicaid programs under which a child may qualify (unless noted otherwise). Requirements that are unique to a program are outlined separately in the program section.

**BENEFITS/
SERVICES** Medicaid will pay for the following services:

- *Health Check.* (See Chapter 8 for description of NC Health Check program).
- *Physician services.* Also includes other professional medical services, such as podiatrists, osteopaths, chiropractors, and optometrists.
- *Clinic services.* Includes services at community, migrant or rural health centers, county health departments, and other services which are furnished by or under the direction of a physician or dentist.
- *Nurse practitioners.*
- *Inpatient and outpatient hospital care.* Includes specialty hospitals (covers inpatient care of people with pulmonary and chronic diseases).
- *Laboratory and X-ray services.*
- *Prescription drugs and insulin.*
- *Case management services.* Limited to pregnant women, children under age five with special needs (see Child Service Coordination Chapter 13), the mentally ill, chronic substance abusers, and people with HIV.
- *Mental health care.* Individualized treatment plans authorized by a psychiatrist are covered for all Medicaid recipients. Treatment in a state mental hospital is covered only for persons under age 21 (or over age 65).
- *Audiologists, occupational therapists, physical therapists, and respiratory therapists.*
- *Speech and language pathologists.* For children under age 21 only.
- *Durable medical equipment.*
- *Prosthetics and orthotics.* For children under age 21 only.
- *Eyeglasses and related services.*
- *Dental care.*
- *Hearing aids.* For children under age 21 only.
- *Home- and community-based services.* Includes: home health services, private duty nursing (in certain circumstances), and personal care services (such as assistance with dressing, feeding, household tasks, transportation and monitoring self-administered medication).
- *Community alternative programs.* More extensive services are available through the Community Alternative Program (CAP) programs, including case management, home mobility aides, respite care and more extensive personal care services. There are two CAP programs available for some disabled children: CAP-MR/DD (for children with mental retardation or developmental disabilities), or CAP/C for other medically fragile children (See Chapters on CAP/C and CAP-MR/DD programs).
- *Home infusion therapy services.*
- *Nursing home care.* Includes intermediate care facilities for the mentally retarded.
- *Family planning services.*

- *Nurse midwife services.*
- *Medically necessary transportation services and ambulance services.*
Ambulance covered when other means of transportation would endanger the patient's health. Recipients who need help with transportation should notify the Department of Social Services as far in advance as possible, to enable the department to make the necessary arrangements. However, no specific advance notice is mandated.
- *Hospice care.*
- *Prepaid health plan services (HMOs).* In spring 1999, HMO coverage was available in 14 counties (Alamance, Chatham, Davidson, Durham, Forsyth, Gaston, Guilford, Harnett, Mecklenberg, Orange, Person, Rockingham, Stokes, and Wake), although more counties may offer HMO coverage in the future.

Note: Eligible recipients in Mecklenburg County are required to join an HMO or obtain services through the CD Williams Community Health Center, recipients in other counties can choose whether or not to join an HMO.

Adults who receive services may be subject to some limitations in frequency or duration of visits (for example, adults can only receive six prescriptions per month or 24 doctors visits per year unless life-threatening circumstances exist). In addition, some adult Medicaid recipients are required to make a small payment—called a copayment—for some of their health services. The service limitations and copayment requirements do not apply to medical services provided to children under age 21.

APPLICATIONS

An individual or family can apply for Medicaid at the local Department of Social Services offices. Some hospitals, public health departments, and community, rural and migrant health centers also have DSS workers available to take applications. There is a two-page Medicaid application for children who are applying for Medicaid (NC Health Check) or the new NC Health Choice program (see Chapter 9 for more information about the NC Health Choice program). *Families can call 1-800-367-2229, to find the nearest place to get an application, or to receive an application by mail.*

Certain children automatically receive Medicaid, so a separate Medicaid application is not needed: children in families receiving Work First payments, and children who are found eligible for SSI. Other children must file a separate application. Applicants have a right to apply for Medicaid on the same day they seek assistance. DSS must determine eligibility within 45 days of the date of application. However, DSS has 90 days to determine eligibility if the child is applying for Medicaid on the basis of being disabled and is not already receiving SSI.

Applicants can apply for ongoing (“prospective”) Medicaid coverage and/or retroactive coverage. Prospective coverage is available to cover medical bills for the current month and the following five month period. Retroactive coverage is available to cover medical expenses for one, two or three months prior to the date of application. In most program categories, a child who is determined to be eligible for prospective coverage will continue to receive insurance coverage for 12 months.

Recipients who lose eligibility for one program category may still be eligible under another Medicaid program. DSS is supposed to automatically “redetermine” Medicaid eligibility for any individual who becomes ineligible to see if he/she is eligible under another program.

ELIGIBILITY REQUIREMENTS

Personal Eligibility Requirements

To qualify for Medicaid, an applicant must:

- Be a US citizen or eligible immigrant (see below). Undocumented immigrants and other immigrants ineligible for full Medicaid coverage may still receive coverage for emergency care (which includes labor and delivery);
- Be a resident of North Carolina;
- Have a Social Security number, or have applied for one;
- Provide verification of any health insurance coverage;
- Assign to the state the right to payment for health care from any third parties;
- Not be in a public institution. This does not apply to children under age 21 or older adults age 65 or older who are receiving inpatient psychiatric services, or people age 21-65 who are in the medical/surgical unit of a state mental hospital; and
- Not be receiving Medicaid through any other source (for example, in another county or state).

Citizenship/Immigration Status

Citizens are eligible for assistance under the Medicaid program if they meet other programmatic rules. Most immigrants are ineligible for Medicaid, although they can receive Medicaid for emergency medical services. However, legal permanent residents (LPR) are eligible for assistance if admitted on or before August 22, 1996. If the person was admitted after August 22, 1996, he/she is ineligible for five years from the date of entry (unless he/she meets one of the exceptions listed below).

The five year ban on receiving assistance does not apply to certain lawful permanent residents including:

- *Refugees, Asylees, persons granted withholding of deportation, Cuban/Haitian entrants, and Amerasians* can obtain benefits immediately but can only receive assistance for their first five years.
- *Veterans/active duty service members and their spouses and unmarried children under 21* can obtain benefits immediately, and continue to receive these benefits as long as they meet the programmatic rules.
- *Immigrants who are receiving SSI* can continue to receive Medicaid for as long as they continue to receive SSI.

Note: A child who is a US citizen is always eligible for these benefits, regardless of the immigration status of the parents.

Income Eligibility

The income of the person applying for Medicaid will always be counted in determining Medicaid eligibility, but not all income is “countable.” Medicaid does not count certain income, including but not limited to things such as:

- SSI,
- Earned Income Tax Credit payments,
- The earned income of a child who is a full-time or part-time student,
- Income that is unpredictable (such as occasional yard work or baby-sitting),
- Foster care payments,
- \$50 child support or military allotment per month,
- Loans,
- In-kind shelter and utility contributions, and
- HUD Section 8 benefits.

In addition, Medicaid applicants are allowed certain income exemptions, disregards and deductions. Each Medicaid category has slightly different rules about income exemptions. Please see sections on specific Medicaid programs for information unique to that program.

Income must be verified by copying a source document, such as a paycheck stub, or statement from the employer.

Resource Eligibility

Children who receive Medicaid under the Medicaid for Infants and Children program (MIC) category are not subject to a resource or assets test. However, children who are seeking assistance through another program category must meet certain resource limitations. In these instances, an applicant may only have a limited amount of resources to be found eligible for Medicaid.

Note: It is important not to transfer away excess assets in order to qualify for Medicaid. Some people who attempt to qualify for Medicaid by getting rid of excess resources may be disqualified from receiving Medicaid for a certain period of time.

As with income, certain resources are not “countable” in determining Medicaid eligibility. Assets that do not count towards the resource limits include, but are not limited to:

- The person’s homesite (the principal place of residence, including the lot on which it sits, and, in some Medicaid programs, some additional contiguous property);
- Personal effects and household goods;
- One essential motor vehicle (used to retain employment or to get to the doctor at least four times a year, or one that is specially equipped for the disabled);
- Partial interests in real property, such as life estates, remainder interests that cannot be sold, and interests held with others as tenants-in-common;
- Income-producing real property, such as rental property, or land that is rented out for farming (the Medicaid program has special rules to determine if the property is producing enough income to be exempt from the resource consideration).

**NUMBERS
SERVED**

The Medicaid program served 1,197,173 individuals in FY 1998. Medicaid is an entitlement program, so all eligible individuals are served.

APPEAL RIGHTS

Medicaid applicants or recipients have a right to appeal any decision by the county DSS that involves the granting, denying, terminating, or modifying of assistance, or the failure of the county DSS to act within a reasonable time. Generally, the person has 60 days to request a hearing on an adverse decision. The 60-day deadline is calculated from the date the notice of the decision is mailed. If the person is already receiving Medicaid, he or she can request that benefits be continued until the first appeal is completed. Coverage will continue in these instances only if the person requests continued benefits within 10 days of the date of the notice.

All Medicaid appeals, except those involving disability, are first heard by a local DSS official. Individuals who disagree with the decision of the local DSS official can appeal to the decision to the NC Department of Health and Human Services (DHHS). Individuals have 15 days to file the state-level appeal; the 15 days is counted from the date the local official's decision was mailed. These second-level appeals (and cases involving disability determinations) will be heard before a state hearing officer. Individuals who are dissatisfied with the DHHS decision may appeal to Superior Court by filing a petition for judicial review. The petition for judicial review must be filed within 30 days of the time the individual receives the notice of the DHHS decision.

Anyone wishing to file such a petition would be wise to seek the services of an attorney before engaging in such a process. Free legal representation may be available for low-income families. See Chapter 32.

FINANCING

The Medicaid program is financed jointly among the federal, state and local governments. In general, the federal government pays approximately 63% of medical or service costs, the state pays approximately 31%, and counties pay the remaining 6%. The federal match rate is adjusted slightly each federal fiscal year. Administrative costs are split differently, with the federal government paying 50% of most administrative costs, and the state/county paying the remaining 50% (depending on whether the costs are incurred at the state or county level). In SFY 1998, the program spent the following amounts:

| | |
|----------|-----------------|
| Federal: | \$3,048,333,192 |
| State: | \$1,515,711,083 |
| County: | \$267,677,380 |
| Total: | \$4,831,721,654 |

ADMINISTRATION

Medicaid is administered on the federal level by the Health Care Financing Administration (HCFA) of the US Department of Health and Human Services. The program is administered on the state level by the Division of Medical Assistance (DMA) of the NC Department of Health and Human Services, and locally through the county Departments of Social Services (DSS).

SOURCES OF LAW

Federal statute: 42 USC 1396 *et. seq.*
Federal regulations: 42 CFR 430 *et. seq.*
State statutes: NCGS 108A-54 *et. seq.*
State regulations: 10 NCAC Chapters 26 and 50
State Medicaid policy manuals (available at every county DSS)

**FOR MORE
INFORMATION**

Division of Medical Assistance
NC Department of Health and Human Services
1985 Umstead Dr.
PO Box 29529
Raleigh, NC 27626-0529
(919) 733-7160

DHHS also has a toll-free number for Medicaid information and referral. Call CARE-LINE at 1-800-662-7030.

There is a special toll-free number for information about the Medicaid for Pregnant Women program. Call 1-800-FOR-BABY, 1-800-367-2229.

1. Medicaid for Infants and Children Under Age 19 (MIC)

INTRODUCTION Children under 19 may be eligible for Medicaid if they meet certain income requirements. Under this program, only the children—not their parents or caretaker relatives—are eligible for Medicaid coverage. Children need not reside with their parent(s) or with caretaker relatives in order to qualify for this program.

ELIGIBILITY **Income Eligibility**

Income eligibility is determined by the family’s countable income, family size and the child’s age. Certain deductions from gross income are allowed in determining the family’s countable income. These include:

- Any Earned Income Tax Credit (EITC) included in wages;
- Work-related expenses of \$90 per wage earner;
- Child care or adult day care expenses, limited to \$200 for each child under age two and \$175 for others;
- Alimony or child support paid to someone outside the household; and
- Needs of any minor children who are not in the family (up to certain maximums).

If the family’s countable income exceeds the amounts listed below, the child is not eligible for this program (although may still be eligible under another program category). These income guidelines are revised each April. The following are the guidelines in effect from April 1, 1999 to March 31, 2000.

| Family Size | Children < age 1 (at/below 185% FPG) | Children ages 1-5 (at/below 185% FPG) | Children ages 6-18 (at/below 185% FPG) |
|------------------------|--------------------------------------|---------------------------------------|--|
| 1 | \$1,271 | \$ 914 | \$ 687 |
| 2 | 1,706 | 1,226 | 922 |
| 3 | 2,140 | 1,539 | 1,157 |
| 4 | 2,575 | 1,851 | 1,392 |
| 5 | 3,010 | 2,164 | 1,627 |
| 6 | 3,445 | 2,477 | 1,862 |
| 7 | 3,879 | 2,789 | 2,097 |
| 8 | 4,314 | 3,102 | 2,332 |
| Each additional person | add \$435 | add \$313 | add \$236 |

Resource Eligibility

There is no resource limit for children under age 19.

2. Medicaid for Families Receiving Work First Payments or Transitional Medicaid Benefits

Medicaid coverage for families is available automatically for families receiving Work First payments (in “standard” counties, see Work First Chapter 1). In order to qualify, a family with dependent children must also meet strict work, income and resource eligibility criteria. The major advantage to this program category is that both the children and parents or caretaker relatives can receive assistance. Also, no application is required, as the children automatically receive Medicaid when they are also part of a family receiving Work First payments.

Twelve months of transitional Medicaid benefits are available to families who lose Work First cash payments due to the earnings of a parent or a caretaker relative. Beginning October 1, 1999, families will be eligible for 24 months of transitional Medicaid benefits. To qualify, families must have received assistance during at least three of the six months prior to having their cash assistance benefits terminated.

3. Medicaid for Families who would have Qualified under North Carolina’s Former Aid to Families with Dependent Children (AFDC) Program

INTRODUCTION

Medicaid coverage for families with dependent children is also available to families with children under age 21 who have been deprived of the support of one or both parents because of death, absence from the home, physical or mental incapacity, or the unemployment or underemployment of the parent who is the principal wage earner. Families who do not qualify for Work First payments, for example, because the family fails to participate in the work programs, or after the two year time limit expires, may nonetheless still qualify for Medicaid under the old AFDC program requirements. In order to qualify, a family with dependent children must file a separate application and must meet strict income and resource eligibility criteria. The chief advantage of this program category is that both the children and parents or caretaker relatives can receive assistance, in contrast to the program for Children under Age 19 where only the children can receive assistance.

ELIGIBILITY

Personal Eligibility

The general personal eligibility rules set out in the General Information section are applicable both to a child and to caretaker relatives. However, additional personal eligibility rules are also applicable to each:

To be eligible as a caretaker, the person must:

- Be living with and caring for a child under age 19 (including unborn children) who is deprived of the support of at least one parent due to death, absence from the home, incapacity or unemployment;
- Be either the child’s parent or a specified relative (such as a grandparent, aunt, or uncle who is related by blood, marriage or adoption);

- Cooperate with the local Child Support Enforcement Agency in establishing paternity and medical support for all dependent children in the family; and
- Meet financial need requirements.

To be eligible as a child, a person must:

- Be under age 21; and
- Meet financial need requirements.

Income Eligibility

Certain deductions from gross income are allowed in determining a family's countable income. These include:

- Any Earned Income Tax Credit included in wages;
- Work-related expenses of \$90 per wage earner;
- Child care or adult day care expenses, limited to \$200 for each child under age two and \$175 for others;
- Alimony or child support paid to someone outside the household; and
- Needs of any minor children who are not in the family (up to certain maximums).

To be eligible for Medicaid under this program category, the family's countable monthly income may not exceed the following amounts:

| Family Size | Monthly Income Limit |
|--------------------|-----------------------------|
| 1 | \$362 |
| 2 | 472 |
| 3 | 544 |
| 4 | 594 |
| 5 | 648 |
| 6 | 698 |
| 7 | 746 |
| 8 | 772 |

Resource Eligibility

Families cannot have more than \$1,000 in countable resources, regardless of the size of the family. In this program the homesite exclusion is defined as a house and lot in a city or a house and one acre of land in rural areas.

4. Medicaid for Disabled or Blind Children

INTRODUCTION

Medicaid is available automatically to disabled children receiving SSI payments. No application is needed. Medicaid is also available to children who were receiving SSI prior to August 22, 1996, but who later lost benefits because of changes in the eligibility requirements. These children should receive Medicaid benefits automatically, without the

need to fill out a new application. Children who are not receiving SSI, but who meet the SSI disability requirements may also receive Medicaid, but will need to file a separate Medicaid application. Children who are applying on the basis of blindness must also fill out a separate Medicaid application. The application procedures are essentially the same as outlined above in the General Information section; however, DSS has 90 days (instead of the usual 45 days) to make an eligibility determination if the child's disability status is at issue.

ELIGIBILITY

Personal Eligibility

- *Disability:* To qualify as a disabled child, the child must have a severe mental or physical impairment that has lasted or is expected to last a minimum of twelve months, or which is expected to result in death (see SSI Chapter 3).
- *Blindness:* To qualify as a blind child, the child must have corrected visual acuity of 20/200 in the better eye or worse, or tunnel vision.

Income Eligibility

Children with disabilities will automatically receive Medicaid if they receive SSI. A child who does not receive SSI, but who meets the SSI disability standard, may still qualify for Medicaid. These children are eligible if their family income is equal to or less than 100% of the federal poverty guidelines.

Note: These children would also be eligible under the Medicaid program for Infants and Children. The MIC program has higher income guidelines for younger children, and has no resource tests. The health care coverage is the same for both programs, so most disabled children who are not receiving SSI would be better off applying under the MIC program.

To be eligible for SSI, a child can have no more than \$500 per month in countable income. The child's income plus certain income deemed from his/her parent(s) is considered in the income calculations. The SSI income limits change January 1st of each year.

As in other program categories, there are certain allowable deductions from gross income. Countable income is determined by subtracting the first \$65 of earned income plus half of the remaining earned income from either the parent's or child's gross income. In addition, each budget unit is allowed a \$20 standard deduction.

To determine the amount of the parent(s) income that is considered available to the child, the Department of Social Services will look at the parent's countable income (after allowable deductions listed above), and then subtract the following:

- An amount equal to the SSI income limits for the parent(s). (The 1999 SSI income limits are \$500 for an individual, and \$751/month for a couple); and
- An amount equal to one-half of the SSI payment level for each ineligible child (i.e., \$250 for each ineligible child).

Any remaining income is "deemed" available to the child.

Resource Eligibility

Disabled children who apply for Medicaid under this program can have countable resources of \$2,000. The child's homesite, plus all contiguous property is excluded from the resource calculation.

5. Medically Needy

INTRODUCTION

North Carolina also provides Medicaid coverage to "medically needy" individuals and families. A child or family who cannot qualify under other program requirements because of excess income may still qualify for Medicaid under the medically needy program. In general, a child or family qualifies as "medically needy" because of large medical expenses. To qualify as medically needy, the child or family must incur and be responsible for paying medical bills equaling the difference between their countable income and the medically needy income limits (see below). This difference is called a deductible or "spend-down."

Children with large medical bills can apply separately for Medicaid for themselves or as a family unit under the medically needy Medicaid program. The size of the spend-down or deductible will be calculated according to the family's income and number of people to be covered.

ELIGIBILITY

Personal Eligibility

To qualify under the medically needy Medicaid program, the child or family must meet the same personal eligibility requirements of the other Medicaid programs. Thus, if a child applies separately, the child must meet the personal eligibility requirements of the Medicaid program for infants and children under age 19, or for disabled children. If the whole family is applying under the medically needy program, then the family must meet the personal eligibility requirements of the Work First or former AFDC program (see preceding sections).

Income Eligibility

Children or families who cannot qualify for other programs because of excess income may still be able to qualify for Medicaid under the medically needy program with a deductible. The child or family's countable income is compared to the medically needy income limits and the difference is the monthly deductible or "spend-down."

| Family Size | Medically Needy Monthly Income Limit |
|-------------|--------------------------------------|
| 1 | \$242 |
| 2 | 317 |
| 3 | 367 |
| 4 | 400 |
| 5 | 433 |
| 6 | 467 |
| 7 | 500 |
| 8 | 525 |

Thus, for example, a family of four with a countable monthly income of \$800 has a \$400 deductible or “spend-down” (\$800 countable income - \$400 medically needy monthly income limit = \$400). If the family wants ongoing Medicaid coverage, the amount of the deductible is calculated on a six-month prospective basis. In the example outline above, the family would have to incur \$2,400 in medical bills (\$400 deductible x 6 months = \$2,400). After the family meets the deductible, Medicaid will pay medical bills for covered services for the remaining of the six-month period.

Alternatively, families can request that the Medicaid coverage be retroactive—that is, that outlined above, the family would have to incur \$2,400 in medical bills (\$400 deductible x 6 months = \$2,400). After a family meets the deductible, Medicaid will pay the medical bills for covered services for the remaining six-month period.

Alternatively, families can request that the Medicaid coverage be retroactive - that is, that Medicaid cover medical bills incurred in the one-, two-, or three-month period prior to applying. The amount of the deductible would be calculated accordingly.

Note: The family need not actually pay the medical bills in order to qualify. They are, however, responsible for paying those medical bills. Medical bills that will be paid by a third party (such as an insurance company) cannot be applied to the deductible. Medical bills that a family incurs to cover the cost of health insurance, medical services or products can be used in meeting a deductible.

Resource Eligibility

For families who qualify under “medically needy” requirements, the following resource limits will usually apply:

| Family Size | Medically Needy Resource Limits |
|------------------------|--|
| 1 | \$1,500 |
| 2 | 2,250 |
| 3 | 2,350 |
| Each additional person | add \$100 (up to a maximum of \$3,050) |

In the medically needy program, the homesite exclusion is defined as a house and lot in a city or a house and one acre of land in rural areas, plus up to \$12,000 worth of contiguous property.

Disabled children who apply for Medicaid under the medically needy program have higher resource limits. A child under the medically needy program for disabled children can have countable resources of \$2,000. The child's homesite plus all contiguous property is excluded from the resource calculation.

6. Medicaid for Pregnant Women (MPW) or "Baby Love"

INTRODUCTION

A pregnant woman/minor whose countable income is not more than 185% of the federal poverty guidelines is eligible for Medicaid for Pregnant Women as soon as her pregnancy is medically verifiable. This program is also known as the "Baby Love" program. For pregnant minors, only the income of the minor (not her parents) will be counted in determining eligibility. There is no resource test in this program. Medicaid coverage will continue throughout the pregnancy and for a certain length of time after the pregnancy ends. In general, pregnant women/minors receive Medicaid coverage until the end of the month which contains the 60th day after the pregnancy ends. Coverage will continue for the full eligibility period, even if her personal finances improve and she no longer meets the income guidelines.

BENEFITS/ SERVICES

Pregnant women who qualify for Medicaid under the Medicaid for Pregnant Women program are eligible for pregnancy-related services only. Treatment of other conditions, such as pregnancy induced diabetes, that might complicate the pregnancy are also covered. Pregnant women may also qualify under the Work First or the former Families with Dependent Children programs. If they qualify under these latter programs, they are eligible for the full range of Medicaid benefits.

APPLICATIONS

Eligibility for Medicaid under this program can be determined "presumptively"—that is, staff at health departments, hospitals, or clinics can "presume" that a woman or minor will be eligible for this coverage based on medical verification of the pregnancy and a verbal declaration by the applicant of her family (or in the case of a minor, her own) income. If it appears that she will be eligible, coverage will begin immediately. Coverage while a woman/minor is "presumptively eligible" is limited to ambulatory prenatal care.

In order to continue coverage, the applicant must file a formal application with the Department of Social Services by the last working day of the month following the "presumptive eligibility" determination. The final determination of eligibility will be made within 45 days of application.

ELIGIBILITY

Personal Eligibility

A woman meets the personal eligibility requirements once her pregnancy is medically verified.

Income Eligibility

Pregnant women/minors must have a family income of not more than 185% of the federal poverty guidelines to qualify for assistance (see above in the Medicaid program for infants and children section). Only the income of the pregnant woman and her spouse, if any, will be counted. In order to encourage pregnant minors (teens or younger children) to obtain necessary prenatal care, the income of a pregnant minor's parents is not counted. However, cash given to the minor by a parent will count as income.

Eligibility is determined based on the number of people in the family. The family includes the pregnant woman, her unborn child(ren), the spouse, and any other children residing with the family. However, if the family qualifies, only the pregnant woman or minor receives coverage.

Families are entitled to certain deductions from gross income. These include:

- Any Earned Income Tax Credit included in wages;
- Work-related expenses of \$90 per wage earner;
- Child care or adult day care expenses, limited to \$200 for each child under age two and \$175 for others;
- Alimony or child support paid to someone outside the household; and
- Needs of any minor children who are not in the family (up to certain maximums).

After subtracting the allowable deductions, the countable income of the family must be no more than 185% of the federal poverty guidelines.

Resource Eligibility

There is no resource test in this program.

NC Health Check

OVERVIEW

What is it?

The NC Health Check program is a statewide Medicaid initiative to improve Medicaid-eligible children's access to preventive health services. Medicaid-eligible children are eligible to receive comprehensive health care check-ups, immunizations, vision, hearing and dental screening services on a regular basis throughout childhood. Any medically necessary diagnostic or treatment services needed to treat the conditions identified during the screenings will also be covered.

Who is it for?

Medicaid-eligible children from birth through age 20.

Where are applications taken?

To receive NC Health Check services, a child must be eligible for Medicaid. Medicaid applications are taken at the county Department of Social Services, as well as some health departments, hospitals and migrant and community health centers. In addition, there are NC Health Check coordinators in 62 counties who can assist families in obtaining needed medical benefits and can help families access other needed community services.

INTRODUCTION

The NC Health Check program, formerly known as the Early and Periodic, Screening, Diagnosis and Treatment program (EPSDT), is a comprehensive health service for Medicaid-eligible children. NC Health Check provides a series of well-child check-ups including: health history, physical examination, nutritional assessment, health education, measurements and blood pressure screenings, developmental screenings (which include mental, emotional and behavioral assessments), and laboratory work-ups for children birth through age 20. The program also helps pay for any diagnostic tests or treatment necessary to ameliorate any problems identified during the preventive screenings. The goal of this program is to ensure that children are linked with a medical provider and that they receive early and periodic screenings to identify potential health problems and to ensure that their health care needs are being met.

BENEFITS/ SERVICES

The NC Health Check program will pay for an array of periodic health screenings as well as most diagnostic, treatment services, or health care equipment needed to address the child's health needs. In addition, the NC Health Check program has certain key programmatic components necessary to ensure that children receive the full array of allowable services.

Medical Services

Medicaid, through the NC Health Check program, will pay for periodic physicals, immunizations, and all the follow-up treatment identified by the provider. Infants are entitled to five well-child visits in the first year, three in the second year, an annual visit for the child's third through sixth years, and one check-up every three years thereafter. The child is also entitled to the full range of Medicaid covered services (see Medicaid, chapter 7). There are no service limitations or cost-sharing imposed on health services for children participating in the NC Health Check program.

Other Key Programmatic Components

- *Provider recruitment efforts.* The NC Health Check program works in collaboration with professional associations to increase the number of primary care providers participating in the Medicaid program.
- *Outreach/Education efforts.* The state helps pay for outreach and education efforts to educate Medicaid recipients about available NC Health Check services and the importance of early and periodic well-child visits. The state operates a toll-free hotline, distributes general community education materials including print materials, public service announcements, and billboards, and sends direct written information to Medicaid eligible families.
- *Toll-free Hotline.* NC Family Health Resource line (1-800-367-2229) provides up-to-date information, referrals and advocacy services. The Hotline provides information in English and Spanish on preconception and pregnancy, breastfeeding, infant care and child health, adolescent health, parenting skills, family planning, nutrition, and substance abuse treatment and referral. The line operates from 9:00 am to 7:00 pm, Monday through Fridays. Services are available for the deaf and hard of hearing at: 1-800-976-1922 (TTY).
- *NC Health Check Coordinators.* The NC Health Check program has created a network of specialty-trained health care staff to assist families in obtaining medical services as well as referrals to other community services. The coordinators assist with outreach efforts, transportation and in scheduling appointments. NC Health Check coordinators will also make phone calls or home visits to work with families who have missed screening appointments or visits for high-risk diagnostic referrals. Most NC Health Check coordinators are housed in local health departments or community and rural health centers. They currently serve 62 counties around the state.
- *NC Health Check Information System.* The state also has an automated information and notification system that collects information on program participation, use of services, and can help notify families of when their children are due to have a screening or referral visit.
- *Coordination with other programs.* NC Health Check coordinators also work closely with other agencies that may provide children with needed

services, such as Early Intervention programs, Head Start, Children's Special Health Services programs, and WIC.

| | |
|---------------------------------|---|
| APPLICATIONS | Families can file their Medicaid applications at the Department of Social Services, as well as some health departments, hospitals and migrant or community health centers or they can obtain a Medicaid application in the mail (See Medicaid chapter 7). Children do not fill out separate applications for NC Health Check services. |
| ELIGIBILITY REQUIREMENTS | To receive NC Health Check Services, children must be under 21 years old and must meet the Medicaid eligibility requirements. NC Health Check services are available to all Medicaid-eligible children, regardless of the program category under which they qualify. |
| NUMBERS SERVED | More than 50% of the eligible children received at least one screening in Calendar Year 1996. |
| APPEAL RIGHTS | See Medicaid chapter. |
| FINANCING | See Medicaid chapter. |
| ADMINISTRATION | The NC Health Check program (EPSDT) is administered on the federal level by the Health Care Financing Administration (HCFA) within the US Department of Health and Human Services. At the state level, the program is administered primarily by the NC Division of Medical Assistance within the NC Department of Health and Human Services. The Department of Social Services is responsible at the local level in determining Medicaid eligibility, and local health departments are primarily involved in NC Health Check coordination activities. |
| SOURCES OF LAW | Federal statute: 42 USC 1396 et. seq. Federal regulations: 42 CFR 430 et. seq. State statutes: NCGS 108A-54 et. seq. State regulations: 10 NCAC Chapters 26 and 50 State Medicaid policy manuals (available at every county DSS) State manual: Billing Guidance for NC Health Check Providers |
| FOR MORE INFORMATION | Division of Medical Assistance NC Department of Health and Human Services 1985 Umstead Dr. PO Box 29529 Raleigh, NC 27626-0529 (919) 857-4022 NC Family Health Resource Line: 1-800-367-2229. Services for the deaf and hard of hearing: 1-800-976-1922 (TTY). |

DHHS has a toll-free number for Medicaid information and referral. Call CARELINE at 1-800-662-7030 (for patient information).

DHHS has a toll-free number for Medicaid information for providers: 1-800-688-6696 (through EDS).

NC Health Choice

OVERVIEW

What is it?

NC Health Choice is a free or reduced cost health insurance program for uninsured children birth through age 18.

Who is it for?

Children who have family incomes that are too high for Medicaid coverage, but equal to or less than 200% of the federal poverty guidelines.

Where are applications taken?

Applications are available through local Departments of Social Services or public health departments. Applications will also be available through many pediatricians offices, day care centers, schools and other non-profit agencies. Families can call 1-800-367-2229 to find the nearest place to get an application, or to receive an application by mail.

INTRODUCTION

Congress created a new child health insurance program as part of the Balanced Budget Act of 1997. The child health insurance program, called NC Health Choice in North Carolina, provides comprehensive health benefits for certain uninsured children under age 19. To qualify, the child must be a resident of North Carolina, uninsured, ineligible for Medicaid, and have a family income that is equal to or less than 200% of the federal poverty guidelines. Children with family incomes in excess of 150% of the federal poverty guidelines have to pay a one-time enrollment fee and copayments for certain health services. There are no resource requirements in this program.

Once a child is determined to be eligible for the program, the child will continue to receive insurance coverage for 12 months, unless the child obtains other health insurance coverage. This program is not an entitlement program, so children may be put on waiting lists if the state exhausts its funding; however the state expects that there is adequate funding to cover all uninsured children who qualify for this program.

BENEFITS/ SERVICES

Covered Benefits

NC Health Choice provides children with comprehensive health insurance that covers most of a child's health care needs. There are some cost-sharing requirements for families with incomes above 150% of the federal poverty guidelines (see below). The insurance covers:

- *Hospital care.* Includes semiprivate room, medically necessary supplies, medications, laboratory tests, radiological services, operating and recovery rooms, and professional care.
- *Outpatient care.* Includes diagnostic services, therapies, laboratory services, x-rays, and outpatient services.
- *Physician and clinic services.* Including office visits.
- *Preventive services.* Covers four well-baby visits for children birth up to age one, three visits for children between one and two years of age, one visit for children between the ages of two and seven, and one visit every three years for children between the ages of seven and 18; immunizations are also covered.
- *Surgical services.* Includes standard surgical procedures, related services, surgeon's fees, and anesthesia (some surgical procedures require precertification).
- *Clinic services.* Includes services provided at health centers, school-based health centers, and other ambulatory health care facilities.
- *Prescription drugs.*
- *Laboratory and radiology services.*
- *Inpatient mental health services.* Requires precertification.
- *Outpatient mental health services.* Covers the first 26 outpatient visits/year (precertification required after 26 outpatient visits).
- *Durable medical equipment and supplies.* Covers certain equipment and supplies, such as wheelchairs, nebulizers or hospital beds which are medically necessary for the treatment of specific illnesses or injuries.
- *Vision.* Includes a routine eye examination once every 12 months, eyeglass lenses or contact lenses once every 12 months, replacement of eyeglass frames once every 24 months, and optical supplies and solutions.
- *Hearing.* Includes auditory diagnostic testing services and hearing aids and accessories (prior approval required for hearing aids and accessories).
- *Home health care.* Limited to patients who are homebound and need care that can only be provided by licensed health care professionals or when a physician certifies that the patient would otherwise be confined to a hospital or skilled nursing facility. Professional health care is covered, care provided by an unlicensed caregiver is not.
- *Nursing care.*
- *Dental care.* Includes oral examinations, teeth cleaning, and scaling twice during a 12-month period, full mouth x-rays once every 60 months (five years), bitewing x-rays of the back teeth once during a 12 month period, and routine fillings.
- *Inpatient substance abuse treatment and outpatient substance abuse treatment.* Coverage subject to the same limitations as mental health coverage.
- *Therapy.* Covers physical therapy, occupational therapy and speech therapy.
- *Case management and care coordination.*
- *Hospice care.*

Children with special needs may receive services beyond these listed if the services are medically necessary.

- *Prenatal care and childbirth* are not covered. Children who become pregnant. are eligible for Medicaid coverage. See Medicaid chapter.

Children with Special Needs

Children with special health needs may be eligible for additional services, including case management. To qualify, the child must have a birth defect, developmental disability, chronic or complex illness that is likely to continue indefinitely, interferes with the child's daily routine, and requires extensive medical intervention or family management. Typically, a child will be evaluated to determine if he or she has a special health care need when a provider recommends services not normally covered by the NC Health Choice benefits package.

Children with special needs may receive the same services provided to Medicaid-eligible children, except that long-term care services are not covered and respite care is limited to emergency respite. In effect, children with special needs may receive additional therapy services, personal care services, or durable medical equipment not fully covered under the core NC Health Choice program. Children are not required to apply separately for additional services.

APPLICATIONS

The state has developed a two-page application that families can use in applying for either the NC Health Choice program or Medicaid. Children will first be evaluated for Medicaid eligibility. If the family's income is too high, then the children will be evaluated to determine eligibility for the NC Health Choice program.

Note: Children who are financially eligible for Medicaid can not obtain NC Health Choice coverage.

Families may apply using mail-in applications found at county Departments of Social Services, health departments, many health care providers, and other human service agencies. In addition, the family may also file an application directly at the Department of Social Services. Assistance is available in filing out the application through local social services offices and at specially designated outstations (such as community, migrant and rural health centers and local health departments).

Applicants will be required to submit income verification (such as pay check, wage stubs or tax returns) and social security numbers for the children. Before children can be enrolled, families with incomes above 150% of the federal poverty guidelines must pay an enrollment fee of \$50 for one child or \$100 for two or more children to the county Department of Social Services (see below).

During the eleventh month of eligibility, the family will be sent a mail-in application form to renew coverage for their children. The enrollment fee must be paid annually for families with incomes in excess of 150% of the federal poverty guidelines.

ELIGIBILITY REQUIREMENTS

General Eligibility Requirements

To be eligible, a child must be a resident of North Carolina, uninsured for a certain length of time, and have a family income within certain specified limits. Immigrants are subject to the same exclusions as in the Medicaid program (see Medicaid chapter). There are no resource eligibility requirements for this program.

Uninsured

NC Health Choice is targeted to uninsured children who meet the eligibility requirements. Due to the limited funding and federal requirements of this program, children with existing private health insurance coverage can not qualify. In addition, to discourage families from dropping private health insurance coverage, children must have been uninsured for two months before they will qualify for NC Health Choice (called a “waiting period”).

The waiting period will be waived if the child lost Medicaid eligibility due to a change in family income, or has lost employer-sponsored health care coverage due to a termination of employment, cessation by the employer of employer-sponsored health coverage, or cessation of the employer’s business.

Income Eligibility

The income eligibility limits vary depending on the number of people in the family’s household and the age of the child. To qualify, the family’s countable monthly income must fall within the ranges listed below. Children in families with incomes below these limits will qualify for Medicaid (see Medicaid chapter).

Note: Families with more than one child should look at the income guidelines for each child separately. Some families may have children who qualify for Medicaid and as well as children who qualify for NC Health Choice.

| Family Size | Age of Child | | | | | |
|------------------|--------------|------------------|----------|------------------|----------|------------------|
| | Under age 1 | | 1-5 | | 5-18 | |
| | Medicaid | NC Health Choice | Medicaid | NC Health Choice | Medicaid | NC Health Choice |
| 1 | \$1271 | \$1272 - \$1374 | \$914 | \$915 - \$1374 | \$687 | \$688 - 1374 |
| 2 | 1706 | 1707 - 1844 | 1226 | 1227 - 1844 | 922 | 923 - 1844 |
| 3 | 2140 | 2141 - 2314 | 1539 | 1540 - 2314 | 1157 | 1158 - 2314 |
| 4 | 2575 | 2576 - 2784 | 1851 | 1852 - 2784 | 1392 | 1393 - 2784 |
| 5 | 3010 | 3011 - 3254 | 2164 | 2165 - 3254 | 1627 | 1628 - 3254 |
| 6 | 3445 | 3446 - 3724 | 2477 | 2478 - 3724 | 1862 | 1863 - 3724 |
| 7 | 3879 | 3880 - 4194 | 2789 | 2790 - 4194 | 2097 | 2098 - 4194 |
| 8 | 4314 | 4315 - 4664 | 3102 | 3103 - 4664 | 2332 | 2333 - 4664 |
| Each add'l child | 435 | 436 - 470 | 313 | 314 - 470 | 235 | 236 - 470 |

Example: A family of four with two children (ages six months and seven) with a countable monthly income of \$2000 would have one child eligible for Medicaid (because the family income for a family of four with a child under the age of one is less than \$2,538), and one child eligible for NC Health Choice. The younger child will maintain Medicaid eligibility for 12 months, and then will qualify for NC Health Choice if the family remains income eligible.

These income guidelines are revised on April 1st of every year. These are the income guidelines in effect through March 31, 2000.

Fees

Families with incomes above 150% of the federal poverty guidelines will be required to pay an annual enrollment fee, plus certain copayments. There are no fees or copayments for families with lower incomes.

Enrollment fee

The enrollment fee is \$50 for one child, or \$100 for two or more children. The enrollment fee must be paid before a child can obtain coverage. There are no monthly premiums in this program.

Copayments

- \$5 for each physician visit, clinic visit, dental or optometry visit. There are no copayments for preventive services such as screenings or immunizations
- \$5 for each outpatient hospital visit
- \$6 for each prescription
- \$20 for unnecessary use of the emergency room

150% of the federal poverty guidelines

Only families with incomes in excess of 150% of the federal poverty guidelines are required to pay an annual enrollment fee or copayments:

| Family Size | 150% of FPG Monthly Limits (1998) |
|------------------------|--|
| 1 | \$1,030 |
| 2 | 1,383 |
| 3 | 1,735 |
| 4 | 2,088 |
| 5 | 2,440 |
| 6 | 2,793 |
| 7 | 3,145 |
| 8 | 3,498 |
| Each additional person | add \$353 |

These guidelines are in effect until March 31, 2000.

PRIORITIZATION SYSTEM

If funds run short, the state will serve children on a first-come, first-serve basis.

APPEAL RIGHTS

There are several different appeals processes, depending on whether the family is appealing an eligibility determination or service denial. Families who are appealing eligibility determinations have the same appeal rights afforded to Medicaid recipients (see Medicaid chapter).

Issues that arise over the coverage of a particular service are handled differently.

- *Denials of regularly covered services.* Children or their families can appeal denials of covered service to the NC State Employees and Teachers Major Comprehensive Medical Plan (State Employees Health Plan). If the family is dissatisfied with the outcome of this initial appeal, they can appeal further to the Board of Trustees of the State Employees Health Plan. Questions about these appeals should be addressed to: 919-733-9623.
- *Denials of services for children with special needs.* Children with special needs who are denied coverage for additional services can appeal to the Children and Youth Section, Division of Women's and Children's Health, NC Department of Health and Human Services. Questions about these appeals should be addressed to: 919-737-3028 .

