

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

- (A) Residence in Ohio is a requirement for covered families and children (CFC) medicaid. An adoptive child with special needs who is in receipt of an Ohio-executed state adoption subsidy and who does not live in Ohio is not eligible for Ohio CFC medicaid even if the subsidy payment continues.
- (B) An adoptive child described in paragraph (A) of this rule ~~is~~may be eligible for medicaid in the new residence state if one of the following applies:
- (1) The new residence state has elected, in its state medicaid plan, the state option for its state adoption subsidy children; ~~and,~~
 - (2) The new residence state and the Ohio department of job and family services (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) ~~When~~If 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" (rev. 7/2004) 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," appendix A to this rule, ~~the~~ ICAMA form 6.02 "Notice of Action," appendix B to this rule, and a copy of the current signed and dated JFS 01615 to the ODJFS ICAMA state administrator.
 - (2) Upon notification of an additional change in the child's or family's status, the ~~Ohio~~ PCSA shall, within seven working days, complete and forward the ICAMA form 6.03 "Report of Change in Child/Family Status," appendix C to this rule, to the ODJFS ICAMA state administrator.
 - (3) 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) ~~When~~If an adoptive 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 JFS 01615 shall notify the adoptive parent 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.~~

(1) The adoptive parent shall inform the PCSA of the family's intent to relocate.

(2) The PCSA that supervises the original JFS 01615 shall notify the adoptive parent that Ohio medicaid coverage will be terminated.

(3) The PCSA shall notify the county department of job and family services (CDJFS) that the Ohio medicaid case shall be closed.

(E) An adoptive 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 ICAMA;~~or,~~

(2) The state is not identified as a member of 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) ~~When~~If an adoptive child moves from another state to Ohio and has a state adoption subsidy agreement in effect with another state, the CDJFS shall:

(1) Upon receipt of the ICAMA form 6.01, the state adoption subsidy agreement, and a completed JFS 07216 "Combined Programs Application" (rev. 10/2006) 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.

~~Upon notification of additional changes in the child's or family's status, the CDJFS shall, within seven working days, complete and forward the original Form 6.03 to the ODJFS ICAMA state administrator.~~

- (3) Upon notification of additional changes in the child's or family's status, the CDJFS shall, within seven working days, complete and forward the original form 6.03 to the ODJFS ICAMA state administrator.
- (G) ~~Each Ohio~~The 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

03/24/2009

Date

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