

5101:2-44-05.2 **Medicaid eligibility for state adoption subsidy recipient moving from or to Ohio.**

- (A) Residence in Ohio is a requirement for medicaid as outlined in rule 5160:1-4-06 of the Administrative Code. 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 medicaid even if the subsidy payment continues.
- (B) An adoptive child described in paragraph (A) of this rule 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.
 - (2) The new residence state and the ~~Ohio department of job and family services~~Ohio department of children and youth (ODJFS)(DCY) are parties to an interstate agreement for reciprocal medicaid coverage of state adoption subsidy children.
 - (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) 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 Maintenance Subsidy" ~~shall~~ is to:
- (1) Within seven business 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 7.01 "Notice of Medicaid Eligibility/Case Activation," appendix A to this rule,~~ the child's name, the name(s) of the adoptive parent(s), the new address and a copy of the current signed and dated JFS 01615 to the ~~ODJFS~~DCY interstate compact on adoption and medical assistance (ICAMA) state administrator.
 - (2) Upon notification of an additional change in the child's or family's status, the PCSA ~~shall, is to forward the updated information within seven business days,~~ complete and forward the ICAMA form 7.5 "Information Exchange," appendix B to this rule, to the ~~ODJFS~~DCY ICAMA state administrator.
 - (3) Notify the adoptive parent that Ohio medicaid coverage will be terminated.
 - (4) Terminate Ohio medicaid coverage in ~~the Ohio statewide automated child welfare information system (SACWIS)~~Ohio comprehensive child welfare information system (CCWIS).

- (5) Notify the county department of job and family services (CDJFS) that the Ohio medicaid case ~~shall~~is to be closed, if applicable.
- (D) If an adoptive child moves from Ohio to another state, the adoptive ~~parent~~parent(s) ~~shall~~are to inform the PCSA of the family's address and contact information within ten days of relocation.
- (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 medicaid, as outlined in rule 5160:1-4-06 of the Administrative Code, if:
- (1) The state which entered into the state adoption subsidy agreement has been identified as a member of ICAMA.
 - (2) The state which entered into the state adoption subsidy agreement 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.
 - (3) The state which entered into the state adoption subsidy agreement and ~~ODJFS~~DCY are parties to an interstate agreement for reciprocal medicaid coverage of state adoption subsidy children.
- (F) If an adoptive child moves from another state to Ohio and has a state adoption subsidy agreement in effect with another state, the PCSA ~~shall~~is to:
- (1) Upon receipt of the ICAMA form 700 from the national ICAMA database and the state adoption subsidy agreement determine the child's eligibility for medicaid as outlined in paragraph (E) of this rule.
 - (2) After determination of medicaid eligibility, enter into ~~Ohio SACWIS~~Ohio CCWIS the Ohio medicaid effective date and an "active" status on the ICAMA record.
- (G) Copies of all ICAMA forms and correspondence ~~shall~~are to be maintained in the child's state adoption subsidy case record.
- (H) The adoptive parents, whether moving from or to Ohio, ~~shall~~are to provide the residence state with any information regarding medical assistance or insurance available to the child.

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CERTIFIED ELECTRONICALLY

Certification

09/30/2024

Date

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