FINANCING The program is financed by the federal and state governments. The federal government pays approximately 74% of program costs, the state pays approximately 26%.

ADMINISTRATION The program is administered through the NC Division of Medical Assistance. Claims are paid through the North Carolina State Employees and Teachers Comprehensive Major Medical Plan.

SOURCES OF LAW Federal statute: PL 105-33 (Title XXI of the Social Security Act)
State statute: GS 108A-70.18 et. seq.

FOR MORE INFORMATION Division of Medical Assistance
NC Department of Health and Human Services
1985 Umstead Dr.
PO Box 29529
Raleigh, NC 27626-0529
919-857-4262

<http://www.sips.state.nc.us/DHR/DMA/cpcont.htm>

Tollfree hotline: 1-800-367-2229

Services for the deaf and hard of hearing: 1-800-976-1922 (TTY)

Children's Special Health Services

OVERVIEW

What is it?

Children's Special Health Services is a program designed to provide health care for children with special health needs. There are two main components to this program: 1) a network of specialty clinics that provides diagnostic evaluations and treatment; and 2) reimbursement for certain medical services not covered by Medicaid.

Who is it for?

Clinics provide diagnostic services to children regardless of family income and may provide treatment services to children on a sliding fee scale. Reimbursement services are limited to Medicaid-eligible children with certain chronic medical conditions that may affect growth and development.

Where are applications taken?

There are no specific applications for clinic visits, but appointments may be necessary, depending on the individual clinic. There are applications to obtain reimbursement for services. These applications may be completed by staff at local health departments or by physicians rostered by the program. A rostered physician is a doctor who has been certified by the state to participate in the program.

INTRODUCTION

The Children's Special Health Services program provides health care to eligible children under age 21 who have certain chronic medical problems that could keep them from growing and developing normally. The program has two main components: one is a network of specialty clinics that provides diagnostic evaluations and treatment. The other component provides reimbursement for certain medical services not covered by Medicaid for Medicaid-eligible children.

BENEFITS/ SERVICES

Specialty Clinics

The following types of clinics are supported by CSHS:

- Cardiology
- Chronic Pulmonary Disease
- Myelodysplasia
- Neurology
- Neuromuscular
- Orthopedic
- Speech and Hearing

The clinics are held at sites such as health departments, medical centers, developmental evaluation centers, and private physicians' offices. Local health departments and physicians rostered by the program should be able to provide information and a referral for eligible children.

Reimbursement for Certain Medical Services

The program provides funds for certain health care services not covered by Medicaid, including durable medical equipment, over-the-counter drugs, supplies, formula, nursing visits, and limited orthodontic care. A wider array of services, including hospitalizations, surgery, physician care, laboratory tests, orthotics and prosthetics, is funded for adults with cystic fibrosis and children approved for post-adoption coverage. *However, the Children's Special Health Services program does not pay for services until all other payment sources have been exhausted.*

Auxiliary Programs and Services

CSHS offers the programs and services described below:

- The community transition coordinator program has nurses and social workers in major medical centers to identify children with or at risk for chronic illness and/or developmental disabilities in order to ensure the seamless receipt of services upon release from the hospital.
- Children who are deemed eligible for SSI benefits are referred to local care coordination services.
- The child care resource and referral service provides training to child care providers and maintains a hotline to respond to requests concerning child care for children with special needs.
- Local Parent-to-Parent programs receive limited funding as well as technical assistance through a statewide resource and referral center.
- Health care providers are trained in assessment and intervention skills to work with the families of children birth to age three who are at risk for or are diagnosed with developmental delay.
- The assistive technology program assists with the purchase of durable medical equipment.
- The NC Hemophilia Assistance plan pays for a limited amount of care related to coagulation disorders that is not covered by other third party payers.

APPLICATIONS

The specific application process varies from service to service. Typically, a family can apply for reimbursement assistance at a local health department or through a participating "rostered" physician's office. There are no applications required to obtain services through the network of specialty clinics.

ELIGIBILITY REQUIREMENTS

Eligibility for services is based on several factors, including the medical needs of the child and the types of services sought. In general, the child must be under 21 years of age and a state resident. There are no resource restrictions in this program.

CSHS covers children with any of a broad array of conditions, including:

- Birth defects and congenital anomalies,
- Chronic illnesses,
- Physical disabilities, and
- Visual, hearing and speech impairments.

The other eligibility criteria vary, depending on the types of services that the child/adult needs.

- *Specialty Clinics.* Children who are NC residents can receive both diagnostic and treatment services in a specialty clinic. There are no income restrictions for diagnostic or treatment services. However, clinics have the option of providing treatment services at no cost or on the basis of a sliding fee schedule for families with incomes above the federal poverty guidelines.
- *Reimbursement of Services.* In order to qualify for reimbursement of services, children must be eligible for Medicaid (see Chapter 7). Non-Medicaid eligible children approved for special post-adoption coverage by CSHS qualify for reimbursement services if their net income is below the federal poverty guidelines.
- *Auxiliary Programs and Services.* There are no income restrictions for children to participate in the Hemophilia Assistance Plan, the child care resource and referral services, and the community transition coordinator services. Services for adults with cystic fibrosis are based on the federal poverty guidelines. Referral and care coordination are provided to all new SSI recipients less than five years of age, and to recipients ages five through 15 who have conditions covered by the CSHS program.

Children with special needs enrolled in the Infant Toddler program are eligible to have devices purchased with assistive technology funds (see IDEA chapter). To apply for devices purchased with assistive technology funds, the child must be enrolled in early intervention, have the equipment documented in an Individualized Family Service plan, and must be under three years of age. All children with special needs (birth through five) can have access to assistive technology devices that are loaned. These devices are available through a network of seven Early Childhood Assistive Technology Resource Centers located throughout North Carolina.

FEES

Diagnostic and treatment services provided in the specialty clinics are available to all children at or below 100% of the federal poverty level. Clinics may provide treatment services to children above the poverty level at no charge or on the basis of a sliding fee scale (that is based on the family's income).

NUMBER SERVED 9,236 children were served in specialty clinics and 2,507 received reimbursement for the purchase of supplemental care services in SFY 97/98.

APPEAL RIGHTS A parent may appeal a denial of benefits by the CSHS program. In order to appeal, the parent should write and request a "Petition for a Contested Case Hearing" to the following address:

Provider Relations Manager
Purchase of Medical Care Services
PO Box 29602
Raleigh, NC 27626-0602

The parent should explain why he or she believes the benefits should have been covered. This will allow the program to review the denial and determine if any errors were made in processing. The parent will be sent a petition that contains detailed instructions on how to complete the form and where to mail it, in order to obtain a hearing through the Office of Administrative Hearings in the NC Department of Administration.

FINANCING The CSHS program is supported by federal and state funds. In SFY 98, the following funds were spent in North Carolina:

Federal: \$ 3,544,039
State: \$ 16,024,972
Other: \$ 345,859

ADMINISTRATION Children's Special Health Services is administered on the federal level by Maternal and Child Health Bureau, Public Health Services of the US Department of Health and Human Services. The program is administered on the state level by the Women's and Children's Health Section, NC Department of Health and Human Services, and on the local level by county or regional health departments, a variety of private agencies and developmental evaluation centers.

SOURCES OF LAW Federal statute: 42 USC 701, Title V of the Social Security Act
Federal regulations: none
State statute: Appropriations Act
State policy: 10 NCAC 15A, 21F

FOR MORE INFORMATION Women's and Children's Health Section
NC Department of Health and Human Services
PO Box 29597
Raleigh, NC 27626-0597
919-715-3812

Children's Special Health Services Helpline: 1-800-737-3028
CARELINE: 1-800-662-7030

Development Evaluation Centers (DEC)

OVERVIEW

What is it?

Eighteen centers throughout the state with interdisciplinary staffs provide clinical evaluations, treatment, and case management services for children who have known or suspected developmental disabilities.

Who is it for?

Children who have or are suspected to have physical, psychological, neuromotor, socio-emotional, speech, language, hearing or learning problems. Preference is given to children under age five, but some older children are served.

Where are applications taken?

Children birth up to age three can apply to the DEC directly, or to the interagency coordinating councils responsible for the IDEA program (see Chapter 13). Children ages three to five can apply to the DEC directly, or through the public schools.

INTRODUCTION

The Developmental Evaluation Centers Program (DEC) consists of a statewide network of 18 regional centers with teams of professionals with specialties in pediatrics, social work, psychology, speech and language, hearing, physical/occupational therapy, special education, nursing and nutrition. These centers provide evaluations, case management and treatment services to children who have, or are suspected of having a developmental disability.

BENEFITS/ SERVICES

DECs provide the following services:

- Individual evaluations and diagnosis,
- Treatment and client instruction,
- Service coordination,
- Screening, and
- Technical assistance to other providers.

In addition, DECs can evaluate children under age five for eligibility under Individuals with Disabilities Education Act (IDEA).

Location

There are 18 DECs around the state. The following is a listing of the DECs and the counties that they cover:

| DEC | Counties Covered |
|----------------|---|
| Cullowhee | Cherokee, Clay, Graham, Haywood, Jackson, Swain |
| Asheville | Buncombe, Henderson, Madison, Transylvania |
| Boone | Alleghany, Ashe, Avery, Mitchell, Watauga, Wilkes, Yancey |
| Morganton | Alexander, Burke, Catawba, Caldwell, McDowell |
| Shelby | Cleveland, Gaston, Lincoln, Polk, Rutherford |
| Charlotte | Mecklenburg |
| Concord | Cabarrus, Iredell, Rowan, Stanly, Union |
| Wadesboro | Anson, Montgomery, Moore, Richmond, Scotland |
| Winston-Salem | Davidson, Davie, Forsyth, Stokes, Surry, Yadkin |
| Greensboro | Alamance, Caswell, Guilford, Randolph, Rockingham |
| Durham | Durham, Franklin, Granville, Orange, Person, Vance, Warren |
| Raleigh | Chatham, Johnston, Lee, Wake |
| Fayetteville | Bladen, Cumberland, Harnett, Hoke, Robeson, Sampson |
| Rocky Mount | Edgecombe, Halifax, Nash, Wilson, Northhampton |
| Greenville | Beaufort, Bertie, Greene, Hyde, Martin, Pitt, Wayne |
| New Bern | Carteret, Craven, Jones, Lenoir, Onslow, Pamlico |
| Wilmington | Brunswick, Columbus, Duplin, New Hanover, Pender |
| Elizabeth City | Camden, Chowan, Currituck, Dare, Gates, Hertford, Pasquotank, Perquimans, Tyrrell, Washington |

APPLICATIONS

There is a statewide “child find” system to identify children who have or may be at risk of having developmental disabilities. Outreach is conducted through physician offices, health departments and schools. Referrals may be made by physicians, schools, mental health agencies, health departments or other providers.

Birth to Age Three

Children birth up to age three can apply to the DEC’s directly, or to the interagency coordinating councils responsible for the IDEA program. Simple application forms are available and generally processed within 15 days.

Children Three to Five

Applications for older children can be taken at the DEC’s or through the public schools. The review process may take up to 30 days.

ELIGIBILITY REQUIREMENTS

Children who are NC residents and in families with an annual gross income under 100% of the federal poverty guidelines are eligible for free services at the DEC’s. There is no charge for evaluations for children, regardless of family income, who are enrolled in the Infant-Toddler Program (birth through two years of age) and the Preschool Program (three through five years of age). Children from families with higher incomes are eligible for services on a sliding fee scale. No child is denied services due to an inability to pay. There are no verification requirements for this program.

**100% of the Federal
Poverty Guidelines (monthly)**

| | |
|---|--------|
| 1 | \$ 687 |
| 2 | 922 |
| 3 | 1,157 |
| 4 | 1,392 |
| 5 | 1,627 |
| 6 | 1,862 |
| 7 | 2,097 |
| 8 | 2,322 |

Each additional person add \$235

The federal poverty guidelines are revised annually. These monthly income limits are in effect until March 31, 2000.

NUMBERS SERVED

Approximately 16,000 children receive evaluations, and 7,000 children receive special therapies on an annual basis. There are sometimes delays in receiving services, but as a general rule, all children receive services within 60 days of a referral.

APPEAL RIGHTS

There are no specific appeal rights in this program, as all children receive a diagnostic evaluation. However, there are extensive appeal rights in the IDEA program, which may help children obtain additional treatment or services (See Chapter 13).

FINANCING

The program is financed through federal, state and some private health insurance revenues. In SFY 98, the following funds were spent in North Carolina:

| | |
|----------------------------|--------------|
| State: | \$20,381,205 |
| Federal (MCH Block Grant): | \$ 2,589,387 |
| Other: | \$ 7,767,913 |

ADMINISTRATION

The DEC's are administered on the federal level by the Maternal and Child Health Bureau of the Public Health Services, US Department of Health and Human Services (which oversees the Title V block grant program). The program is administered on the state level by the Women's and Children's Health Section in the NC Department of Health and Human Services and at the local level through the 18 regional DEC's.

SOURCES OF LAW

| | |
|----------------------|---|
| Federal statute: | 42 USC 701 (Title V of the Social Security Act) 20 USC 1400 et. seq., PL 105-17 (IDEA) |
| Federal regulations: | 34 CFR Part 303 |
| State statute: | NCGS 122C-11A, 143B-179.5 |
| State regulations: | 10 NCAC 14K Sec. 0800 |

FOR MORE

Women's and Children's Health Section

INFORMATION

NC Department of Health and Human Services
PO Box 29597
Raleigh, NC 27626-0597
919-733-7437

Children's Special Health Services Helpline: 1-800-737-3028

CARELINE: 1-800-662-7030

Child Service Coordination

OVERVIEW

What is it?

Child Service Coordination provides services to families to help access needed preventive, specialized and support services, and assist parents in coordinating care for their families.

Who is it for?

Services are available to certain children from birth to five years old, if the child or family has certain medicaid developmental or social/emotional needs.

Where are applications taken?

The Health Department or area Mental Health, Developmental Disability, and Substance Abuse Services agency (MH/DD/SAS) must obtain a psycho-social certification form to document need.

INTRODUCTION

The Child Service Coordination program works with families with young children who have certain medical, developmental, or social/emotional needs. Families are assigned a care coordinator helps them to identify their strengths and outstanding needs. Special emphasis is placed on helping families obtain preventive, specialty and support services. The goal is for families to recognize what community resources they desire and how to utilize them in a way that best meets their family's unique situation.

BENEFITS/ SERVICES

Local Health Departments and area MH/DD/SAS agencies provide child service coordination. If more than one agency provides care coordination, the family can choose which agency with which to work. Families also are supposed to be given some choice of care coordinators. The role of the child service coordinator varies according to the needs of the family. Some of the activities that may be provided include:

- Providing families information about other programs and services,
- Assisting in the completion of application forms,
- Monitoring children's development,
- Strengthening parent-child interactions,
- Teaching and encouraging family advocacy,
- Fostering family self-sufficiency, and
- Home visits.

An individualized service plan will be developed for each family. Follow-up visits and contacts are required at least quarterly, but may be provided more often if needed.

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| APPLICATIONS | Children may be identified and referred to the Health Departments for child service coordination services by newborn nurseries, physicians, parents or other community agencies. A certification form is required to show medical or psycho-social need. |
| ELIGIBILITY REQUIREMENTS | To be eligible, a child must be less than five years of age, a resident of North Carolina and have certain medical or psycho-social needs. A certification form with 30 medical and psycho-social indicators must be completed by the local Health Department or area MH/DD/SAS program. Children who meet the eligibility requirements for Individuals with Disabilities Education Act (either the Infants and Toddlers or Preschool programs), receive child service coordination services as an entitlement under that law. There are no financial eligibility requirements. <p>Children birth through age two</p> <p>To be eligible, the child must be at risk of developmental delay, chronic illness or social/emotional disorder.</p> <p>Children ages three to five</p> <p>Children are eligible if they have diagnosed conditions or are determined to be at high-risk of having developmental, medical, environmental, or social/emotional disorders.</p> |
| NUMBERS SERVED | The program serves about 50,000 children in North Carolina on an annualized basis. |
| APPEAL RIGHTS | There are no formal appeal rights in this program. However, a family who is dissatisfied with the operation of the program may informally file a grievance through the county Health Department in which the child lives, or the Children and Youth Branch of the Women's and Children's Health Section within the NC Department of Health and Human Services. Children and their families who receive child service coordination as an entitlement under the Individuals with Disabilities Education Act (IDEA) have access to formal grievance procedures. |
| FINANCING | The program receives funds from Medicaid and from the state directly for non-Medicaid eligible children. In SFY 1997/98, the program received the following funds: <p>Medicaid: \$13.4 million from Medicaid receipts State: \$ 4.2 million (for non-Medicaid eligible children)</p> |
| ADMINISTRATION | There are two agencies within the US Department of Health and Human Services involved in administering the program: the Health Care Financing Administration (HCFA), which oversees the Medicaid program, and the Maternal and Health Bureau |

of the Public Health Service. The program is administered on the state level by the Children and Youth Branch, Women's and Children's Health Section within the NC Department of Health and Human Services, and at the local level through county or district Health Departments and area Mental Health, Developmental Disability and Substance Abuse Service agencies.

SOURCES OF LAW Federal law: 20 USC 1400 et. seq., PL 105-17 (IDEA)

FOR MORE INFORMATION Children and Youth Branch
Women's and Children's Health Section
NC Department of Health and Human Services
PO Box 29597
Raleigh, NC 27626-0526
919-733-7437

CARELINE: 1-800-662-7030

Early Intervention Services or Individuals with Disabilities Education Act (IDEA)

OVERVIEW

What is it?

The Early Intervention program consists of two separate programs for young children with special needs. The Infant-Toddler program covers children from birth through age two, and the Preschool program covers children from three to five (or until the child enters kindergarten).

Who is it for?

Children who have or are at risk of having a disability or other special need that may affect their development, health or education, are eligible for special services. There are no financial eligibility requirements, although some services for children under age three have sliding scale fees. Children who are “at risk” of developing a disability are not eligible for services once they reach age three. The Preschool program is only available to children with a diagnosed disability.

Where are applications taken?

Referrals for the Infants-Toddler Program can be made through area mental health centers, Developmental Evaluation Centers (DECs) or health departments. Referrals for the Preschool program is through the local school system. Children must receive an evaluation to determine whether they have a disability that meets the program requirements.

INTRODUCTION

The Early Intervention system was created as a result of the Individuals with Disabilities Education Act (IDEA) originally passed by Congress in 1986. It is based on the belief that providing children with special needs with services early in their lives can help increase a child’s ability to develop and learn, and may reduce or prevent the need for special services later in life. Research has shown that early intervention produces substantial gains in physical, cognitive, language and speech development, as well as self-help skills, reduces family stress, and helps reduce the need for institutionalization or special education programs once the child reaches school age. North Carolina passed early intervention legislation to support and implement IDEA.

BENEFITS/ SERVICES

The array of services varies depending on whether a child is receiving services through the Infant-Toddler program or the Preschool program. A lead agency helps administer each program: area Mental Health, Developmental Disability and Substance Abuse agencies (MH/DD/SAS) are the lead agencies for the Infant-Toddler program, and Local Education Agencies (LEAs) are the lead agencies for the

Preschool program. In addition, each county has a Local Interagency Coordinating Council (LICC), which is an advisory committee that provides input into the operation of the programs. The LICC is comprised of representatives from the DEC, public health department, area mental health program, local schools, parents and other service providers.

A consortia of area mental health, health departments and DEC's (and often, parents) are responsible for determining eligibility for the birth to three services. Consortia are sometimes a subcommittee of the larger LICC.

Infant-Toddler Program (for children birth through age two)

Children participating in the Infant-Toddler program are eligible for the following services:

- *Multi-disciplinary evaluation.* Any child who exhibits certain risk factors may obtain a multi-disciplinary evaluation to determine if the child is eligible to receive early intervention services. The evaluation will focus on the child's cognitive, physical (motor, vision and hearing), speech/language, psychosocial and self-help skills. The multi-disciplinary evaluation also requires a medical examination (which may be part of or separate from the rest of the evaluation). The evaluations are provided at no cost to the family and typically occur through the Developmental Evaluation Centers. Children are entitled to a multi-disciplinary evaluation and the development of an IFSP for eligible children within 45 days of the referral to the Infant-Toddler Program.
- *Service coordination.* Children who are eligible for the program will be assigned a Child Service Coordinator (See Chapter 13). The service coordinator helps the family identify and access needed services, and works with the family in designing the individualized family service plan.
- *Individualized Family Service Plan (IFSP).* Each child is entitled to an individualized treatment plan that identifies the scope of services needed to address the child's developmental needs and those of the family. The child service coordinator will work with the family and other appropriate health professionals in developing this treatment plan. The IFSP should be completed within 45 days of the date that the child is referred to the program. The written IFSP will include an evaluation of the child's strengths and needs, the family's resources and priorities, a list of needed services, who will provide them and how often, when services will begin and end, the name of the Child Service Coordinator, written goals for the child and family, the costs of any programs (if there is a charge), and plans for services when the child reaches age three.
- *Available Services.* An array of services are available to help infants and children in this program, including:
 - Assistive technology devices and services,
 - Audiology services,

- Family training and counseling,
- Health services needed to enable the child to benefit from early intervention services,
- Medical services for diagnosis or evaluation,
- Nursing services,
- Nutrition services,
- Psychological services,
- Respite services,
- Social work services,
- Special instruction (home and center based),
- Therapy services (occupation, physical and speech-language),
- Transportation (to designated early intervention service sites), and
- Vision services.

All services identified in the IFSP must be made available to the family. The child is entitled to receive services within 30 days after the IFSP is developed and agreed to by the family.

- *Fees for Services.* All families are entitled to an initial evaluation, child service coordination, development and modification of the IFSP without charge. However, agencies may charge for other services listed on the IFSP (each agency can set its own fees). The fees must be based on a sliding fee scale, taking into account the family's income, family size, and other special circumstances. Services can not be denied because of a family's inability to pay for them.

Preschool program

The Preschool Program is available to children ages three to five (or when the child enters kindergarten). Preschool children are entitled to free and appropriate special education service in the least restrictive environment through the local school system. Services available for preschool children include the following:

- *Multi-disciplinary evaluations.* Preschool children are entitled to a multi-disciplinary evaluation to determine the child's developmental needs. The evaluation should consist of a variety of assessment tools and strategies needed to gather functional and developmental information that would assist in determining whether the child has a disability, and if so, what services are needed to address the identified needs. Children who were receiving services through the Infant-Toddler program may need to be re-evaluated to determine continued eligibility for services. The evaluations are usually conducted through the Developmental Evaluation Centers, but the schools are responsible for seeing that they are completed in a timely manner. Parents may request an independent educational evaluation at no cost to the parents.
- *Individualized Education Program (IEP).* Each eligible child is entitled to an individualized education plan that is a tailored plan to address that child's need for special education and related services. The IEP must be developed with involvement from the school (special education teacher, regular

teacher and someone who can commit funds, such as the Director or other appropriate personnel), as well as the parent(s), other agencies that may be providing services, individuals who have knowledge or special expertise about the child, and someone involved in or with knowledge of the child's evaluation results. The IEP should be developed within 30 days of when the child is determined to be in need of services. The school must hold meetings at least once a year, or more often if necessary, to review and/or modify each child's IEP.

- *Available services.* Children in the Preschool program may be eligible for some of the following services:

- Assistive technology devices,
- Audiology,
- Counseling services,
- Medical services for diagnosis or evaluation,
- Parent counseling and training,
- Psychological services,
- Recreation,
- School health services,
- Screening and evaluation,
- Social work services in schools,
- Special education services,
- Related services (including occupational, physical and speech therapy),
- Transportation, and
- Vision services.

Each school system must serve all eligible children.

REFERRALS

Infants and toddlers can be referred into early intervention services through area mental health centers, Developmental Evaluation Centers (DECs) or health departments. Referrals for the Preschool program are through the local school system. Children must receive an evaluation to determine whether they have a disability that meets the program requirements.

ELIGIBILITY REQUIREMENTS

General Eligibility Requirements

Children who have certain disabilities are eligible for the services. In addition, infants and toddlers (birth through age two) are eligible if they have a risk of developing a disability. Children must be residents of a county to receive services there (or resident of a school system in the Preschool Program), but there are no citizenship or immigration status restrictions. Early intervention services are available to all children who meet the disability definitions, and are not based on the income or resources of the family. However, there are sliding scale fees for some of the services.

Need

Infant-Toddler Program

To be eligible for services, a young child must have a developmental delay, atypical development, or have a high probability of developing these conditions (“at-risk”).

- *Developmental Delay.* Children who qualify on the basis of developmental delay must be delayed in one or more of the following areas: cognitive development, physical development (including gross and fine motor function, vision and hearing), communication development, social-emotional development, and/or adaptive development. The specific delay must be documented by scores 1.5 standard deviations below the mean of the composite score (total test score) on standardized tests or by a 20% delay on instruments which determine scores in at least one of the above areas of development.
- *Atypical Development.* Children may qualify for the Infant-Toddler program on the basis of significant atypical behavior, socio-emotional, motor or sensory development such as:
 - Diagnosed hyperactivity, attention deficit disorder, autism, severe attachment disorder or other behavioral disorder;
 - Emotional or behavior disorders including delay or abnormality in achieving milestones (in such areas as attachment, parent-child interaction, ability to communicate emotional needs or tolerate frustration), persistent failure to initiate or respond to most social interactions, fearfulness or other distress that does not respond to comforting, indiscriminate sociability, or self-injurious or other aggressive behavior;
 - Substantiated physical or mental conditions known to result in developmental delay or atypical behavior. These conditions are limited to chromosomal anomaly or genetic disorder, metabolic disorder, infectious disease, neurologic disease, congenital malformation, sensory disorder (vision and hearing), and toxic exposure.
- *High Risk Potential.* Infants and toddlers can also qualify for the early intervention program if they have indicators associated with patterns of development which have a high probability of meeting the criteria for developmental delay or atypical development as the child matures. To qualify, the child must meet at least three indicators, based on:
 - parent or familial factors (such as parents with mental illness, mental retardation, substance abuse or difficulty providing basic parenting or meeting the child's basic needs);
 - neonatal conditions (including low birth weight children or children with other prescribed conditions); or
 - post-neonatal conditions (such as suspected visual or hearing impairment, failure on standard developmental or sensory screening tests, or significant parental concerns).

- *High Risk Established.* Infants and toddlers can also qualify if they have a diagnosed physical or mental condition known to result in a developmental delay or atypical development as the child matures.

The consortia make the actual eligibility determinations. Consortia are comprised of representatives from area mental health programs, Developmental Evaluation Centers, and local health departments. Often, family representatives are also members of the consortia.

Preschool Program

To qualify for services in the preschool program, a child must have a permanent or temporary cognitive, communication, social/emotional or adaptive disability which requires special education and related services. Children ages three to five (or until the child enters kindergarten), who have one of the following conditions are eligible for services through the Preschool Program:

- Autism,
- Delayed or atypical development,
- Hearing impaired/Deaf,
- Other health impaired,
- Orthopedically impaired,
- Speech-language impaired,
- Visually impaired/Blind, or
- Traumatic brain-injury.

NUMBERS SERVED

Approximately 8,317 children were served through the Infant-Toddler program in SFY 1997-98, and 11,300 children were served through the Preschool Program.

PRIORITIZATION SYSTEM

All children who meet the eligibility requirements for early intervention services are eligible to be served. Services listed on the IFSP or IEP must be available wherever the child lives. However, the availability of services may be limited in some areas. While all children are eligible for services, sometimes children may have to wait for particular services or travel to obtain needed services. However, no child should be required to wait for more than 30 days for any services. Generally, a service coordinator or the school system is responsible for working with the family to determine what services the child receives.

APPEAL RIGHTS

The appeals process is somewhat different for both the Infant-Toddler program and the Preschool program. Families or others acting on the child's behalf can challenge the initial eligibility decision, or can file a complaint if they are dissatisfied with the results of the multi-disciplinary evaluation, development of the IFSP/IEP, or provision of educational or other services. There are basically three different routes which a family can take to try to resolve problems: informal complaint process, mediation or an administrative hearing.

Infant-Toddler Program

- *Informal Complaint Process.* Families (or others acting on a child's behalf) who are dissatisfied with the operation of the Infant-Toddler program can file a formal written complaint with the North Carolina Infant-Toddler Program Coordinator within the Developmental Disabilities Section, Division of Mental Health, Developmental Disabilities and Substance Abuse Services, NC Department of Health and Human Services.
- *Mediation.* If the parents and the early intervention agency cannot agree on the initial eligibility determination, evaluation, IFSP, or provision of educational or related services, then they can seek mediation. Mediation is a process offered through the lead agency where both sides can talk to a trained, impartial mediator to help resolve the problem. The mediation process is voluntary and can be stopped by either party at any time. The Infant-Toddler program encourages families to try mediation before filing a formal appeal, as mediation is a less formal mechanism that may be able to resolve the problem. Mediation can be requested by notifying the director of the area mental health program.
- *Administrative Hearing.* Families who are still dissatisfied with the outcome of the mediation can request a formal hearing. It is not necessary to first file an informal complaint or go through mediation to seek an Administrative Hearing. Requests for hearings in the Infant-Toddler Program must be made to the director of the Area Mental Health Program, who will appoint a hearing officer from a list approved by the Division of Mental Health, Developmental Disabilities and Substance Abuse Services. The Administrative Hearing is the last stage in the appeals process for the Infant-Toddler program.

The agency has 30 days to investigate and to try to resolve the complaint. This 30-day period begins when the complaint is filed, and ends at the last stage of the appeals process. In other words, the area mental health program has 30 days to try to successfully resolve complaints, regardless of how many steps in the appeals process the family pursues.

Preschool Program

- *Informal Complaint Process.* Families who are dissatisfied with some aspect of the Preschool program can file a written complaint with the Exceptional Children Division of the NC Department of Public Instruction. The agency has 60 days to investigate the complaint and issue its written findings. Either party to the complaint can request that the Secretary of the US Department of Education review the results of the investigation.
- *Mediation.* If the parents and the early intervention agency cannot agree on the initial eligibility determination, evaluation, IEP or provision of educational or related services, then they can seek mediation. Mediation can be requested by notifying the Superintendent of the local public school system.

- *Formal Contested Case Hearings/Judicial Actions.* Parents may also file a formal appeal (called a contested case hearing). This appeal can be made at any time in the process (i.e., the family need not first go through the mediation process). To request a hearing, the parent must file a petition within 60 days of the action that the family is contesting with the Office of Administrative Hearings. For more information about the contested case hearing process, a parent can call the Office of Administrative Hearings at 919-733-2698.

An impartial Administrative Law Judge will hear the Preschool program cases. The decision of the Administrative Law Judge within the Office of Administrative Hearings can be appealed further, first to the Superintendent of Public Schools in North Carolina, and if the family is still dissatisfied, then to NC Superior Court or federal district court. There are specific time limits to file an appeal in each of these forums.

Families seeking to exercise their rights through an administrative or judicial hearing may want the assistance of an attorney. Free legal assistance may be available through the Governor's Advocacy Council for Persons with Disabilities (1-800-821-6922) or from a local Legal Services Office (limited to certain low income families, see Chapter 32).

FINANCING

Infant-Toddler program: FY 1997-98

Federal: \$21.1 million
 State: \$36.2 million
 Local: \$ 4.2 million

Preschool program:

Federal: \$11 million
 State: \$23 million (some local school districts also contribute)

ADMINISTRATION

The program is supervised at the federal level by the Office of Special Education Programs within the US Department of Education. The Infant-Toddler program is administered at the state level by the Developmental Disabilities Section, NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services within the NC Department of Health and Human Services, and at the local level, by the Area Mental Health, Developmental Disabilities and Substance Abuse Services programs. The Preschool program is administered through the Exceptional Children's Division within the NC Department of Public Instruction, and at the local level by the Local Education Agency (LEA).

SOURCES OF LAW

Federal law: 20 USC 1400 *et. seq.*, P.L. 105-17 (IDEA)
 Federal regulations: 34 CFR Part 303 (Infants and Toddlers)
 34 CFR Part 300, 301 (Preschool Program)
 State statute: NCGS 122C-11(a) (mental health's requirements)

State regulations: Standards for Area Programs and Their Contract Agencies 10 NCAC 0800 (Infant and Toddlers program)
16 NCAC 6H.0005 *et. seq.* (Preschool program)

State policy manual: North Carolina Infant and Toddler Program Manual
Procedures Governing Programs and Services for Children with Special Needs (Preschool program)

**FOR MORE
INFORMATION**

Infant-Toddler Program Coordinator
Developmental Disabilities Section
Division of Mental Health, Developmental Disabilities and
Substance Abuse Services
325 N. Salisbury St.
Raleigh, NC 27603
919-733-3654

Preschool Program Coordinator
Exceptional Childrens Division
North Carolina Department of Public Instruction
301 N. Wilmington St.
Raleigh, NC 27601
919-715-1598

Family Support Network of North Carolina
CB# 7340
University of North Carolina
Chapel Hill, NC 27599-7340
800-852-0042
919-966-2841

The Family Support Network provides information and assistance to families who have children with special needs.

Exceptional Children's Assistance Center
PO Box 16
Davidson, NC 28036
704-892-1321

The Exceptional Children's Assistance Center provides information and assistance to families who have children with special needs.

Governor's Advocacy Council for Persons with Disabilities
2113 Cameron Street, Suite 218
Raleigh, NC 27605-1344
800-821-6922
919-733-9250

The Governor's Advocacy Council provides information, assistance and advocacy on behalf of persons with disabilities.

Community Alternatives Program for Children (CAP/C)

OVERVIEW

What is it?

The Medicaid Community Alternatives Program for Children (CAP/C) was established to provide medically fragile children with a cost-effective home care alternative to institutional care. It provides a package of home care and other support services to enable the children to remain with their loved ones in a private residential setting.

Who is it for?

Services are available to children who are medically fragile, such as children born with severe birth defects, children with gastric feeding tubes or respirators, or those who were in serious accidents, who would otherwise need to be cared for in a nursing home or hospital.

Where are applications taken?

To apply for the CAP/C services, contact the Home Care Initiative Unit in the Division of Medical Assistance at 919-857-4021.

INTRODUCTION

The CAP/C program was established to enable certain children who would otherwise need institutionalization to remain at home. Unlike other Medicaid programs, the state does not consider the income or resources of the child's parents in considering eligibility for this program. *Children who qualify for this program are eligible for the full range of Medicaid benefits, and may receive additional services not otherwise offered to Medicaid eligible individuals.*

BENEFITS/ SERVICES

The child and his/her family work with a case manager to design a treatment plan to enable the child to remain in the community. Each child is given a certain budget to work within and these amounts typically vary by the comparable level of institutional care. Children are eligible for the full range of Medicaid-covered services. In addition, other services not typically offered may be provided. In addition to the regular Medicaid services, CAP/C children may receive:

- Home mobility aids (wheelchair ramps, safety rails, non-skid surfaces, handheld showers, grab bars and widening of doorways for wheelchair access);
- CAP/C waiver supplies (reusable incontinence undergarments with disposable liners for children two and older, and oral nutritional supplements);
- Personal care services;

- Respite care (in-home and institutional); and
- Hourly nursing services (RN and LPN).

The maximum budget for each CAP/C child is capped, depending on the level of institutionalization that the child would otherwise need. These monthly maximums are changed on July 1st of each year. The current maximum 1998-99 budget for children in the CAP/C program are as follows:

- \$2,373/mo.—for children needing intermediate nursing facility care (ICF)
- \$3,124/mo.—for children needing skilled nursing facility care (SNF)
- \$27,742/mo.—for children needing hospital level care (typically limited to children on ventilators or who have high tech needs)

APPLICATIONS

The process usually begins by someone calling the state Division of Medical Assistance's Home Care Initiative Staff on the child's behalf (919-857-4021). The child's family or caregiver must first complete the Medicaid application form and have the child's doctor fill out a form specifying the level of institutional care that the child requires. The CAP/C program staff will have a social worker/registered nurse team assess the child's situation, and will appoint a case manager from the child's county of residence to work with the family in developing a plan of care. The Division of Medical Assistance must then approve this plan of care.

ELIGIBILITY REQUIREMENTS

General Eligibility Requirements

To be eligible, a child must be a resident of North Carolina, a US citizen or other qualified alien (see Medicaid chapter 7), and have a medical condition that would otherwise require the child to be institutionalized. The child's caregiver must obtain a FL-2 form filled out by a doctor that shows that the child has a medical condition which places them at risk of needing nursing facility or hospital care.

Unlike other Medicaid programs, the agencies will not consider the income or resources of the parent(s) in determining the child's eligibility for this program. Only the child's independent income and resources will be counted. (The income and resource rules are the same as those listed in the Medicaid chapters). However, Medicaid eligibility staff will ask about the parent's income and resources when a family applies for this program, as the eligibility workers are required to look at all possibilities for Medicaid eligibility.

NUMBERS SERVED

In FY 1997, approximately 180 children were served by the program.

PRIORITIZATION SYSTEM

Typically, services are not limited by statewide caps. However, limits do exist at the county level according to county participation and case manager client load. In these instances, clients are served on a first-come first-serve basis.

APPEAL RIGHTS Children who are denied assistance through this program have the same appeal rights as other Medicaid recipients (See Medicaid chapter).

FINANCING Medicaid finances the CAP/C program.

The total FY 1997 expenditures for this program were \$6,387,190.

ADMINISTRATION This program is administered at the national level by the Health Care Financing Agency within the US Department of Health and Human Services (which administers the Medicaid program). At the state level, the Division of Medical Assistance, within the NC Department of Health and Human Services administers the CAP/C program. At the local level, various public or private agencies may provide case management services (such as a public health department, Department of Social Services, hospital or aging agency).

SOURCES OF LAW Federal statute: 42 USC 1396n(c)
Federal regulations: 42 CFR 441, Subpart G

FOR MORE INFORMATION Home Care Initiative Unit
Division of Medical Assistance
NC Department of Health and Human Services
PO Box 29529
Raleigh, NC 27603
919-857-4021

Community Alternatives Placement Program for Children and Adults with Mental Retardation or Developmental Disabilities (CAP-MR/DD)

OVERVIEW

What is it?

The Medicaid-financed Community Alternative Placement Program for children and adults with Mental Retardation or Developmental Disabilities (CAP-MR/DD) provides support services to enable individuals with developmental disabilities or mental retardation to remain in the community instead of residing in an institutional setting.

Who is it for?

Services are available to children and adults with developmental disabilities or mental retardation who would otherwise need to be cared for in an Intermediate Care Facility for individuals with Mental Retardation or Developmental Disabilities (ICF-MR/DD).

Where are applications taken?

Applications for CAP-MR/DD are taken at the local area Mental Health, Developmental Disability, and Substance Abuse Services Agency (MH/DD/SAS).

INTRODUCTION

The CAP-MR/DD was established to enable certain children and adults who would otherwise need institutionalization to remain at home or in the community. Unlike other Medicaid programs, only the client's income and resources (not his/her family's income or resources) are considered in determining eligibility for this program. *Individuals who qualify for this program are eligible for the full range of Medicaid benefits, plus may receive additional services not otherwise offered to Medicaid eligibles.*

BENEFITS/ SERVICES

CAP-MR/DD is available to children (and adults) who need the care of an Intermediate Care Facility for the Mentally Retarded or Developmentally Disabled (ICF-MR/DD). Each eligible participant is assigned a case manager. The case manager works with the family (and sometimes, additional professionals) to develop a treatment plan for the child (or eligible adult). The treatment plan, along with any revisions to the plan, must be submitted to the state for approval. Once approved, Medicaid will pay for authorized treatment and services, up to a maximum budget of \$5,674/month (\$68,088/year).

Individuals receiving CAP-MR/DD services are entitled to the full array of Medicaid services. In addition, eligible participants can receive the following services (not normally covered by Medicaid):

- Augmentative communication devices (purchase or rental up to \$10,000 per year);
- Case management services;
- Community inclusion (habilitative training);
- Crisis stabilization (limited to two weeks at a time, on physician's order);
- Developmental day care;
- Environmental accessibility adaptation (up to \$1,500/year for ramps, safety rails, etc.);
- Family training;
- Personal care services;
- Personal emergency response system;
- Respite care (including institutional, community based and nursing respite);
- Supported living (habilitative training and some personal care assistance)
- Vehicle adaptation (up to \$10,000); and
- Other supplies and equipment (adaptive positioning devices, mobility aids, aids for daily living or cognitive, perceptual, and motor-development treatment/therapy equipment and supplies).

APPLICATIONS

Children and adults may apply for CAP-MR/DD program at local area Mental Health, Developmental Disability, and Substance Abuse Services Agencies.

ELIGIBILITY REQUIREMENTS

To be eligible, a child/adult must be a resident of North Carolina and a US citizen or other qualified alien (see Medicaid chapter 7). The child/adult must meet ICF-MR/DD criteria, which shows that the child/adult has a condition that requires active treatment at the ICF-MR/DD level of care. The child also needs to have a diagnosis of mental retardation or an IQ test result indicating mental retardation or a related condition which is manifested before the child reaches age 22, or a related condition resulting in substantial functional limitation in three or more areas of the following:

- Self-care,
- Understanding and use of language,
- Learning,
- Mobility,
- Self direction, and
- Capacity for independent living.

