

5101:2-49-19

Title XIX medicaid coverage for Title IV-E adoption assistance eligible children (COBRA).

(A) A child eligible for Title IV-E adoption assistance (AA), is eligible for Title XIX medicaid coverage beginning with the effective date of the JFS 01453 "Adoption Assistance Agreement" (rev. ~~10/2006~~3/2010) unless the child is solely at substantial risk as defined in rule 5101:2-49-03 of the Administrative Code, regardless of whether AA payments are actually being made or an interlocutory order or a final decree of adoption has been entered into.

(B) The public children services agency (PCSA) shall inform the adoptive parent(s) that ~~they must~~ he or she shall immediately notify the PCSA ~~if when they~~ he or she is are moving to another county or state. ~~The parent(s) must cooperate with the PCSA to assure that a move out of state complies with all applicable interstate requirements for placement. Failure to notify the PCSA may result in the interruption of Title XIX medical coverage.~~

~~(C)~~ The parent shall cooperate with the PCSA to assure that a move out-of state complies with any applicable interstate requirements for placement. Failure to notify the PCSA may result in the interruption of Title XIX medical coverage.

~~(C)~~(D) For an adopted child~~children~~ with an AA agreement in effect who ~~move~~ moves or ~~reside~~ resides out-of state, the following shall apply:

(1) ~~Within seven days after~~ After the PCSA is notified by the adoptive parent(s) that the AA eligible child is moving to or residing in another state ~~within twenty working days, the PCSA shall~~ following actions must be taken in order to transfer Title XIX medical coverage to the state of residence by:

(a) Completing and forwarding the following forms pursuant to rule 5101:2-44-05.2 of the Administrative Code:

(i) The original interstate compact on adoption and medical assistance (ICAMA) 6.01 "Notice of Medicaid Eligibility/Case Activation"; and 6.02 "Notice of Action."

(ii) A copy of the current signed and dated JFS 01453.

~~(a)~~(b) ~~Providing~~ The PCSA shall provide written notification to the adoptive parent(s) of Ohio's intent to terminate the Title XIX medical coverage. Notification shall, at a minimum, include all of the following:

(i) The effective termination date of Ohio's Title XIX medical coverage.;

(ii) A completed JFS 04065 "Prior Notice of Right To A State Hearing" (rev 05/2001);

(iii) A statement that the child will continue to receive AA payments from Ohio or, if no payments are being made, a statement that the JFS 01453 remains in effect and Title XIX medical coverage will be provided by the state in which the child resides.

~~(b)(c) Providing~~ The PCSA must provide written notification of the date Ohio's Title XIX medical coverage will be terminated to the responsible Title XIX medical authority in the state in which the AA eligible child resides.

~~(e)(d) Requesting to~~ The PCSA shall request that it be notified in writing by the Title XIX medical authority in the receiving state of the effective date of the child's Title XIX medical coverage.

~~(d)(e) Terminate~~ When the out-of-state agency begins Title XIX coverage, the Ohio PCSA must terminate the medical coverage in the statewide automated ~~database system~~ child welfare information system.

(2) Upon notification of any change that would effect the Medicaid status, the PCSA shall, within seven working days, complete and forward the ICAMA form 6.03 "Report of Change in Child/Family Status" to the ODJFS ICAMA state administrator.

~~(2)(3)~~ No less than annually, the PCSA shall provide the responsible Title XIX medical authority in the state where the child resides with written verification that the child meets the continuing eligibility requirements for Medicaid. for AA. When ~~if~~ the PCSA determines the child does not meet the continuing eligibility requirements, it must take the following actions within twenty working ~~the PCSA shall~~ days:

(a) Complete a medicaid pre-termination review (PTR) of continuing medicaid eligibility pursuant to rule 5101:1-38.01.1 of the Administrative Code.

(b) Provide written notification of the date Title XIX medical coverage shall be terminated to the responsible Title XIX medical authority in the state in which the AA eligible child resides.

~~(a) The PCSA must notify the adoptive parent(s) in writing of Ohio's intent to terminate AA. Notification at a minimum must include the following:~~

~~(i) The effective termination date of Ohio's JFS 01453, and~~

~~(ii) A completed JFS 04065.~~

~~(b) Unless the adoptive parent(s) requests a state hearing the PCSA must terminate AA eligibility in the statewide automated child welfare information system.~~

~~(c) The PCSA must provide written notification of the date Ohio intends to terminate AA to the responsible Title XIX medical authority in the state where the child is placed or residing.~~

~~(D)~~(E) For an adopted ~~child~~children with out-of-state AA agreements in effect who ~~moves~~move to or ~~resides~~resides in Ohio, the following shall apply:

(1) The child is automatically eligible for Title XIX medical coverage provided by Ohio.

(2) The PCSA shall within~~Within~~ twenty working days after being notified by ~~the adoptive parent(s) or another state that a child for whom an out-of state AA agreement is in effect is residing in or is moving to Ohio, the PCSA in the county in which the child resides must~~ take the following actions to transfer Title XIX medical coverage:

(a) Obtain, ~~at a minimum,~~ the following information from the adoptive parent(s), the agency with Title IV-E case management responsibility, and/or the responsible Title XIX authority:

(i) The child's name, social security number, date of birth, and address.

(ii) The name of adoptive parent(s).

(iii) The address where the medical card should be sent.

(iv) Verification of eligibility for AA.

(v) A copy of the sending state's adoption assistance agreement.

(vi) The name, address and telephone number of a contact person in the state with Title IV-E case management responsibility.

- (vii) The termination date of Title XIX medical coverage in the state with Title IV-E case management responsibility or the state where the child moved.
 - (viii) Any additional information regarding other health insurance coverage the child may have, including third-party liability.
- (b) Enter into SACWIS the Ohio medicaid effective date and an "active" status on the ICPC/ICAMA screen for the appropriate Consolidated Omnibus Budget Reconciliation Act (COBRA) AA ~~events in the family and child statewide automated child welfare information system~~ that authorizes medical coverage.
- (c) Provide written notification to the responsible Title XIX medical authority in the state from where the child moved of the effective date Ohio Title XIX medical coverage will begin.
- (d) Complete the JFS 06612 "Health Insurance Information Sheet" (rev. 05/2001) if there is information that the child is covered by a private health insurance plan.
- ~~(3) No less than annually, the PCSA in the county in which the child resides shall request verification from the Title IV E case management agency which entered into the out-of-state AA agreement, that the continuing eligibility requirements for AA are met. Upon notification from the Title IV E case management agency that the child does not meet the AA continuing eligibility requirements the PCSA shall:~~
- ~~(a) Send a JFS 01958 "Referral for Continuing Eligibility Review" (rev. 06/2003) to the county department of job and family services (CDJFS) which has the medicaid case management responsibility, in compliance with the medicaid pre-termination review process in accordance with rule 5101:1-38-01.1 of the Administrative Code.~~
 - ~~(b) Verify that the CDJFS has authorized medicaid eligibility in the statewide automated child welfare information system prior to termination of the Title IV E medicaid eligibility.~~
- ~~(4)~~(3) The PCSA shall maintain a separate case record for each AA eligible child who resides in Ohio. ~~At a minimum, the~~ The case record shall contain all of the information required in paragraph (D) of this rule for all adopted children with ~~out-of-state~~ AA agreements in effect who move to or reside in Ohio.

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Certification

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