

LINKS Reimbursement Form: Instructions

The LINKS Reimbursement form (DSS-5217) was developed to assist counties in submitting monthly reimbursement requests to NCDHHS for services and goods funded through LINKS Special Funds. These instructions (DSS- 5217ins) should be referenced when completing the LINKS Reimbursement form.

LINKS Special Funds are designed to reimburse counties for expenditures made on behalf of eligible youth and young adults up to age 21 who are currently in or were previously in foster care during their teenage years. These LINKS Special Funds provide timely financial support to address additional needs that promote stability and well-being.

Housing Funds are available specifically to young adults who exited foster care at age 18 and are not yet 21 years of age. Counties may receive up to \$1,500 per individual per year to support transitional housing expenses. Eligible costs included rent, security deposits, and room and board arrangements that include meals as part of a rental agreement.

LINKS Transitional Funds (up to \$3,000) per individual based on availability are available to assist eligible youth and young adult ages 14 through 20. These funds are intended for eligible young people at risk of not achieving self-sufficiency due to life circumstances, behaviors, or lack of needed resources. Transitional Funds support targeted interventions to improve outcomes and facilitate a successful transition to adulthood.

Note: If the youth elects to remain in foster care between the ages of 18 to 21, a Transition Plan must be completed. In addition, the goals outlined in the Transitional Living Plan (Section I.B) must be reviewed and updated to clearly reflect how the youth plan to meet the eligibility requirements for participation in the extended foster care program.

A. Blank Spaces Within the Paragraph:

In the first field, counties must enter the total amount of Housing Funds being requested. In the second field, counties must enter the total amount of Transitional Funds being requested. In the third field, counties must enter the name of their county.

In the fourth field, counties must provide the name of the person certifying the form. In the fifth field, the certifying individual must enter their position or job title within the Department of Social Services (DSS). In the final field, the certifying individual must record the date the reimbursement form was completed and submitted.

B. The Spreadsheet

Column 1: Enter the full first and last name of the youth or young adult for whom the county is requesting LINKS reimbursement funds.

Column 2: Enter the youth and young adult's date of birth using the required date format (MM/DD/YYYY).

Column 3: Enter the youth or young adult's SIS identification/CNDS number.

Column 4: Enter the reimbursement amount requested for LINKS housing funds.

Column 5: Enter the reimbursement amount being requested for LINKS transitional funds.

Column 6: The One-Time Special Allowance column should only be used when NCDHHS announces a special one-time allowance opportunity outside of regular LINKS housing and transitional funding. Counties will be notified by NCDHHS when this funding is available. Enter the reimbursement amount requested for the approved special allowance.

Column 7: Items/Service Purchased is for counties to provide a clear description of the item or service purchased for which reimbursement is being requested. Example: "Math tutoring, driver's education course, or apartment security deposit."

Column 8: Counties must list all applicable LINKS outcomes associated with the item or service identified in Column 7. Include every relevant outcome that supports the reimbursement request.

C. Totals per fund

Counties must enter the total reimbursement amount for each funding category in the designated totals row at the bottom of the spreadsheet. Separate totals should be calculated and entered for:

- Housing Funds
- Transitional Funds
- One-Time Special Allowance Funds (when applicable)

Ensure all totals accurately reflect the amounts requested within each respective column.

D. Due Date

Counties requesting LINKS reimbursement from NCDHHS must submit reimbursement documentation monthly by the 5th day of each month.

Counties that are not currently enrolled in PATH NC must submit LINKS reimbursement requests via email to linksreimbursement@dhhs.nc.gov.