Unlike other Medicaid programs, the agencies will not consider the income or resources of the parent(s) in determining the child's eligibility for this program. Only the child's income and resources will be counted. (The income and resource rules are the same as those listed in the Medicaid chapters).

NUMBERS SERVED

The CAP-MR/DD program has 5,127 slots. It served 2,068 children (under 18 years of age) in FY 1998.

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| PRIORITIZATION SYSTEM | Each area program has an interagency council that recommends children and adults for CAP-MR/DD slots. If all of the slots are filled, eligible individuals are prioritized and placed on a waiting list. |
| APPEAL RIGHTS | Children who are denied assistance through this program have the same appeal rights as other Medicaid recipients (See Medicaid chapter). |
| FINANCING | Medicaid finances the CAP-MR/DD programs. The total FY 1997 expenditures for this program were \$106,199,243. |
| ADMINISTRATION | This program is administered at the national level by the Health Care Financing Agency within the US Department of Health and Human Services (which administers the Medicaid program). At the state level, the Division of Mental Health, Developmental Disabilities, and Substance Abuse, housed within the NC Department of Health and Human Services, administers the CAP-MR/DD program. At the local level, the CAP-MR/DD program is administered by area MH/DD/SAS agencies. |
| SOURCES OF LAW | Federal statute: 42 USC 1396u(b), 1396n(c) Federal regulations: 42 CFR 441, Subpart G |
| FOR MORE INFORMATION | CAP-MR/DD Branch Division of Mental Health/Developmental Disabilities/Substance Abuse Services NC Department of Health and Human Services 3509 Haworth, Suite 105 Raleigh, NC 27609 919-571-4980 CARELINE: 1-800-662-7030 Head Start is a free, comprehensive, early childhood program that offers education, meals, social services, medical and dental care, and mental health services for children, and programs for parents. |

Immunizations

OVERVIEW

What is it?

The Universal Childhood Vaccine Distribution Program (UCVDP) provides childhood vaccines to public and private health professionals at no charge. Children can receive the vaccines at no charge from public or private providers; although private physicians may charge a small fee to administer the vaccinations.

Who is it for?

Any North Carolina child from birth through age 18. There are no financial eligibility requirements.

Where are applications taken?

There are no applications for this program.

INTRODUCTION

The UCVDP was established to reduce cost as a barrier to children receiving vaccines and to enable children to receive these services from their traditional provider (i.e., their pediatricians' or family practitioners' office). In the past, the costs of the vaccinations created financial barriers for some families. Private physicians often referred patients to local Health Departments to obtain free vaccinations, a practice which led to fragmentation of medical services and a lower rate of immunizations. With the UCVDP, participating private physicians can obtain the vaccinations for free. The physicians, in turn, provide the vaccinations for free to the families (although private physicians may charge a fee of up to \$13.71 for one dose and \$27.42 for two or more doses to administer the vaccinations. This fee is covered by Medicaid and many private health insurance companies if the child has private health insurance).

**BENEFITS/
SERVICES**

Required Immunizations

Children are eligible for the following vaccinations at the following time schedules:

| Child's Age | Vaccines |
|-------------|---|
| 2 months | Hepatitis B Polio DTaP (Diphtheria, Tetanus, and acellular Pertussis) Hib (<i>H. influenzae</i> type b) |

| Child's Age | Vaccines |
|---------------------------------------|--|
| 4 months | Polio DTaP Hib Hepatitis B |
| 6 months | Polio (between 6-18 months) DTaP Hib |
| 12 months | MMR (Measles, Mumps, and Rubella) Hib Varicella (recommended, not required) Hepatitis B |
| 15 months | DTaP |
| 4-6 years (before starting school) | Polio DTP MMR |

Exemptions

Children must receive the full array of immunizations listed above before they can be admitted to school. There are two exceptions to the immunization requirements: medical and religious.

- *Medical exemptions.* Children can be exempt from specific immunization requirements if a physician certifies that the child could be detrimentally affected by the administration of a vaccine. The medical exemption must correspond to a medical contraindication specified in the NC Immunization Rules. The doctor must indicate the basis for the exemption, the specific vaccine which should not be administered, and the length of time that the exemption will apply.

A physician licensed to practice in North Carolina must submit a request to the State Health Director if he or she wishes to have a child exempted from receiving certain immunizations for reasons other than those listed in state regulations (governing medical contraindications).

The State Health Director or his designee will review the request and respond in writing to the physician. The family will be sent a copy of the decision. If the request is denied, the family may appeal the decision by filing a Petition for Contested Case Hearing with the Office of Administrative Hearings. A copy of this form can be obtained by calling 919-733-0926 or writing to PO Box Drawer 27447, 424 N. Blount St., Raleigh, NC 27611. If the decision is appealed, the case will be heard by an Administrative Law Judge who will make a final recommendation to the State Health Director. The appeal must be filed within 30 days of the receipt of the decision.

A child will not be allowed to attend school or a child care facility if an appeal is not filed or the child has not obtained the required immunizations.

- *Religious Exemption.* A child can also be exempt from the immunization requirements if the parent, guardian or custodial parent claims a bona fide religious objection to the immunization requirements.

ELIGIBILITY REQUIREMENTS

All children who are in need of required childhood vaccinations can obtain the vaccinations at no cost, if they seek services from a participating physician. Approximately 92% of private physicians participate in the UCVDP.

In addition, families can still obtain vaccines without any expense (no administration fee) from local Health Departments and Community, Migrant and Rural Health Centers. Some Health Departments limit the times (days and hours) when they administer immunizations, so families should call first to find out the times and locations where the immunizations will be provided.

Parents are requested to bring their child's immunization record with them to all visits. If a parent does not know what immunizations the child has received, the health care provider will take a history. The parent and health care provider will work together to collect the immunization information. In extreme situations, where no information can be collected, the immunization series may be reinitiated.

DOSES DISTRIBUTED

The state distributed more than 2,665,398 million doses of vaccines through the Universal Childhood Vaccination program in calendar year 1998.

FINANCING

This program is funded through federal and state appropriations in the following amounts for SFY 97-98:

Federal: \$ 6,215,451 (used to support operating costs)
State: \$11,921,919 (used to purchase vaccines for children not eligible for federally purchased vaccines)

In addition, the federal government supplies the state with the vaccines for eligible children covered by this program. Children eligible for federally supplied vaccines include children on Medicaid, the uninsured, Native Americans, and children served by Community and Migrant health centers. The cost of this vaccine to the federal government was \$16,655,543.

ADMINISTRATION

The program is administered on the national level by Centers for Disease Control and Prevention, National Immunization Program within the US Department of Health and Human Services. On the state level, the program is administered by the Immunization Branch, Women's and Children's Health Section, NC Department of Health and Human Services. At the local level, vaccinations are available through local Health Departments, Community, Migrant and Rural Health Centers, and most private physician's offices.

SOURCES OF LAW State statute: NCGS 130A-152(a)
State regulations: 15 NCAC 19A-0401 (recommended vaccinations)

FOR MORE INFORMATION Immunization Branch
Women's and Children's Health Section
NC Department of Health and Human Services
PO Box 29597
Raleigh, NC 27626
919-733-7752
1-800-344-0569

CARELINE: 1-800-662-7030

1-800-FOR-BABY

Adolescent Pregnancy Prevention Programs (APPP)

OVERVIEW

What is it?

The North Carolina Adolescent Pregnancy Prevention Program (APPP) funds community initiatives to prevent adolescent pregnancy.

Who is it for?

Initiatives target adolescent males and females to prevent first and subsequent pregnancies among teens. Initiatives vary by project, however examples of some of the services offered include counseling, mentoring, educational and life-skills programs.

Where are applications taken?

Interested teens can contact the local agencies directly. Referrals are often made by schools, clinics, friends and other agencies.

INTRODUCTION

Funded in its current form by the NC General Assembly in 1989, the Adolescent Pregnancy Prevention Program works with local community groups to provide pregnancy prevention programs to adolescents. Five year grants are awarded which require local matching dollars or in-kind services. State funds decrease each year requiring increasing local support.

**BENEFITS/
SERVICES**

Specific services vary by grantee. However, all grantees strive to prevent first and subsequent pregnancies by promoting abstinence and through activities such as life skills education programs, youth development programs, parent workshops, peer education, adult mentoring, counseling and referral, community awareness efforts, male involvement projects, and support services for teen parents.

APPLICATIONS

Each initiative establishes its own application process according to the services offered. Local agencies can be contacted directly for application information. The following is a list of the 24 currently funded APPP grantees.

| County | Grantee |
|---------------|--|
| Brunswick | Brunswick County Schools |
| Caldwell | Caldwell Council on Adolescent Health |
| Carteret | Carteret Health Center |
| Catawba | Council on Adolescents of Catawba County |

| County | Grantee |
|---------------|--|
| Chatham | Coalition for Adolescent Health & Chatham Co. Health Dept. |
| Cleveland | Cleveland County Health Dept. |
| Davie | Davie County Health Dept. |
| Durham | CommuniMedia |
| Durham | Sisterhood Agenda |
| Granville | Granville County Health Dept. |
| Guilford | Sickle Cell Disease Association of the Piedmont & YWCA of High Point |
| Guilford | UNC-G School of Nursing |
| Hertford | Exodus for Youth, Inc. |
| Hyde | Hyde Family Center |
| Jones | Jones County Schools |
| Mecklenburg | Teen Health Connection |
| New Hanover | Wilmington Health Access for Teens |
| New Hanover | Girls, Inc. |
| Orange | The Women's Center with the Chapel Hill-Carrboro Resident's Council |
| Wake | Healthy Mothers/Healthy Babies Coalition |
| Wake | Wake County Human Services |
| Wake | YWCA of Wake County |
| Washington | Washington County Schools |
| Wilson | Opportunities Industrialization Center, Inc. |

ELIGIBILITY REQUIREMENTS

General Eligibility Requirements

Projects are open to teens. There are no statewide needs, income or resource eligibility requirements, although some projects may have their own eligibility requirements, depending on their target population. For example, some initiatives target males or the non-pregnant sister of a teenage mother.

Fees

All services are free of charge. Fees can not be requested from participants.

NUMBERS SERVED

For fiscal year 1997-1998, there were 24 APPP projects serving approximately 1,500 teens.

PRIORITIZATION SYSTEM

Historically funds have been adequate to serve all participating teens. First priority for services, however, are given to teens at high risk for becoming pregnant.

APPEAL RIGHTS

There is no formal appeal process. Problems with any particular project can be discussed with the state office: 919-733-7791.

FINANCING The federal government pays 20% of non-local program costs and the state government pays 80%. In addition, there is a local match required of 20% in year one, 10% in year two, 35% in year three, 35% in year four and 50% in year five. In FY 1998, the program received \$261,000 of federal and \$939,000 of state funds.

ADMINISTRATION The Adolescent Pregnancy Prevention Program is administered by the Women's and Children's Health Section within the NC Department of Health and Human Services. Final authority for funding decisions rests with the NC Commission for Health Services.

SOURCES OF LAW Federal statutes: 42 USC 1397 (Social Services Block Grant)
State statutes: NCGS 130A-131.15
State policy: 15A NCAC 21A, Sections .0815-.0821

FOR MORE INFORMATION Women's Preventive Health
NC Department of Health and Human Services
Women's and Children's Health Section
Women's Health Branch
PO Box 29597
Raleigh, NC 27626-0597
Phone: 919-733-7791

Migrant, Community, and Rural Health Centers (M/CHCs and RHCs)

OVERVIEW

What is it?

Health Centers offer comprehensive primary and preventive care services to individuals of all ages. Migrant and/or Community Health Centers (M/CHC) operate in urban and rural health professional shortage areas and Rural Health Clinics (RHC) operate in rural communities. Most health centers accept private health insurance, Medicaid and Medicare and offer a sliding scale fee to low-income, self-pay individuals. In addition to offering a sliding scale fee, M/CHCs must also operate during non-traditional hours at least once a week.

Who is it for?

All individuals seeking primary medical care, regardless of location or status of residency.

Where are applications taken?

Not applicable.

INTRODUCTION

Nationally, M/CHCs provide preventive and comprehensive primary care services to more than eight million medically underserved people on an annual basis. There are more than 600 grantees nationwide, many of which operate in multiple locations. Of this, 100 are community-based migrant health centers serving over 500,000 migrant and seasonal farm workers and their families.

North Carolina has 19 Migrant and Community Health Centers operating 49 sites across the state. M/CHCs provide primary health care services to approximately 192,500 patients every year. In addition, North Carolina has 24 state-funded Rural Health Clinics (RHC). The number of patients served by RHCs is not available.

Migrant and Community Health Centers are located in health professional shortage areas. A health professional shortage area typically has less than one primary care physician for every 3,500 residents. M/CHCs are governed by a Board of Directors that include a majority of consumer members. This structure is intended to keep the centers closely connected to the needs of their clients. M/CHCs receive much of their operating funds through grants from the US Bureau of Primary Health Care. In addition, they accept Medicare, Medicaid and apply a sliding-fee discount based on family size and income. Migrant health centers reach out to agricultural workers through extended hours, bilingual staff and translators, mobile units, outreach workers and other methods.

Rural Health Clinics are primary care offices located in rural areas. RHCs are required by law to accept Medicaid and Medicare patients. Many also apply a sliding scale fee schedule to low-income self-pay patients. Many of the rural health centers are self-supporting, receiving income from patients, public and private insurance, and state and private grants. Some receive operating grants from the state through the North Carolina Office of Research, Demonstrations, and Rural Health Development.

**BENEFITS/
SERVICES**

Health care services offered at community, migrant, and rural health centers are comprehensive. Services include primary and preventive health care. Additional services, such as dental care, laboratory work, family planning, translation or transportation, varies from center to center. In addition, each center sets its own sliding scale fee schedule and copayments. While appointments are not always necessary at these health centers, it is recommended that you call first to check the center's hours of operation, to find out whether appointments are needed and to obtain special information that you might need.

APPLICATIONS

Applications are not necessary in order to receive care at health centers.

**ELIGIBILITY
REQUIREMENTS**

There are no specific eligibility requirements in order to receive services at these health centers. Most centers charge a sliding scale based on the family's income.

**NUMBERS
SERVED**

Migrant and Community Health Centers provided care to approximately 192,500 individuals in 1998. The number of individuals served by Rural Health Centers is not available.

**PRIORITIZATION
SYSTEM**

There is no prioritization system for these centers. Patients that have emergency or urgent medical conditions may be able to see a provider more quickly, but in general patients are seen based on providers' availability.

APPEAL RIGHTS

There are no formal appeal rights. Individuals with grievances can seek to discuss these concerns with administrative staff or Board of Directors.

FINANCING

While health centers are private organizations, M/CHC receive much of their funding through direct federal grants, other private grants, patient revenue and public and private insurance. Rural Health Clinics obtain much of their operating funds through patient and insurance revenue and may receive some state and private grants.

ADMINISTRATION

The US Department of Health and Human Services, Bureau of Primary Health Care provides grants directly to the M/CHCs. Rural health clinics that receive state funding have their grants administered by the North Carolina Office of Research, Demonstrations, and Rural Health Development.

Child Protective Services

OVERVIEW

What is it?

Child protective services are those services necessary to protect children from abuse, neglect or dependency.

Who is it for?

Any child under the age of 18 who may be subject to abuse, neglect or dependency by a parent or caretaker. There are no financial eligibility requirements for this program.

Where are applications taken?

There are no formal applications for this program. The county Department of Social Services (DSS) must investigate all reports of suspected abuse, neglect and dependency (that meet the statutory definitions for investigation), and provide further services to ensure the safety of the child or children if the allegation is substantiated. Reports come from all sources, including family members, neighbors, schools and non-profit agencies.

INTRODUCTION

The Child Protective Services (CPS) program is mandated by state and federal law. The county Departments of Social Services are responsible for receiving and investigating any report that alleges that a child may be abused, neglected or dependent if the child is under the age of 18 and the allegation is against the parent or caretaker. If the report is substantiated, DSS must provide services to the child and his/her family to ensure that the child is protected.

BENEFITS/ SERVICES

Children and families are eligible for in-home services if allegations of abuse, neglect, and dependency are substantiated. In-home child protective services include case planning and case management aimed at improving parenting skills to ensure the safety of the child within the home. In-home services also include referrals to other needed services, such as health care, mental health services and substance abuse treatment. If a county DSS thinks that a child cannot remain in his or her home safely, the agency will seek court intervention. The district court may place a child in the custody of a county Department of Social Services. When a child is placed in DSS custody, the child and family are eligible for foster care services aimed at reunification of the child with the family or termination of parental rights and placement of the child in an adoptive home.

Reports of Abuse, Neglect or Dependency

Every person or institution that has reason to suspect that a child may be abused, neglected or dependent, or who has died as a result of mistreatment, has a legal responsibility to

report this information to the county DSS where the child resides. The report may be made orally, by telephone, or in writing, and should contain any information that may be helpful in determining whether abuse, neglect or dependency exists.

DSS is required to initiate investigations of all reports of suspected abuse that meet the statutory definitions for investigation within 24 hours of receiving the reports and must initiate investigations of all reports of suspected neglect or dependency that meet the statutory definitions for investigation within 72 hours of receiving the report. When a report alleges child abuse or neglect in a day care facility or day care home, the Department of Social Services shall notify the Child Abuse/Neglect Unit in the Division of Child Development within 24 hours. When a report alleges child sexual abuse in a day care facility or day care home, the DSS shall also notify the State Bureau of Investigation within 24 hours.

Abuse, Neglect or Dependency

The following are the criteria used in determining whether a child has been abused, neglected or is dependent:

- *Abused child.* Any child under age 18 whose parent, guardian, custodian or caretaker:
 - Inflicts (or allows someone else to inflict) serious physical injury;
 - Creates (or allows the creation of) a substantial risk of serious physical injury;
 - Uses (or allows the use of) cruel or grossly inappropriate disciplinary procedures;
 - Commits (or permits) rape, sexual offenses, a crime against nature, incest or takes obscene photos, promotes prostitution or takes indecent liberties;
 - Creates (or allows the creation of) serious emotional damage to the child; or
 - Encourages, directs or approves of delinquent acts involving moral turpitude.
- *Neglected child.* Any child under age 18 who does not receive proper care, supervision or discipline from his or her parent, guardian or caretaker or who has been abandoned. Neglected children also include children who are not provided necessary medical or remedial care, who live in an environment injurious to their welfare, or who have been placed for care or adoption in violation of the law. The state will look at whether other children in the household have been abused or neglected in making their determination of neglect.
- *Dependent child.* Any child under age 18 in need of assistance or placement because he/she has no parent, guardian, or custodian responsible for his/her care and supervision. Dependent children also include those children whose parents, guardians, or custodians are unable to provide care and supervision and lack an appropriate alternative child care arrangement.

**NUMBERS
SERVED**

In SFY 1997/98, there were:

| | |
|---------|--|
| 61,298 | reports of abuse, neglect or dependency |
| 114,152 | children involved in reports |
| 34,759 | children involved in substantiated reports |

**PRIORITIZATION
SYSTEM**

Services are available to all in need.

FINANCING

The program is financed with federal, state and local funds. In SFY 98, the federal government contributed approximately 48% of program costs, the state contributed approximately 20% and counties paid the remaining 28%, although the actual amounts varied by county. The following amounts of money were spent on Child Protective Services in SFY 1998:

| | |
|----------|---------------|
| Federal: | \$ 92,385,845 |
| State: | \$ 37,844,684 |
| County: | \$ 54,606,343 |
| Other: | \$ 9,229,543 |

ADMINISTRATION

The program is administered on the federal level by Administration on Children, Youth and Families, US Department of Health and Human Services. On the state level, the program is administered by Children's Services Section, Division of Social Services within the NC Department of Health and Human Services, and at the local level by the county Departments of Social Services.

SOURCES OF LAW

| | |
|----------------------|--|
| Federal statutes: | 42 USC 601 <i>et. seq.</i> 42 USC 5101 <i>et. seq.</i> |
| Federal regulations: | 45 CFR 1340 (and other appropriate sections of Title 42 and 45 of the CFR) |
| State statutes: | NCGS 7A-516-744 (Juvenile Code) |
| State regulations: | 10 NCAC 411 (Protective services) |
| State policy manual: | Family Services Manual, Vol. 1, Children's Services, Chapter VIII, Child Protective Services |

**FOR MORE
INFORMATION**

Children's Services Section
Division of Social Services
NC Department of Health and Human Services
325 N. Salisbury St.
Raleigh, NC 27603-5905
919-733-4622

CARELINE: 1-800-662-7030

Family Preservation Services

OVERVIEW

What is it?

The program provides intensive, in-home services to prevent children from being removed from their homes, and also provides less-intensive family preservation services to children and families at crisis.

Who is it for?

The services are available to families with children who are at imminent risk of out-of-home placement into social services, mental health, developmental disabilities or substance abuse services, or the juvenile justice system. It is also available to families with children who need less intensive services.

Where are applications taken?

There are no applications for the program. Referrals into the program come primarily from Departments of Social Services, Area Mental Health, Developmental Disability and Substance Abuse agencies, and juvenile justice agencies (such as the courts). Parents may also self-refer into the program if there is immediate risk of out-of-home placement or the child is facing a crisis.

INTRODUCTION

The North Carolina General Assembly established the Family Preservation Services Program in 1991, in order to prevent unnecessary placement of children away from the families. The services are intended to create positive long term changes by helping families alleviate immediate crises; defuse the potential for physical, sexual, emotional or verbal violence (thereby helping to keep the child, family and community safe); and improve functioning so that the family's quality of life is improved.

There are two levels of family preservation services—one which is more intensive, and one which is less intensive. To be eligible for the more intensive Family Preservation services, families must be screened and the children identified as having an imminent risk of out-of-home place. The less intensive Family Preservation services are available to families in crisis, but not those at imminent risk of an out-of-home placement.

The Family Preservation program is part of a continuum of family-centered placement prevention services, including Family Resource Centers and family support programs (such as the Adolescent Parenting Program or Support Our Students). These programs all differ in program design (such as target population, client eligibility, caseload size, intensity and duration of services, and practice methods), but are all aimed at keeping families together when possible. The Family Preservation program is the most intensive, crisis-oriented within this continuum of services. However, these services are not available in every county of the state.

BENEFITS/ SERVICES

Participating families are entitled to a comprehensive array of services that are tailored to the specific needs of the family. The family is treated as a whole, rather than focus on specific individuals within the family. The types of available services include:

- *Case management*—caseworkers have responsibility for assuring that the needs of the family as a whole are assessed, that service plans are created with the family that reflect the family's goals and priorities, and that all other agencies working with the family are interacting in a coordinated manner and directed towards common goals.
- *Family assessment*—the family preservation caseworker will work with a family to identify the family's strengths, needs and problems; establish goals that are measurable, realistic and achievable; and develop strategies to achieve these goals. Specialized assessments may also be provided, depending on the family's needs. These specialized assessments include neurological, nutritional, speech and language, psychological, drug or vocational evaluations.
- *Intensive family and individual counseling*—counseling services may include individual, couple, family or group counseling, and are intended to help family members focus on problem solving and skills building.
- *Client advocacy*—family preservation caseworkers advocate for families by informing them about available services, helping them obtain needed services and helping families learn to advocate for themselves.
- *Development and enhancement of parenting skills*—family preservation caseworkers help families develop parenting skills identified as a deficiency in the assessment, counseling or case management process. For example, caseworkers can help family members develop skills in such areas as: nurturing, age appropriate expectations, supervision, discipline, behavior management, communication or anger control.
- *Cash assistance*—the caseworker may also be able to help the family with small amounts of money needed to alleviate an immediate crisis, for example, to repair a car or needed appliance, or to restore utilities.

While the types of services provided to families are similar in both the intensive and less intensive Family Preservation programs, the intensity of services and the length of time that services are provided differ. In the intensive Family Preservation programs, families receive assistance for an average of four, but not more than six, weeks. At least one-half of an intensive Family Preservation caseworker's time must be spent in the family's home and community, and caseworkers must be available to each eligible family by telephone or on-call for visits 24 hours a day, seven days a week. To ensure that this level of service can be provided, each caseworker is allowed to work with no more than four families at any time. Families may be referred to other agencies for additional, less-intensive services at the end of the intensive Family Preservation program. In addition, the caseworker may be available to help the family

for brief interventions after the termination of services. In contrast, the maximum length of service for the less intensive Family Preservation program is six months. These caseworkers work with more families because the children are not in immediate risk of an out-of-home placement.

Program Location

The intensive Family Preservation Services program currently operates in the following counties:

| County | Program |
|---------------|---|
| Alamance | Alamance/Caswell Area Mental Health, Developmental Disability and Substance Abuse agency (Burlington) |
| Alexander | Foothills Area Mental Health, Developmental Disability and Substance Abuse agency (Lenoir) |
| Brunswick | Methodist Home for Children (Raleigh) |
| Buncombe | Blue Ridge Area Mental Health, Developmental Disability and Substance Abuse agency (Asheville) Buncombe County DSS (Asheville) |
| Burke | Foothills Area Mental Health, Developmental Disability and Substance Abuse agency (Lenoir) Home Remedies Bringing It All Back Home (Morganton) |
| Cabarrus | Cabarrus County DSS (Concord) Piedmont Behavioral Health Care (Salisbury) |
| Caldwell | Foothills Area Mental Health, Developmental Disability and Substance Abuse agency (Lenoir) Home Remedies Bringing It All Back Home (Morganton) |
| Catawba | Catawba County DSS (Newton) |
| Chatham | Methodist Home for Children (Raleigh) |
| Cherokee | Mountain Youth Resources (Sylva) |
| Cleveland | Cleveland County DSS (Shelby) |
| Cumberland | Cumberland Area Mental Health, Developmental Disability and Substance Abuse agency (Fayetteville) |
| Davidson | Baptist Children's Home |
| Franklin | Vance, Granville, Franklin and Warren Area Mental Health, Developmental Disabilities and Substance Abuse Services Agency (Henderson) |
| Forsyth | Forsyth-Stokes Area Mental Health, Developmental Disability and Substance Abuse agency (Winston-Salem) |
| Gaston | Gaston County DSS (Gastonia) |
| Graham | Mountain Youth Resources (Sylva) |
| Granville | Vance, Granville, Franklin and Warren Area Mental Health, Developmental Disabilities and Substance Abuse Services Agency (Henderson) |
| Guilford | Youth Focus (Greensboro) |
| Haywood | Smokey Mountain Counseling Center (Waynesville) |
| Iredell | Iredell County DSS (Statesville) |
| Jackson | Mountain Youth Resources (Sylva) Smokey Mountain Counseling Center (Waynesville) |

| County | Program |
|---------------|--|
| Macon | Mountain Youth Resources (Sylva) |
| McDowell | Foothills Area Mental Health, Developmental Disability and Substance Abuse agency (Lenoir) |
| New Hanover | Methodist Home for Children (Raleigh) |
| Northampton | Choanoke Area Development Assoc. (Rich Square) |
| Person | Person County Partnership for Children/Family Connections (Roxboro) |
| Pitt | Methodist Home for Children (Raleigh) |
| Richmond | Sandhills Center for Mental Health, Developmental Disabilities, Substance Abuse Services (Rockingham) |
| Scotland | Methodist Home for Children (Raleigh) |
| Stokes | Forsyth-Stokes Area Mental Health, Developmental Disability and Substance Abuse agency (Winston-Salem) |
| Swain | Smokey Mountain Counseling Center (Waynesville) |
| Vance | Vance, Granville, Franklin and Warren Area Mental Health, Developmental Disabilities and Substance Abuse Services Agency (Henderson) |
| Warren | Vance, Granville, Franklin and Warren Area Mental Health, Developmental Disabilities and Substance Abuse Services Agency (Henderson) |
| Wayne | Methodist Home for Children (Raleigh) |
| Wake | Methodist Home for Children (Raleigh) |
| Wilson | Methodist Home for Children (Raleigh) |

The less intensive Family Preservation program operates in the following counties:

| County | Program |
|---------------|--|
| Buncombe | Blue Ridge Center (Asheville) |
| Cherokee | Cherokee County DSS (Murphy) |
| Cleveland | The Cleveland Center (Shelby) |
| Forsyth | Youth Opportunities (Winston-Salem) |
| Guilford | Youth Focus (Greensboro) |
| Haywood | Haywood County DSS (Waynesville) |
| Henderson | Trend Community Mental Health (Hendersonville) |
| Hoke | Methodist Home for Children (Raleigh) |
| Macon | Macon Program for Progress (Franklin) |
| McDowell | Foothills Area Mental Health (Marion) |
| Person | Person County Family Connections |

REFERRALS Families are referred into the program when:

- Other agencies have determined that the service needs of the family are beyond the resources (time, skills, staff) of the current service provider;
- The children can still safely remain in the home (at least on a short-term basis);
- Direct and immediate intensive family preservation services are needed to prevent removal of the children from their homes; and

- At least one parent or primary caregiver is willing and able to participate in the program.

ELIGIBILITY REQUIREMENTS

Intensive Family Preservation Services are available to families with one or more children ages birth through 17 years who are at imminent risk of out-of-home placement into the social services, mental health, or juvenile justice systems. The risk may be caused by the actions of the child him or herself, or by someone else in the home. The less intensive Family Preservation program also responds to families in crisis, but not those at imminent risk of an out-of-home placement. Again, to receive these less intensive services, a child must be determined to be a danger to him or herself or others, or threatened by others in the home.

Children who are potentially eligible for the services include those alleged or found to be abused, neglected, or dependent, emotionally or behaviorally disturbed, undisciplined or delinquent, and/or that have medical needs that with assistance could be managed in the home. The major issues facing children at the time of referrals include family violence, school difficulty, alcohol or other drug abuse by one or more family members, neglect, various types of abuse (physical, sexual, emotional/verbal), and unemployment of the caretaker.

There are no income or resource requirements in this program. However, each participant is required to provide the agency with their Social Security number.

NUMBERS SERVED

Family Preservation Services were provided to a total of 579 families in FY 1997. There were a total of 1,332 children in these families, of which, 967 were in imminent risk of being removed from the household. Approximately 30% of the children served are between the ages of birth and five.

At the end of the services, less than 8% of the children at imminent risk of out-of-home placement were actually removed from the home. As a whole, families experienced positive changes on environmental, social support, family/caregiver characteristics, family interactions and child well-being scales. The state estimates a net cost savings of \$3.26 dollars saved for every \$1 spent on the program.

Less intensive Family Preservation services were provided to 99 children in FY 1997. Neglect was the main reason for these referrals.

PRIORITIZATION SYSTEM

Family Preservation Services are not available to all in need, and are not provided in every county. Even in the counties where a program is operating, there may be insufficient staff or resources to serve all in need. If the family cannot be accepted for immediate services, then the referring agency will be informed so they can move ahead to carry out their service responsibilities.

APPEAL RIGHTS

A family that is dissatisfied with their assigned caseworker or the services they receive should contact the supervisor of their local Family Preservation program. If the family is still dissatisfied, the family can contact the head of the local agency.

FINANCING Family Preservation programs receive funding through a combination of federal and state dollars. The federal funds come through the Adoption and Safe Families Act of 1997.

ADMINISTRATION The Family Preservation program is administered on the federal level by the Administration for Children and Families, US Department of Health and Human Services. On the state level, the program is administered by the Division of Social Services, in conjunction with the Division of Mental Health, Developmental Disabilities and Substance Abuse Services within the NC Department of Health and Human Services and the Office of Juvenile Justice within the Governors Office. On the local level, the program is operated through a number of public and private agencies.

SOURCES OF LAW

| | |
|----------------------|--|
| Federal statute: | PL 105-89 (Adoption and Safe Families Act of 1997) |
| Federal regulations: | None |
| State statute: | NCGS 143B-150.5 |
| State policy manual: | Family Preservation Policies and Standards |

FOR MORE INFORMATION

Children's Services Section
Resource Development Team for Community-Based Programs
NC Division of Social Services
NC Department of Health and Human Services
325 N. Salisbury St.
Raleigh, NC 27603-5905
919-733-2279

Office of Juvenile Justice
410 S. Salisbury St.
Raleigh, NC 27603
919-733-3011

Division of Mental Health, Developmental Disabilities
and Substance Abuse Services
NC Department of Health and Human Services
325 N. Salisbury St.
Raleigh, NC 27603
919-733-0598

Foster Care

OVERVIEW

What is it?

Foster care placement is temporary care provided to children whose parent, guardian or caretaker is unwilling or unable to provide adequate care.

Who is it for?

Children usually enter foster care placement as a result of child abuse, neglect, or dependency. Children are removed from their homes only when the county Department of Social Services (DSS) has determined that the child cannot be safely maintained within the family. Foster care may also be provided to children who are in the juvenile justice system and need placement but do not need to be in a locked facility. In addition, a parent/guardian may ask the DSS to take custody of the child for a short time due to family crisis. These voluntary placement agreements require the agreement of the parent or guardian and the agency director.

Where are applications taken?

The majority of children in DSS foster care placement entered as a result of a juvenile court order. Parents or guardians wishing to explore voluntary placement should contact their county DSS to determine the availability and appropriateness of the service.

INTRODUCTION

Foster care placement is temporary care provided for children whose parent, guardian or caretaker is unwilling or unable to provide adequate care. Typically, children are not placed in foster care unless the parent, guardian or caretaker has been offered services directed at preventing out-of-home placement. In emergency situations, children can be removed from their homes immediately. Generally, relatives are preferred as a first placement alternative to non-relative foster care placement.

Children who are placed in foster care should be placed in the least restrictive, most family-like setting that is appropriate to the child's safety and best interests. Foster care placements are intended to be temporary, until the child can be reunited with the family or provided with an alternate permanent living situation through adoption or guardianship.

BENEFITS/ SERVICES

Foster care services vary depending on the person receiving services.

- *For the child.* DSS will assess needs to ensure appropriate placement and services; arrange and monitor the child's placement; provide on-going risk assessment; arrange medical examinations and other services; provide transportation when needed; supervise the foster care facility to ensure

proper care during placement; provide independent living services to assist older youth in learning life skills; and prepare the child for adoptive placement. In addition, children who are in a foster care placement through the county DSS may be eligible for Medicaid. Medicaid eligibility is based upon the biological family's income and whether the child receives SSI.

- *For the child & family.* DSS will provide services to protect children at home, strengthen families, and prevent out-of-home placement; develop and arrange community-based services to support the child and family; collaborate with other community service providers already working with the family; refer the child and family to needed services, including clinical treatment; provide treatment services as appropriate; and provide counseling to help the child and family cope with the grief resulting from separation and placement.
- *For the family.* DSS will include the family in planning and decision making about placement; involve the kinship network to provide planning, placement and other support for the child and family; assess strengths and needs to determine appropriate plan for service; develop and implement the Family Services Case Plan with the family; help meet plan objectives by providing information, instruction, guidance and mentoring on parenting skills; monitor and update the plan with the family; and develop alternate option with the family to provide a permanent home to the child should reunification fail.
- *For the foster care family/facility.* DSS will recruit, develop and supervise foster care families and child care facilities; provide consultation, technical assistance, and training to expand and improve the quality of care provided; and involve the foster care family in planning and decision making for children in care.
- *For child, family and foster care.* DSS will prepare the child, family, and foster family or facility for separation and placement; negotiate visitation agreements for the family; provide case management; and maintain contact.

Foster Care Payments

There are two sources of governmental revenue for foster care payments: Title IV-E Foster Care Maintenance and State Foster Home Funds. The funding used depends on the family's income. If the child has income through Social Security Disability or Social Security death benefits, Veteran's benefits, child support, or an endowment, etc., the amount of foster care payment may be offset by some or all of the child's income.

The standard foster care payment is as follows:

Child:

- \$315 per month for children 0-5
- \$365 per month for children 6-12
- \$415 per month for children 13+

For children who have been perinatally exposed to HIV or who have developed symptoms of AIDS, supplemental payments of \$800-\$1600 are available, depending on the child's medical status:

- Children with indeterminate HIV status: \$800/month;
- Children with confirmed HIV-infected, asymptomatic: \$1,000/month;
- Children with confirmed HIV-infected, symptomatic: \$1,200 per month; or
- Children who are terminally ill with complex medical needs: \$1,600/month.

APPLICATIONS

There are no formal applications for this program.

By law, the county Director of Social Services has the authority to place a child in foster care if one of the following situations exists:

- The child has been placed in the legal custody of the Department of Social Services by a court, and the order gives the agency the authority to determine the most appropriate foster care placement;
- The family, guardian or legal custodian gives the agency a written agreement that the child may be placed in foster care;
- The child has been released to the county Department of Social Services for adoption; or
- An 18 year old or emancipated child signs a written voluntary agreement to remain in foster care.

**ELIGIBILITY
REQUIREMENTS**

Foster care must be provided to any child residing in North Carolina if the county Department of Social Services has the legal authority for placement (see above) and believes that it is not safe for the child to remain in his or her home due to abuse, neglect or dependency. There are no other eligibility requirements for foster care placement. Thus, children do not have to meet any income, resource or citizenship requirements.

**NUMBERS
SERVED**

As of June 30, 1998, there were 6,702 North Carolina children in foster care living arrangements. An additional 4,840 children were in the custody and placement responsibility of DSS, but were not in foster care placement. Approximately 1,050 of these children were still living with their parents, and approximately 2,000 were living with other relatives. The rest were in non-foster care placements such as hospitals, mental health facilities, and correctional facilities.

PRIORITIZATION SYSTEM All children entering foster care from the Child Protective Services system are entitled to receive these services.

APPEAL RIGHTS The initial determination to remove the child from the parents' custody occurs at the District Court level. Parents have the right to appeal the district court's order to place their child(ren) in foster care. This appeal is heard by the state Court of Appeals. Once the DSS has custody, the agency has the legal right to make determinations regarding placement of the child. The District Court maintains its authority to determine if and when the child will be reunited with the family, and the conditions for reunification.

FINANCING There are two sources of governmental revenue for foster care payments: Title IV-E Foster Care Maintenance and State Foster Home Funds. The funding used depends on the family's income. Therefore, the portion of the total cost covered by federal, state and county funds varies from year to year according to the family income and eligibility for funding sources. The following is a breakdown of the FY 1997-1998 total expenses:

| | |
|-------------------------|----------------|
| Federal: | \$50.8 million |
| State: | \$14.3 million |
| County & other private: | \$28.4 million |
| Provider match: | \$ 7.4 million |

ADMINISTRATION The Foster Care program is administered on the national level by the Administration for Children, Youth, and Families. The Division of Social Services, within the NC Department of Health and Human Services, supervises the program on the state level. Services are administered on the local level by the county Department of Social Services.

SOURCES OF LAW Federal statute: PL 96-272
PL 99-272
State statute: NCGS 108A-48 (State Foster Home Funds)
NCGS 143-153(3) (Social Services Commission authority)
NCGS 131D-10
NCGS 7A-574, 7A-577, 7A-651, 7A-661, 108A-24, 108A-49

FOR MORE INFORMATION For more information contact:
Division of Social Services
NC Department of Health and Human Services
Children's Services
325 N. Salisbury St.
Raleigh, NC 27603
919-733-4622
<http://www.state.nc.us/DHR/DSS/ChildrensServices>

Adoption Assistance

OVERVIEW

What is it?

A federal and state program that provides cash assistance and other benefits to families who adopt children with special needs from the foster care system.

Who is it for?

Children with special needs in the foster care system include those who have physical, mental or emotional disabilities, are members of a sibling group that need to be placed together, and/or are members of minority groups.

To qualify for adoption assistance, children with special needs must be available for adoption and in the custody of public or private agencies. They do not include children who are placed independently, or foreign-born children who are brought to this country for the purpose of adoption. However, foreign-born children who come into the foster care system as a result of abuse or neglect are eligible for assistance if they have special needs.

Where are applications taken?

Local Departments of Social Services determine eligibility for all children who receive adoption assistance.

INTRODUCTION

The Adoption Assistance program provides monthly cash payments and other benefits to families who adopt children with special needs. The goal of the program is to reduce the number of children in the foster care system and to provide children with permanent homes. This program is an entitlement program, so all eligible families can receive assistance.

BENEFITS/ SERVICES

There are four different types of assistance provided to families who adopt children with special needs: cash assistance, vendor payments, Medicaid and assistance with non-recurring expenses.

Cash Assistance

Families can receive cash assistance for an adopted child with special needs. The amount of the monthly payment varies depending on the age of the child. The maximum monthly adoption assistance payments that counties can claim a federal and state match for are:

- \$315 per child for children birth through age five,
- \$365 per child for children ages six through 12,

- \$415 per child for children ages 13 through 18.

Children with HIV are eligible for supplemental payments, as follows:

- \$800 per child with indeterminate HIV status;
- \$1,000 per child when confirmed HIV infected, asymptomatic;
- \$1,200 per child when confirmed HIV-infected, symptomatic; or
- \$1,600 per child when the child is terminally ill with complex medical needs.

All adoption assistance payments terminate when the child reaches his/her 18th birthday.

