5101:2-44-05.2 **ADC-related Covered families and children** medicaid eligibility for state adoption subsidy recipient moving from or to Ohio.

- (A) Residence in the stateOhio is a requirement for ADC related covered families and children (CFC) medicaid. A child with special needs who is in receipt of an Ohio-executed state adoption subsidy whose adoption is finalized and who does not live in Ohio is not eligible for Ohio ADC-related CFC medicaid even if the subsidy payment continues.
- (B) A child described in paragraph (A) of this rule is eligible for medicaid in the new residence state only under the following circumstances if:
  - (1) The new residence state has elected, in its state medicaid plan, the optional coverage COBRA option for its state adoption subsidy children; and,
  - (2) The new residence state and the Ohio department of <a href="https://humanjob.and.family.services">humanjob and family.services</a> (ODJFS) are parties to an interstate agreement for reciprocal medicaid coverage of state adoption subsidy children: or
  - (3) The new residence state elects in its state medicaid plan to reciprocate with all states for medicaid coverage of state adoption subsidy children, whether or not the states are parties to an interstate agreement.
- (C) The Ohio PCSA which entered into the state adoption subsidy agreement shall provide the adoptive parents and the medicaid authority in the new state with a completed copy of the ODHS 1449 "Determination of Special Needs for Medical and Rehabilitation Care" form, a copy of the ODHS 1615 "State Adoption Subsidy Agreement," and a copy of the interstate agreement. Annually, the Ohio PCSA shall provide the new residence state with evidence that the agreement is still in effect or has been renewed.
- (C) When a child moves from Ohio into a new residence state, the Ohio public children services agency (PCSA) which entered into the JFS 01615 "Approval for State Adoption Subsidy Agreement" shall:
  - (1) Within seven working days after notification of the child's relocation or intent to relocate to another state, complete and forward the original interstate compact on adoption and medical assistance (ICAMA) form 6.01 "Notice of Medicaid Eligibility/Case Activation," the ICAMA form 6.02 "Notice of Action," and a copy of the current signed and dated JFS 01615 to the ODJFS ICAMA state administrator.

Upon notification of an additional change in the child's or family's status, the Ohio PCSA shall, within seven working days, complete the ICAMA form 6.03 "Report of Change in Child/Family Status" and forward the original form 6.03 to the ODJFS ICAMA state administrator.

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(2) Annually, the Ohio PCSA which entered into the JFS 01615 with the adoptive parent(s) shall provide the ODJFS ICAMA state administrator with evidence that the JFS 01615 is still in effect, has been renewed, or has been modified.

- (D) A child with special needs resident in Ohio who is the subject of a state adoption subsidy agreement with another state is eligible to receive Ohio ADC-related medicaid if:
  - (1) The state which entered into the agreement has elected, on its state medicaid plan, the optional coverage for its state adoption subsidy children; and
  - (2) The state which entered into the agreement and the Ohio department of human services are parties to an interstate agreement for reciprocal medicaid coverage of state adoption subsidy children.
- (D) When a child moves from Ohio to another state, the adoptive parent is responsible for informing the PCSA of the family's intent to relocate. The PCSA that supervises the original subsidy agreement shall notify the family that Ohio medicaid coverage will be terminated. In addition, the PCSA shall advise the county department of job and family services (CDJFS) to close the Ohio medicaid case.
- (E) For a child described in paragraph (D) of this rule, the Ohio CDHS in the child's county of residence shall request that the state which entered into the state adoption subsidy agreement complete the ODHS 1615 and provide a copy of the subsidy agreement, and a copy of the interstate agreement.
- (E) A child with special needs, who is a resident of Ohio and in receipt of a state adoption subsidy agreement from another state, is eligible to receive Ohio CFC medicaid if:
  - (1) The state which entered into the state adoption subsidy agreement has been identified as a member of the ICAMA: or
  - (2) The state is not identified as a member of the ICAMA but has elected in its state medicaid plan to provide medicaid coverage for its own state adoption subsidy children; and,
  - (3) The state which entered into the state adoption subsidy agreement and ODJFS are parties to an interstate agreement for reciprocal medicaid coverage of state adoption subsidy children.
- (F) The adoptive parents, whether moving from or to Ohio shall be required to provide the residence state with any information on other medical assistance or insurance available to the child.
- (F) When a child moves from another state to Ohio and has a state adoption subsidy agreement in effect with another state, the CDJFS shall:

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(1) Upon receipt of the ICAMA form 6.01, the state adoption subsidy agreement, and a completed JFS 07216 "Combined Program Application" from the adoptive parent(s), determine the child's eligibility for CFC medicaid.

- (2) After determination of medicaid eligibility, complete and forward to the ODJFS ICAMA state administrator the original ICAMA form 6.03.
  - <u>Upon notification of additional changes in the child's or family's status, the CDJFS shall, within seven working days, complete the ICAMA form 6.03 and forward the original Form 6.03 to the ODJFS ICAMA state administrator.</u>
- (G) Each Ohio CDJFS shall be responsible for administration of any ICAMA applications received or distributed at the county level.
- (H) Copies of all ICAMA forms and correspondence shall be maintained in the child's state adoption subsidy case record.
- (I) The adoptive parents, whether moving from or to Ohio, shall be required to provide the residence state with any information regarding medical assistance or insurance available to the child.

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## CERTIFIED ELECTRONICALLY

Certification

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Date

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