

The Association of Administrators of the Interstate Compact on **Adoption** and Medical Assistance ®

The Association of Administrators of the Interstate Compact on Adoption and Medical Assistance (AAICAMA, the Association) receives questions from states and adoptive families on permanency, Adoption Assistance, and Medicaid. The goal of AAICAMA's *Factsheets* is to provide responses to these questions in an easy-to-reference resource that includes discussion and cites law, regulation, and policy.

Title IV-E Adoption Assistance and Medicaid

- ☑ All states accepting Title IV-E funding must create and sustain a Title IV-E Adoption Assistance program, actively promote its availability, and assess eligibility for any child or youth known to the agency. ¹
- ☑ Income assessment (aka a means test) for prospective, adoptive parents is prohibited. ²
- ☑ Medicaid is mandatory for all youth found eligible for Title IV-E. This is true for all, three categories of Title IV-E re: Adoption Assistance, Guardianship Assistance, and Foster Care. ³
- ☑ States must protect the interests of youth adopted with special needs in interstate cases. ⁴
- ☑ Medicaid must be provided to Title IV-E recipients living in a state. This includes youth placed interstate in a residential school or residential treatment facility. ⁵
- ☑ States must provide Medicaid to age 21 to resident youth eligible for Title IV-E. Note: This includes states that do not extend their own, Title IV-E programs past the age of 18. ⁶
- ☑ A separate, Medicaid application for youth determined eligible for Title IV-E is precluded by federal law. ⁷
- ☑ Redetermination of Title IV-E Adoption Assistance eligibility is precluded by federal law. ⁸
- ☑ Medicaid eligibility *redetermination* is not required for youth eligible for Title IV-E Adoption Assistance. Passive confirmation of continued eligibility for Medicaid through continued eligibility for Title IV-E Adoption Assistance is encouraged. ⁹

¹ 42 U.S.C. §§ 671(a), 673; 45 C.F.R. §§1356.40(a), (f) and ACYF-CB-PA-01-01 (1.23.01.)

² 45 C.F.R. §1356.40(c.)

³ 42 U.S.C. §§673(b)(1), 1396a (10)(A)(i)(I) and 42 C.F.R. §435.145.

⁴ 42 U.S.C §§675(3) and 42 C.F.R. §1356.40(b)(4.)

⁵ 42 U.S.C. §§673(b)(1), 1396a(10)(A)(i)(I) and (16); 42 C.F.R. §§435.145 and 435.403(g.)

⁶ 42 U.S.C. §§673(b)(1), 1396a(a)(10)(A)(i)(I) and 45 C.F.R. §1356.40(d.)

⁷ 42 C.F.R. §§ 435.115(e) and 435.909.

⁸ 42 U.S.C. §673(a)(4) and ACYF-CB-PA-01-01 (1.23.01.)

⁹ 42 U.S.C. §§673(a)(4) and 1396a (10)(A)(i)(I.)

- ☑ Title IV-E Adoption Assistance eligibility is presumed to continue unless information to the contrary is confirmed. ¹⁰ *Please see Note below.*
- ☑ Enrolling in private health insurance is not a Medicaid requirement for youth eligible for Title IV-E Adoption Assistance. Families are not required to include a youth on the family's private, health insurance as a condition of Medicaid receipt. ¹¹
- ☑ Youth eligible for Medicaid and under the age of 21 must receive a Medicaid service determined to be medically necessary regardless of whether the service is in a state's Medicaid State Plan. ¹² *Please see Note below. See also AAICAMA's Practice Bulletin on the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) service of the Medicaid program.*
- ☑ State administrative procedures cannot delay or deny the receipt of Medicaid and states must ensure that services are received whenever needed, *24 hours a day and 7 days a week.* ¹³

Note: Title IV-E Adoption Assistance may be terminated under only three (3) conditions:

- 1.) Youth reaches the maximum age the Agreement State sets in its Title IV-E Plan re: 18-21 years
- 2.) Agreement State determines the adoptive parent(s) is no longer legally responsible* for support
- 3.) Agreement State determines the youth is no longer receiving *any*** support from adoptive parent(s)

* Legal responsibility continues unless a Termination of Parental Rights (TPR) is obtained. Termination of benefits, including Medicaid, in response to a youth's status in or outside the adoptive home is prohibited.



** The word "any" is interpreted broadly, and determinations favor continued assistance.

Note: EPSDT Services and Medicaid State Plans

EPSDT services include any medical or remedial care that is medically necessary to correct or ameliorate a defect, physical or mental illness, or condition and includes any service ever approved for coverage in any state. Requests for services not in a State Plan must be processed as a request for EPSDT.

AAICAMA encourages sharing this publication with all, interested persons and invites input and suggestions from child welfare stakeholders- states, families, agencies, and NGOs. Together, we strengthen permanency.

#Team AAICAMA

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¹⁰ 42 U.S.C. §673 (a)(4) and ACYF-CB-PA-01-01 (1.23.01.)

¹¹ 42 U.S.C. §1396e(b)(2.)

¹² 42 U.S.C. §1396d(r) and CMS; State Medicaid Manual §§ 5010, 5121, and 5310.

¹³ 42 C.F.R. §435.930.