Vendor Payments for Medicaid or Therapeutic Services

Vendor payments are used to pay for services or treatment of a handicapping conditions that existed prior to the time of the child's placement for adoption. The vendor payments amounts are:

- \$1,200 per year for services or treatment not covered by any medical insurance program, such as Medicaid or private insurance; and
- \$1,200 per year for payments of specialized non-medical services such as psychological, therapeutic, tutorial and/or remedial services.

Medicaid

All children eligible for adoption assistance qualify for Medicaid regardless of the income of the adoptive parents, unless the child has an income, such as Social Security from a deceased birth parent, that is above the allowable limits for Medicaid eligibility.

Non-Recurring Expenses

Parents adopting special needs children are eligible for reimbursement of the non-recurring costs of the adoption. The total amount of reimbursement cannot exceed \$2,000. These costs include adoption fees, court costs, attorney fees, and other expenses that are directly related to the legal adoption of the child. Adoption-related expenses can include: the costs of pre-placement assessment, including physical and psychological examinations; transportation and reasonable costs of lodging and food for the child and/or adopting parents when necessary to complete the adoption process; and supervision of the placement. Adoptive parents must apply for reimbursement of the non-recurring costs.

APPLICATIONS

Children who are in the custody of the local Department of Social Services, or one of 19 private adoption agencies (listed below), may be eligible. However, eligibility for assistance is determined by the birth parents' local Department of Social Services.

| City | Private Adoption Agency |
|---------------|--------------------------------------|
| Greensboro | AGAPE of NC |
| Charlotte | Another Choice for Black Children* |
| Charlotte | Bethany Christian Services |
| Raleigh | Bethany Christian Services |
| Asheville | Bethany Christian Services |
| Asheville | Caring for Children (Adoption Plus)* |
| Greensboro | Carolina Adoption Services |
| Raleigh | Catholic Social Ministries |
| Charlotte | Catholic Social Services |
| Greensboro | Children's Home Society of NC* |
| Matthews | Christian Adoption Services |
| Cary | The Datz Foundation |
| Winston-Salem | Family Services |
| Charlotte | The Gladney Center |
| Raleigh | International Adoption Society |
| Charlotte | LDS Social Services |
| Raleigh | Lutheran Family Services |
| Raleigh | Methodist Home Adoption Services |
| Chapel Hill | Mandala of Chapel Hill |

Note: Those agencies with an asterisk () have statewide contracts to place children with special needs and are reimbursed by the state for the adoptive placement of children from the foster care system.*

ELIGIBILITY REQUIREMENTS

The children are eligible if they are in the custody of a NC public or private agency, are available for adoption, and have special needs. Adoption assistance is not available in independent placements or for foreign-born children who come into this country for the purpose of adoption. However, foreign-born children who come into the system as a result of abuse or neglect may be eligible for assistance if they have special needs.

There are no financial eligibility requirements for the adoptive parents. The adoptive parents should inquire of the agency to see if the child is eligible for adoption assistance before the adoption takes place. Adoption benefits begin a month after the adoption is finalized.

Need

To receive adoption assistance, the child must:

- Be in the foster care system and have a special needs;
- Have a physical, mental or emotional disability;
- Be part of a sibling group that is adopted together; and/or
- Have membership in certain minority groups.

| | |
|------------------------------|---|
| NUMBERS SERVED | There are approximately 4,000 children served each year under the adoption assistance program. |
| PRIORITIZATION SYSTEM | All eligible children receive services. |
| APPEAL RIGHTS | <p>Adoptive parents, or prospective adoptive parents, of a child with special needs have the right to appeal the amount of assistance (including a decrease or termination of benefits), a denial of assistance, or failure to inform them of the availability of assistance. Appeals should be initiated with the agency that placed the child or had custody of the child.</p> <p>Applicants or potential recipients have a right to a hearing if they believe they have been wrongly denied financial assistance, not informed of the availability of a program of assistance, or excluded from a service program. The hearing officer will determine whether extenuating circumstances exist and if the applicant or recipient was wrongly denied eligibility.</p> |
| FINANCING | <p>The adoption assistance program is financed through a combination of federal, state and county dollars. The amount of federal, state and county participation depends on the category under which the child is eligible for assistance. There are three different funding sources.</p> <ul style="list-style-type: none"> • <i>IV-E Funding</i>—Children are eligible to receive assistance under the IV-E program if, at the time they are cleared for adoption (either through termination of parental rights or relinquishment), they are eligible for IV-E foster care assistance benefits or SSI benefits, or they are recipients of Family Assistance (TANF) benefits living with a relative who was given custody by a NC child placing agency. The federal government provides approximately 63% of the cost, and the state and county share the remaining 37%. • <i>IV-B Funding</i>—Children are eligible for IV-B funding if they are not IV-E eligible. Funding is derived from federal IV-B funds and county funds. Counties provide 25% of the cost. • <i>SAF (State Adoption Fund)</i>—This includes all children whose adoption was finalized before June 30, 1982, and all children placed by private adoption agencies. Funding for this category is provided from IV-B funds and state funds. No county funds are required as match. |
| ADMINISTRATION | The program is administered on the federal level by the Administration of Children, Youth and Families within the US Department of Health and Human Services. The program is administered at the state level by the Children's Services Section, Division of Social Services within the NC Department of Health and Human Services and at the local level by the local Departments of Social Services. |

SOURCES OF LAW Federal statute: PL 96-272
State statutes: NCGS 108A-50
State regulations: 10 NCAC 41H.0400
State policy: Family Services Manual, Vol. 1, Chapter 6

FOR MORE INFORMATION Special Needs Adoption Coordinator
NC Department of Health and Human Services
Division of Social Services
325 N. Salisbury Street
Raleigh, NC 27603
919-733-4622

CARELINE: 1-800-662-7030

Adolescent Parenting Program (APP)

OVERVIEW The Adolescent Parenting Program (APP) is a program of services for adolescents 17 years of age or younger who are either parenting for the first time or are pregnant. APP's goals are to help prevent second pregnancies, and to complete their secondary education or obtain their GED. The program also provides teens with the education and skills training to become better parents. The program is currently available in 30 counties.

**BENEFITS/
SERVICES** Participants in the adolescent parenting program receive individualized casework services, referrals to other agencies, education, family planning and parenting classes. In addition, teens are matched with a volunteer parent aide. The program includes monthly peer group meetings.

The program is available from 30 public and private agencies located across the state.

| County | Agency |
|-------------|---|
| Alamance | Burlington City Schools |
| Anson | Anson County Partnership for Children |
| Burke | Department of Social Services |
| Caldwell | Department of Social Services |
| Chatham | Chatham County Health Department |
| Craven | Department of Social Services |
| Cumberland | Department of Social Services |
| Durham | Department of Social Services |
| Edgecombe | Department of Social Services |
| Forsyth | Catholic Social Services |
| Franklin | Department of Social Services |
| Gaston | Department of Social Services |
| Greene | Greene County Health Care |
| Guilford | YWCA of High Point |
| Henderson | Department of Social Services |
| Hertford | Hertford-Gates District Health Department |
| Johnston | Department of Social Services |
| Lenoir | Young Women's Outreach Center |
| McDowell | McDowell County Schools |
| Mecklenburg | The Family Center |
| New Hanover | Planned Parenthood of the Capital and Coast |
| Onslow | Department of Social Services |
| Orange | Department of Social Services |
| Pender | Planned Parenthood of the Capital and Coast |
| Robeson | Robeson County Health Department |
| Stanly | Department of Social Services |
| Swain | Cherokee Family Services |

| County | Agency |
|--------|--|
| Union | Department of Social Services |
| Vance | Vance County Child and Family Services |
| Wake | Wake County Exchange Club Center |

APPLICATIONS There are no applications for the program. Children are referred to the program through schools, churches, health departments, Departments of Social Services or other agencies.

ELIGIBILITY REQUIREMENTS To be eligible for the program, the child must be 17 years old or younger, parenting their first child or pregnant, a resident of one of the 30 counties that offers an Adolescent Parenting Program, and receiving Medicaid. In most counties, the teens may continue to receive the services until they graduate from high school even if they lose Medicaid eligibility. However, in some counties, the teen may lose eligibility for this program if she is no longer receiving Medicaid. There is no fee for this program.

NUMBERS SERVED The program serves between 400-450 teens/year statewide.

PRIORITIZATION SYSTEM Most of the counties are able to serve all eligible teens, but some counties may have a waiting list to participate in the program.

FINANCING The program is financed by Medicaid funds. The federal government pays 50%, the state pays 35%, and the counties pay 15% of program costs (although counties can add additional funds to this program). The typical county-level program receives \$54,258.

ADMINISTRATION The program is administered on the federal level by the Health Care Financing Administration, US Department of Health and Human Services (which oversees the Medicaid program). The program is administered at the state level by the Women’s Health Branch, Women’s and Children’s Health Section in the NC Department of Health and Human Services, and at the county level by various public and private agencies.

SOURCES OF LAW

| | |
|----------------------|--|
| Federal statute: | None |
| Federal regulations: | None |
| State statute: | Appropriations Act |
| State policy: | Family Services Manual, Vol. 1, Chapter 12 |

**FOR MORE
INFORMATION**

Women's Health Branch
Women's and Children's Health Section
NC Department of Health and Human Resources
1330 St. Mary's St.
PO Box 29597
Raleigh, NC 27626-0597
(919) 715-8432

CARELINE: 1-800-662-7030

Support Our Students (SOS)

OVERVIEW

What is it?

Support Our Students (SOS) is a public-private partnership that provides after-school activities to middle school children.

Who is it for?

Middle school children, 9-14 years old, who are at-risk for dropping out of school, getting into trouble with the law, or who are unsupervised in the afternoon.

Where are applications taken?

The application process varies for each initiative. Interested families should contact the local project directly.

INTRODUCTION

SOS is a public-private partnership to help prevent juvenile crime by providing after school activities to middle school children. Passed by the General Assembly in 1994 as part of the Special Session on Crime, it relies heavily on community involvement and contributions. SOS has five main goals: to reduce juvenile crime, reduce the number of "latchkey" children, improve academic performance, recruit community volunteers, and improve collaboration with existing community resources.

BENEFITS/ SERVICES

While services vary by community, initiatives are designed to provide students with the opportunity to participate in educational, constructive and interesting activities during after-school hours. Examples of SOS project activities include: enrichment tutoring and homework help, community service, chess, violence prevention, substance abuse prevention, sports, arts and crafts.

APPLICATIONS

Applications are taken by the local agency. Currently there are 76 county programs, each with a different application process. Individuals interested in participating in the program can call the local agency directly for application information, or the SOS Support Office in Raleigh (919-733-3011) for the number of the closest program.

ELIGIBILITY REQUIREMENTS

General Eligibility Requirements

To participate in the SOS program, children must be between the ages of 9-14, enrolled in middle school, and be at risk of dropping out of school, getting into trouble with the law, or be unsupervised after school. Children are typically referred to SOS programs by school administrators, courts, parents and/or the children themselves.

Need

There are no additional need requirements for participation in the program.

Income Eligibility

There are no income eligibility requirements.

Resource Eligibility

There are no resource eligibility or assets tests required.

Fees

Most programs do not charge fees. For the small number of programs that charge a nominal fee, scholarships are available to ensure access for children who are unable to pay.

**NUMBERS
SERVED**

Support Our Students funds non-profit agencies in 76 counties, serving 13,000 students at 200 sites.

**PRIORITIZATION
SYSTEM**

Prioritization of students are handled at the local level based on the needs of the specific county. At the state level, SOS grant funds are distributed to non-profit organizations through a competitive request for proposal process.

APPEAL RIGHTS

Not applicable.

FINANCING

SOS is financed through state funds and local contributions. Local schools, businesses, religious organizations, civic and community groups, individuals and youth-oriented agencies donate a significant amount of resources to the operations of SOS initiatives through volunteer, in-kind and cash contributions.

ADMINISTRATION

SOS is administered at the state level by the Division of Youth Services within the NC Department of Health and Human Services, and at the local level, by non-profit agencies who design and run their own program.

SOURCES OF LAW

State statute: GS 143B-152.1-152.7

**FOR MORE
INFORMATION**

Support Our Students
NC Department of Health and Human Services
Division of Youth Services
705 Palmer Drive
PO Box 29527
Raleigh, NC 27626-0527
(919) 733-3011

Food Stamps

OVERVIEW

What is it?

A federal program that provides a monthly Food Stamp allotment that may be used to purchase food. The Food Stamp program is an entitlement program, so all eligible individuals and households can receive assistance.

Who is it for?

Individuals and families who meet financial and other eligibility requirements.

Where are applications taken?

Applications are taken at county Departments of Social Services. Decisions on applications should be made in 30 days.

INTRODUCTION

The Food Stamp program is the primary, government-sponsored program designed to improve the nutrition of low-income individuals and families. The federal government determines virtually all of the program rules and provides almost all of the funding.

BENEFITS/ SERVICES

Food Stamp Benefits

Food Stamp benefits consist of a monthly allotment that may be exchanged for food. The maximum allotment is adjusted each October. The maximum coupon allotments for October 1998 through September 1999 are as follows:

| Number in Household | Maximum Monthly Allotment |
|----------------------------|----------------------------------|
| 1 | \$ 125 |
| 2 | 230 |
| 3 | 329 |
| 4 | 419 |
| 5 | 497 |
| 6 | 597 |
| 7 | 659 |
| 8 | 754 |

Each additional person add \$94

A Food Stamp unit's allotment is calculated by multiplying the unit's net monthly income by 30 percent. This amount (rounded up) is then subtracted from the maximum food stamp allotment (see above). The difference is the Food Stamp Unit's

monthly food stamp amount. Thus, for example, a family of four with \$800 in net monthly income will have a monthly allotment of \$179. ($\$800 \times .30 = 240$. $\$419$ maximum allotment for a family of four - $\$240 = \179 .) The minimum food stamp allotment that any eligible household will receive is \$10. In the first month, the monthly food stamp allotment will be prorated from the date of application.

Food Stamp benefits may be used to purchase most foods at participating stores. They may not be used to purchase tobacco, pet food, paper products, soap products, cooked foods, or alcoholic beverages. Residents at shelters for battered women may be eligible to use Food Stamp benefits to pay for their meals, and food stamp benefits can be used at a limited number of restaurants to purchase prepared foods for individuals who are homeless.

Issuance

Food Stamps are issued in four different ways, depending on the county in which the recipient lives. In some counties, food stamps are mailed directly to eligible households. In a few counties, an ATP (Authorized to Participate) card is sent in the mail. This card must be taken to an issuance center and exchanged for Food Stamps. The issuance center may be a bank or other designated center. Some counties offer on-line issuance. In these counties, the coupons are obtained from the county Department of Social Services.

Counties are converting to electronic benefit (EBT) cards to issue food stamp benefits. These cards are like ATM bank cards, and can be used at grocery stores. The grocery store will deduct the amount of groceries directly from the card, using an electronic scanning device. Counties will provide training on the cards prior to issuance. All counties will be issuing benefits through the EBT cards by June 1999.

Replacement of Food Stamps

If a household did not receive the Food Stamps or the ATP card in the mail, they can be replaced by the Department of Social Services. Food Stamps or ATP cards that were received but thereafter destroyed in a disaster (such as flood, hurricane, fire, etc.) or mutilated (in the washing machine) can be replaced. Food purchased with Food Stamps but destroyed in a disaster may also be replaced. Stolen ATP cards may also be replaced, but stolen Food Stamps will not be.

APPLICATIONS

Normal Processing Procedures

Applications are taken at county Departments of Social Services. Some counties have Food Stamp outreach offices as well. Persons who live in households consisting only of SSI (Supplemental Security Income) applicants or recipients may apply for Food Stamps at the Social Security Administration Office.

An adult member of the household or an authorized representative of a household may file an application. An applicant must be permitted to apply the day he/she appears at the office. This is important because benefits are prorated from the day of application. (An authorized representative is someone who does not live in the household but agrees to act for the household). Disabled persons may be able to

apply by phone or can request a DSS worker to come to their home to fill out an application.

The Department is required to process the application in 30 days, unless the processing is delayed by the household (i.e., by failing to provide the information needed to process the application). A household that has delayed the application in the first 30 days, but that brings in the needed information within the next 30 days, will have their application approved, but benefits will begin with the second 30 days. If the county is at fault for delaying the application, the benefits must be retroactive to the day of application.

Expedited Processing/Emergency Food Stamp

Some households are entitled to have their applications processed within seven calendar days (called “emergency” food stamps). To be eligible for emergency food stamps, a household must:

- Have liquid resources of not more than \$100 and countable gross monthly income of not more than \$150; or
- Be a migrant or seasonal farm worker with not more than \$100 in liquid assets and without an ongoing source of income (Note: strict eligibility rules apply to immigrants, see Personal Eligibility section below); or
- Have liquid resources and a monthly gross income of less than the household’s monthly rent or mortgage, and utilities.

What to Bring

The applicant should bring as many documents as possible when he/she files an application to help expedite the eligibility determination process. Some of the information likely to be requested includes:

- Proof of identify;
- Past four weeks pay stubs of anyone in the household who is working, or a statement of wages from employers;
- Social Security or SSI award letters;
- Statements of annuity or pension income;
- Statement of income from any other source, such as Veterans benefits, Worker’s Compensation, Unemployment Insurance, child support, alimony, rentals, etc.;
- Rent/mortgage and utility bills or receipts;
- Social Security number or application for each household member; and
- Bank statements.

The household should not delay in applying for food stamps even if they lack the information listed above. Applicants have the primary responsibility to supply the necessary documents, but those who need help gathering the necessary information can request assistance from the Department of Social Services. It is important to start the application process, because when eligibility is finally determined, benefits will be paid back to the date the application was filed.

Certification Period

Food stamps are provided each month throughout a “certification period.” This period can be from three to 12 months, depending on the likelihood that the household’s circumstances will change. The household will be notified prior to the end of the certification period, so that the household may make an appointment and be re-certified. The re-certification process is basically the same as the initial application process, but the department will only need to re-verify items that may have changed (such as income).

Most households with fluctuating income have three-month re-certification periods. Families are mailed a quarterly reporting form, which must be sent back to the Department of Social Services (along with any necessary documentation). Households subject to this quarterly re-certification process will be required to attend a face-to-face interview once a year.

ELIGIBILITY REQUIREMENTS

Personal Eligibility Requirements

To be eligible for Food Stamps, members of the household must be residents of North Carolina, US citizens (or meet some of the specific eligibility criteria for immigrants), and meet certain income, resource and work requirements. Able bodied adults with no children are only eligible for Food Stamps for three months in a 36 month period, unless the person lives in a county that has received a waiver of these requirements or unless they meet work requirements.

Household Definition:

Food stamps are provided to an individual or group of individuals who purchase and prepare meals together. A person who receives Food Stamps or a group of people who receive Food Stamps is called a “Food Stamp Unit.” The composition of a Food Stamp Unit is very important for two reasons: (1) the income and resources of everyone in the unit is counted in determining eligibility, and (2) the amount of benefits allowed varies based on household size, allowing a larger benefit per person in smaller households.

People living under the same roof who do not purchase and prepare food together can be separate Food Stamp Units, except for the situations noted below.

Mandatory Food Stamp Units:

The following people must be in the same Food Stamp Unit if they live together, even if they do not purchase and prepare their food together:

- Children under 18 living with an adult who exercises parental control over the children;
- Children ages 19 through 21 living with a parent who receives Food Stamps (Adult children age 22 and over living with parents can be separate Food Stamp Units if they can prove that they purchase and prepare their food separately and that they are married and living with their spouses or have children);

- Spouses; or
- Siblings, unless one sibling has a minor child or children, or unless both siblings are over age 21.

Other people living under the same roof who do not purchase and prepare food together can be considered a separate Food Stamp household. In addition, under certain circumstances, elderly (60 years of age or older) or disabled persons can be eligible as a separate household even if they purchase and prepare meals with others.

Note: It is almost always better to have multiple households because the combined food stamps of the multiple units is almost always more than for one household.

Non-Unit Members

Non-unit members are individuals who cannot be considered part of the Food Stamp unit. Generally, the income and resources of non-unit members will not be counted in determining the eligibility of the Food Stamp Unit. However, the income and resources of non-unit members who are disqualified from participating will be counted (see Deemed Income, below). These individuals include:

- Individuals who are roomers,
- Individuals who are students (see below),
- Individuals disqualified from participation due to an intentional program violation,
- Individuals who are currently disqualified for work registration requirements or for transferring resources,
- Individuals who are the principal wage earners for the Food Stamp Unit who are disqualified for voluntarily quitting employment,
- Individuals who do not meet citizenship/alien status requirements, and
- Individuals who fail or refuse to cooperate with Social Security number enumeration requirements.

In some cases, non-unit members may be eligible as separate households.

Students

A student is someone who is age 18 through 49 (inclusive) who is enrolled at least half-time in an institution of higher education. A student is generally ineligible for Food Stamps unless he or she is:

- Employed a minimum of 20 hours per week in paid employment;
- Self-employed a minimum of 20 hours per week and earning at least the minimum wage;
- Responsible for the care of a dependent Food Stamp unit member under age six;
- The parent or person exercising parental control over a dependent Food Stamp unit member under age 12 when there is no other parent or person exercising parental control in the home;
- Responsible for the care of a dependent food stamp unit members who is between the ages of 6 and 12 if adequate child care is not available;

- Receiving Work First payments;
- Assigned to an institution of higher education through the Job Training Partnership Act (JTPA) or a Food Stamp Employment and Training program;
- Participating in an on-the-job training program; or
- Working in a state or federally financed work-study program during the regular school year.

Residency

A household must live in the county in which it applies. There is no requirement that a person have a mailing address or have lived in the county for any minimum length of time. Homeless individuals and families are eligible, including those who spend time at shelters for the homeless, and those who are staying temporarily with family or friends.

Citizenship/Immigration Status

The welfare reform bill that was signed into law on August 22, 1996 made most immigrants ineligible for Food Stamps benefits. Although there are some exceptions, many noncitizen children with disabilities will no longer be able to receive Food Stamp benefits.

There are several groups who can qualify for Food Stamps. These include:

- Certain children of permanent resident aliens, if the parents have a substantial work history in the US (must have “40 quarters” of qualifying work);
- Unmarried dependent children (under age 21) of US armed forces veterans who were honorably discharged or active duty military personnel;
- Refugees, asylees, those granted withholding of deportation, Cuban/Haitain entrants and Amerasians for their first 7 years after admission to the US;
- American Indians born in Canada and other tribal members born outside the US Members of Hmong/Laotian tribes, their spouses, widows and unmarried dependent children are also eligible; or
- Qualified immigrants (including legal permanent residents) who were in the US on August 22, 1996 and who were either disabled or who become disabled at a later date, who are younger than 18 or who are older than 65. Although these individuals were initially cut off by the welfare reform bill, they were later made eligible by the Balanced Budget Act which was passed in August 1997.

While the immigrant requirements prevent certain immigrants from receiving Food Stamps, it does not prevent others living with an ineligible alien from receiving Food Stamps.

Able-Bodied Adults

Able-bodied adults who are between the ages of 18 and 49 may only receive Food Stamps for three months out of a 36-month period. This restriction does not apply if the adult:

- Is working 20 hours a week (or 80 hours a month), or is engaging in a variety of allowable work-related activities for the same amount of time (such as employment and training, workfare, Job Training Partnership Act, community-service, etc.);
- Is pregnant or disabled; or
- Cares for a dependent child under the age of 18 who is a member of the Food Stamp Unit.

In addition, able-bodied adults in certain economically distressed counties are exempt from this restriction. The following counties are exempt from the able-bodied adults work requirements:

| | |
|-----------|-------------|
| Bertie | Jones |
| Camden | Northampton |
| Caswell | Pamlico |
| Currituck | Perquimans |
| Gates | Polk |
| Graham | Swain |
| Greene | Tyrrell |
| Halifax | Warren |
| Hyde | |

Income Eligibility

Food Stamp households without a member age 60 or older must meet both a “gross monthly income” test and a “net monthly income” test to be eligible for benefits. Those households with a member age 60 or older need only meet the net monthly income test. The income limits usually change each October.

The figures in effect from October 1998 through September 1999 are as follows:

| Household Size | Maximum Monthly Gross Income | Maximum Monthly Net Income |
|------------------------|------------------------------|----------------------------|
| 1 | \$ 873 | \$ 671 |
| 2 | 1,176 | 905 |
| 3 | 1,479 | 1,138 |
| 4 | 1,783 | 1,371 |
| 5 | 2,086 | 1,605 |
| 6 | 2,389 | 1,838 |
| 7 | 2,693 | 2,071 |
| 8 | 2,996 | 2,305 |
| Each additional person | add \$304 | add \$234 |

Countable Income

The following are the major types of income that are counted to determine Food Stamp eligibility:

- Wages from any type of work;
- Income from self-employment, minus operating expenses;
- Rent from tenants or boarders;
- Work First payments;
- Supplemental Security Income (SSI);
- Social Security benefits;
- Veterans benefits;
- Any type of public or private disability benefit;
- Any type of public or private retirement benefit;
- Unemployment Insurance;
- Workers' Compensation;
- Cash contributions;
- Income from investments;
- Child support or alimony; and
- Income from an immigrant's sponsor (see below).

Excluded Income

The following are the major types of income that are not counted:

- Non-cash benefits (such as Medicaid or housing subsidies);
- Emergency Assistance payments;
- Vendor payments (i.e., payments made directly to a landlord or utility company by some third party);
- Earned Income Tax Credit;
- Federal income tax refunds;
- Section 8 or HUD housing utility allowances;
- Irregular or infrequent income (no more than \$30 per calendar quarter);
- Non-recurring lump sum payments (which are treated as reserve);
- Loans, except for student loans and grants which are exempt only to the extent that they are used to pay for tuition, mandatory fees, and other educational expenses;
- Reimbursements for expenses other than regular living expenses, such as transportation and child care;
- Money received by a representative payee for a non-household member;
- Earnings of children, provided the child attends school at least half-time or is involved in job training through JTPA;
- Non-recurring lump sum payments (which are treated as reserve);
- Other income excluded by law, such as relocation assistance or energy assistance; or
- Work First Benefit Diversion Payments.

Deemed Income

Income from certain individuals is counted as available to the family, even though they are not considered part of the Food Stamp Unit. Different rules apply, depending on the reason the person is not included in the Food Stamp Unit.

- *Individuals who have been disqualified for an intentional program violation.* The person's countable gross income is counted in determining the Food Stamp Unit's income eligibility and amount of benefits.
- *Individuals who have been disqualified for failing to comply with Employment and Training requirements.* The person's countable gross income is counted in determining the Food Stamp Unit's income eligibility and amount of benefits.
- *Individuals who fail to meet the Social Security number enumeration requirements.* All of this person's gross income, minus a pro-rated amount for him or herself, is counted in determining the Food Stamp Unit's income eligibility and amount of benefits.
- *Individuals who fail to meet the citizenship/alien status requirements.* All of this person's gross income, minus a pro-rated amount for him or herself, is counted in determining the Food Stamp Unit's income eligibility and amount of benefits.
- *Immigrant's sponsor.* The full amount of income of a sponsor and his or her spouse (if living together) is countable income for the eligible immigrant's Food Stamp Unit, unless the immigrant becomes a citizen or the immigrant works 40 qualifying quarters.

Net Income Test

The net income of a household is determined by calculating the combined gross income and subtracting certain deductions. The deductions are:

- Standard deduction of \$134 per household;
- 20% of earned income;
- Medical expenses over \$35 per month for individuals who are elderly or disabled;
- Dependent care costs up to \$200 per month per dependent under age 2 and \$175 per month per dependent age 2 and older;
- Shelter and utility costs that exceed 50% of the household's remaining income after the deductions listed above, up to a maximum of \$275 (up until September 30, 2000). Household with elderly or disabled members are not limited by the cap; and
- Child support paid to children outside the household.

Resource Eligibility

Resources are cash or assets available to the household to meet its needs. A household's resources may not exceed \$3,000 for households with at least one member who is 60 years or older, or \$2,000 for other households. If all the members of the Food Stamp Unit receive either SSI or Work First money, they automatically meet the resource test.

The resources of all household members, even those who are disqualified, must be counted.

Countable Resources

The following are the major types of assets that are counted:

- Cash on hand;
- Money in savings or checking accounts, except the amount that represents monthly income;
- Savings bonds, certificates of deposit, stocks, bonds, and the like;
- Accessible retirement accounts (regardless of whether there is a penalty for early withdrawal);
- Lump sum payments;
- The value of real property and certain interest in real property not otherwise excluded;
- The equity value of unlicensed motor vehicles (the value after any loans are subtracted);
- The value in excess of \$4,650 of any vehicle not otherwise excluded;
- The value of revocable burial plans; and
- The value of promissory notes.

Excluded Resources

The following items are the major types of assets that are not counted:

- The home and surrounding property;
- Household goods and personal effects;
- One licensed vehicle, up to a fair market value of \$4,650, regardless of liens;
- Any income-producing vehicle, property or tools;
- Any vehicle used to transport a disabled household member;
- Any vehicle used for long distance travel necessary for a household member's employment;
- Any vehicle used to carry fuel or water if the household lacks piped-in heating fuel or water;
- Cash value of life insurance;
- Inaccessible retirement accounts, pension plans, and the like;
- Nonsalable interests in real property;
- Real property that the owner is attempting to sell;
- Federal disaster assistance, relocation assistance or reparation payments; and
- The resources of an incorporated business.

If the countable resources of all the household members exceeds the limits, the household is not eligible.

Evaluation of Resources

The Department of Social Services will assign a value to the resources, using standard methods, such as the tax value for real property or the value in the "blue book" for cars. If the Food Stamp applicant does not think the value assigned accurately represents the

value of his/her asset, he/she can rebut the value by producing other evidence of value. For example, a used car salesman might be able to provide an opinion that a car is worth less than the book value because of its poor condition. A real estate agent may be able to offer an opinion that real property is not worth the tax value because of the interest of co-owners who are unwilling to sell or other impediments to sale. The applicant or his/her advocate can present written documents rebutting the value, and if they are not accepted, ask for a hearing.

Jointly-owned Resources

If a resource is owned jointly with one or more other individuals, an assessment will be done to determine how much of the resource will be counted to the Food Stamp Unit. If all of the joint owners are in the same Food Stamp Unit, the entire value counts. If any-one outside the unit owns a portion, the portion of the resource owned by the Food Stamp recipient is counted. Usually, a jointly-owned resource is divided equally among all the owners. If a legally binding agreement specifies a different division, that agreement is honored. If the Food Stamp recipient cannot sell his or her share of the resource without the consent of the other owners, and the owners will not give their consent, the resource is not counted.

Transfer of Resource Penalties

A Food Stamp Unit will suffer a penalty if a member gave away resources in the three months prior to the application for the purpose of establishing eligibility for Food Stamps. The penalty is a period of time during which the unit may not receive Food Stamps. The length of the penalty varies from one to twelve months, depending on the value of the transferred resource. The twelve-month penalty is imposed for transfers of assets worth \$5,000 or more.

No penalty will be imposed if the unit can show:

- The transfer was for a purpose other than establishing Food Stamp eligibility;
- The transfer was of an excluded resource;
- The transfer was to another member of the Food Stamp Unit;
- The transfer was for fair market value; or
- The resource, if retained, would not have made the unit ineligible.

WORK REQUIREMENTS

Employment and Training

Persons age 60 or older are not required to register for work. Other persons in a Food Stamp household age 16 through 59 must register for the Employment and Training Program (E&T) and accept any suitable job referred by the Employment Security Commission, unless the household member is exempt. The Employment and Training program operates in the 79 counties not covered by Workfare (4 counties) or under the county-wide exemption from the Able-Bodied Adults Without Dependents work requirements (17 counties). In addition to job search and job placement activities, participants in E&T can participate in education and training activities through community colleges and Job Training Partnership Act (JTPA).

Exemptions

The following people are exempt from work registration:

- Those who are physically or mentally incapable of holding a job;
- Work First (formerly AFDC) applicants and recipients;
- Unemployment insurance applicants and recipients;
- Those who must provide care to a dependent child under the age of six or to an incapacitated household member;
- Those who are already working and receiving earnings equal to at least the federal minimum wage multiplied by 30 hours per week;
- Participants in a drug or alcoholic treatment and rehabilitation program;
- Students enrolled in school at least on a half-time basis;
- Migrant and seasonal farmworkers (this exemption does not apply to able bodied adults without dependents);
- Those who lack access to transportation (this exemption does not apply to able bodied adults without dependents);
- Homeless individuals (this exemption does not apply to able bodied adults without dependents);
- Household members experiencing an emergency (this exemption does not apply to able bodied adults without dependents); and
- Those who are not “job ready” as determined by the Employment Security Commission interviewer (this exemption does not apply to able bodied adults without dependents).

Geographically Remote Counties

Individuals in geographically remote counties are not required to register with the Employment Security Commission for work. The same 17 counties excluded from the Able-Bodied Adults without Dependents work requirements are considered geographically remote.

Workfare

In some counties, certain Food Stamp recipients must participate in Workfare in order to receive Food Stamps. Non-exempt recipients are required to work in unpaid employment. The maximum number of hours which the Food Stamp recipient is required to work is determined by dividing the family’s coupon allotment by the federal minimum wage. The Workfare program operates in four counties: Alamance, Davie, Mitchell and Surry.

GROUNDS FOR DISQUALIFI- CATION

Food Stamp Units may be subject to sanctions and a loss of Food Stamps for failing to meet certain program rules. Sometimes the whole household will be sanctioned, and at other times, only the individual that failed to comply is sanctioned.

The *whole household* may be disqualified if:

- A household member is on strike, unless the household was eligible prior to the strike;

- A unit member gave away a resource within three months prior to the application for purpose of becoming eligible for Food Stamps. Disqualification is from one to twelve months, depending on the value of the gift; or
- The household fails to complete the recertification process when required by the county Department of Social Services.

Individuals in an eligible Food Stamp Unit may be disqualified for the following reasons:

- The individual has been found to have committed an intentional program violation (which generally means the person committed fraud in order to obtain more Food Stamps than he or she was entitled to receive). This will disqualify the violator only, not the whole household, although the whole household may be required to pay back the extra Food Stamps. An individual disqualified for an intentional program violation will lose benefits for one year for the first offense, two years for a second offense, and permanently for any offenses thereafter.
- The individual fails to provide or verify his/her Social Security number without good cause.
- The individual is an ineligible immigrant.
- Failure to meet work requirements.
 - Individuals who fail to meet work requirements listed below may be subject to a disqualification period.
 - Anyone in the household, ages 18-59 who voluntarily quits a job of more than 20 hours a week without good cause. Good cause includes loss of child care, the loss of transportation, etc.
 - Anyone in the household who is required to register for work, or refuses to cooperate to get a job.
 - Non-exempt recipient fails or refuses to comply with Workfare registration or work requirements.

A Food Stamp recipient will be disqualified for one month, or until he or she “cures” the non-compliance, whichever is later, for the first work-related program violation. The second violation carries a three month penalty, and the third and subsequent violation carries a six month penalty (or until the problem is fixed, whichever is longer).

When an individual is disqualified, his or her income and resources continue to count in determining whether the other household members are eligible and the amount of Food Stamps they will receive.

APPEALS

Any Department of Social Services’ decision regarding a unit’s Food Stamps may be appealed. A family may, for example, appeal a denial, reduction or termination of benefits, the amount of benefits awarded, or the imposition of a sanction. An appeal gives the Food Stamp unit an opportunity to show that the DSS worker misunderstood the facts or incorrectly applied the rules or law to the facts.

A Food Stamp Unit may request an appeal within 90 days of the disputed decision. A Food Stamp unit whose benefits were terminated may have those benefits continued pending the hearing by requesting an appeal within ten days. An appeal may be requested either orally or in writing and should be directed to the county Department of Social Services.

The person appealing has the option of initially requesting an informal local conference. This would be helpful if there was a misunderstanding that could be cleared up easily. If the appellant does not request an informal conference, then the first appeal will be a state level hearing.

State Level Hearing

A state level hearing will be conducted by a hearing officer employed by the NC Department of Health and Human Services. The person appealing will be given written notice of the time, date and place of the hearing. It will be held at the county DSS office, probably within three to six weeks of the request. The hearing officer will not have been involved previously in the case.

The person appealing has the right to be represented, either by an attorney or another representative. Either the person appealing or the representative has the right to see the DSS file prior to the hearing. The person appealing will have an opportunity to question the DSS witnesses, produce evidence (both documents and witnesses) and testify in his or her own behalf. In addition, the appellant may be required to answer questions by the county worker or hearing officer. The hearing officer may, upon request, leave the case open to receive additional documentary evidence if a good reason is presented as to why it could not be made available during the hearing.

The state level hearing is, for all practical purposes, the last opportunity the person has to present evidence. Generally, no additional testimony will be taken. Therefore, it is very important to establish all necessary facts at this level.

The hearing officer has 60 days from the date of the request for an appeal to issue a written decision. Appellants who are dissatisfied with the hearing officer's decision can appeal to the Chief Hearing Officer within ten days, or may skip this level and file a petition for judicial review in Superior Court. The petition for judicial review must be filed within 30 days of the time the individual receives the notice of the DHHS decision.

Note: Anyone wishing to file such a petition would be wise to seek the services of an attorney before engaging in such a process. Free legal representation may be available for low income families. See Chapter 32.

NUMBERS SERVED

The average number of people each month who received Food Stamps in North Carolina in FY 1998 was approximately 540,933.

PRIORITIZATION SYSTEM

The Food Stamp program is an entitlement program, so all eligible individuals and families are served.

FINANCING

Food Stamps are financed primarily by the federal government. The federal government pays 100% of the program (Food Stamp) costs, and 50% of the administrative costs. The remaining 50% of the administrative costs are paid by the state/county (depending on whether the state or county incurs the costs).

In FY 1998, the federal government paid \$403,707,792 in food stamp coupons. The total costs for administering the program were \$77,035,471.

ADMINISTRATION The program is administered on the national level by the Food and Nutrition Service of the US Department of Agriculture. The program is administered on the state level by Economic Independence Section, Division of Social Services, NC Department of Health and Human Services and at the local level by county Departments of Social Services.

SOURCES OF LAW

| | |
|----------------------|-----------------------------|
| Federal statute: | 7 USC 2000 et. seq. |
| Federal regulations: | 7 CFR 271-285 |
| State statute: | NCGS 108A-51 et. seq. |
| State regulations: | 10 NCAC Chapter 30 et. seq. |
| State policy: | Food Stamp Manual |

FOR MORE INFORMATION

Division of Social Services
Economic Independence Section
NC Department of Health and Human Services
325 N. Salisbury St.
Raleigh, NC 27603
919-733-4570

CARELINE: 1-800-662-7030

Women, Infants, and Children Program (WIC)

OVERVIEW

What is it?

A nutrition program that provides nutrition education, breastfeeding support, infant formula, milk, cheese, eggs, cereal, juice, and other foods to eligible recipients.

Who is it for?

Pregnant and postpartum women, infants, and children under age five who are nutritionally at risk and have a family income not more than 185% of the federal poverty guidelines.

Where are applications taken?

At most local health departments and some community health centers. Decisions on applications should usually be made within 20 days, or ten days for pregnant women or infants under six months of age.

INTRODUCTION

The WIC program, formerly entitled the Special Supplemental Nutrition Program for Women, Infants and Children, provides breastfeeding support, food supplements and nutrition education for eligible individuals who are at nutritional risk. Because this is not considered an entitlement program, not all persons who meet the eligibility criteria will receive benefits.

BENEFITS/ SERVICES

Two benefits are available through WIC: food supplements and nutrition education.

Food supplements:

Eligible recipients receive free food vouchers that can be redeemed at authorized grocery stores for special foods. A professional at the health department or community health center makes up an individual “food prescription” for each participant that is tailored to his or her nutritional needs. The vouchers are for a monthly allotment of the specified foods. Participants must usually pick up the vouchers from the WIC provider. Usually, three months of vouchers can be picked up at a time. The vouchers must be redeemed within the time period stamped on them.

A typical food package for an *infant* will contain:

- Iron-fortified infant formula for 0-12 month olds (up to 403 fluid ounces concentrate);
- Iron-fortified dry infant cereal for 4-12 month olds (up to 24 ounces); and
- Fruit juice for 4-12 month olds (up to 92 ounces).

A typical food package for a *child* will contain:

- Milk (up to 24 quarts);
- Cheese (up to four pounds);
- Eggs (up to two and a half dozen);
- Iron-fortified dry cereal (up to 36 ounces);
- Fruit or vegetable juice (up to 276 ounces); and
- Dry beans (up to one pound) or peanut butter (up to 18 ounces).

A typical food package for a *pregnant or breastfeeding woman* will contain:

- Milk (up to 28 quarts);
- Cheese (up to four pounds);
- Eggs (up to two and a half dozen);
- Iron-fortified dry cereal (up to 36 ounces);
- Fruit or vegetable juice (up to 276 ounces);
- Dry beans (up to one pound) or peanut butter (up to 18 ounces); and
- For exclusively breastfeeding women: tuna (up to 26 ounces) and carrots (up to 32 ounces).

Nutrition Education

Each local program must make available free nutrition education as well as specific counseling tailored to the individual participant's need. WIC participants who decline the nutrition education benefits of the program may not be denied food supplements. Nutrition education should be simple and take into account the cultural and personal preferences of the participants. Pregnant women must be given information on breastfeeding, bottle feeding, and other aspects of infant feeding. Children should receive information geared to their level of understanding.

APPLICATIONS

Applications are taken at the local WIC program sites, which are usually county health departments. In eight counties, the WIC program is administered in other locations (see list below).

| County | WIC Provider |
|---------------|---|
| Chatham | Piedmont Health Services |
| Duplin | Duplin, Onslow and Pender Community Action Agency |
| Durham | Lincoln Community Health Center |
| Halifax | Twin County Health Center |
| McDowell | Saluda Medical Center |
| Orange | Piedmont Health Services |
| Polk | Saluda Medical Center |
| Rutherford | Saluda Medical Center |

Information about the WIC provider in a specific area can be obtained from the First Step hotline, 1-800-FOR-BABY (1-800-367-2299) from 9 am to 7 pm Monday through Friday.

An applicant must provide information on residence, income and other eligibility factors to complete an application. For example, an applicant may be required to submit a W-2 form and/or check stub from the last four weeks (to verify income), a recent utility bill or other document which verifies residence, and a birth certificate (to verify age of child), to verify eligibility.

The application also includes a nutritional assessment, carried out by a professional at the WIC site. This is used to determine whether the applicant is at “nutritional risk.” (See personal eligibility section below). The assessment will include at least a measurement of height and weight, and for adults and children over six months, a blood test to check the iron level. An applicant may wish to present other medical information in support of the application to show that he/she is at “nutritional risk.”

An applicant who is pregnant, applying on behalf of an infant up to age six months, homeless, or a member of migrant farm worker family that plans to leave the agency’s service area should receive an eligibility determination within ten days. Other applicants should have a determination within 20 days. Applications that are denied may be appealed.

Applicants are usually certified for periods of six months at a time. Pregnant women are certified for the duration of their pregnancy and six weeks postpartum. At the end of the certification period, the participant must be recertified to continue receiving the benefits. The recertification process is essentially like the application process. The WIC program administrator must give at least 15 days advance notice prior to the end of the certification period.

ELIGIBILITY REQUIREMENTS

Eligibility Requirements

To receive WIC benefits, a participant must be:

- A resident of North Carolina and/or in the service area of the local WIC provider;
- At nutritional risk; and
- Pregnant, breastfeeding (up to one year after the birth), postpartum (up to six months after the birth), or under age five.

Nutritional Risk (Need)

The determination of whether an individual is at “nutritional risk” is a medical judgment. A variety of conditions may qualify an individual. If the person is diagnosed with conditions such as the following, he/she will be considered at “nutritional risk:”

- Abnormal or detrimental nutritional conditions that can be detected by laboratory tests or observation, such as anemia or abnormal weight;
- Other documented nutritionally-related medical conditions;
- Dietary deficiencies that impair or endanger health; or
- Conditions that predispose persons to inadequate nutritional patterns, such as chronic infections, or alcohol, tobacco or drug abuse.

Income Eligibility

To be eligible, a participant must have a gross family income at or below 185% of the federal poverty guidelines. These guidelines are changed annually. The 1999 guidelines, which are in effect until April 1, 2000 are:

| Family Size | Maximum Gross Monthly Income |
|------------------------|-------------------------------------|
| 1 | \$1,271 |
| 2 | 1,706 |
| 3 | 2,140 |
| 4 | 2,575 |
| 5 | 3,010 |
| 6 | 3,445 |
| 7 | 3,879 |
| 8 | 4,314 |
| Each additional person | add \$435 |

A family is defined as a group of people, related or unrelated, who live together and function as one economic unit. The income of everyone in the family is counted to determine eligibility. The agency should consider the family's income in the past 12 months and the family's current rate of income to determine which more accurately reflects family's status.

Gross income includes wages, net income from self-employment, government checks (including Work First payments), child support or alimony, SSI, Social Security, unemployment compensation, worker's compensation, and any other cash income. It does not include the value of Food Stamps, subsidized housing, Medicaid or certain other government benefits. County WIC agencies will request proof of income. Income may be verified by copying a source document, such as a paycheck stub, or W-2.

Anyone who receives Food Stamps, Work First, or Medicaid automatically meets the financial criteria for WIC.

Resource Eligibility

There is no resource or assets test in this program.

NUMBERS SERVED

In SFY 1998, the average monthly number of WIC participants served was:

| | |
|----------------------|--------|
| Pregnant women: | 25,679 |
| Postpartum women: | 17,745 |
| Breastfeeding women: | 7,417 |
| Infants: | 53,533 |
| Children | 92,950 |

PRIORITIZATION SYSTEM

The state estimates that it is meeting the needs of approximately 77% of the eligibles. Because WIC is not an “entitlement” program, applicants who meet the above criteria may still be denied benefits if there are insufficient resources to serve everyone. When funds become limited, eligibility is determined based on a priority system:

- Priority I: Pregnant women, breastfeeding women and infants at highest nutritional risk;
- Priority II: Infants (up to six months) of mothers who participated in WIC during pregnancy, or of mothers who did not participate but would have been eligible;
- Priority III: Children (over age one) whose medical condition reveals them to be at high nutritional risk;
- Priority IV: Pregnant and breastfeeding women at lower nutritional risk;
- Priority V: Children (over age one) at lower nutritional risk; and
- Priority VI: Postpartum women at nutritional risk.

APPEAL RIGHTS

WIC applicants and participants have the right to a fair hearing to contest any local program decision regarding initial eligibility or subsequent termination of benefits. Local programs must give participants at least 15 days notice if they plan to terminate benefits.

A request for a hearing must be made within 60 days after notice of the decision was mailed. The request may be made orally or in writing, and directed to either the local WIC provider or to the state WIC office. (The details of how to request a hearing are contained in every notice of decision). The benefits can continue pending a hearing on termination of benefits, provided the appeal is requested within 15 days of the notice.

The hearing must be conducted by an impartial hearing officer, scheduled within three weeks of receipt of the request, and held at a location accessible to the person requesting the appeal. A decision must be made within 45 days of the receipt of the request. If a person is dissatisfied with the results of the hearing, he/she may request a further hearing with the Office of Administrative Hearings. The procedures for these hearings are controlled by the Administrative Procedures Act, NCGS 150B. Persons wishing to proceed through this step may want to seek the services of an attorney. Some WIC participants and applicants may be eligible for free legal services (See Chapter 32).

FINANCING

The WIC program is financed primarily through federal (99.25%) and state funds (0.75%). In SFY 1998, the program spent the following amounts:

Federal: \$66,772,441 (food)
 \$25,846,891 (nutrition services and administration)
 \$39,835,961 (formula rebates)
State: \$950,000

ADMINISTRATION

WIC is administered at the federal level by the Food and Nutrition Services within the US Department of Agriculture. The program is administered at the state level by the

Women's and Children's Health Section, NC Department of Health and Human Services, and at the local level by public health departments or community health centers that have contracted to be WIC providers.

| | | |
|-----------------------|----------------------|--|
| SOURCES OF LAW | Federal statute: | 42 USC 1786 et. seq. |
| | Federal regulations: | 7 CFR Part 246 |
| | State statute: | Sec. 15.27 of 1997 Session Law 443 (Appropriations Bill) |
| | State regulations: | 15A NCAC Chapter 21D |

**FOR MORE
INFORMATION**

Nutrition Services
Women's and Children's Health Section
NC Department of Health and Human Services
PO Box 10008
Raleigh, NC 27605
919-733-2973

First Step hotline, 1-800-FOR-BABY (1-800-367-2299) from 9 am to 7 pm Monday through Friday.

Child and Adult Care Food Program

OVERVIEW

What is it?

The Child and Adult Care Food Program (CACFP) provides financial assistance to adult and child care providers to encourage them to provide nutritious foods to their clients. CACFP also supplies nutrition education materials to these facilities.

Who is it for?

NC licensed public, non-profit and some for-profit child and adult care facilities that provide meals meeting federal guidelines.

Where are applications taken?

To apply, day care providers should call the Child and Adult Care Food Program (CACFP) offices in Raleigh at 919-715-1923. Day care centers may apply directly to the state. Day care homes need a sponsoring agency in order to participate in the program. The CACFP state office in Raleigh can provide a list of sponsoring agencies. Centers that apply directly are reimbursed more than centers that apply through a sponsoring agency, but have more paper work to complete.

INTRODUCTION

The Child Care Food Program began in 1968 and was expanded in 1989 to include adult care centers. CACFP provides participating day care providers with nutrition education materials and reimbursement for serving meals that meet federal guidelines.

BENEFITS/ SERVICES

Participating centers/homes receive nutrition education materials and reimbursement for the provision of healthy meals to all children or adults in their care. The amount of reimbursement is based upon the income level of the family receiving care. All families are charged the same for the day care services. The CACFP acts as an incentive to assure that day care providers offer nutritionally sound meals and snacks to their clients. Reimbursement rates for day care centers and homes are determined based on the following information:

- *Day Care Centers.* The rates vary according to the income of the adult/child's family and are based on a three category system: free, reduced or paid/denied. Families do not have to provide their income information to the center. Centers without income information are reimbursed at the lowest of the three levels (denied). The following are the rates that the centers receive (June 31, 1998-July 1, 1999):

Reimbursement rates per individual:

| | Free meals | Reduced price | Paid (denied) meals |
|--------------------|-------------------|----------------------|----------------------------|
| Breakfast | \$1.0725 | \$0.7725 | \$0.20 |
| Lunch/Supper | \$1.9425 | \$1.5425 | \$0.18 |
| Supplement (snack) | \$0.5325 | \$0.2675 | \$0.04 |

- *Day Care Homes.* The rates vary according to the location and income of the home and are based on a two-tier system. Homes located in school districts where more than 50% of the children receive free meals, in low income census tracts, or whose own income is equal to or less than 185% of the federal poverty guidelines are reimbursed at the higher Tier 1 level. Otherwise, homes are reimbursed at the lower, Tier 2 level. The following are the rates that day care homes receive (June 31, 1998-July 1, 1999):

Reimbursement rate per individual:

| | Tier 2 rate | Tier 1 rate |
|--------------------|--------------------|--------------------|
| Breakfast | \$0.34 | \$0.90 |
| Lunch/Supper | \$1.00 | \$1.65 |
| Supplement (Snack) | \$0.13 | \$0.49 |

In addition, institutions receive \$0.1475 in cash in lieu of commodities for each lunch and supper.

APPLICATIONS

To apply, day care providers should call the Child and Adult Care Food Program (CACFP) office in Raleigh at 919-715-1923. Centers may apply directly to the state or through a sponsoring agency, while homes must apply under a sponsoring agency. There are currently 36 sponsoring agencies in North Carolina. The sponsoring agency is responsible for providing the day care home with monthly reimbursements, based on the reports the home submits regarding the meals served and the applicable payment tier. The Raleigh offices can provide a list of sponsoring agencies.

ELIGIBILITY REQUIREMENTS

General Facility Eligibility Requirements

In order to participate, centers must be licensed in North Carolina and be either non-profit, public or have at least 25% of their children receiving day care subsidies. All licensed homes that meet these requirements are eligible to participate. Child care providers must serve meals meeting the CACFP meal pattern requirements, which includes all the food groups in amounts based on the age of the participants. In addition, they must receive nutritional training, maintain good sanitation, promote the safety and well being of participants and provide monthly reports describing their menus and numbers of participants served.

Fees

There are no fees for families or day care centers and homes to participate in this program. Families continue to pay their regular rates to the adult or child day care providers.

NUMBERS SERVED

Approximately 149,100 children in 5,600 child care centers and homes receive meals supported by the CACFP in North Carolina. Approximately 2,600 adults in North Carolina adult care centers participate.

PRIORITIZATION SYSTEM

The CACFP is an entitlement program so the program is available to all eligible child and adult care programs.

APPEAL RIGHTS

Sponsoring agencies and independent centers can appeal adverse decisions made by the state, including suspension of agreements, denial of payments or participation, and other actions affecting an institution's participation in the program or claim for reimbursement. Day care centers and homes cannot appeal directly to the state, a sponsoring agency must appeal the decision on their behalf. The state will notify sponsoring agencies of an intended action by certified mail. An institution has two options in appealing. They may submit a written request for an informal conference within fifteen days of receipt of the notice of adverse action. Alternatively, they may request a review of the decision without an informal conference. This request must be submitted in writing within thirty days of receipt of the notice of adverse action.

- *Informal Conferences.* The written request for an informal conference must be made within fifteen days of receiving the state's notice of intended action. The request for an appeal must include the state's proposed action which is being contested and the name, address and phone number of the contact person handling the informal conference for the institution. The state will acknowledge the request within ten days after it receives the request from the sponsoring agency. The state will notify the agency of the informal conference date, time and place at least ten days prior to the scheduled conference. Any documents that the institution would like to be considered at the informal conference must be received by the state no later than five days prior to the scheduled date of the conference. The institution may present information at the conference. Informal conferences are held at regional offices.
- *Review without an informal conference.* The written request for a review without an informal conference must be made within 30 days of receiving the state's notice of intended action. The request for an appeal must include the state's proposed action which is being contested, and the name, address and phone number of the person submitting the documentation on behalf of the institution. The state will fully consider all information provided by the institution before making a final decision.

For both informal conferences and reviews without an informal conference, the state will notify the sponsoring agency of its decision by certified mail. If the institution is dissatisfied with the results of the informal conference or review, the institution may file a petition with the Office of Administrative Hearings (OAH). Petition forms may be obtained by calling or writing the OAH (919-733-0926). The petition must be received by the OAH within 30 days of when the institution receives notice of the state's decision. A contested case hearing will be conducted before an administrative law judge. The institution may be assisted or represented at the hearing by another party such as an advocate or legal counsel. The administrative law judge will render a recommended decision in the case. The final decision in the case will be made by the State Health Director. Prior to the decision of the Director, both parties will be given an opportunity to file exceptions to the recommended decision and provide written arguments.

FINANCING The program is funded entirely by federal dollars.

ADMINISTRATION The CACFP program is administered at the federal level by the US Department of Agriculture and at the state level, by the Nutrition Services Section, NC Department of Health and Human Services. Sponsoring organizations administer the program locally.

SOURCES OF LAW Federal statute: 42 USC 1766
Federal regulations: 7 CFR 226.1 et seq.

FOR MORE INFORMATION Special Nutrition Programs
NC Department of Health and Human Services
PO Box 10008
Raleigh, NC 27605-0008
919-715-1923

School Breakfast and Lunch Programs

OVERVIEW

What is it?

A federally funded program that offers nutritionally balanced meals to all children, primarily at school. Free and reduced price meals are available to students from low income families.

Who is it for?

Children enrolled in public schools, non-profit private schools and residential child caring institutions.

Where are applications taken?

Applications for children are available at public schools or other sponsoring organizations.

INTRODUCTION

The National School Lunch Program was established in 1946 to ensure proper nutrition for children. In 1975, the School Breakfast Program was implemented. Both programs provide cash subsidies to pay for meals and donate commodity goods to sponsoring organizations. Students either pay for their meal at full or reduced price or receive their meals free based on family size and income.

All North Carolina public school systems sponsor School Lunch and Breakfast programs. All schools except for one participate in the School Lunch Program and 98.6% of schools participate in the School Breakfast Program. In addition, just over half of the public schools have chosen to designate themselves as "Team Nutrition Schools." To be a Team Nutrition School, the Principal, Cafeteria Manager, and the teaching staff commit to providing sound nutritional education in both the cafeteria and the classroom.

BENEFITS/ SERVICES

Nutritionally balanced breakfasts and lunches are provided at either a reasonable cost, free, or reduced-price to low income children. Many schools augment the provision of the nutritionally balanced meals with educational activities in the both the cafeteria and the classroom. Lifelong health and sound nutrition decision making is the goal of these coordinated efforts.

APPLICATIONS

Applications for children are available at public schools or other sponsoring organizations. Public schools and sponsoring organizations that want to participate in the program should contact the NC Department of Public Instruction, Child Nutrition Services Section at 919-715-1920.

ELIGIBILITY REQUIREMENTS

To be eligible to participate in the school breakfast or lunch program, students must attend a participating school or other sponsoring organization. Students who are from low income families can receive their meals free or at a reduced price based on their family size and income. The United States Department of Agriculture develops these standards on an annual basis.

Students who are residents of child caring institutions receive their meals without a charge based on their status as a “family of one.”

Income Eligibility

To receive free breakfasts and lunches, the income of the children’s family must be at or below 130 percent of the federal poverty level. Children with family incomes between 130-185 percent of poverty can purchase meals at a reduced price, not to exceed 40 cents for lunch and 30 cents for breakfast. Following are the eligible income levels for July 1, 1999- June 30, 2000.

| Household Size | Monthly Income | |
|------------------------|----------------|----------------------|
| | <u>Free</u> | <u>Reduced Price</u> |
| 1 | \$893 | \$1,271 |
| 2 | 1,199 | 1,706 |
| 3 | 1,504 | 2,140 |
| 4 | 1,810 | 2,575 |
| 5 | 2,115 | 3,010 |
| 6 | 2,421 | 3,445 |
| 7 | 2,726 | 3,879 |
| 8 | 3,032 | 4,314 |
| Each additional person | add \$306 | add \$435 |

These guidelines are revised annually.

Note: Beginning January 1, 2000, all kindergarten children are eligible for free breakfast, regardless of their family’s income.

PRIORITIZATION SYSTEM

All eligible children who attend a participatory school or other sponsoring organization are eligible for free or reduced price meals.

RESOURCE ELIGIBILITY

There are no resource eligibility requirements for this program.

NUMBERS

More than 740,000 children participate in school lunch and 260,000 participate in

SERVED school breakfast each school day. All public school systems sponsor school lunch and breakfast programs, although not every school participates.

APPEAL RIGHTS Students and sponsoring organizations can appeal decisions regarding family size and income classification to the local Board of Education.

FINANCING Approximately \$420 million is spent annually in North Carolina on School Lunch and School Breakfast programs.

Federal: Approximately \$200 million
State: Approximately \$7 million
Individual purchases: Approximately \$210 million

ADMINISTRATION These programs are administered at the national level by US Department of Agriculture, Food and Nutrition Service, and at the state level, by the NC Department of Public Instruction. Locally, Boards of Education, Residential Child Caring Institutions, and private non-profit agencies administer the programs.

SOURCES OF LAW Federal statute: 42 USC 1751 et. seq. (National School Lunch Act of 1946)
42 USC 1771 et. seq. (Child Nutrition Act of 1966)
Federal regulations: 7 CFR Parts 210 and 220
State statute: NCGS 115c-263 and 264
State policy: 16 NCAC 6H.0004

FOR MORE INFORMATION NC Department of Public Instruction
Child Nutrition Services Section
301 N. Wilmington St.
Raleigh, NC 27601-2825
Phone: 919-715-1920

Family Resource Centers

OVERVIEW

What is it?

Family Resource Centers are neighborhood and community-based programs that offer supportive services and activities for families in safe and nurturing environments. Although each Family Resource Center may offer a different array of services based on the needs of the community, most offer academic, parenting, employment, health, social, and other community-building services.

Who is it for?

Family Resource Center services are available without regard to income; however, programs are targeted primarily to families with preschool and school-aged children.

Where are applications taken?

Family Resource Centers may require applications for some of the programs offered at the centers; although many programs operate without formal applications. Sometimes, public agencies may outstation staff at the Family Resource Centers to take applications for other programs (for example, DSS offices may have eligibility workers available to take applications for Work First, Food Stamps or Medicaid at some of the Family Resource Centers).

INTRODUCTION

The General Assembly established a Family Resource Center program in 1994 to work with families with children (birth through elementary school). The goal of the program is to: (1) enhance the children's development and ability to attain academic and social success; (2) ensure a successful transition from early childhood education programs and child care to the public schools; (3) assist families in achieving economic independence and self-sufficiency; and (4) mobilize public and private community resources to help children and families in need. Federally-funded Family Resource Centers were established the following year, to assist parents

The Division of Social Services within the NC Department of Health and Human Services administers the state-funded programs. The programs are administered on the local level by community-based public or non-profit organizations that were approved for funding. In deciding which applications to fund, a state task force considered the severity of the local problems, the likelihood that the locally designed plan would result in high quality services for children and their families, evidence of local collaboration and coordination of services, any innovative or experimental aspects of the plan that would make it a useful model for replication, the availability of other resources or funds, the incidence of crime and juvenile delinquency, and the amount needed to implement the proposal.

**BENEFITS/
SERVICES****Family Resource Centers**

Each Family Resource Center is neighborhood-based and governed by families with children. The services are available regardless of income, and serve the entire family. The array of services offered in each center are somewhat unique, based on the neighborhood's needs and resources. The centers often provide a "one-stop" source of help for families that is prevention-focused, family-friendly, community-based and comprehensive. Most programs offer the following core services:

- *Parent Education/Parent Support*—which may include parenting classes and/or parent/caregiver support groups;
- *Academic Success/Tutoring/Lending Libraries*—which may include tutoring and education programs, out-of-school suspension programs, lending libraries, and/or parent involvement programs;
- *Child and Youth Development*—which may include infant/toddler development play groups, mentoring programs (for example, for teen parents or adolescents), after school or summer child/youth enrichment programs, and/or child development assessments;
- *Parent/Child Participation Programs*—which may include family literacy programs, parent-child play groups, and/or parent-child development groups;
- *Adult Literacy/Adult Education*—which may include adult literacy programs, GED/Adult High School, Adult Basic Education (ABE), English as a Second Language (ESL), life skills classes (such as cooking, communication skills or conflict resolution), and/or financial management programs;
- *Health Services/Health Education*—which may include physical health screenings, immunization programs, health education/health promotion programs, health services programs (such as occupational therapy), WIC services, and/or substance abuse prevention/rehabilitation programs;
- *Occupational Skills/Job Readiness/Job Placement*—which may include computer or other skills development programs, job readiness programs, job search/placement counseling and support, job internship programs, and/or Work First collaboration programs;
- *Transportation/Child Care Support Services*—which may include transportation and/or drop-in child care programs;
- *Community Building*—which may include leadership development programs, community-policing, police substation at Family Resource Center sites, illegal drug use prevention programs, community drug traffic/illegal activity reduction programs, neighborhood watch/community safety programs, neighborhood clean-up programs, and/or mediation services; and

- *Individual Family Services Coordination*—which may include family counseling, intensive family services, child/family advocacy, emergency services and support programs, community food programs, and/or housing assistance programs.

Program Location

State and federally funded Family Resource Centers are located in the following counties:

| County | Name |
|----------------|---|
| Alleghany | Alleghany County Family Resource Center |
| Ashe | Ashe Partnership for Children Family Resource Center |
| Bertie | Colerain & Lewiston-Woodville Family Resource Center |
| Bladen | Bladen Family Support Initiative |
| Brunswick | CIS Family Resource Center |
| Cleveland | Hoechst Celanese Family Resource Center |
| Columbus | Multicultural Community Development Services |
| Davidson | Fairgrove Family Resource Center |
| Durham | Eastway Family and Academic Support Program |
| Edgecombe/Nash | Down East Partnership for Children Family Resource Centers |
| Gaston | Highland Family Resource Center |
| Gates | Family Care Center |
| Hyde | Hyde Family Center |
| Lenoir | La Grange Family Support Programs |
| Martin | Friends of Families/Family Support Services |
| McDowell | North Cover and Old Fort Family Resource Centers |
| Moore | Northern Moore Family Resource Center |
| New Hanover | Family Resource Center of the Bottom |
| Northampton | Garysburg Family Resource Center |
| Orange | Chapel Hill Training Outreach Inc. Family Resource Centers |
| Pitt | Bethel Family Resource Center |
| Richmond | Richmond County Community Support |
| Robinson | Robeson County Family Support and Family Preservation Program |
| Rowan | Paul L. Dunbar Family Resource Center |
| Transylvania | The Family Center of Transylvania County |
| Tyrell | Friends of Families/Family Support Service |
| Vance | South Henderson Family Resource Center |
| Warren | Warren Family Institute |
| Wayne | Employment Support Program |

Additional Family Resource Centers operate around the state that are not funded by the state. These centers are not included in the list above.

**ELIGIBILITY
REQUIREMENTS**

General Eligibility Requirements

There are no income or other eligibility requirements for the Family Resource Centers. While there are no formal residency requirements, Family Resource Centers target their services to families with children in the neighborhood or community in which the center is based.

**NUMBERS
SERVED**

Family Resource Centers administered by the Division of Social Services served more than 8,000 families during SFY 97-98.

FINANCING

There are three funding streams that help fund Family Resource Centers.

- NC General Assembly appropriated \$2,001,109 in SFY 97-98 to fund the 16 Family Resource Centers.
- The federal Title IV-B of the Social Security Act, Subpart 2 is used to support Family Resource Centers, Family Support programs and Family Preservation programs. These programs typically receive \$75,000 each. The federal monies were used to support 18 Family Resource Centers administered through the Division of Social Services.
- Community Based Family Resource programs. There are three programs funded by the federal government, and three funded through the pooling of funds under Title IV-B of the Social Security Act, Subpart 2 programs.

ADMINISTRATION

The federally-funded monies flow through the Administration for Children and Families (ACF) within the Children's Bureau of the US Department of Health and Human Services. The Division of Social Services, within the NC Department of Health and Human Services, administers the family resource centers. The program is administered on the local level by public or private non-profit agencies across the state.

SOURCES OF LAW

| | |
|----------------------|---|
| Federal statute: | PL 105-89 (Adoption and Safe Families Act of 1997), amending Title IV-B of the Social Security Act, Subpart 2, for federally funded Family Resource Centers |
| Federal regulations: | None |
| State statute: | NCGS 143B-152 |
| State policy manual: | Under development (Family Resource Center) |

**FOR MORE
INFORMATION**

Resource Development for
Community Based Programs
Division of Social Services
NC Department of Health and Human Services
325 N. Salisbury St.
Raleigh, NC 27603
919-733-2279

Guardian ad Litem Program

OVERVIEW

What is it?

The Guardian ad Litem program provides trained advocates to represent a child's best interests in abuse and neglect cases.

Who is it for?

Guardian ad Litem are appointed for children when the Department of Social Services (DSS) files a judicial action alleging child abuse or neglect.

Where are applications taken?

No applications are necessary. The court will appoint a Guardian ad Litem to represent the child's interests every time DSS files a petition alleging child abuse or neglect. Guardians may also be appointed for children in dependency actions.

INTRODUCTION

The Guardian ad Litem program was started in 1983, to provide trained independent advocates to represent and promote the best interests of abused, neglected or dependent children involved in the court (see chapter on Child Protective Services, chapter 19).

The program was established to ensure that children were represented in abuse and neglect cases. Usually, the parent is available to represent the best interest of the child. However, in abuse and neglect cases, the parent may not be acting in the best interest of the child. DSS has an attorney, but the attorney is charged with representing DSS's interests. Therefore, Guardian ad Litem are appointed to make sure that the child's interests are voiced.

BENEFITS/ SERVICES

The district court will appoint a Guardian ad Litem to represent the interests of the child whenever there have been allegations of abuse and neglect. Most guardians are volunteers who work under the supervision of the Guardian ad Litem program in the judicial district in which the petition was filed. If the Guardian ad Litem is not an attorney, the court shall also appoint an attorney who will represent the child's interest in the court, and will be available to provide legal assistance throughout the process. Judges may also appoint Guardian ad Litem or attorneys to represent the child's interest in a case alleging dependency, although this is not required.

Guardians have a primary responsibility to protect and promote the best interests of the juvenile. They accomplish this purpose by:

- Investigating the facts of the case to determine the child's needs, and the resources available in the community to meet the child's needs;

- Attempting to resolve disputes in a timely manner to meet the best interest of the child;
- Offering evidence on behalf of the child;
- Examining witnesses in court; and
- Conducting follow-up investigations to insure the orders are properly executed and reporting to the court when the needs of the juvenile are not being met.

| | |
|---------------------------------|--|
| ELIGIBILITY REQUIREMENTS | There are no financial eligibility requirements for this program. The court will appoint a Guardian ad Litem and/or an attorney to represent the child's interests whenever DSS files a petition alleging that the child has been subjected to abuse or neglect. |
| NUMBERS SERVED | Guardian ad Litem were appointed for 15,582 children in FY 1998. |
| APPEAL RIGHTS | If the child or another person acting on behalf of the child is dissatisfied with the representation provided by the guardian, they can call the local or state Guardian ad Litem program to ask that a different guardian be appointed. |
| FINANCING | The General Assembly appropriated \$6.2 million in FY 1998 for this program. |
| ADMINISTRATION | The program is administered on the state level by the Guardian ad Litem program within the Administrative Office of the Courts. The program is administered at the local level by local Guardian ad Litem offices which operate in each judicial district. |
| SOURCES OF LAW | State statute: NCGS 7A-586 (responsibilities of the Guardian) NCGS 7A-489 et. seq. |
| FOR MORE INFORMATION | Guardian ad Litem program Administrative Office of the Courts PO Box 2448 Raleigh, NC 27602 919-662-4386 1-800-982-4041 |

Legal Services

OVERVIEW

What is it?

A program that provides free legal services in civil matters.

Who is it for?

Individuals experiencing certain types of legal problems whose family income does not exceed 125% of the federal poverty guidelines.

Where are applications taken?

At local legal services offices.

INTRODUCTION

Legal Services provides free legal help in civil (noncriminal) matters to low-income people. The mission of all legal services programs is to promote equal access to the justice system by providing high-quality civil legal assistance to those who would be otherwise unable to afford legal counsel.

Legal Services programs receive most of their funding from the federal government, through the Legal Services Corporation in Washington, D.C. Other funding is from state, local and private sources. Federal laws place some restrictions on the types of cases that can be handled by Legal Services offices, and limited funding further restricts the availability of services.

BENEFITS/ SERVICES

Each Legal Services program sets its own priorities and criteria for accepting cases. However, most programs handle the following types of matters, either with staff lawyers and paralegals, or by referring the cases to local lawyers:

- *Government benefits.* Including problems involving Work First, Medicaid, Social Security, SSI, and Food Stamps.
- *Housing.* Including evictions and substandard housing cases in both public and private housing.
- *Consumer.* Including debt problems and problems with merchants.
- *Employment.* Including unemployment insurance cases and illegal job terminations.
- *Family.* Including domestic violence, child custody, guardianships, and wills.
- *Education.* Including school residency, discipline, and discrimination.

In most situations, clients can expect to receive advice about their problems from an attorney or paralegal. If the Legal Services program determines that the problem fits its acceptance criteria, the client may be offered representation in a negotiation,

administrative hearing or a court procedure, or other appropriate representation. Although the client may sometimes be responsible for certain expenses such as court fees, the attorney's or paralegal's services are free.

Volunteer Lawyer Program

Most Legal Services programs have insufficient resources to handle all of the legal problems of people seeking assistance. In many areas, the program is able to refer some of its clients to lawyers in the community who will also provide free legal assistance.

APPLICATIONS

Applications for Legal Services are taken at the local offices. In some cases, the initial interview is done by phone; in other cases the client is asked to come to the office. A client should call the program covering the county in which he/she resides, or the applicable special client program, to find out about the application procedures for the particular office. The programs and counties they serve are listed in Appendix A.

ELIGIBILITY REQUIREMENTS

General Eligibility Requirements

To be eligible for Legal Services, an individual must:

- Be a US citizen, a lawful permanent resident or an immigrant with another allowable immigration status. Undocumented immigrants can also be provided assistance if the problem is domestic violence;
- Have a civil (noncriminal) legal problem;
- Have a family income of less than 125% of the federal poverty guidelines (with certain exceptions noted below); and
- Not have available assets in excess of the resource limits.

Income Eligibility

The gross monthly family income of the applicant usually is limited to 125% of the federal poverty guidelines. The following figures reflect the poverty guidelines set in March 1999. They increase annually when the federal poverty guidelines change.

| Family Size | Monthly Gross Income |
|------------------------|-----------------------------|
| 1 | \$ 858 |
| 2 | 1,152 |
| 3 | 1,446 |
| 4 | 1,740 |
| 5 | 2,033 |
| 6 | 2,327 |
| 7 | 2,621 |
| 8 | 2,915 |
| Each additional person | add \$ 294 |

Exceptions can be made to these limits in certain situations. If a client has significant debts or other unusual circumstances, he/she may be eligible if the gross family income does not exceed 187.5% of the federal poverty guidelines.

| Family Size | Monthly Income |
|--------------------|-----------------------|
| 1 | \$1,288 |
| 2 | 1,728 |
| 3 | 2,169 |
| 4 | 2,609 |
| 5 | 3,050 |
| 6 | 3,491 |
| 7 | 3,931 |
| 8 | 4,372 |

Each additional person add \$ 441

Elderly (age 60 or older) can be served in some circumstances without regard to income and assets. This is the case when the Legal Services program receives special funding through the federal Older Americans Act to represent older adults.

Resource Eligibility

The following represent the maximum equity value (after subtracting liens or mortgages) in available resources:

| Family Size | Maximum Limits |
|--------------------|-----------------------|
| 1 | \$20,600 |
| 2 | 27,650 |
| 3 | 34,700 |
| 4 | 41,750 |
| 5 | 48,800 |
| 6 | 55,850 |
| 7 | 62,900 |
| 8 | 69,950 |

Each additional person add \$ 7,050

These resource limits do not include the family's principal place of residence or essential vehicles.

**NUMBERS
SERVED**

Legal Services programs in North Carolina served approximately 45,000 people in 1998. Of these, 40% were provided advice only, 21% were provided brief services, 12% were represented in administrative hearings or court, 7% were referred to another agency, 14% declined, withdrew, or became ineligible for services, 2% settled without litigation and 4% were categorized as other.

PRIORITIZATION SYSTEM Each Legal Services office establishes its own priority system for the types of cases it will handle, if insufficient funds are available to handle all the individuals seeking assistance.

APPEAL RIGHTS If a client is dissatisfied with the manner or quality of services he/she has received or has been denied service, he/she can file a grievance with the program director. This is an informal complaint procedure handled differently by each program director.

A client who is dissatisfied with the resolution of the grievance proposed by the program director in a case involving the manner or quality of services can make a further complaint to the program's Board of Directors. The client will be given the opportunity to submit oral and written statements to a grievance committee of the local program's board of directors. There is no board involvement in cases involving the denial of services.

If a client is still dissatisfied with the resolution reached by the director or board grievance committee, he/she may submit a complaint to the grievance committee of the Legal Services of North Carolina, Inc. Board of Directors. That committee will review only whether the procedures for handling the complaint at the program level were proper. It will not review the substance of the complaint.

State Bar Complaints

A client who believes that a Legal Services attorney has failed to meet his/her professional or ethical obligations, can make a complaint to the NC State Bar. The NC State Bar is the organization that licenses and disciplines lawyers. A formal investigation will follow in which the State Bar will determine if the complaint has merit. If it determines the complaint has merit, a formal disciplinary proceeding will follow.

FINANCING Legal Services programs receive funding from three primary sources: the federal government (55%), Interest on Lawyers Trust Accounts (IOLTA) (13%), and the state (16%). A small amount of funding is received from Title III and grant funds (16%).

ADMINISTRATION The program is administered on the national level by the Legal Services Corporation, an independent, non-profit corporation established by Congress in 1974. In North Carolina, there are four separate programs which, in combination, provide legal services to all 100 counties. A listing of all the offices is located in Appendix A.

- **Legal Services of North Carolina, Inc., (LSNC)** is made up of 12 geographically based "field" programs located throughout the state. In addition, there are two statewide, special client programs focused on the problems of farmworkers and persons with mental health disabilities. LSNC serves the following counties: Alamance, Alexander, Alleghany, Anson, Ashe, Avery, Beaufort, Bertie, Bladen, Brunswick, Buncombe, Burke, Caldwell, Camden, Carteret, Caswell, Catawba, Chatham, Cherokee, Chowan, Clay, Cleveland, Columbus, Greene, Guilford, Halifax, Harnett, Haywood, Henderson, Hertford, Hoke, Hyde, Jackson, Johnston, Jones,

Lee, Lenoir, Lincoln, Macon, Madison, Martin, McDowell, Montgomery, Moore, Nash, New Hanover, Northampton, Onslow, Orange, Pamlico, Pasquotank, Pender, Perquimans, Pitt, Polk, Randolph, Robeson, Rockingham, Rowan, Rutherford, Sampson, Scotland, Swain, Transylvania, Tyrrell, Wake, Washington, Watauga, Wayne, Wilkes, Wilson, and Yancey.

- **Legal Services of the Southern Piedmont** in Charlotte serves the following counties: Cabarrus, Gaston, Mecklenburg, Stanly, and Union.
- **North Central Legal Assistance Program** in Durham serves the following counties: Durham, Franklin, Granville, Person, Vance, and Warren.
- **Legal Aid Society of Northwest North Carolina** in Winston-Salem serves the following counties: Davie, Forsyth, Iredell, Stokes, Surry, and Yadkin.

| | | |
|-----------------------|----------------------|------------------------|
| SOURCES OF LAW | Federal statute: | 42 USC 2996 et. seq. |
| | Federal regulations: | 45 CFR 1600 et. seq. |
| | State statutes: | NCGS 7A-474.1 et. seq. |
| | State regulations: | none |

FOR MORE INFORMATION

Legal Services of North Carolina, Inc.
224 S. Dawson St.
PO Box 26087
Raleigh, NC 27611
(919) 856-2564

Legal Services of Southern Piedmont
1431 Elizabeth Avenue
Charlotte, NC 28204
(704) 376-1600

Legal Aid Society for Northwest North Carolina
216 W. Fourth St.
Winston-Salem, NC 27101
(336) 725-9166

North Central Legal Assistance Program
PO Box 2101
Durham, NC 27702
(919) 688-6396

North Carolina Lawyer Referral Service
1-800-662-7660

The referral service is operated by the NC Bar Association; it will provide a client the name of a lawyer who will discuss the client's legal problem for one-half hour for not more than \$30. Additional legal work may be contracted for the lawyer's going rate.

Appendix: *Community Resources*

Alamance

Adolescent Parenting Program
Cummings High School
2200 N. Mebane
Burlington NC 27217
Phone (336) 570-6659

Adolescent Parenting Program
Alexander Wilson Elementary
2518 NC Hwy 54 W.
Graham NC 27253
Phone (336) 570-6353

Adolescent Parenting Program
Western Alamance High School
1731 N. NC 87
Elon College NC 27244
Phone (336) 570-0811

DEC
Developmental Evaluation Ctr.
122 N. Elm St., Suite 400
Greensboro NC 27401
Phone (336) 334-5601
Fax (336) 334-5657

Legal Services
North State Legal Services
PO Box 670
Hillsborough NC 27278
Phone (800) 672-5834
Fax (336) 644-0694

Mental Health
Alamance-Caswell Area Program
1946 Martin St.
Burlington NC 27215
Phone (336) 513-4200

Primary Care
Charles Drew Community Health Ctr.
723 Edith St.
Burlington NC 27215
Phone (336) 570-3739
Fax (336) 570-1215

Public Health
Alamance Co. Health Department
319 N. Graham-Hopedale Rd., Suite B
Burlington NC 27217
Phone (336) 513-5514
Fax (336) 570-6746

Smart Start
Alamance Co. Partnership
PO Box 2243
Burlington NC 27516
Phone (336) 513-0063
Fax (336) 226-1158

Social Services
Alamance County DSS
319 N. Graham-Hopedale Rd., Suite C
Burlington NC 27217
Phone (336) 228-6441

Support our Students
East Bynum Educational Ctr.
311 E. Morehead St., PO Box 2701
Burlington NC 27215
Phone (336) 228-0840
Fax (336) 883-6863

Alexander

DEC
Developmental Evaluation Ctr.
517-E W. Fleming Dr.
Morganton NC 28655
Phone (828) 4386263
Fax (828) 4386088

Legal Services
Catawba Valley Legal Services, Inc.
211 East Union St.
Morganton NC 28655
Phone (800) 849-5195
Fax (828) 437-9397

Mental Health
Foothills Area Authority
306 S. King St.
Morganton NC 28655
Phone (828) 438-6230
Fax (828) 438-6238

Public Health
Health Department
322 First Avenue, S.W.
Taylorsville NC 28681
Phone (828) 632-9704
Fax (828) 632-9008

Smart Start
Alexander Co. PFC
PO Box 1661
Taylorsville NC 28681
Phone (828) 632-3799
Fax (828) 632-6411

Social Services
Alexander County DSS
334 7th St. SW
Taylorsville NC 28681
Phone (828) 632-1080

Alleghany

DEC
Developmental Evaluation Ctr.
820 State Farm Rd., Suite C
Boone NC 28607
Phone (828) 265-5391
Fax (828) 265-5394

Family Resource Center
Alleghany Co. Family Resource Ctr.
PO Box 1832
Sparta NC 28675-1832
Phone (336) 372-2417

Legal Services
Legal Services of the Blue Ridge
PO Box 111
Boone NC 28607
Phone (828) 264-5640
Fax (828) 264-5667

Mental Health
New River Area Program
895 State Farm Rd, Suite 508
Boone NC 28607
Phone (336) 264-9007
Fax (336) 264-9468

Public Health
Health Department
77 Willis St.
Sparta NC 28675
Phone (336) 372-5641
Fax (336) 372-5645

Smart Start
Alleghany Co. PFC, Inc.
PO Box 1643
Sparta NC 28675
Phone (336) 372-2846
Fax (336) 372-7705

Social Services
Alleghany County DSS
PO Box 247
Sparta NC 28675
Phone (336) 372-2411

Anson

Child Support Enforc.
Anson/Richmond Child Support Enforcement
801 E. Broad Ave., Hwy 74
Rockingham NC 28379
Phone (910) 997-9170
Fax (910) 997-9117

DEC
Developmental Evaluation Ctr.
107 E. Ashe St.
Wadesboro NC 28170
Phone (704) 694-5186
Fax (704) 694-7803

Dental Care
Wadesboro Dental Site
207 Morven Rd, PO Box 696
Wadesboro NC 28170
Phone (704) 694-3810
Fax (704) 694-5454

Legal Services
North State Legal Services
PO Box 670
Hillsborough NC 27278
Phone (800) 672-5834
Fax (919) 644-0694

Mental Health
Sandhills Area Program
1120 Seven Lakes Dr.
West End NC 27376
Phone (910) 673-9111
Fax (910) 673-6202

Primary Care
Lilesville Medical
115 Cowan St
Lilesville NC 28091
Phone (704) 848-8927
Fax (704) 848-8928

Public Health
Health Department
110 Ashe St., PO Box 473
Wadesboro NC 28170
Phone (704) 694-5188
Fax (704) 694-9067

Smart Start
Anson Co. PFC
303 East View St.
Wadesboro NC 28170
Phone (704) 694-4036
Fax (704) 694-4010

Social Services
Anson County DSS
118 N. Washington St.
Wadesboro NC 28170
Phone (704) 694-9351

Support our Students
Anson Co. Partnership for Children
Anson Co. Schools, PO Box 719
Wadesboro NC 28170
Phone (704) 694-4036
Fax (704) 694-4010

Ashe

DEC
Developmental Evaluation Ctr.
820 State Farm Rd., Suite C
Boone NC 28607
Phone (828) 265-5391
Fax (828) 265-5394

Family Resource Center
Ashe Family Resource Ctr.
W. Jefferson NC 28695-1547
Phone (336) 246-3434
Fax (336) 246-3433

Legal Services
Legal Services of the Blue Ridge
PO Box 111
Boone NC 28607
Phone (828) 264-5640
Fax (828) 264-5667

Mental Health
New River Area Program
895 State Farm Rd, Suite 508
Boone NC 28607
Phone (828) 264-9007
Fax (828) 264-9468

Public Health
Health Department
413 McConnell, PO box 208
Jefferson NC 28640
Phone (336) 246-9449
Fax (336) 246-8163

Smart Start
Ashe Co. PFC
PO Box 1547
West Jefferson NC 28694
Phone (336) 246-3234
Fax (336) 246-3433

Social Services
Ashe County DSS
PO Box 298
Jefferson NC 28640
Phone (336) 246-1900

Support our Students
NC Cooperative Extension Service- Ashe County
PO Box 338
Jefferson NC 28640
Phone (336) 246-1880
Fax (336) 246-4466

Avery

Child Support Enforc.
WAM Counties Child Support Enforcement
938 W. King St.
Boone NC 28607
Phone (828) 265-5371
Fax (828) 265-5418

Day care subsidies
Region D Council of Government
PO Box 1820
Boone NC 28607
Phone (704) 265-5434

DEC
Developmental Evaluation Ctr.
820 State Farm Rd., Suite C
Boone NC 28607
Phone (828) 265-5391
Fax (828) 265-5394

Legal Services
Legal Services of the Blue Ridge
PO Box 111
Boone NC 28607
Phone (828) 264-5640
Fax (828) 264-5667

Mental Health
New River Area Program
895 State Farm Rd, Suite 508
Boone NC 28607
Phone (704) 264-9007
Fax (704) 264-9468

Public Health
Health Department
545 Schultz Fox Circle, PO Box 325
Newland NC 28657
Phone (828) 733-6031
Fax (828) 733-6034

Smart Start
Avery Co. PFC
PO Box 1455
Newland NC 28657
Phone (828) 733-2899
Fax (828) 733-9122

Social Services
Avery County DSS
PO Box 309
Newland NC 28657
Phone (828) 733-8230

Support our Students
W.A.M.Y. Community Action, Inc.
PO Box 2668
Boone NC 28607
Phone (828) 264-2421
Fax (828) 264-0952

Beaufort

DEC
Developmental Evaluation Ctr.
Irons Bldg, Charles Blvd, ECU
Greenville NC 27858
Phone (252) 328-4480
Fax (252) 328-5509

Legal Services
Pamlico Sound Legal Services
PO Box 1167
New Bern NC 28563
Phone (800) 672-8213
Fax (252) 637-6099

Mental Health
Tideland Area Program
1308 Highland Dr.
Washington NC 27889
Phone (252) 946-8061
Fax (252) 946-8078

Public Health
Health Department
403 N. Harvey, PO Box 579
Washington NC 27889
Phone (252) 946-1902
Fax (252) 946-8430

Smart Start
Beaufort Co. PFC
321 Smaw Road
Washington NC 27889
Phone (252) 946-6593
Fax (252) 975-6044

Social Services
Beaufort County DSS
PO Box 1358
Washington NC 27889
Phone (252) 975-5500

Support our Students
Boys & Girls Club
PO Box 2331
Washington NC 27889
Phone (252) 975-9311
Fax (252) 974-2159

Bertie

Child Support Enforc.
Bertie-Hertford Child Support Enforcement
418 S. Everett St.
Ahoskie NC 27910-4165
Phone (919) 332-2913
Fax (919) 209-0451

DEC
Developmental Evaluation Ctr.
Irons Bldg, Charles Blvd, ECU
Greenville NC 27858-4354
Phone (252) 328-4480
Fax (252) 328-5509

Family Resource Center
Colerain Family Resource Ctr.
PO Box 175
Colerain NC 27983
Phone (252) 356-1144
Fax (252) 356-1163

Legal Services
Legal Services of the Coastal Plains
PO Box 564
Ahoskie NC 27910
Phone (800) 682-0010
Fax (252) 332-3317

Mental Health
Roanoke-Chowan Area Program
Route 3 Box 22A
Ahoskie NC 27910
Phone (252) 332-4137
Fax (252) 332-8457

Primary Care
Lewiston-Woodville Family Medical Ctr.
PO Box 39
Lewiston NC 27849-
Phone (252) 348-2545
Fax (252) 348-2239

Public Health
Health Department
502 Barringer St., PO Box 586
Windsor NC 27983
Phone (252) 794-5322
Fax (252) 794-5327

Smart Start
Bertie Co. PFC
PO Box 634
Windsor NC 27983
Phone (252) 794-3438
Fax (252) 794-2831

Social Services
Bertie County DSS
PO Box 627
Windsor NC 27983
Phone (252) 794-5320

Support our Students
Bertie County YMCA
PO Box 834
Windsor NC 27983
Phone (252) 794-9622
Fax (252) 704-3450

Bladen

DEC
Developmental Evaluation Ctr.
1211-A Ireland Dr.
Fayetteville NC 28304
Phone (910) 486-1605
Fax (910) 486-1590

Family Resource Center
Balden Family Support Initiative
PO Box 717
Clarkton NC 28433
Phone (910) 862-4136
Fax (910) 862-4227

Legal Services
Legal Services of Lower Cape Fear
PO Box 814
Wilmington NC 28402
Phone (800) 672-9304
Fax (910) 343-8894

Mental Health
Southeastern Regional Area Program
207 W. 29th St.
Lumberton NC 28358
Phone (910) 738-5261
Fax (910) 738-8230

Public Health
Health Department
300 Mercer Mill Rd., PO Box 188
Elizabethtown NC 28337
Phone (910) 862-6900
Fax (910) 862-6859

Smart Start
Bladen Co. Public Library PFC
PO Box 1419
Elizabethtown NC 28337
Phone (910) 862-6990
Fax (910) 862-8777

Social Services
Bladen County DSS
PO Box 365
Elizabethtown NC 28337
Phone (910) 862-6801

Support our Students
Zara Betterment Corporation
2104 S. Elwell Ferry Road
Council NC 27983
Phone (910) 669-2577
Fax (910) 669-2548

Brunswick

Adolescent Pregnancy Prevention
Brunswick Co. Schools
Phone (910) 457-0777

DEC
Developmental Evaluation Ctr.
1501 Dock St.
Wilmington NC 28401
Phone (910) 251-5817
Fax (910) 251-2652

Family Resource Center
CIS Family Resource Ctr.
1556 Leland School Ctr.
Leland NC 28451
Phone (910) 371-5411
Fax (910) 371-1888

Legal Services
Legal Services of Lower Cape Fear
PO Box 814
Wilmington NC 28402
Phone (800) 672-9304
Fax (910) 343-8894

Mental Health
Southeastern Area Program
2023 S. Seventeenth St.
Wilmington NC 28401
Phone (910) 251-6440
Fax (910) 251-6557

Public Health
Health Department
25 Courthouse Dr., PO Box 9
Bolivia NC 28422
Phone (910) 253-2250
Fax (910) 253-2387

Smart Start
Brunswick Co. PFC, Inc.
PO Box 3050
Shallotte NC 28459
Phone (910) 754-3166
Fax (910) 754-3188

Social Services
Brunswick County DSS
PO Box 219
Bolivia NC 28422
Phone (910) 253-2077

Support our Students
Communities in Schools of Brunswick County
PO Box 10087
Southport NC 28461
Phone (910) 371-3030
Fax (910) 371-0647

Buncombe

Day care subsidies
Buncombe Co. Child Development
50 S. French Broad Ave.
Asheville NC 28801
Phone (282) 255-5725

DEC
Developmental Evaluation Ctr.
119 Tunnel Rd., Suite D
Asheville NC 28805
Phone (828) 251-6091
Fax (828) 251-6911

Family Preservation Svs.
Trinity Runaway Shelter
257 Biltmore Ave.
Asheville NC 28802-
Phone (828) 258-2597
Fax (828) 285-9679

Legal Services
Appalachian Legal Services
PO Box 7606
Asheville NC 28802
Phone (800) 489-6144
Fax (828) 252-8927

Mental Health
Blue Ridge Area Program
356 Biltmore Ave.
Asheville NC 28801
Phone (828) 258-3500
Fax (828) 252-9584

Primary Care
Western NC Community Health Services
PO Box 338
Asheville NC 28802
Phone (828) 285-0622
Fax (828) 285-9831

Private Adoption Assistance Agencies
Caring for Children (Adoption Pluss)
PO Box 19113
Asheville NC 28815-
Phone (828) 236-2877

Private Adoption Assistance Agencies
Bethany Christian Services
PO Box 15569
Asheville NC 28813-0569
Phone (828) 274-7146

Public Health
Health Department
35 Woodfin St.
Asheville NC 28801-3075
Phone (828) 255-5671
Fax (828) 255-5326

Smart Start
Buncombe Co. PFC
50 S. French Broad Rd.
Asheville NC 28801
Phone (828) 285-9333
Fax (828) 285-9933

Social Services
Buncombe County DSS
PO Box 7408
Asheville NC 28802
Phone (828) 255-5561

Support our Students
YWCA of Asheville
185 S. French Broad Rd.
Asheville NC 28801
Phone (828) 254-7206
Fax (828) 258-8731

Burke

Day care subsidies
Blue Ridge Community Action Council
PO Box 1900
Lenoir NC 28645-
Phone (704) 438-6255

DEC
Developmental Evaluation Ctr.
517-E W. Fleming Dr.
Morganton NC 28655
Phone (828) 438-6263
Fax (828) 438-6088

Legal Services
Catawba Valley Legal Services, Inc.
211 East Union St.
Morganton NC 28655
Phone (800) 849-5195
Fax (828) 437-9397

Mental Health
Foothills Area Authority
306 S. King St.
Morganton NC 28655
Phone (828) 438-6230
Fax (828) 438-6238

Public Health
Health Department
700 E. Parker Rd., PO Drawer 1266
Morganton NC 28680
Phone (828) 439-4400
Fax (828) 439-4444

Smart Start
Burke Co. PFC
PO Box 630
Morganton NC 28680
Phone (828) 439-2326
Fax (828) 439-2333

Social Services
Burke County DSS
PO Drawer 549
Morganton NC 28655
Phone (828) 439-2000

Support our Students
Blue Ridge Community Action
PO Box 1900
Lenoir NC 28645
Phone (704) 754-9085
Fax (704) 764-1444

Cabarras

Mental Health
Piedmont Area Program
845 Church St. N., Suite 305
Concord NC 28025
Phone (704) 782-5505
Fax (704) 782-5110

DEC
Developmental Evaluation Ctr.
342 Penny Lane
Concord NC 28025
Phone (704) 786-9181
Fax (704) 792-9198

Legal Services
Legal Services of Southern Piedmont
1431 Elizabeth Ave.
Charlotte NC 28204-2506
Phone (704) 376-1600
Fax (704) 376-8627

Public Health
Health Department
715 Cabarrus Ave., W., PO Box 1149
Concord NC 28026
Phone (704) 786-8121
Fax (704) 786-4955

Smart Start
Cabarrus Co. PFC
102 Lake Concord Rd.
Concord NC 28027
Phone (704) 783-4007
Fax (704) 783-1027

Social Services
Cabarrus County DSS
PO Box 668
Concord NC 28025
Phone (704) 786-7141

Support our Students
Cooperative Extension Service of Cabarrus County
PO Box 367
Concord NC 28026-0387
Phone (704) 792-0430
Fax (704) 792-0439

Caldwell

Adolescent Pregnancy Prevention
Caldwell Council on Adolescent Health
Phone (828) 757-9020

Day care subsidies
Blue Ridge Community Action Council
PO Box 1900
Lenoir NC 28645-
Phone (704) 438-6255

DEC
Developmental Evaluation Ctr.
517-E W. Fleming Dr.
Morganton NC 28655
Phone (828) 438-6263
Fax (828) 438-6088

Legal Services
Catawba Valley Legal Services, Inc.
211 East Union St.
Morganton NC 28655
Phone (800) 849-5195
Fax (828) 437-9397

Mental Health
Foothills Area Authority
306 S. King St.
Morganton NC 28655
Phone (828) 438-6230
Fax (828) 438-6238

Primary Care
West Caldwell Health Council, Inc.
PO Drawer 9
Collettsville NC 28611
Phone (828) 754-2400

Public Health
Health Department
1966-B Morganton Blvd., S.W.
Lenoir NC 28645
Phone (828) 757-1217
Fax (828) 757-1352

Smart Start
Caldwell Co. PFC
1966-E Morganton Blvd. SW
Lenoir NC 28645
Phone (828) 754-8484
Fax (828) 757-1488

Social Services
Caldwell County DSS
1966-H Morganton Blvd., SW
Lenoir NC 28645
Phone (828) 757-1180

Camden

Child Support Enforc.
Albermarle Child Support Enforcement
401 S. Griffin St.
Elizabeth City NC 27909
Phone (252) 331-4811
Fax (252) 331-4833

DEC
Developmental Evaluation Ctr.
PO Box 189
Elizabeth City NC 27909
Phone (252) 338-4044
Fax (252) 338-4365

Legal Services
Legal Services of the Coastal Plains
PO Box 564
Ahoskie NC 27910
Phone (800) 682-0010
Fax (252) 332-3317

Mental Health
Albemarle Area Program
PO Box 326
Elizabeth City NC 27907
Phone (252) 335-0431
Fax (252) 335-9144

Public Health
Health Department
Hwy 343 North
Camden NC 27921
Phone (252) 338-4460
Fax (252) 338-4475

Smart Start
Camden Smart Start
PO Box 367
Camden NC 27921
Phone (252) 338-5466
Fax (252) 338-5639

Social Services
Camden County DSS
PO Box 70
Camden NC 27927
Phone (252) 331-4787

Carteret

Adolescent Pregnancy Prevention
Carteret Health Center
Phone (252) 728-8550
Child Support Enforc.
Carteret Child Support Enforcement
Morehead City NC

DEC
Developmental Evaluation Ctr.
1405 S. Genburnie Rd.
New Bern NC 28562
Phone (252) 514-4770
Fax (252) 514-4773

Family Resource Center
Beaufort Family Resource Ctr.
600 Mulberry St., Suite 11
Beaufort NC 28516-1960
Fax (252) 728-2753

Legal Services
Pamlico Sound Legal Services
PO Box 1167
New Bern NC 28563
Phone (800) 672-8213
Fax (252) 637-6099

Mental Health
Neuse Area Program
405 Middle St., PO box 1636
New Bern NC 28563
Phone (252) 636-1510
Fax (252) 633-1237

Public Health
Health Department
Courthouse Square
Beaufort NC 28516
Phone (252) 728-8550
Fax (252) 728-1820

Smart Start
Carteret Co PFC
PO Box 813
Beaufort NC 28516
Phone (252) 728-5453
Fax (252) 728-5453

Social Services
Carteret County DSS
PO Box 779
Beaufort NC 28516
Phone (252) 728-3181

Support our Students
Coastal Community Action, Inc.
PO Drawer 90
Beaufort NC 28518-0090
Phone (252) 728-4528
Fax (252) 728-6958

Caswell

DEC
Developmental Evaluation Ctr.
122 N. Elm St., Suite 400
Greensboro NC 27401
Phone (336) 334-5601
Fax (336) 334-5657

Legal Services
North State Legal Services
PO Box 670
Hillsborough NC 27278
Phone (800) 672-5834
Fax (919) 644-0694

Mental Health
Alamance-Caswell Area Program
1946 Martin St.
Burlington NC 27215
Phone (336) 513-4200

Primary Care
Prospect Hill Community Health Ctr.
140 Main St., PO Box 4
Prospect Hill NC 27314
Phone (336) 562-3311
Fax (336) 562-4444

Public Health
Health Department
County Park Rd, PO Drawer H
Yanceyville NC 27379
Phone (336) 694-4129
Fax (336) 694-1405

Smart Start
Caswell Co. PFC
PO Box 664
Yanceyville NC 27379
Phone (336) 694-1538
Fax (336) 694-7666

Social Services
Caswell County DSS
Drawer S
Yanceyville NC 27379
Phone (336) 694-4141

Catawba

Adolescent Pregnancy Prevention
Council on Adolescents of Catawba Co.
Phone (828) 322-4591

DEC
Developmental Evaluation Ctr.
517-E W. Fleming Dr.
Morganton NC 28655
Phone (828) 438-6263
Fax (828) 438-6088

Family Preservation
Catawba Co. Social Services
PO Box 669
Newton NC 28658-
Phone (704) 256-7389
Fax (704) 322-2497

Legal Services
Catawba Valley Legal Services, Inc.
211 East Union St.
Morganton NC 28655
Phone (800) 849-5195
Fax (828) 437-9397

Mental Health
Catawba Area Program
3050 - 11th Ave. Drive, SE
Hickory NC 28602
Phone (828) 326-5900
Fax (828) 326-5949

Public Health
Health Department
3070 11th Ave, Drive SE
Hickory NC 28602
Phone (828) 326-5800
Fax (828) 326-4410

Smart Start
Catawba Co PFC
PO Box 3123
Hickory NC 28603
Phone (828) 345-6955
Fax (828) 328-4551

Social Services
Catawba County DSS
PO Box 669
Newton NC 28658
Phone (828) 326-5600

Support our Students
Hickory Recreation Ctr.
1515 12th Street Dr. NW
Hickory NC 28601
Phone (828) 327-7199
Fax (828) 323-1042

Chatham

Adolescent Pregnancy Prevention
Chatham Health Dept./Coalition for Adol. Health
Phone (919) 542-8220

DEC
Developmental Evaluation Ctr.
319 Chapanoke Rd.
Raleigh NC 27603
Phone (919) 662-4600
Fax (919) 662-4473

Legal Services
North State Legal Services
PO Box 670
Hillsborough NC 27278
Phone (800) 672-5834
Fax (919) 644-0694

Mental Health
O-P-C Area Program
101 E. Weaver St., Suite 300
Carrboro NC 27510
Phone (919) 918-1111
Fax (919) 918-1112

Primary Care
Moncure Community Health Ctr.
7228 Pittsboro-Moncure Rd, PO Box 319
Moncure NC 27559
Phone (919) 542-4991
Fax (919) 542-3726

Public Health
Health Department
80 E. St, PO Box 130
Pittsboro NC 27312
Phone (919) 542-8214
Fax (919) 542-8266

Smart Start
Chatham co PFC
200 Sanford Hwy, Ste 4
Pittsboro NC 27312
Phone (919) 542-7449
Fax (919) 542-0238

Social Services
Chatham County DSS
PO Box 489
Pittsboro NC 27312
Phone (919) 542-2759

Support our Students
Mary Neal Child Care Ctr.
2128 B. Alston Chapel Church
Pittsboro NC 27312
Phone (919) 542-3056
Fax (919) 542-0238

Cherokee

Day care subsidies
Southwestern Child Development Commission
PO Box 250
Webster NC 28788-
Phone (828) 586-5561

DEC
Developmental Evaluation Ctr.
Western Carolina University
Cullowhee NC 28723
Phone (828) 227-7490
Fax (828) 227-7142

Family Preservation
Cherokee Co. DSS
116 Peachtree St. #200
Murphy NC 28906-
Phone (828) 837-3460
Fax (828) 837-8064

Legal Services
Western NC Legal Services
PO Box 426
Sylva NC 28779
Phone (800) 458-6817
Fax (828) 586-4082

Mental Health
Smoky Mountain Area Program
PO Box 280
Dillsboro NC 28725
Phone (828) 586-5501
Fax (828) 586-3965

Public Health
Health Department
206 Hilton St.
Murphy NC 28906
Phone (828) 837-7486
Fax (828) 837-3983

Social Services
Cherokee County DSS
116 Peachtree St., Suite 200
Murphy NC 28906
Phone (828) 837-7455

Support our Students
Power Partners, Inc.
PO Box 1997
Andrews NC 28901
Phone (828) 321-2350
Fax (828) 321-5178

Chowan

DEC
Developmental Evaluation Ctr.
PO Box 189
Elizabeth City NC 27909
Phone (252) 338-4044
Fax (252) 338-4365

Legal Services
Legal Services of the Coastal Plains
PO Box 564
Ahoskie NC 27910
Phone (800) 682-0010
Fax (252) 332-3317

Mental Health
Albemarle Area Program
PO Box 326
Elizabeth City NC 27907
Phone (252) 335-0431
Fax (252) 335-9144

Public Health
Health Department
King St., County Office Bldg, PO Box 808
Edenton NC 27932
Phone (252) 482-6003
Fax (252) 482-6020

Smart Start
Chowan-Gates-Perquimans
PO Box 206
Edenton NC 27932
Phone (252) 482-4436
Fax (252) 482-7309

Social Services
Chowan County DSS
PO Box 296
Edenton NC 27932
Phone (252) 482-7441

Support our Students
Chowan Middle School (SOS)
Central Office, PO Box 206
Edenton NC 27932
Phone (252) 482-4436
Fax (252) 482-7309

Clay

Child Support Enforc.
Swain Co. Child Support Enforcement
PO Box 1047
Bryson City NC 28713
Phone (828) 488-2191
Fax (828) 488-8658

Day care subsidies
Southwestern Child Development Commission
PO Box 250
Webster NC 28788
Phone (828) 586-5561

DEC
Developmental Evaluation Ctr.
Western Carolina University
Cullowhee NC 28723
Phone (828) 227-7490
Fax (828) 227-7142

Legal Services
Western NC Legal Services
PO Box 426
Sylva NC 28779
Phone (800) 458-6817
Fax (828) 586-4082

Mental Health
Smoky Mountain Area Program
PO Box 280
Dillsboro NC 28725
Phone (828) 586-5501
Fax (828) 586-3965

Primary Care
Clay Comprehensive Health Services
PO Box 1309
Hayesville NC 28904
Phone (828) 389-6347

Public Health
Health Department
Riverside Circle, PO Box 55
Hayesville NC 28904
Phone (828) 389-8052
Fax (828) 389-8533

Social Services
Clay County DSS
PO Box 147
Hayesville NC 28904
Phone (828) 389-6301

Cleveland

Adolescent Pregnancy Prevention
Cleveland Co. Health Dept.
Phone (704) 484-5143

DEC
Developmental Evaluation Ctr.
1428 E. Marion St., Suite 5
Shelby NC 28150
Phone (704) 480-5440
Fax (704) 480-5477

Family Preservation
The Cleveland Center
917 First St.
Shelby NC 28150-3996
Phone (704) 487-0661
Fax (704) 482-5025

Family Resource Center
Hoechst Celanese Family Resource Ctr.
526 Davis Rd.
Shelby NC 28152
Phone (704) 481-1568
Fax (704) 487-0460

Legal Services
Catawba Valley Legal Services, Inc.
211 East Union St.
Morganton NC 28655
Phone (800) 849-5195
Fax (828) 437-9397

Mental Health
Cleveland Area Program
917 First St.
Shelby NC 28150-3996
Phone (704) 482-8941
Fax (704) 482-5025

Primary Care
CLECO Primary Care Network
315 Grover St.
Shelby NC 28150

Public Health
Health Department
315 Grover St.
Shelby NC 28150-
Phone (704) 484-5100
Fax (704) 484-5220

Smart Start
Cleveland Co PFC
PO Box 1468
Shelby NC 28151
Phone (704) 484-0096
Fax (704) 484-2524

Social Services
Cleveland County DSS
Drawer 9006
Shelby NC 28150
Phone (704) 487-0661

Columbus

DEC
Developmental Evaluation Ctr.
1501 Dock St.
Wilmington NC 28401
Phone (910) 251-5817
Fax (910) 251-2652

Family Resource Center
Family Champtions
PO Box 694
Tabor City NC 28463
Phone (910) 653-9200
Fax (910) 653-9183

Legal Services
Legal Services of Lower Cape Fear
PO Box 814
Wilmington NC 28402
Phone (800) 672-9304
Fax (910) 343-8894

Mental Health
Southeastern Regional Area Program
207 W. 29th St.
Lumberton NC 28358
Phone (919) 738-5261
Fax (919) 738-8230

Primary Care
Columbus Co. Community Health Ctr.
209 W. Virgil St.
Whitesville NC 28472
Phone (910) 641-0202

Public Health
Health Department
Miller Bldg, PO Box 810
Whiteville NC 28472
Phone (910) 642-5700
Fax (910) 640-1088

Smart Start
Columbus Co. PFC, Inc.
PO Box 1481
Whiteville NC 28472
Phone (910) 642-8226
Fax (910) 642-8885

Social Services
Columbus County DSS
PO Box 397
Whiteville NC 28472
Phone (910) 642-5700

Support our Students
Columbus Co. Services Management
PO Box 551
Whiteville NC 28472
Phone (910) 642-1862
Fax (910) 642-8775

Craven

Child Support Enforc.
New Bern Child Support Enforcement
233 Middle St. Suite 203
New Bern NC 28560
Phone (252) 514-4807
Fax (252) 514-4872

DEC
Developmental Evaluation Ctr.
1405 S. Genburnie Rd.
New Bern NC 28562
Phone (252) 514-4770
Fax (252) 514-4773

Legal Services
Pamlico Sound Legal Services
PO Box 1167
New Bern NC 28563
Phone (800) 672-8213
Fax (252) 637-6099

Mental Health
Neuse Area Program
405 Middle St., PO box 1636
New Bern NC 28563
Phone (252) 636-1510
Fax (252) 633-1237

Public Health
Health Department
2818 Neuse Blvd, PO Drawer 12610
New Bern NC 28561
Phone (252) 636-4920
Fax (252) 636-4970

Smart Start
Craven Co. PFC
PO Box 1636
New Bern NC 28562
Phone (252) 637-3249
Fax (252) 637-9845

Social Services
Craven County DSS
PO Box 12039
New Bern NC 28561
Phone (252) 636-4900

Support our Students
Youth Vision, Inc.
PO Box 13092
New Bern NC 28560
Phone (252) 635-1968
Fax (252) 635-1379

Cumberland

Child Support Enforc.
Cumberland Child Support Enforcement
803 J. Eulaw Village Stamper Road
PO Box 2545
Fayetteville, NC 28302
Phone (910) 486-1092
Fax (910) 486-1256

DEC
Developmental Evaluation Ctr.
1211-A Ireland Dr.
Fayetteville NC 28304
Phone (910) 486-1605
Fax (910) 486-1590

Family Resource Center
Multicultural Comm. Dev. Service
PO Box 261
Spring Lake NC 28390
Phone (910) 497-4905
Fax (910) 497-6059

Legal Services
Lumbee River Legal Services
PO Drawer 939
Pembroke NC 28372
Phone (800) 554-7852
Fax (910) 521-9824

Mental Health
Cumberland Area Program
PO Box 3069
Fayetteville NC 28302-3069
Phone (910) 323-0601
Fax (910) 323-0096

Public Health
Health Department
227 Fountainhead Lane
Fayetteville NC 28301
Phone (910) 433-3700
Fax (910) 433-3659

Smart Start
Cumberland Co. PFC, Inc.
351 Wagoner Dr., Ste 200
Fayetteville NC 28303
Phone (910) 867-9700
Fax (910) 867-7772

Social Services
Cumberland County DSS
PO Box 2429
Fayetteville NC 28302
Phone (910) 323-1540

Support our Students
Steel Magnolias
PO Box 2941
Fayetteville NC 28302
Phone (910) 488-1705
Fax (910) 482-0997

United Cerebral Palsy of NC
PO Box 27707
Raleigh NC 27611-7707
Phone (919) 832-3787
Fax (919) 832-5928

Currituck

Child Support Enforc.
Manteo Child support Enforcement
105 Budleigh St.
Manteo NC 27954
Phone (252) 473-2001
Fax (252) 473-4570

DEC

Developmental Evaluation Ctr.
PO Box 189
Elizabeth City NC 27909
Phone (252) 338-4044
Fax (252) 338-4365

Legal Services

Legal Services of the Coastal Plains
PO Box 564
Ahoskie NC 27910
Phone (800) 682-0010
Fax (252) 332-3317

Mental Health

Albemarle Area Program
PO Box 326
Elizabeth City NC 27907
Phone (252) 335-0431
Fax (252) 335-9144

Public Health

Health Department
Hwy 168, PO Box 26
Currituck NC 27929
Phone (252) 232-2271
Fax (252) 232-2442

Smart Start

Currituck PFC
PO Box 249
Currituck NC 27929
Phone (252) 232-2261
Fax (252) 232-3290

Social Services

Currituck County DSS
PO Box 99
Currituck NC 27929
Phone (252) 232-3083

Support our Students

NC Cooperative Extension Service-Currituck
PO Box 10
Currituck NC 27929
Phone (252) 232-2262
Fax (252) 232-3026

Dare

Child Support Enforc.

Manteo Child support Enforcement
105 Budleigh St.
Manteo NC 27954
Phone (252) 473-2001
Fax (252) 473-4570

Day care subsidies

Northwest Child Development Council
530 N. Spring St.
Winston-Salem NC 27101
Phone (336) 721-1215

DEC

Developmental Evaluation Ctr.
PO Box 189
Elizabeth City NC 27909
Phone (252) 338-4044
Fax (252) 338-4365

Legal Services

Legal Services of the Coastal Plains
PO Box 564
Ahoskie NC 27910
Phone (800) 682-0010
Fax (252) 332-3317

Mental Health

Albemarle Area Program
PO Box 326
Elizabeth City NC 27907
Phone (252) 335-0431
Fax (252) 335-9144

Public Health

Health Department
211 Budleigh St., PO Box 1000
Manteo NC 27954
Phone (252) 473-1101
Fax (252) 473-1817

Smart Start

Children & Youth Part for Dare
PO Box 1828
Kitty Hawk NC 27949
Phone (252) 441-0614
Fax (252) 441-3580

Social Services
Dare County DSS
PO Box 669
Manteo NC 27954
Phone (252) 473-1471

Support our Students
Dare County 4-H & Youth Foundation
PO Box 968
Manteo NC 27954
Phone (252) 473-1101
Fax (252) 473-3106

Davidson

DEC
Developmental Evaluation Ctr.
3325 Sila Creek Pkwy
Winston-Salem NC 27103
Phone (336) 774-2400
Fax (336) 774-2485

Family Resource Center
Fairgrove Family Resource Ctr.
217 Cedar Lodge Rd.
Thomasville NC 27360-6140
Phone (336) 472-7217
Fax (336) 472-7242

Legal Services
Central Carolina Legal Services
PO Box 3467
Greensboro NC 27402
Phone (336) 272-0148
Fax (336) 333-9825

Mental Health
Davidson Area Program
205 Old Lexington Rd.
Thomasville NC 27360
Phone (336) 474-2700
Fax (336) 474-2771

Public Health
Health Department
915 Greensboro St., PO Box 439
Lexington NC 27293
Phone (336) 242-2300
Fax (336) 242-2485

Smart Start
Davidson Co PFC
PO Box 1287
Lexington NC 27293
Phone (336) 249-8186

Fax (336) 249-6687
Social Services
Davidson County DSS
PO Box 788
Lexington NC 27292
Phone (336) 242-2500

Support our Students
J. Smith Young YMCA of Lexington
119 W. Third St.
Lexington NC 27292
Phone (336) 249-2177
Fax (336) 249-4218

Davie

Adolescent Pregnancy Prevention
Davie County Health Dept.
Phone (336) 751-8700

DEC
Developmental Evaluation Ctr.
3325 Sila Creek Pkwy
Winston-Salem NC 27103
Phone (336) 774-2400
Fax (336) 774-2485

Legal Services
Legal Aid Society for Northwest NC
216 W. Fourth St.
Winston-Salem NC 27101
Phone (336) 725-9166
Fax (336) 723-9140

Mental Health
Centerpoint Human Services
725 Highland Ave.
Winston-Salem NC 27101
Phone (336) 725-7777
Fax (336) 722-9464

Public Health
Health Department
210 Hospital St., PO Box 848
Mocksville NC 27028
Phone (336) 634-8700
Fax (336) 634-0335

Smart Start
Davie Co PFC
123 South Main St.
Mocksville NC 27028
Phone (336) 751-5513
Fax (336) 751-7408

Social Services
Davie County DSS
PO Box 517
Mocksville NC 27028
Phone (336) 634-8800

Duplin

DEC
Developmental Evaluation Ctr.
1501 Dock St.
Wilmington NC 28401
Phone (910) 251-5817
Fax (910) 251-2652

Legal Services
Legal Services of Lower Cape Fear
PO Box 814
Wilmington NC 28402
Phone (800) 672-9304
Fax (910) 343-8894

Mental Health
Duplin-Sampson Area Program
PO Box 599, 117 Beasley St.
Kenansville NC 28349
Phone (910) 296-1851
Fax (910) 296-1731

Primary Care
Goshen Medical Ctr.
PO Box 187, 444 S. W. Center St.
Faison NC 28341
Phone (910) 267-0421
Fax (910) 267-0441

Public Health
Health Department
340 Seminary St., PO Box 948
Kenansville NC 28349
Phone (910) 296-2130
Fax (910) 296-2139

Smart Start
Duplin Co. PFC
PO Box 989
Kenansville NC 28349
Phone (910) 296-2000
Fax (910) 296-1497

Social Services
Duplin County DSS
PO Box 969
Kenansville NC 28349
Phone (910) 296-2200

Durham

Adolescent Pregnancy Prevention
CommuniMedia
Phone (919) 688-0859

DEC
Developmental Evaluation Ctr.
115 Market St., Suite 201
Durham NC 27701-3221
Phone (919) 560-5600
Fax (919) 560-3018

Family Resource Center
Eastway Family & Academic Support Pro.
1107 Holloway St.
Durham NC 27701-3852
Phone (919) 956-5543
Fax (919) 688-8827

Legal Services
North Central Legal Assistance Program
PO Box 2101
Durham NC 27702
Phone (919) 688-6396
Fax (919) 682-8157

Mental Health
Durham Area Program
Carmichael Bldg, 2nd Floor, 300 N. Duke St.
Durham NC 27701
Phone (919) 560-7200
Fax (919) 560-7216

Primary Care
Lincoln Community Health Ctr.
1301 Fayetteville St., PO Box 52119
Durham NC 27707
Phone (919) 956-4000
Fax (919) 687-4257

Public Health
Health Department
414 E. Main St.
Durham NC 27701
Phone (919) 560-7600
Fax (919) 560-7652

Smart Start
Durham's PFC
PO Box 52488
Durham NC 27717
Phone (919) 403-6960
Fax (919) 403-6963

Social Services
Durham County DSS
PO Box 810
Durham NC 27702
Phone (919) 560-8000

Support our Students
Durham Day Care Council
2634 Chapel Hill Blvd- Suite 100
Durham NC 27707
Phone (919) 403-6950
Fax (919) 403-6959

Edgecombe

DEC
Developmental Evaluation Ctr.
111 Medical Arts Mall
Rocky Mount NC 27804
Phone (252) 443-8858
Fax (252) 443-0275
Family Resource Center
Down East Partnership for Children
PO Box 1245
Rocky Mount NC 27802-1245
Phone (252) 985-4300
Fax (252) 985-4319

Legal Services
Eastern Carolina Legal Services
PO Box 2688
Wilson NC 27894-2688
Phone (800) 682-7902
Fax (252) 291-6407

Mental Health
Edgecombe-Nash Area Program
500 Nash Medical Arts Mall
Rocky Mount NC 27804
Phone (252) 937-8141
Fax (252) 443-9574

Public Health
Health Department
2909 Main St.
Tarboro NC 27886
Phone (252) 641-7511
Fax (252) 641-7565

Social Services
Edgecombe County DSS
3003 N. Main St.
Tarboro NC 27886
Phone (252) 641-7611

Support our Students
The Community Enrichment Organization
PO Box 1647
Tarboro NC 27886
Phone (252) 823-1733
Fax (252) 641-0710

Forsyth

Adolescent Parenting Program
Catholic Social Services
PO Box 10962
Winston-Salem NC 27108
Phone (336) 725-4263
Fax (336) 727-9333

Day care subsidies
Northwest Child Development Council
530 N. Spring St.
Winston-Salem NC 27101
Phone (336) 721-1215

DEC
Developmental Evaluation Ctr.
3325 Sila Creek Pkwy
Winston-Salem NC 27103
Phone (336) 774-2400
Fax (336) 774-2485

Family Preservation
Youth Opportunities/Families First
206 N. Spruce St., Suite 3B
Winston-Salem NC 27101
Phone (336) 724-1412
Fac (336) 724-1464

Legal Services
Legal Aid Society for Northwest NC
216 W. Fourth St.
Winston-Salem NC 27101
Phone (336) 725-9166
Fax (336) 723-9140

Mental Health
Centerpoint Human Services
725 Highland Ave.
Winston-Salem NC 27101
Phone (336) 725-7777
Fax (336) 722-9464

Private Adoption Assistance
Family Services
610 Coliseum Dr.
Winston-Salem NC 27106-5393
Phone (336) 722-8173

Public Health
Health Department
799 Highland Ave., PO Box 686
Winston-Salem NC 27102
Phone (336) 727-2433
Fax (336) 727-8135

Smart Start
Forsyth Early Childhood Part.
PO Box 10305
Winston-Salem NC 27108
Phone (336) 725-6011
Fax (336) 725-5438

Social Services
Forsyth County DSS
PO Box 999
Winston-Salem NC 27102
Phone (336) 727-8311

Support our Students
The YMCA of Greater Winston-Salem
107 W. Dale Ave.
Winston-Salem NC 27101
Phone (336) 722-9772
Fax (336) 722-4272

Franklin

Child Support Enforc.
Franklin Co. Child Support Enforcement
216 N. Bickett St.
Louisburg NC 27549
Phone (919) 496-2274
Fax (919) 496-6857

DEC
Developmental Evaluation Ctr.
115 Market St., Suite 201
Durham NC 27701-3221
Phone (919) 560-5600
Fax (919) 560-3018

Legal Services
North Central Legal Assistance Program
PO Box 2101
Durham NC 27702
Phone (919) 688-6396
Fax (919) 682-8157

Mental Health
V-G-F-W Area Program
134 W. Garnett St.
Henderson NC 27536
Phone (252) 430-1330
Fax (252) 430-0909

Public Health
Health Department
107 Industrial Dr., Suite C
Louisburg NC 27549
Phone (919) 496-8110
Fax (919) 496-8140

Smart Start
Franklin-Granville-Vance
PO Box 142
Henderson NC 27536
Phone (252) 433-9110
Fax (252) 433-9230

Social Services
Franklin County DSS
PO Box 669
Louisburg NC 27549
Phone (919) 496-5721

Gaston

DEC
Developmental Evaluation Ctr.
1428 E. Marion St., Suite 5
Shelby NC 28150
Phone (704) 480-5440
Fax (704) 480-5477

Family Resource Center
Highland Family Resource Ctr.
301 N. Highland St.
Gastonia NC 28052
Phone (704) 866-9552
Fax (704) 866-9478

Legal Services
Legal Services of Southern Piedmont
1431 Elizabeth Ave.
Charlotte NC 28204-2506
Phone (704) 376-1600
Fax (704) 376-8627

Mental Health
Gaston-Lincoln Area Program
2505 Court Drive
Gastonia NC 28054
Phone (704) 867-2361
Fax (704) 854-4809

Public Health
Health Department
991 W. Hudson Blvd.
Gastonia NC 28052
Phone (704) 853-5000
Fax (704) 853-5252

Smart Start
PFC of Lincoln/Gaston Co's., Inc.
PO Box 998
Lincolnton NC 28093
Phone (704) 736-9008
Fax (704) 736-0055

Social Services
Gaston County DSS
PO Box 10
Gastonia NC 28053
Phone (704) 866-3911

Support our Students
Highland SOS Program
PO Box 1695
Gastonia NC 28053
Phone (704) 867-3512
Fax (704) 867-3002

Gates

Child Support Enforc.
Albermarle Child Support Enforcement
401 S. Griffin St.
Elizabeth City NC 27909
Phone (252) 331-4811
Fax (252) 331-4833

DEC
Developmental Evaluation Ctr.
PO Box 189
Elizabeth City NC 27909
Phone (252) 338-4044
Fax (252) 338-4365

Family Resource Center
Family Care Ctr
PO Box 46
Gatesville NC 27938
Phone (252) 465-4549
Fax (252) 465-4356

Legal Services
Legal Services of the Coastal Plains
PO Box 564
Ahoskie NC 27910
Phone (800) 682-0010
Fax (252) 332-3317

Mental Health
Roanoke-Chowan Area Program
Route 3 Box 22A
Ahoskie NC 27910
Phone (252) 332-4137
Fax (252) 332-8457

Primary Care
Gates Co. Rural Health Services
PO Box 297
Gatesville NC 27938
Phone (252) 357-1226

Public Health
Health Department
Rt. 1, Box 112A
Gates NC 27937
Phone (252) 357-1380
Fax (252) 357-2251

Smart Start
Gates Co. PFC
PO Box 125
Gatesville NC 27938
Phone (252) 357-1113
Fax (252) 357-0207

Social Services
Gates County DSS
PO Box 185
Gatesville NC 27938
Phone (252) 357-0075

Support our Students
Gates County Extension Service
PO Box 46
Gatesville NC 27938
Phone (252) 357-1400
Fax (252) 357-1167

Graham

Child Support Enforc.
Swain Co. Child Support Enforcement
PO Box 1047
Bryson City NC 28713
Phone (828) 488-2191
Fax (828) 488-8658

Day care subsidies
Southwestern Child Development Commission
PO Box 250
Webster NC 28788
Phone (828) 586-5561

DEC
Developmental Evaluation Ctr.
Western Carolina University
Cullowhee NC 28723
Phone (828) 227-7490
Fax (828) 227-7142

Legal Services
Western NC Legal Services
PO Box 426
Sylva NC 28779
Phone (800) 458-6817
Fax (828) 586-4082

Mental Health
Smoky Mountain Area Program
PO Box 280
Dillsboro NC 28725
Phone (828) 586-5501
Fax (828) 586-3965

Public Health
Health Department
Moose Branch Rd, PO Box 546
Robbinsville NC 28771
Phone (828) 479-7900
Fax (828) 479-6956

Social Services
Graham County DSS
PO Box 1150
Robbinsville NC 28771
Phone (828) 479-7911

Support our Students
Stecoah Valley Center
Graham County Schools; PO Box 605
Robbinsville NC 28771
Phone (828) 479-3413
Fax (828) 479-7950

Granville

Adolescent Pregnancy Prevention
Granville Co. Health Dept.
101 Hunt Dr., PO Box 367
Oxford NC 27565
Phone (919) 693-2141
Fax (919) 693-8006

DEC
Developmental Evaluation Ctr.
115 Market St., Suite 201
Durham NC 27701-3221
Phone (919) 560-5600
Fax (919) 560-3018

Legal Services
North Central Legal Assistance Program
PO Box 2101
Durham NC 27702
Phone (919) 688-6396
Fax (919) 682-8157

Mental Health
V-G-F-W Area Program
134 W. Garnett St.
Henderson NC 27536
Phone (252) 430-1330
Fax (252) 430-0909

Public Health
Health Department
101 Hunt Dr., PO Box 367
Oxford NC 27565
Phone (919) 693-2141
Fax (919) 693-8006

Smart Start
Franklin-Granville-Vance
PO Box 142
Henderson NC 27536
Phone (252) 433-9110
Fax (252) 433-9230

Social Services
Granville County DSS
PO Box 966
Oxford NC 27565
Phone (919) 693-1511

Support our Students
Oxford Business & Professional Chair
PO Box 1553, 304 Hillsboro St.
Oxford NC 27565
Phone (919) 693-8874
Fax (919) 693-7391

Greene

DEC
Developmental Evaluation Ctr.
Irons Bldg, Charles Blvd, ECU
Greenville NC 27858
Phone (252) 328-4480
Fax (252) 328-5509

Legal Services
Eastern Carolina Legal Services
PO Box 2688
Wilson NC 27894-2688
Phone (800) 682-7902
Fax (919) 291-6407

Mental Health
Wilson-Greene Area Program
1709 S. Tarboro St., PO Box 3756
Wilson NC 27895-3756
Phone (252) 399-8021
Fax (252) 399-8151

Primary Care
Greene Co. Community Health Ctr.
302 N. Greene St., PO Box 658
Snow Hill NC 28580
Phone (252) 747-8162
Fax (252) 747-8163

Public Health
Health Department
227 Kingold Blvd., Suite B
Snow Hill NC 28580
Phone (252) 747-8183
Fax (252) 747-4040

Smart Start
Lenoir/Greene PFC
PO Box 6490
Kinston NC 28501
Phone (252) 939-1200
Fax (252) 939-1313

Social Services
Greene County DSS
227 Kingold Blvd.-Suite A
Snow Hill NC 28580
Phone (252) 747-5932

Support our Students
Greene County Extension Service
229 Kingold Blvd., Suite E
Snow Hill NC 28580
Phone (252) 747-5831
Fax (252) 747-3884

Guilford

Adolescent Parenting Program
YWCA of High Point
112 Gatewood Ave.
High Point NC 27262
Phone (336) 882-4126
Fax (336) 882-7980

Adolescent Pregnancy Prevention
Sickle Cell Disease Assoc./YWCA of High Point
Phone (336) 274-1507

DEC
Developmental Evaluation Ctr.
122 N. Elm St., Suite 400
Greensboro NC 27401
Phone (336) 334-5601
Fax (336) 334-5657

Family Preservation
Family Services of the Piedmont
301 E. Washington St.
Greensboro NC 27401
Phone (336) 333-6910
Fax (336) 574-1230

Legal Services
Central Carolina Legal Services
PO Box 3467
Greensboro NC 27402
Phone (336) 272-0148
Fax (336) 333-9825

Mental Health
Guilford Area Program
Admin. Offices - 4thFloor, 232 N. Edgeworth St.
Greensboro NC 27401-2221
Phone (336) 373-4981
Fax (336) 373-7761

Private Adoption Assistance Agencies
AGAPE
302 College Road
Greensboro NC 27410
Phone (336) 855-7107

Private Adoption Assistance Agencies
Carolina Adoption Services
1000 N. Elm St.
Greensboro NC 27401
Phone (336) 275-9660

Private Adoption Assistance Agencies
Children's Home Society of NC
PO Box 14608
Greensboro NC 27415-4608
Phone (336) 274-1538

Public Health
Health Department
232 N. Edgeworth St., PO Box 3508
Greensboro NC 27401
Phone (336) 373-3283
Fax (336) 333-6807

Smart Start
Guilford Co. PFC
122 N. Elm St., Ste 608
Greensboro NC 27401
Phone (336) 274-5437
Fax (336) 274-5447

Social Services
Guilford County DSS
PO Box 3388
Greensboro NC 27402
Phone (336) 373-3813

Support our Students
YWCA of Greensboro
#1 YWCA Place
Greensboro NC 27401-2889
Phone (336) 273-3461
Fax (336) 273-7141

Halifax

DEC
Developmental Evaluation Ctr.
111 Medical Arts Mall
Rocky Mount NC 27804
Phone (252) 443-8858
Fax (252) 443-0275

Legal Services
Legal Services of the Coastal Plains
PO Box 564
Ahoskie NC 27910
Phone (800) 682-0010
Fax (252) 332-3317

Mental Health
Halifax Area Program
PO Box 1199, 210 Smith Church Rd.
Roanoke Rapids NC 27870
Phone (252) 537-6174
Fax (252) 537-4961

Primary Care
Scotland Neck Family Medical Ctr.
PO Box 540
Scotland Neck NC 27874
Phone (252) 826-3143

Public Health
Health Department
Dobbs St., PO Box 10
Halifax NC 27839
Phone (252) 583-5021
Fax (252) 583-2975

Smart Start
Halifax-Warren SS PFC
PO Box 402
Halifax NC 27839
Phone (252) 583-1304
Fax (252) 583-1217

Social Services
Halifax County DSS
PO Box 767
Halifax NC 27839
Phone (252) 536-2511

Support our Students
St. Paul's Baptist Church SOS Program
409 N. Railroad St.
Enfield NC 27823
Phone (252) 445-5003
Fax (252) 445-3068

Harnett

Child Support Enforc.
Harnett Child Support Enforcement
317 E. Jackson Blvd.
Erwin NC 28339
Phone (910) 897-3288
Fax (910) 897-2572

DEC
Developmental Evaluation Ctr.
1211-A Ireland Dr.
Fayetteville NC 28304
Phone (910) 486-1605
Fax (910) 486-1590

Dental Care
Stedman Family Dental Ctr.
PO Box 368, Hwy 24
Stedman NC 28391
Phone (910) 483-3150
Fax (910) 483-2845

Legal Services
East Central Community Legal Services
PO Drawer 1731
Raleigh NC 27602
Phone (919) 828-4647
Fax (919) 839-8370

Mental Health
Lee-Harnett Area Program
130 Carbonton Rd.
Sanford NC 27330
Phone (919) 774-8599
Fax (919) 774-8595

Primary Care
Wade Family Medical Ctr.
PO Box 449, Hwy 301 N.
Wade NC 28395
Phone (910) 483-6694
Fax (910) 483-3019

Public Health
Health Department
307 Corneilus Harnett Blvd., PO Box 09
Lillington NC 27546
Phone (910) 893-7550
Fax (910) 893-9429

Smart Start
Harnett Co. PFC
102 E. Front St.
Lillington NC 27546
Phone (910) 893-7555

Social Services
Harnett County DSS
PO Box 669
Lillington NC 27546
Phone (910) 893-7500

Haywood

Day care subsidies
Southwestern Child Development Commission
PO Box 250
Webster NC 28788
Phone (828) 586-5561

DEC
Developmental Evaluation Ctr.
Western Carolina University
Cullowhee NC 28723
Phone (828) 227-7490
Fax (828) 227-7142

Legal Services
Western NC Legal Services
PO Box 426
Sylva NC 28779
Phone (800) 458-6817
Fax (828) 586-4082

Mental Health
Smoky Mountain Area Program
PO Box 280
Dillsboro NC 28725
Phone (828) 586-5501
Fax (828) 586-3965

Public Health
Health Department
2216 Asheville Rd.
Waynesville NC 28786
Phone (828) 452-6675

Social Services
Haywood County DSS
486 E. Marshall St.
Waynesville NC 28786
Phone (828) 452-6620

Henderson

DEC
Developmental Evaluation Ctr.
119 Tunnel Rd., Suite D
Asheville NC 28805
Phone (828) 251-6091
Fax (828) 251-6911

Family Preservation
Trend Community Mental Health Svs.
800 Flemming St.
Hendersonville NC 28739
Phone (828) 697-4494
Fax (828) 693-9560

Legal Services
Appalachian Legal Services
PO Box 7606
Asheville NC 28802
Phone (800) 489-6144
Fax (828) 252-8927

Mental Health
TREND Area Program
800 Fleming St.
Hendersonville NC 28791
Phone (828) 692-5741
Fax (828) 693-9560

Primary Care
Blue Ridge Health Ctr.
US Hwy 64 E. & Howard Gap Rd.
Hendersonville NC 28793
Phone (828) 692-4289
Fax (828) 692-4396

Public Health
Health Department
1347 Spartanburg Hwy
Hendersonville NC 28792
Phone (828) 692-4223
Fax (828) 697-4709

Smart Start
Henderson Co. PFC
PO Box 542
Hendersonville NC 28793
Phone (828) 693-1580
Fax (828) 696-4026

Social Services
Henderson County DSS
246 Second Ave. East
Hendersonville NC 28792
Phone (828) 697-5500

Support our Students
Boys & Girls Club
109 S. Main St.
Hendersonville NC 28792
Phone (828) 693-9444
Fax (828) 693-1077

Hertford

Adolescent Pregnancy Prevention
Exodus for Youth, Inc.
Phone (252) 398-8077

Child Support Enforc.
Bertie-Hertford Child Support Enforcement
418 S. Everett St.
Ahoskie NC 27910-4165
Phone (919) 332-2913
Fax (919) 209-0451

DEC
Developmental Evaluation Ctr.
PO Box 189
Elizabeth City NC 27909
Phone (252) 338-4044
Fax (252) 338-4365

Legal Services
Legal Services of the Coastal Plains
PO Box 564
Ahoskie NC 27910
Phone (800) 682-0010
Fax (252) 332-3317

Mental Health
Roanoke-Chowan Area Program
Route 3 Box 22A
Ahoskie NC 27910
Phone (252) 332-4137
Fax (252) 332-8457

Public Health
Health Department
King St., PO Box 246
Winton NC 27986
Phone (252) 358-7833
Fax (252) 358-7869

Smart Start
Hertford Co. PFC
PO Box 504
Murfreesboro NC 27855
Phone (252) 398-4124
Fax (252) 398-3965

Social Services
Hertford County DSS
PO Box 218
Winton NC 27986
Phone (252) 358-7830

Hoke

DEC
Developmental Evaluation Ctr.
1211-A Ireland Dr.
Fayetteville NC 28304
Phone (910) 486-1605
Fax (910) 486-1590

Family Preservation
Hoke Co. Multicultural Family Resource Partnership
2906 Blue Springs Rd.
Red Springs NC 28377
Phone (910) 875-5882
Fax (910) 875-6649

Legal Services
Lumbee River Legal Services
PO Drawer 939
Pembroke NC 28372
Phone (800) 554-7852
Fax (910) 521-9824

Mental Health
Sandhills Area Program
1120 Seven Lakes Dr.
West End NC 27376
Phone (910) 673-9111
Fax (910) 673-6202

Public Health
Health Department
429 E. Central Ave.
Raeford NC 28376
Phone (910) 875-3717
Fax (910) 875-6351

Smart Start
Hoke Co. PFC & Fam.
PO Box 1209
Raeford NC 28376
Phone (910) 904-5452
Fax (910) 904-5654

Social Services
Hoke County DSS
PO Box 340
Raeford NC 28376
Phone (910) 875-8725

Support our Students
Hoke County Partners for Children & Families
PO Box 1209
Raeford NC 28376
Phone (910) 904-5452
Fax (910) 904-5654

Hyde

Adolescent Pregnancy Prevention
Hyde Family Center
Phone (252) 926-2157

Child Support Enforc.
Manteo Child support Enforcement
105 Budleigh St.
Manteo NC 27954
Phone (252) 473-2001
Fax (252) 473-4570

DEC
Developmental Evaluation Ctr.
Irons Bldg, Charles Blvd, ECU
Greenville NC 27858
Phone (252) 328-4480
Fax (252) 328-5509

Family Resource Center
Hyde Family Ctr
PO Box 73
Swan Quarter NC 27885
Phone (252) 926-2157
Fax (252) 926-2358

Legal Services
Pamlico Sound Legal Services
PO Box 1167
New Bern NC 28563
Phone (800) 672-8213
Fax (252) 637-6099

Mental Health
Tideland Area Program
1308 Highland Dr.
Washington NC 27889
Phone (252) 946-8061
Fax (252) 946-8078

Primary Care
Ocracoke Health Ctr.
PO Box 543
Ocracoke NC 27960
Phone (252) 928-1511

Public Health
Health Department
U.S. 264 E. Business, Box 100
Swan Quarter NC 27885
Phone (252) 926-3561
Fax (252) 926-1193

Smart Start
Hyde Co. PFC
PO Box 69
Swan Quarter NC 27885
Phone (252) 926-3561
Fax (252) 926-1193

Social Services
Hyde County DSS
PO Box 220
Swan Quarter NC 27885
Phone (252) 926-3371

Iredell

DEC
Developmental Evaluation Ctr.
342 Penny Lane
Concord NC 28025-1216
Phone (704) 786-9181
Fax (704) 792-9198

Legal Services
Legal Aid Society for Northwest NC
216 W. Fourth St.
Winston-Salem NC 27101
Phone (336) 725-9166
Fax (336) 723-9140

Mental Health
Crossroads Behavioral Healthcare Area Program
124-A Kapp St., PO Box 708
Dobson NC 27017
Phone (910) 386-7425
Fax (910) 386-8552

Public Health
Health Department
318 Turnersburg Hwy
Statesville NC 28625
Phone (704) 878-5300
Fax (704) 878-5357

Smart Start
Iredell Co PFYC
132 E. Broad St.
Statesville NC 28677
Phone (704) 878-9980
Fax (704) 878-9961

Social Services
Iredell County DSS
PO Box 1146
Statesville NC 28677
Phone (704) 873-5631

Support our Students
Communi-Care
PO Box 5185
Statesville NC 28677
Phone (704) 871-1893
Fax (704) 871-9313

Jackson

Day care subsidies
Southwestern Child Development Commission
PO Box 250
Webster NC 28788
Phone (828) 586-5561

DEC
Developmental Evaluation Ctr.
Western Carolina University
Cullowhee NC 28723
Phone (828) 227-7490
Fax (828) 227-7142

Legal Services
Western NC Legal Services
PO Box 426
Sylva NC 28779
Phone (800) 458-6817
Fax (828) 586-4082

Mental Health
Smoky Mountain Area Program
PO Box 280
Dillsboro NC 28725
Phone (828) 586-5501
Fax (828) 586-3965

Public Health
Health Department
538 Scotts Creek Rd., Suite 100
Sylva NC 28779
Phone (828) 586-8994
Fax (828) 586-3493

Smart Start
Region A PFC
7 Colonial Sq. Ste 100
Sylva NC 28779
Phone (828) 586-0661
Fax (828) 586-0663

Social Services
Jackson County DSS
538 Scotts Creek Road- Suite 200
Sylva NC 28779
Phone (828) 586-5545

Johnston

DEC
Developmental Evaluation Ctr.
319 Chapanoke Rd.
Raleigh NC 27603
Phone (919) 662-4600
Fax (919) 662-4473

Legal Services
East Central Community Legal Services
PO Drawer 1731
Raleigh NC 27602
Phone (919) 828-4647
Fax (919) 839-8370

Mental Health
Johnston Area Program
PO Box 411
Smithfield NC 27577
Phone (919) 989-5500
Fax (919) 989-5532

Primary Care
Benson Area Medical Ctr.
PO Box 399
Benson NC 27504
Phone (910) 894-2011

Public Health
Health Department
517 N. Bright Leaf Blvd.
Smithfield NC 27577-4407
Phone (919) 989-5200
Fax (919) 989-5199

Smart Start
Johnston Co. PFC
1200 S. Pollock St.
Selma NC 27576
Phone (919) 202-0002
Fax (919) 202-0902

Social Services
Johnston County DSS
PO Box 911
Smithfield NC 27577
Phone (919) 989-5300

Support our Students
Johnston Central High School Alumni
PO Box 1276
Smithfield NC 27577
Phone (919) 934-1047
Fax (919) 934-1047

Jones

Adolescent Pregnancy Prevention
Jones Co. Schools
Phone (252) 448-2531

DEC
Developmental Evaluation Ctr.
1405 S. Genburnie Rd.
New Bern NC 28562
Phone (252) 514-4770
Fax (252) 514-4773

Legal Services
Pamlico Sound Legal Services
PO Box 1167
New Bern NC 28563
Phone (800) 672-8213
Fax (252) 637-6099

Mental Health
Neuse Area Program
405 Middle St., PO box 1636
New Bern NC 28563
Phone (252) 636-1510
Fax (252) 633-1237

Public Health
Health Department
401 Hwy 58 S., PO Box 216
Trenton NC 28585
Phone (252) 448-9111
Fax (252) 448-1443

Smart Start
Jones Co. PFC
PO Box 186
Trenton NC 28585
Phone (252) 448-5272
Fax (252) 448-1500

Social Services
Jones County DSS
PO Box 250
Trenton NC 28585
Phone (252) 448-2581

Support our Students
Young Women's Outreach Ctr.
PO Box 5023
Kinston NC 28503
Phone (252) 527-7844
Fax (252) 527-6393

Lee

DEC
Developmental Evaluation Ctr.
319 Chapanoke Rd.
Raleigh NC 27603
Phone (919) 662-4600
Fax (919) 662-4473

Legal Services
East Central Community Legal Services
PO Drawer 1731
Raleigh NC 27602
Phone (919) 828-4647
Fax (919) 839-8370

Mental Health
Lee-Harnett Area Program
130 Carbonton Rd.
Sanford NC 27330
Phone (919) 774-8599
Fax (919) 774-8595

Public Health
Health Department
106 Hillcrest Dr., PO Box 1528
Sanford NC 27331-1528
Phone (919) 775-3603
Fax (919) 774-8407

Smart Start
Lee Co. PFC
102 Wicker St., Box 238
Sanford NC 27330
Phone (919) 774-9496
Fax (919) 774-8762

Social Services
Lee County DSS
PO Box 1066
Sanford NC 27330
Phone (919) 774-4955

Support our Students
Get Smart
PO Box 4244
Sanford NC 27331
Phone (919) 776-6119
Fax (919) 776-7905

Lenoir

DEC
Developmental Evaluation Ctr.
1405 S. Genburnie Rd.
New Bern NC 28562
Phone (252) 514-4770
Fax (252) 514-4773

Family Resource Center
Family Support Programs
PO Box 5023
Kinston NC 28503-5023
Phone (252) 527-7844
Fax (252) 527-6393

Legal Services
Eastern Carolina Legal Services
PO Box 2688
Wilson NC 27894
Phone (800) 682-7902
Fax (919) 291-6407

Mental Health
Lenoir Area Program
2901 Herritage St.
Kinston NC 28501
Phone (252) 527-7086
Fax (252) 523-3262

Primary Care
Kinston Community Health Ctr.
PO Drawer 2278
Kinston NC 28502
Phone (252) 522-9800
Fax (252) 522-5520

Public Health
Health Department
201 N. McLewean St.
Kinston NC 28501
Phone (252) 527-7116
Fax (252) 527-0002

Smart Start
Lenoir/Greene PFC
PO Box 6490
Kinston NC 28501
Phone (252) 939-1200
Fax (252) 939-1313

Social Services
Lenoir County DSS
PO Box 6
Kinston NC 28501
Phone (252) 599-6400

Support our Students
Young Women's Outreach Ctr.
PO Box 5023
Kinston NC 28503
Phone (252) 527-7844
Fax (252) 527-6393

Lincoln

DEC
Developmental Evaluation Ctr.
1428 E. Marion St., Suite 5
Shelby NC 28150
Phone (704) 480-5440
Fax (704) 480-5477

Legal Services
Catawba Valley Legal Services, Inc.
211 East Union St.
Morganton NC 28655
Phone (800) 849-5195
Fax (828) 437-9397

Mental Health
Gaston-Lincoln Area Program
2505 Court Dr.
Gastonia NC 28054
Phone (704) 867-2361
Fax (704) 854-4809

Public Health
Health Department
151 Sigmon Rd.
Lincolnton NC 28092-8643
Phone (704) 736-8634
Fax (704) 732-9034

Smart Start
PFC of Lincoln/Gaston Co's., Inc.
PO Box 998
Lincolnton NC 28093
Phone (704) 736-9008
Fax (704) 736-0055

Social Services
Lincoln County DSS
PO Box 130
Lincolnton NC 28093
Phone (704) 732-0738

Support our Students
Lincoln Communities in Schools
PO Box 1315
Lincolnton NC 28092
Phone (704) 736-0303
Fax (704) 736-0372

Macon

Child Support Enforc.
Swain Co. Child Support Enforcement
PO Box 1047
Bryson City NC 28713
Phone (828) 488-2191
Fax (828) 488-8658

Day care subsidies
Southwestern Child Development Commission
PO Box 250
Webster NC 28788
Phone (828) 586-5561

DEC
Developmental Evaluation Ctr.
Western Carolina University
Cullowhee NC 28723
Phone (828) 227-7490
Fax (828) 227-7142

Legal Services
Western NC Legal Services
PO Box 426
Sylva NC 28779
Phone (800) 458-6817
Fax (828) 586-4082

Mental Health
Smoky Mountain Area Program
PO Box 280
Dillsboro NC 28725
Phone (828) 586-5501
Fax (828) 586-3965

Public Health
Health Department
189 Thomas Heights Rd.
Franklin NC 28734
Phone (828) 349-2081
Fax (828) 524-6154

Social Services
Macon County DSS
5 W. Main St.
Franklin NC 28734
Phone (828) 349-1214

Support our Students
Macon Program for Progress
C/O Peggy Crosby Center, 348 S. 5th St.
Highland NC 28741
Phone (828) 524-4471
Fax (828) 524-4833

Madison

DEC
Developmental Evaluation Ctr.
119 Tunnel Rd., Suite D
Asheville NC 28805
Phone (828) 251-6091
Fax (828) 251-6911

Legal Services
Appalachian Legal Services
PO Box 7606
Asheville NC 28802
Phone (800) 489-6144
Fax (828) 252-8927

Mental Health
Blue Ridge Area Program
356 Biltmore Ave.
Asheville NC 28801
Phone (828) 258-3500
Fax (828) 252-9584

Primary Care
Hot Springs Health Program
PO Box 909
Mars Hill NC 26754
Phone (828) 689-3491

Public Health
Health Department
140 Health Care Lane
Marshall NC 28753
Phone (828) 649-3531
Fax (828) 649-2910

Smart Start
Madison Co. PFC and Families
2 Blannahassett Island
Marshall NC 28753
Phone (828) 649-9373
Fax (828) 649-9334

Social Services
Madison County DSS
PO Box 219
Marshall NC 28753
Phone (704) 649-2711

Support our Students
Madison County Communities in Schools
1 Turning Point Place
Marshall NC 28753
Phone (828) 649-2269
Fax (828) 649-9016

Martin

DEC
Developmental Evaluation Ctr.
Irons Bldg, Charles Blvd, ECU
Greenville NC 27858-4354
Phone (252) 328-4480
Fax (252) 328-5509

Family Resource Center
Friends of Families/Family Supp. Service
PO Box 129
Williamston NC 27892-1769
Phone (252) 792-0500
Fax (252) 809-1842

Legal Services
Pamlico Sound Legal Services
PO Box 1167
New Bern NC 28563
Phone (800) 672-8213
Fax (252) 637-6099

Mental Health
Tideland Area Program
1308 Highland Dr.
Washington NC 27889
Phone (252) 946-8061
Fax (252) 946-8078

Public Health
Health Department
210 W. Liberty St.
Williamston NC 27892
Phone (252) 792-7811
Fax (252) 792-8779

Smart Start
Martin/Pitt Co. PFC
600 East 11th St.
Greenville NC 27858
Phone (252) 758-0455
Fax (252) 758-0455

Social Services
Martin County DSS
PO Box 809
Williamston NC 27892
Phone (252) 809-6400

Support our Students
Bertie, Martin, Washington
PO Box 97
Jamesville NC 27846
Phone (252) 792-1272
Fax (252) 792-9169

McDowell

Adolescent Parenting Program
McDowell Co. Schools
35 S. Main St.
Marion NC 28752
Phone (828) 652-1040
Fax (828) 652-9840

DEC
Developmental Evaluation Ctr.
517-E W. Fleming Dr.
Morganton NC 28655
Phone (828) 438-6263
Fax (828) 438-6088

Family Preservation
Foothills Area Program
315 Willow St.
Lenoir NC 28645
Phone (704) 757-2916
Fax (704) 757-2916

Family Resource Center
Endowment Fund of the McDowell Co. Public Schools
35 S. Main St.
Marion NC 28752-3941
Phone (828) 652-3941
Fax (828) 659-2238

Legal Services
Catawba Valley Legal Services, Inc.
211 East Union St.
Morganton NC 28655
Phone (800) 849-5195
Fax (828) 437-9397

Mental Health
Foothills Area Authority
306 S. King St.
Morganton NC 28655
Phone (828) 438-6230
Fax (828) 438-6238

Public Health
Health Department
140 Spaulding Rd.
Marion NC 28752
Phone (828) 652-6811
Fax (828) 652-9376

Smart Start
McDowell Co. PFC & F, Inc.
Po Box 158
Marion NC 28752
Phone (828) 659-2462
Fax (828) 659-1934

Social Services
McDowell County DSS
PO Box 338
Marion NC 28752
Phone (828) 652-3355

Support our Students
McDowell Arts & Crafts Association
PO Box 1387
Marion NC 28752
Phone (828) 652-8610
Fax (828) 652-3935

Mecklenburg

Adolescent Parenting Program
The Family Center
1516 Elizabeth Ave.
Charlotte NC 28204
Phone (704) 376-7180
Fax (704) 338-1446

Adolescent Pregnancy Prevention
Teen Health Connection
Phone (704) 334-1013

Child Support Enforc.
Mecklenburg Co. Child Support Enforcement
500 W. Trade St., Suite 557
Charlotte NC 28202
Phone (704) 342-6325
Fax (704) 347-7003

Day care subsidies
United Cerebral Palsy of NC
PO Box 27707
Raleigh NC 27611-7707
Phone (919) 832-3787
Fax (919) 832-5928

DEC
Developmental Evaluation Ctr.
3500 Ellington St.
Charlotte NC 28211
Phone (704) 335-7100
Fax (704) 336-7112

Legal Services
Legal Services of Southern Piedmont
1431 Elizabeth Ave.
Charlotte NC 28204-2506
Phone (704) 376-1600
Fax (704) 376-8627

Mental Health
Mecklenburg Area Program
429 Billingsley Rd.
Charlotte NC 28211
Phone (704) 336-2033
Fax (704) 336-4383

Primary Care
CW Williams Health Ctr.
3333 Wilkinson Blvd
Charlotte NC 28208
Phone (704) 393-7720
Fax (704) 398-3173

Private Adoption Assistance Agencies
Another Choice for Black Children
5736 N. Tryon St.
Charlotte NC 28213
Phone (704) 599-7745

Private Adoption Assistance Agencies
Christian Adoption Services
624 Matthews-Mint Rd., Suite 134
Matthews NC 28105
Phone (704) 847-0038

Private Adoption Assistance Agencies
Gladney Center
1811 Sardis Rd, N., Suite 207
Charlotte 28270
Phone (704) 849-2003

Private Adoption Assistance Agencies
LDS Social Services
5624 Executive Ctr. Dr., Suite 109
Charlotte NC 28212-8832
Phone (704) 535-2436

Private Adoption Assistance Agencies
Bethany Christian Services
PO Box 470036
Charlotte NC 28247-0036
Phone (704) 541-1833

Private Adoption Assistance Agencies
Catholic Social Services, Diocese of Charlotte
1524 E. Morehead St.
Charlotte NC 28236
Phone (704) 343-9954

Public Health
Mecklenburg Co. Dept. of Environmental Protection
700 N. Tryon St., Ste. 205
Charlotte NC 28202-2236
Phone (704) 336-5500
Fax (704) 336-4391

Smart Start
Mecklenburg PFC
401 S. Independence Blvd.
Charlotte NC 28204
Phone (704) 375-9944
Fax (704) 334-7070

Social Services
Mecklenburg County DSS
PO Box 220999
Charlotte NC 28222
Phone (704) 336-3150

Support our Students
The YWCA of the Central Carolinas
3420 Park Road
Charlotte NC 28209
Phone (704) 336-8481
Fax (704) 521-9622

Mitchell

Child Support Enforc.
WAM Counties Child Support Enforcement
938 W. King St.
Boone NC 28607
Phone (828) 265-5371
Fax (828) 265-5418

Day care subsidies
Region D Council of Government
PO Box 1820
Boone NC 28607
Phone (704) 265-5434

DEC
Developmental Evaluation Ctr.
820 State Farm Rd., Suite C
Boone NC 28607
Phone (828) 265-5391
Fax (828) 265-5394

Legal Services
Legal Services of the Blue Ridge
PO Box 111
Boone NC 28607
Phone (828) 264-5640
Fax (828) 264-5667

Mental Health
Blue Ridge Area Program
356 Biltmore Ave.
Asheville NC 28801
Phone (828) 258-3500
Fax (828) 252-9584

Primary Care
Bakersville Community Medical Clinic, Inc.
PO Box 27
Bakersville NC 28705
Phone (828) 668-2104

Public Health
Health Department
124 School St.
Bakersville NC 28705
Phone (828) 688-2371
Fax (828) 688-3866

Smart Start
Mitchell-Yancey Co. PFC
PO Box 616
Spruce Pine NC 28777
Phone (828) 765-5130
Fax (828) 765-5130

Social Services
Mitchell County DSS
PO Box 365
Bakersville NC 28705-0365
Phone (828) 688-2175

Support our Students
NC Cooperative Extension Service-Mitchell
PO Box 366
Bakersville NC 28705
Phone (828) 688-4811
Fax (828) 688-2051

Montgomery

DEC
Developmental Evaluation Ctr.
107 E. Ashe St.
Wadesboro NC 28170
Phone (704) 694-5186
Fax (704) 694-7803

Legal Services
Central Carolina Legal Services
PO Box 3467
Greensboro NC 27402
Phone (336) 272-0148
Fax (336) 333-9825

Mental Health
Sandhills Area Program
1120 Seven Lakes Dr.
West End NC 27376
Phone (910) 673-9111
Fax (910) 673-6202

Public Health
Health Department
217 S. Main St.
Troy NC 27371
Phone (910) 572-1393
Fax (910) 572-8177

Smart Start
Montgomery Co. PFC
120 N. Main St.
Troy NC 27371
Phone (910) 576-2363
Fax (910) 576-2562

Social Services
Montgomery County DSS
Drawer N
Troy NC 27371
Phone (910) 576-6531

Support our Students
Neighborhood Youth Leadership
PO Box 775
Southern Pines NC 28388
Phone (910) 695-8664
Fax (910) 695-8666

Moore

DEC
Developmental Evaluation Ctr.
107 E. Ashe St.
Wadesboro NC 28170
Phone (704) 694-5186
Fax (704) 694-7803

Family Resource Center
Northern Moore Family Resource Ctr.
PO Box 190
Robbins NC 27325
Phone (910) 948-4324
Fax (910) 948-3625

Legal Services
North State Legal Services
PO Box 670
Hillsborough NC 27278
Phone (800) 672-5834
Fax (919) 644-0694

Mental Health
Sandhills Area Program
1120 Seven Lakes Dr.
West End NC 27376
Phone (910) 673-9111
Fax (910) 673-6202

Public Health
Health Department
705 Pinehurst Ave., PO Box 279
Carthage NC 28327
Phone (910) 947-3300
Fax (910) 947-1663

Social Services
Moore County DSS
PO Box 938
Carthage NC 28327
Phone (910) 947-2436

Support our Students
Neighborhood Youth Leadership
PO Box 775
Southern Pines NC 28388
Phone (910) 695-8664
Fax (910) 695-8666

Nash

DEC
Developmental Evaluation Ctr.
111 Medical Arts Mall
Rocky Mount NC 27804
Phone (252) 443-8858
Fax (252) 443-0275

Legal Services
Eastern Carolina Legal Services
PO Box 2688
Wilson NC 27894-2688
Phone (800) 682-7902
Fax (252) 291-6407

Mental Health
Edgecombe-Nash Area Program
500 Nash Medical Arts Mall
Rocky Mount NC 27804
Phone (252) 937-8141
Fax (252) 443-9574

Public Health
Health Department
214 S. Barnes St., PO box 849
Nashville NC 27856
Phone (252) 459-9819
Fax (252) 459-9834

Smart Start
Down East PFC
PO Box 1245
Rocky Mount NC 27802
Phone (252) 985-4300
Fax (252) 985-4319

Social Services
Rocky Mount Office
301 S. Fairview Rd.
Rocky Mount NC 27801
Phone (252) 985-4101

Support our Students
St. James Baptist Church
527 E. Thomas St.
Rocky Mount NC 27801
Phone (252) 442-2318
Fax (252) 446-7468

New Hanover

Adolescent Parenting Program
Planned Parenthood of the Capital & Coast
3951-B Market St.
Wilmington NC 28403
Phone (910) 762-1746
Fax (910) 762-2743

Adolescent Pregnancy Prevention
Girls, Inc.
Phone (910) 763-6674

Day care subsidies
United Cerebral Palsy of NC
PO Box 27707
Raleigh NC 27611-7707
Phone (919) 832-3787
Fax (919) 832-5928

DEC
Developmental Evaluation Ctr.
1501 Dock St.
Wilmington NC 28401
Phone (910) 251-5817
Fax (910) 251-2652

Family Resource Center
Family Resource Ctr. of the Bottom
PO Box 996
Wilmington NC 28402
Phone (910) 762-2884
Fax (910) 762-2904

Legal Services
Legal Services of Lower Cape Fear
PO Box 814
Wilmington NC 28402
Phone (800) 672-9304
Fax (910) 343-8894

Primary Care
New Hanover Community Health Ctr.
408 N. 11th St.
Wilmington NC 28401
Phone (910) 343-0270
Fax (910) 343-2990

Public Health
Health Department
2029 S. 17th St.
Wilmington NC 28401
Phone (910) 343-6500
Fax (910) 341-4146

Smart Start
New Hanover Co. PFC
100-A Eastwood Road
Wilmington NC 28403
Phone (910) 792-6160
Fax (910) 792-6044

Social Services
New Hanover County DSS
PO Drawer 1559
Wilmington NC 28402
Phone (910) 341-4700

Support our Students
Family Services of the Lower Cape Fear
4014 Shipyard Blvd.
Wilmington NC 28403
Phone (910) 343-8681
Fax (910) 799-8277

New Hanover County
Mental Health
Southeastern Area Program
2023 S. Seventeenth St.
Wilmington NC 28401
Phone (910) 251-6440
Fax (910) 251-6557

Northampton

DEC
Developmental Evaluation Ctr.
111 Medical Arts Mall
Rocky Mount NC 27804
Phone (252) 443-8858
Fax (252) 443-0275

Family Resource Center
Garysburg Family Resource Ctr.
PO Box 278
Garysburg NC 27831
Phone (252) 536-0111
Fax (252) 536-0112

Legal Services
Legal Services of the Coastal Plains
PO Box 564
Ahoskie NC 27910
Phone (800) 682-0010
Fax (252) 332-3317

Mental Health
Roanoke-Chowan Area Program
Route 3 Box 22A
Ahoskie NC 27910
Phone (252) 332-4137
Fax (252) 332-8457

Primary Care
Rich Square Medical Ctr.
156 Main St, PO Box 710
Rich Square NC 27869
Phone (252) 539-2082
Fax (252) 539-2898

Public Health
Health Department
1237 N. Church St. Ext., PO Box 635
Jackson NC 27845
Phone (252) 534-1803
Fax (252) 534-1045

Smart Start
Smart Start-Northampton PFC
PO Box 997
Jackson NC 27845
Phone (252) 534-1656
Fax (252) 534-1568

Social Services
Northampton County DSS
PO Box 157
Jackson NC 27845
Phone (252) 534-5811

Support our Students
Choanoke Area Development Association, Inc.
PO Box 530
Rich Square NC 27869
Phone (252) 539-4155
Fax (252) 539-2048

Onslow

DEC
Developmental Evaluation Ctr.
1405 S. Genburnie Rd.
New Bern NC 28562
Phone (252) 514-4770
Fax (252) 514-4773

Legal Services
Legal Services of Lower Cape Fear
PO Box 814
Wilmington NC 28402
Phone (800) 672-9304
Fax (910) 343-8894

Mental Health
Onslow County Behavioral Healthcare
215 Memorial Dr.
Jacksonville NC 28546
Phone (910) 353-5118
Fax (910) 353-3653

Primary Care
Penslow Health Ctr.
PO Box 159
Holly Ridge NC 28445
Phone (910) 329-7591

Public Health
Health Department
612 College St.
Jacksonville NC 28540
Phone (910) 347-7042
Fax (910) 347-7941

Smart Start
Onslow Co. PFC
151 Chaney Ave.
Jacksonville NC 28540
Phone (910) 938-0336
Fax (910) 455-9765

Social Services
Onslow County DSS
PO Box 1379
Jacksonville NC 28541
Phone (910) 455-4145

Support our Students
Onslow County 4-H Program
604 College St., Room 8
Jacksonville NC 28540
Phone (910) 455-5873
Fax (910) 455-6767

Orange

Adolescent Pregnancy Prevention
Women's Ctr & Chapel Hill-Carrboro Resid. Council
Phone (919) 968-4610

DEC
Developmental Evaluation Ctr.
115 Market St., Suite 201
Durham NC 27701
Phone (919) 560-5600
Fax (919) 560-3018

Family Resource Center
Chapel Hill Training Outreach
800 Eastowne Dr.
Chapel Hill NC 27514
Phone (919) 490-5577
Fax (919) 490-4905

Legal Services
North State Legal Services
PO Box 670
Hillsborough NC 27278
Phone (800) 672-5834
Fax (919) 644-0694

Mental Health
O-P-C Area Program
101 E. Weaver St., Suite 300
Carrboro NC 27510
Phone (919) 918-1111
Fax (919) 918-1112

Primary Care
Carrboro Community Health Ctr.
301 Lloyd St
Carrboro NC 27510
Phone (919) 942-8741
Fax (919) 942-1473

Public Health
Health Department
300 W. Tryon St.
Hillsborough NC 27278
Phone (919) 732-8181
Fax (919) 644-3007

Smart Start
Orange Co. PFYC
1829 E. Franklin St.
Chapel Hill NC 27514
Phone (919) 967-9091
Fax (919) 933-1008

Social Services
Orange County DSS
300 W. Tryon St.
Hillsborough NC 27278
Phone (919) 732-9361

Support our Students
Communities in Schools of Orange County
PO Box 1358
Hillsborough NC 27278
Phone (919) 644-6247
Fax (919) 644-6171

Pamlico

Child Support Enforc.
New Bern Child Support Enforcement
PO Box 33B
Bayboro NC 28515
Phone (252) 745-7640
Fax (252) 745-8068

Developmental Evaluation Ctr.
1405 S. Genburnie Rd.
New Bern NC 28562
Phone (252) 514-4770
Fax (252) 514-4773

Legal Services
Pamlico Sound Legal Services
PO Box 1167
New Bern NC 28563
Phone (800) 672-8213
Fax (252) 637-6099

Mental Health
Neuse Area Program
405 Middle St., PO box 1636
New Bern NC 28563
Phone (252) 636-1510
Fax (252) 633-1237

Public Health
Health Department
North St. PO Box 306
Bayboro NC 28515
Phone (252) 745-5111
Fax (252) 745-5514

Smart Start
Pamlico PFC, Inc.
PO Box 612
Bayboro NC 28515
Phone (252) 745-7850
Fax (252) 745-7860

Social Services
Pamlico County DSS
PO Box 395
Bayboro NC 28515
Phone (252) 745-4086

Pasquotank

Child Support Enforc.
Albermarle Child Support Enforcement
401 S. Griffin St.
Elizabeth City NC 27909
Phone (252) 331-4811
Fax (252) 331-4833

DEC
Developmental Evaluation Ctr.
PO Box 189
Elizabeth City NC 27909
Phone (252) 338-4044
Fax (252) 338-4365

Legal Services
Legal Services of the Coastal Plains
PO Box 564
Ahoskie NC 27910
Phone (800) 682-0010
Fax (252) 332-3317

Mental Health
Albemarle Area Program
PO Box 326
Elizabeth City NC 27907
Phone (252) 335-0431
Fax (252) 335-9144

Public Health
Health Department
311 Cedar St., PO Box 189
Elizabeth City NC 27907
Phone (252) 338-4400
Fax (252) 338-4449

Smart Start
Albemarle SS Partnership
1403 Parkview Dr.
Elizabeth City NC 27909
Phone (252) 333-1233
Fax (252) 333-1201

Social Services
Pasquotank County DSS
PO Box 159
Elizabeth City NC 27909
Phone (252) 338-2126

Support our Students
Economic Improvement Council
PO Box 549
Edenton NC 27932
Phone (252) 482-4458
Fax (252) 482-7564

Pender

Adolescent Parenting Program
Planned Parenthood of the Capital & Coast
PO Box 1053
Burgaw NC 28425
Phone (910) 259-6004
Fax (910) 259-6080

Child Support Enforc.
Pender Co. Child Support Enforcement
305 S. Walker St.
Burgaw NC 28425-1086
Phone (910) 259-1223
Fax (910) 259-1255

DEC
Developmental Evaluation Ctr.
1501 Dock St.
Wilmington NC 28401
Phone (910) 251-5817
Fax (910) 251-2652

Legal Services
Legal Services of Lower Cape Fear
PO Box 814
Wilmington NC 28402
Phone (800) 672-9304
Fax (910) 343-8894

Mental Health
Southeastern Area Program
2023 S. Seventeenth St.
Wilmington NC 28401
Phone (910) 251-6440
Fax (910) 251-6557

Primary Care
Maple Hill Medical Ctr.
4811 NC Hwy 50
Maple Hill NC 28454
Phone (910) 259-6444

Public Health
Health Department
803 W. Walker St., PO Box 1209
Burgaw NC 28425
Phone (910) 259-1230
Fax (910) 259-1258

Smart Start
Pender Co. PFC
PO Box 5
Burgaw NC 28425
Phone (910) 259-1371
Fax (910) 259-1258

Social Services
Pender County DSS
PO Box Drawer 1207
Burgaw NC 28425
Phone (910) 259-1240

Support our Students
Gospel Truth Mission Church, Inc.
PO Box 27
Maple Hill NC 28454
Phone (910) 259-8012
Fax (910) 259-8115

Perquimans

Child Support Enforc.
Albermarle Child Support Enforcement
401 S. Griffin St.
Elizabeth City NC 27909
Phone (252) 331-4811
Fax (252) 331-4833

DEC
Developmental Evaluation Ctr.
PO Box 189
Elizabeth City NC 27909
Phone (252) 338-4044
Fax (252) 338-4365

Legal Services
Legal Services of the Coastal Plains
PO Box 564
Ahoskie NC 27910
Phone (800) 682-0010
Fax (252) 332-3317

Mental Health
Albemarle Area Program
PO Box 326
Elizabeth City NC 27907
Phone (252) 335-0431
Fax (252) 335-9144

Public Health
Health Department
103 Charles St.
Hertford NC 27944
Phone (252) 426-2100
Fax (252) 426-2126

Smart Start
Chowan-Gates-Perquimans
PO Box 206
Edenton NC 27932
Phone (252) 482-4436
Fax (252) 482-7309

Social Services
Perquimans County DSS
PO Box 107
Hertford NC 27944
Phone (252) 426-7373

Support our Students
Perquimans 20/20 Inc.
PO Box 632
Hertford NC 27944
Phone (252) 426-5741
Fax (252) 426-4913

Person

DEC
Developmental Evaluation Ctr.
115 Market St., Suite 201
Durham NC 27701-3221
Phone (919) 560-5600
Fax (919) 560-3018

Family Preservation
Person Co. Family Connection
PO Box 1791
Roxboro NC 27573
Phone (336) 597-1745
Fax (336) 597-5027

Legal Services
North Central Legal Assistance Program
PO Box 2101
Durham NC 27702
Phone (919) 688-6396
Fax (919) 682-8157

Mental Health
O-P-C Area Program
101 E. Weaver St., Suite 300
Carrboro NC 27510
Phone (919) 918-1111
Fax (919) 918-1112

Primary Care
Person Family Medical Center
702 W. Main St, PO Box 350
Roxboro NC 27573
Phone (336) 599-9271
Fax (336) 599-0969

Public Health
Health Department
325 S. Morgan
Roxboro NC 27573
Phone (336) 597-2204
Fax (336) 597-4804

Smart Start
Person Co. PFC
PO Box 1791
Roxboro NC 27573
Phone (336) 599-3773
Fax (336) 599-3999

Social Services
Person County DSS
PO Box 770
Roxboro NC 27573
Phone (336) 599-8361

Support our Students
First Baptist Church
14 South Main Circle
Roxboro NC 27573
Phone (336) 597-8440

Pitt

Day care subsidies
United Cerebral Palsy of NC
PO Box 27707
Raleigh NC 27611-7707
Phone (919) 832-3787
Fax (919) 832-5928

DEC
Developmental Evaluation Ctr.
Irons Bldg, Charles Blvd, ECU
Greenville NC 27858
Phone (252) 328-4480
Fax (252) 328-5509

Family Resource Center
Bethel Family Resource Ctr.
PO Box 58
Bethel NC 27812-0058
Phone (252) 825-1110
Fax (252) 825-1112

Legal Services
Pamlico Sound Legal Services
PO Box 1167
New Bern NC 28563
Phone (800) 672-8213
Fax (252) 637-6099

Mental Health
Pitt Area Program
203 Government Circle
Greenville NC 27834
Phone (252) 413-1600
Fax (252) 413-1606

Public Health
Health Department
201 Government Circle
Greenville NC 27834
Phone (252) 413-1305
Fax (252) 413-1446
Smart Start
Martin/Pitt Co. PFC
600 East 11th St.
Greenville NC 27858
Phone (252) 758-0455
Fax (252) 758-0455

Social Services
Pitt County DSS
1717 W. Fifth St.
Greenville NC 27834
Phone (252) 413-1101

Support our Students
Boys & Girls Club
PO Box 20293
Greenville NC 27868
Phone (252) 355-2345
Fax (252) 321-6281

Polk

DEC
Developmental Evaluation Ctr.
1428 E. Marion St., Suite 5
Shelby NC 28150
Phone (704) 480-5440
Fax (704) 480-5477

Legal Services
Appalachian Legal Services
PO Box 7606
Asheville NC 28802
Phone (800) 489-6144
Fax (828) 252-8927

Mental Health
Rutherford-Polk Area Program
207 Callahan-Koon Rd.
Springdale NC 28160
Phone (828) 287-6074
Fax (828) 287-6302

Primary Care
Saluda Medical Ctr.
PO Box 577
Saluda NC 28773
Phone (828) 749-4411

Public Health
Health Department
212 Walker St.
Columbus NC 28722
Phone (828) 894-8271
Fax (828) 894-8678

Smart Start
Polk Co. PFC, Inc.
PO Box 786
Tryon NC 28782
Phone (828) 894-0343
Fax (828) 894-0156

Social Services
Polk County DSS
500 Carolina Dr.
Tryon NC 28782
Phone (828) 859-5825

Randolph

Child Support Enforc.
Randolph Co. Child Support Enforcement
363 S. Cox St.
Asheboro NC 27203
Phone (910) 625-6626
Fax (910) 625-6692

DEC
Developmental Evaluation Ctr.
122 N. Elm St., Suite 400
Greensboro NC 27401
Phone (336) 334-5601
Fax (336) 334-5657

Legal Services
Central Carolina Legal Services
PO Box 3467
Greensboro NC 27402
Phone (336) 272-0148
Fax (336) 333-9825

Mental Health
Randolph Area Program
110 W. Walker Ave.
Asheboro NC 27203
Phone (336) 633-7043
Fax (336) 625-4969

Primary Care
Medical Resource Ctr. For Randolph Co.
PO Box 4248
Asheboro NC 27204-4248
Phone (336) 672-1300

Public Health
Health Department
2222 S. Fayetteville St.
Asheboro NC 27203
Phone (336) 318-6200
Fax (336) 318-6234

Smart Start
Randolph Co. PFC
2222-B So. Fayetteville St.
Asheboro NC 27203
Phone (336) 318-6217
Fax (336) 318-6234

Social Services
Randolph County DSS
PO Box 3239
Asheboro NC 27204
Phone (336) 683-8000

Richmond

Child Support Enforc.
Anson/Richmond Child Support Enforcement
801 E. Broad Ave., Hwy 74
Rockingham NC 28379
Phone (910) 997-9170
Fax (910) 997-9117

DEC
Developmental Evaluation Ctr.
107 E. Ashe St.
Wadesboro NC 28170
Phone (704) 694-5186
Fax (704) 694-7803

Family Resource Center
Richmond Co. Comm. Support Ctr.
PO Box 1023
Rockingham NC 28380-1023
Phone (910) 997-8440
Fax (910) 471-4932

Legal Services
North State Legal Services
PO Box 670
Hillsborough NC 27278
Phone (800) 672-5834
Fax (919) 644-0694

Mental Health
Sandhills Area Program
1120 Seven Lakes Dr.
West End NC 27376
Phone (910) 673-9111
Fax (910) 673-6202

Public Health
Health Department
125 Carolina St., PO Box 429
Rockingham NC 28379
Phone (910) 997-8300
Fax (910) 997-8336

Smart Start
Richmond Co. PFC
PO Box 1944
Rockingham NC 28380
Phone (910) 417-4914
Fax (910) 997-8336

Social Services
Richmond County DSS
PO Box 518
Rockingham NC 28379
Phone (910) 997-8400

Support our Students
Leak Street Alumni, Inc.
PO Box 2252
Rockingham NC 28379
Phone (910) 997-6238
Fax (910) 895-7777

Robeson

DEC
Developmental Evaluation Ctr.
1211-A Ireland Dr.
Fayetteville NC 28304
Phone (910) 486-1605
Fax (910) 486-1590

Family Resource Center
Robeson Co. Family Supp. & Family Preservation Pgr
PO Box 1310
Lumberton NC 28359-1102
Phone (910) 739-7851
Fax (910) 618-9839

Legal Services
Lumbee River Legal Services
PO Drawer 939
Pembroke NC 28372
Phone (800) 554-7852
Fax (910) 521-982

Mental Health
Southeastern Regional Area Program
207 W. 29th St.
Lumberton NC 28358
Phone (910) 738-5261
Fax (910) 738-8230

Primary Care
Julian T. Pierce Health Ctr.
310 E. Wardell Dr., PO Box 1629
Pembroke NC 28372
Phone (910) 521-2816
Fax (910) 521-3583

Public Health
Health Department
460 Country Club Rd.
Lumberton NC 28358
Phone (910) 671-3200
Fax (910) 671-3484

Smart Start
Robeson Co. PFC
PO Box 1619
Lumberton NC 28358
Phone (910) 738-6767
Fax (910) 738-6883

Social Services
Robeson County DSS
435 Caton Rd.
Lumberton NC 28358
Phone (910) 671-3500

Support our Students
Robeson County Communities in Schools
1148 Pembroke
Pembroke NC 28372
Phone (910) 521-0071
Fax (910) 521-0071

Rockingham

DEC
Developmental Evaluation Ctr.
122 N. Elm St., Suite 400
Greensboro NC 27401
Phone (336) 334-5601
Fax (336) 334-5657

Legal Services
Central Carolina Legal Services
PO Box 3467
Greensboro NC 27402
Phone (336) 272-0148
Fax (336) 333-9825

Mental Health
Rockingham Area Program
PO Box 355
Wentworth NC 27375
Phone (336) 342-8316
Fax (336) 342-8352

Public Health
Health Department
371 NC 65, Suite 204
Reidsville NC 27320
Phone (336) 342-8143
Fax (336) 342-8356

Smart Start
Rockingham Co PFC
414 Maple Avenue
Reidsville NC 27320
Phone (336) 342-9676
Fax (336) 342-9962

Social Services
Rockingham County DSS
PO Box 61
Wentworth NC 27375
Phone (336) 342-1394

Support our Students
Rockingham County 4-H
PO Box 200
Wentworth NC 27375
Phone (336) 342-5756
Fax (336) 342-8242

Rowan

DEC
Developmental Evaluation Ctr.
342 Penny Lane
Concord NC 28025-1216
Phone (704) 786-9181
Fax (704) 792-9198

Family Resource Center
Paul L. Dunbar Family Resource Ctr.
PO Box 400
E. Spencer NC 28309
Phone (704) 647-0054
Fax (704) 884-8809

Legal Services
Central Carolina Legal Services
PO Box 3467
Greensboro NC 27402
Phone (336) 272-0148
Fax (336) 333-9825

Mental Health
Piedmont Area Program
845 Church St. N., Suite 305
Concord NC 28025
Phone (704) 782-5505
Fax (704) 782-5110

Public Health
Health Department
2728 Old Concord Rd.
Salisbury NC 28146
Phone (704) 633-0411
Fax (704) 638-3129

Smart Start
Rowan PFC, Inc.
417 N Main St., Ste A-3
Salisbury NC 28144
Phone (704) 630-9085
Fax (704) 630-6259

Social Services
Rowan County DSS
1236 W. Innes St.
Salisbury NC 28144
Phone (704) 633-4921

Support our Students
Rowan County Youth Services Bureau
PO Box 4217
Salisbury NC 28144
Phone (704) 633-5636
Fax (704) 636-8117

Rutherford

DEC
Developmental Evaluation Ctr.
1428 E. Marion St., Suite 5
Shelby NC 28150
Phone (704) 480-5440
Fax (704) 480-5477

Legal Services
Appalachian Legal Services
PO Box 7606
Asheville NC 28802
Phone (800) 489-6144
Fax (828) 252-8927

Mental Health
Rutherford-Polk Area Program
207 Callahan-Koon Rd.
Spindale NC 28160
Phone (828) 287-6074
Fax (828) 287-6302

Primary Care
Tri-City Women's Health Ctr.
380 East Main St.
Forest City NC 28043
Phone (828) 248-1990

Public Health
Health Department
203 Koone Rd.
Spindale NC 28160
Phone (828) 287-6101
Fax (828) 287-6314

Smart Start
Rutherford Co. PFC
PO Box 823
Spindale NC 28160
Phone (828) 286-3929
Fax (828) 286-8413

Social Services
Rutherford County DSS
PO Box 237
Spindale NC 28160
Phone (828) 287-6165

Support our Students
Building Community, Inc.
298 Fairgrounds Rd.
Spindale NC 28160
Phone (828) 286-2757
Fax (828) 286-7016

Sampson

DEC
Developmental Evaluation Ctr.
1211-A Ireland Dr.
Fayetteville NC 28304
Phone (910) 486-1605
Fax (910) 486-1590

Family Preservation
Sampson Co. Multicultural Family Resource
PO Box 1368
Roseboro NC 28382
Phone (919) 525-3484
Fax (919) 525-3176

Legal Services
East Central Community Legal Services
PO Drawer 1731
Raleigh NC 27602
Phone (919) 828-4647
Fax (919) 839-8370

Mental Health
Duplin-Sampson Area Program
PO Box 599, 117 Beasley St.
Kenansville NC 28349
Phone (910) 296-1851
Fax (910) 296-1731

Primary Care
Tri-County Community Health Ctr.
3331 Easy St
Dunn NC 28334
Phone (910) 567-6194
Fax (910) 567-5342

Public Health
Health Department
360 County Complex Rd.
Clinton NC 28328
Phone (910) 592-1131
Fax (910) 592-1901

Smart Start
Sampson Co. PFC
369 Rowan Road
Clinton NC 28328
Phone (910) 592-7161
Fax (910) 592-9513

Social Services
Sampson County DSS
PO Box 1105
Clinton NC 28328
Phone (910) 592-7131

Support our Students
Goldsboro Development District
PO Box 901
Roseboro NC 28382
Phone (910) 525-5630
Fax (910) 525-3092

Scotland

DEC
Developmental Evaluation Ctr.
107 E. Ashe St.
Wadesboro NC 28170
Phone (704) 694-5186
Fax (704) 694-7803

Legal Services
Lumbee River Legal Services
PO Drawer 939
Pembroke NC 28372
Phone (800) 554-7852
Fax (910) 521-9824

Mental Health
Southeastern Regional Area Program
207 W. 29th St.
Lumberton NC 28358
Phone (910) 738-5261
Fax (910) 738-8230

Public Health
Health Department
1405 W. Blvd., PO Box 69
Laurinburg NC 28352
Phone (910) 277-2440
Fax (910) 277-2450

Smart Start
Scotland Co. PFC
600 South Atkinson Str.
Laurinburg NC 28353
Phone (910) 277-2637
Fax (910) 276-2666

Social Services
Scotland County DSS
PO Box 1647
Laurinburg NC 28352
Phone (910) 277-2500

Support our Students
National Association of University Women
Scotland County Schools, 322 S. Main St.
Laurinburg NC 28362
Phone (910) 276-1138
Fax (910) 277-4310

Stanley

Mental Health
Piedmont Area Program
845 Church St. N., Suite 305
Concord NC 28025
Phone (704) 782-5505
Fax (704) 782-5110

DEC
Developmental Evaluation Ctr.
342 Penny Lane
Concord NC 28025-1216
Phone (704) 786-9181
Fax (704) 792-9198

Legal Services
Legal Services of Southern Piedmont
1431 Elizabeth Ave.
Charlotte NC 28204
Phone (704) 376-1600
Fax (704) 376-8627

Public Health
Health Department
1000 N. First St., Suite 3
Albemarle NC 28001
Phone (704) 983-9171
Fax (704) 982-8354

Smart Start
Stanly Co PFC
PO Box 2165
Albemarle NC 28002
Phone (704) 982-2038
Fax (704) 983-8981

Social Services
Stanly County DSS
1000 N. First St. - Suite 2
Albemarle NC 28001
Phone (704) 980-6100

Stokes

Day care subsidies
Northwest Child Development Council
530 N. Spring St.
Winston-Salem NC 27101
Phone (336) 721-1215

DEC
Developmental Evaluation Ctr.
3325 Sila Creek Pkwy
Winston-Salem NC 27103
Phone (336) 774-2400
Fax (336) 774-2485

Legal Services
Legal Aid Society for Northwest NC
216 W. Fourth St.
Winston-Salem NC 27101
Phone (336) 725-9166
Fax (336) 723-9140

Mental Health
Centerpoint Human Services
725 Highland Ave.
Winston-Salem NC 27101
Phone (336) 725-7777
Fax (336) 722-9464

Public Health
Health Department
Hwys 8 & 89, PO Box 187
Danbury NC 27016
Phone (336) 593-2400
Fax (336) 593-9361

Smart Start
Stokes PFC, Inc.
PO Box 974
Walnut Cover NC 27052
Phone (336) 591-4420
Fax (336) 591-4114

Social Services
Stokes County DSS
PO Box 30
Danbury NC 27016
Phone (336) 593-2861

Support our Students
The YMCA of Greater Winston-Salem
107 W. Dale Ave.
Winston-Salem NC 27101
Phone (336) 722-9772
Fax (336) 722-4272

Surry

DEC
Developmental Evaluation Ctr.
3325 Sila Creek Pkwy
Winston-Salem NC 27103
Phone (336) 774-2400
Fax (336) 774-2485

Legal Services
Legal Aid Society for Northwest NC
216 W. Fourth St.
Winston-Salem NC 27101
Phone (336) 725-9166
Fax (336) 723-9140

Mental Health
Crossroads Behavioral Healthcare Area Program
124-A Kapp St., PO Box 708
Dobson NC 27017
Phone (336) 386-7425
Fax (336) 386-8552

Primary Care
Westfield Medical Ctr.
PO Box 62
Westfield NC 27053
Phone (336) 351-3102

Public Health
Health Department
188 Hamby Rd., PO Box 1062
Dobson NC 27017
Phone (336) 401-8400
Fax (336) 401-8599

Smart Start
Surry Co. Early Childhood Part
PO Box 7050
Mt. Airy NC 27030
Phone (336) 786-1880
Fax (336) 786-1879

Social Services
Surry County DSS
PO Box 38
Dobson NC 27017
Phone (336) 401-8700

Support our Students
Surry Arts Council
PO Box 141
Mount Airy NC 27030
Phone (336) 786-7998
Fax (336) 786-9822

Swain

Child Support Enforc.
Swain Co. Child Support Enforcement
PO Box 1047
Bryson City NC 28713
Phone (828) 488-2191
Fax (828) 488-8658

DEC
Developmental Evaluation Ctr.
Western Carolina University
Cullowhee NC 28723
Phone (828) 227-7490
Fax (828) 227-7142

Mental Health
Smoky Mountain Area Program
PO Box 280
Dillsboro NC 28725
Phone (828) 586-5501
Fax (704) 586-3965

Public Health
Health Department
Hwy 19 W., PO box 546
Bryson City NC 28713
Phone (828) 488-3198
Fax (828) 488-8672

Social Services
Swain County DSS
PO Box 610
Bryson City NC 28713
Phone (828) 488-6921

Swain & Qualla Indian Boundary

Adolescent Parenting Program
Cherokee Boys Club, Inc.
PO Box 507, Acquoni Rd.
Cherokee NC 28719
Phone (828) 497-6092
Fax (828) 497-3322

Day care subsidies
Southwestern Child Development Commission
PO Box 250
Webster NC 28788
Phone (828) 586-5561

Legal Services
Western NC Legal Services
PO Box 426
Sylva NC 28779
Phone (800) 458-6817
Fax (704) 586-4082

Transylvania

DEC
Developmental Evaluation Ctr.
119 Tunnel Rd., Suite D
Asheville NC 28805
Phone (828) 251-6091
Fax (828) 251-6911

Family Resource Center
The Family Ctr. Of Transylvania Co.
1020 Asheville Hwy
Brevard NC 28712-3054
Phone (828) 883-4857
Fax (828) 884-8809

Legal Services
Appalachian Legal Services
PO Box 7606
Asheville NC 28802
Phone (800) 489-6144
Fax (828) 252-8927

Mental Health
TREND Area Program
800 Fleming St.
Hendersonville NC 28791
Phone (828) 692-5741
Fax (828) 693-9560

Public Health
Health Department
Community Services Bldg
Brevard NC 28712
Phone (828) 884-3135
Fax (828) 884-3140

Smart Start
Transylvania Co. PFC
1020 Asheville Hwy, Ste D
Brevard NC 28712
Phone (828) 877-3025
Fax (828) 884-8809

Social Services
Transylvania County DSS
207 S. Broad St.
Brevard NC 28712
Phone (828) 884-3174

Support our Students
W. Carolina Community Action-Transylvania
PO Box 685
Hendersonville NC 28793
Phone (828) 693-1711
Fax (828) 697-4277

Tyrrell

Child Support Enforc.
Manteo Child support Enforcement
105 Budleigh St.
Manteo NC 27954
Phone (252) 473-2001
Fax (252) 473-4570

DEC
Developmental Evaluation Ctr.
PO Box 189
Elizabeth City NC 27909
Phone (252) 338-4044
Fax (252) 338-4365

Legal Services
Pamlico Sound Legal Services
PO Box 1167
New Bern NC 28563
Phone (800) 672-8213
Fax (252) 637-6099

Mental Health
Tideland Area Program
1308 Highland Dr.
Washington NC 27889
Phone (252) 946-8061
Fax (252) 946-8078

Primary Care
Tyrrell Co. Rural Health Assoc.
PO Box 189
Columbia NC 27925
Phone (252) 796-0689

Public Health
Health Department
408 Broad St., PO Box 238
Columbia NC 27925
Phone (252) 796-2681
Fax (252) 796-0818

Smart Start
Tyrell Co. PFC
PO Box 328
Columbia NC 27925
Phone (252) 796-1121
Fax (252) 796-1492

Social Services
Tyrrell County DSS
PO Box 449
Columbia NC 27925
Phone (252) 796-3421

Union

Child Support Enforc.
Union Co. Child Support Enforcement
1501 Charlotte Ave.
Monroe NC 28110
Phone (704) 289-9496
Fax (704) 283-0534

Day care subsidies
United Cerebral Palsy of NC
PO Box 27707
Raleigh NC 27611-7707
Phone (919) 832-3787
Fax (919) 832-5928

DEC
Developmental Evaluation Ctr.
342 Penny Lane
Concord NC 28025-1216
Phone (704) 786-9181
Fax (704) 792-9198

Legal Services
Legal Services of Southern Piedmont
1431 Elizabeth Ave.
Charlotte NC 28204
Phone (704) 376-1600
Fax (704) 376-8627

Mental Health
Piedmont Area Program
845 Church St. N., Suite 305
Concord NC 28025
Phone (704) 782-5505
Fax (704) 782-5110

Public Health
Health Department
500 N. Main St.
Monroe NC 28112
Phone (704) 283-3815
Fax (704) 283-3821

Smart Start
Union Co. PFC
PO Box 36
Monroe NC 28111
Phone (704) 226-1407
Fax (704) 226-1369

Social Services
Union County DSS
PO Box 489
Monroe NC 28111
Phone (704) 282-0200

Support our Students
Black's Memorial Presbyterian Church
515 Elizabeth Ave.
Monroe NC 28112
Phone (704) 296-3110
Fax (704) 296-3112

Vance

Adolescent Parenting Program
Child and Family Services
303 S. Garnett St.
Henderson NC 27536
Phone (252) 492-9191
Fax (252) 492-8187

DEC
Developmental Evaluation Ctr.
115 Market St., Suite 201
Durham NC 27701-3221
Phone (919) 560-5600
Fax (919) 560-3018

Family Resource Center
S. Henderson Family Resource Ctr.
PO Box 1453
Henderson NC 27536-1453
Phone (252) 431-1400
Fax (252) 492-6250

Legal Services
North Central Legal Assistance Program
PO Box 2101
Durham NC 27702
Phone (919) 688-6396
Fax (919) 682-8157

Mental Health
V-G-F-W Area Program
134 W. Garnett St.
Henderson NC 27536
Phone (252) 430-1330
Fax (252) 430-0909

Primary Care
HealthCo, Inc.
PO Box 425
Manson NC 27553
Phone (252) 456-2181
Fax (252) 456-2327

Public Health
Health Department
115 Charles Rollins Rd
Henderson NC 27536
Phone (252) 492-7915
Fax (252) 492-4219

Smart Start
Franklin-Granville-Vance
PO Box 142
Henderson NC 27536
Phone (252) 433-9110
Fax (252) 433-9230

Social Services
Vance County DSS
350 Ruin Creek Rd.
Henderson NC 27536
Phone (252) 492-5001

Wake

Adolescent Parenting Program
Exchange Club Ctr. Of Wake Co.
508 Sasser St.
Raleigh NC 27604
Phone (919) 834-8687
Fax (919) 831-0583

Adolescent Pregnancy Prevention
Healthy Mothers/Healthy Babies Coalition
Phone (919) 250-1285
Day care subsidies
United Cerebral Palsy of NC
PO Box 27707
Raleigh NC 27611-7707
Phone (919) 832-3787
Fax (919) 832-5928

DEC
Developmental Evaluation Ctr.
319 Chapanoke Rd.
Raleigh NC 27603
Phone (919) 662-4600
Fax (919) 662-4473

Legal Services
East Central Community Legal Services
PO Drawer 1731
Raleigh NC 27602
Phone (919) 828-4647
Fax (919) 839-8370

Mental Health
Wake Area Program
220 Swinburne St., Suite 2010
Raleigh NC 27620
Phone (919) 212-7199
Fax (919) 212-7285

Pediatrics
Burroughs Pediatrics
100 Sunneybrook Rd, Suite 202
Raleigh NC 27610
Phone (919) 231-3180
Fax (919) 231-8077

Primary Care
Jones Street Site
618 Jones St.
Raleigh NC 27603
Phone (919) 755-1888

Private Adoption Assistance Agencies
International Adoption Society
3803B Computer Dr, Suite 201
Raleigh NC 27609
Phone (919) 510-9135

Private Adoption Assistance Agencies
Datz Foundation of NC
875 Walnut St, Suite 275
Cary NC 27511
Phone (919) 319-6635

Private Adoption Assistance Agencies
Lutheran Family Services in the Carolinas
PO Box 12287
Raleigh NC 27605
Phone (919) 832-2620

Private Adoption Assistance Agencies
Catholic Social Ministries, Diocese of Raleigh
400 Oberlin Rd., Suite 350
Raleigh NC 27605
Phone (919) 832-0225

Private Adoption Assistance Agencies
Bethany Christian Services
410 Oberlin Rd., Suite 402
Raleigh NC 27605-2094
Phone (919) 828-6281

Public Health
Health Department
10 Sunybrook Rd., PO Box 14049
Raleigh NC 27620
Phone (919) 250-4400
Fax (919) 250-3984

Smart Start
Wake Co. SmartStart
3300 Woman's Club Dr.
Raleigh NC 27612
Phone (919) 789-9990
Fax (919) 789-9991

Social Services
Wake County DSS
PO Box 46833
Raleigh NC 27620
Phone (919) 212-7000

Support our Students
Wake Co. Cooperative Extension Service
4001 E. Carya Dr.
Raleigh NC 27610
Phone (919) 250-1109
Fax (919) 250-1097

Warren

Child Support Enforc.
Warren Co. Child Support Enforcement
108 S. Bragg St.
PO Box 694
Warrenton NC 27589
Phone (252) 257-1165
Fax (252) 257-5585

DEC
Developmental Evaluation Ctr.
115 Market St., Suite 201
Durham NC 27701-3221
Phone (919) 560-5600
Fax (919) 560-3018

Family Resource Center
Warren Family Institute
105 S. Front St.
Warrenton NC 27589
Phone (252) 257-1134
Fax (252) 257-2584

Legal Services
North Central Legal Assistance Program
PO Box 2101
Durham NC 27702
Phone (919) 688-6396
Fax (919) 682-8157

Mental Health
V-G-F-W Area Program
134 W. Garnett St.
Henderson NC 27536
Phone (252) 430-1330
Fax (252) 430-0909

Primary Care
Warren Health Plan
542 W. Ridgeway St.
Warrenton NC 27859
Phone (252) 257-2327
Fax (252) 257-3141

Public Health
Health Department
544 W. Ridgeway St.
Warrenton NC 27589
Phone (252) 257-1185
Fax (252) 257-2897

Smart Start
Halifax-Warren SS PFC
PO Box 402
Halifax NC 27839
Phone (252) 583-1304
Fax (252) 583-1217

Social Services
Warren County DSS
538 W. Ridgeway St.
Warrenton NC 27589
Phone (252) 257-1283

Support our Students
Warren Family Institute
PO Box 150, 115 E. Market St.
Warrenton NC 27589
Phone (252) 257-1134
Fax (252) 257-2584

Washington

Adolescent Pregnancy Prevention
Washington Co. Schools
Phone (252) 791-3141

DEC
Developmental Evaluation Ctr.
PO Box 189
Elizabeth City NC 27909
Phone (252) 338-4044
Fax (252) 338-4365

Legal Services
Pamlico Sound Legal Services
PO Box 1167
New Bern NC 28563
Phone (800) 672-8213
Fax (252) 637-6099

Mental Health
Tideland Area Program
1308 Highland Dr.
Washington NC 27889
Phone (252) 946-8061
Fax (252) 946-8078

Public Health
Health Department
198 NC Hwy 45 N.
Plymouth NC 27962
Phone (252) 793-3023
Fax (252) 791-3158

Smart Start
Washington Co. Ch Adv Council
1047 Brentwood Dr.
Plymouth NC 27962
Phone (252) 793-5437
Fax (252) 793-1526

Social Services
Washington County DSS
PO Box 10
Plymouth NC 27962
Phone (252) 793-4041

Support our Students
Washington County Pride, Inc.
PO Box 693
Plymouth NC 27962
Phone (252) 793-4767
Fax (252) 793-0232

Watauga

Child Support Enforc.
WAM Counties Child Support Enforcement
938 W. King St.
Boone NC 28607
Phone (828) 265-5371
Fax (828) 265-5418

Day care subsidies
Region D Council of Government
PO Box 1820
Boone NC 28607
Phone (704) 265-5434

DEC
Developmental Evaluation Ctr.
820 State Farm Rd., Suite C
Boone NC 28607
Phone (828) 265-5391
Fax (828) 265-5394

Legal Services
Legal Services of the Blue Ridge
PO Box 111
Boone NC 28607
Phone (828) 264-5640
Fax (828) 264-5667

Mental Health
New River Area Program
895 State Farm Rd, Suite 508
Boone NC 28607
Phone (828) 264-9007
Fax (828) 264-9468

Public Health
Health Department
141 Health Center Dr.
Boone NC 28607
Phone (828) 264-4995
Fax (828) 264-4997

Smart Start
Children's Council of Watauga
PO Box 423
Boone NC 28607
Phone (828) 262-5424
Fax (828) 262-5422

Social Services
Watauga County DSS
132 Poplar Grove Rd. Connector, Suite C
Boone NC 28607
Phone (828) 265-8100

Support our Students
Watauga Youth Network
155 WYN-Way
Boone NC 28607
Phone (828) 264-5174
Fax (828) 264-0838

Wayne

DEC
Developmental Evaluation Ctr.
Irons Bldg, Charles Blvd, ECU
Greenville NC 27858-4354
Phone (252) 328-4480
Fax (252) 328-5509

Legal Services
Eastern Carolina Legal Services
PO Box 2688
Wilson NC 27894
Phone (800) 682-7902
Fax (919) 291-6407

Mental Health
Wayne Area Program
301 N. Herman St., Box DD
Goldsboro NC 27530
Phone (919) 731-1133
Fax (919) 731-1333

Primary Care
Mount Olive Family Medical Ctr.
238 Smith Chapel Rd
Mount Olive NC 28365
Phone (919) 658-4954

Public Health
Health Department
301 N. Herman St., Box CC
Goldsboro NC 27530
Phone (919) 731-1000
Fax (919) 731-1232

Smart Start
Wayne Co. PFC
PO Box 1004
Goldsboro NC 27533
Phone (919) 735-3371
Fax (919) 735-3194

Social Services
Wayne County DSS
301 N. Herman St., Box HH
Goldsboro NC 27530
Phone (919) 731-1048

Support our Students
Wayne County 4-H
PO Box 68
Goldsboro NC 27533
Phone (919) 731-1527
Fax (919) 731-1511

Wilkes

DEC
Developmental Evaluation Ctr.
820 State Farm Rd., Suite C
Boone NC 28607
Phone (828) 265-5391
Fax (828) 265-5394

Legal Services
Legal Services of the Blue Ridge
PO Box 111
Boone NC 28607
Phone (828) 264-5640
Fax (828) 264-5667

Mental Health
New River Area Program
895 State Farm Rd, Suite 508
Boone NC 28607
Phone (828) 264-9007
Fax (828) 264-9468

Primary Care
Mountain View Medical Ctr.
PO Box 62
Hays NC 28635
Phone (336) 696-2711

Public Health
Health Department
306 College St.
Wilkesboro NC 28697
Phone (336) 651-7450
Fax (336) 651-7472

Smart Start
Wilkes Community PFC
513-B Highland St.
Wilkesboro NC 28697
Phone (336) 838-0885
Fax (336) 838-0782

Social Services
Wilkes County DSS
PO Box 119
Wilkesboro NC 28697
Phone (336) 651-7400

Support our Students
NC Cooperative Extension Service
110 North St.
Wilkesboro NC 28697
Phone (336) 651-7331
Fax (336) 651-7593

Wilson

Adolescent Pregnancy Prevention
Opportunities Industrialization Ctr., Inc.
Phone (252) 291-0038

DEC
Developmental Evaluation Ctr.
111 Medical Arts Mall
Rocky Mount NC 27804
Phone (252) 443-8858
Fax (252) 443-0275

Legal Services
Eastern Carolina Legal Services
PO Box 2688
Wilson NC 27894
Phone (800) 682-7902
Fax (252) 291-6407

Mental Health
Wilson-Green Area Program
1709 S. Tarboro St., PO Box 3756
Wilson NC 27895
Phone (252) 399-8021
Fax (252) 399-8151

Primary Care
Wilson Community Health Ctr.
303 E. Green St.
Wilson NC 27893
Phone (252) 243-9800

Public Health
Health Department
1801 Glendale Dr.
Wilson NC 27893
Phone (252) 291-5470
Fax (252) 237-2146

Smart Start
Wilson Co. PFC
PO Box 2661
Wilson NC 27894
Phone (252) 206-4235
Fax (252) 206-4245

Social Services
Wilson County DSS
PO Box 459
Wilson NC 27893
Phone (252) 206-4000

Yadkin

Day care subsidies
Northwest Child Development Council
530 N. Spring St.
Winston-Salem NC 27101
Phone (336) 721-1215

DEC
Developmental Evaluation Ctr.
3325 Sila Creek Pkwy
Winston-Salem NC 27103
Phone (336) 774-2400
Fax (336) 774-2485

Legal Services
Legal Aid Society for Northwest NC
216 W. Fourth St.
Winston-Salem NC 27101
Phone (336) 725-9166
Fax (336) 723-9140

Mental Health
Crossroads Behavioral Healthcare Area Program
124-A Kapp St., PO Box 708
Dobson NC 27017
Phone (336) 386-7425
Fax (336) 386-8552

Public Health
Health Department
217 E. Willow St., Box 457
Yadkinville NC 27055
Phone (336) 679-4203
Fax (336) 679-6358

Smart Start
Yadkin Co. SS Partnership, Inc.
PO Box 1022
Yadkinville NC 27055
Phone (336) 679-7833
Fax (336) 679-4625

Social Services
Yadkin County DSS
PO Box 548
Yadkinville NC 27055
Phone (336) 679-4210

Support our Students
The YMCA of Greater Winston-Salem
121 Washington St.
Yadkinville NC 27055
Phone (336) 679-2051
Fax (336) 679-4013

Yancey

Day care subsidies
Region D Council of Government
PO Box 1820
Boone NC 28607
Phone (704) 265-5434

DEC
Developmental Evaluation Ctr.
820 State Farm Rd., Suite C
Boone NC 28607
Phone (828) 265-5391
Fax (828) 265-5394

Legal Services
Legal Services of the Blue Ridge
PO Box 111
Boone NC 28607
Phone (828) 264-5640
Fax (828) 264-5667

Mental Health
Blue Ridge Area Program
356 Biltmore Ave.
Asheville NC 28801
Phone (828) 258-3500
Fax (828) 252-9584

Primary Care
Yancey Community Medical Services
320 Pensacola Rd.
Burnsville NC 28714
Phone (828) 682-6136

Public Health
Health Department
10 Swiss Ave.
Burnsville NC 28714
Phone (828) 682-6118
Fax (828) 682-6262

Smart Start
Mitchell-Yancey Co. PFC
PO Box 616
Spruce Pine NC 28777
Phone (828) 765-5130
Fax (828) 765-5130

Social Services
Yancey County DSS
PO Box 67
Burnsville NC 28714
Phone (828) 682-6148

State

Legal Services
LSNC Mental Health Unit
PO Box 26087
Raleigh NC 27611
Phone (919) 856-2121
Fax (919) 856-2120

North Carolina Programs Serving Young Children and Their Families

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