

# OFFICE OF THE DEPUTY COMMISSIONER FOR ADMINISTRATION

## Medical Eligibility

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### Policy

All children in the care and custody of the Department of Children and Families shall have medical coverage.

All adolescents who were in foster care at age 18 AND who were receiving Medicaid benefits are also entitled to medical coverage through their 26th birthday, whether they chose to continue receiving services from DCF.

The DCF Medical Assistance Unit (MAU) shall facilitate the enrollment of these children in Medicaid through close collaboration and communication with the child's Social Workers and the Department of Social Services (DSS).

DCF shall be responsible for administering state-funded medical coverage for children who (by rare exception) are not eligible for Title XIX Medicaid. The Medical Assistance Unit shall ensure that this enrollment occurs.

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### Initial Eligibility Steps for Child in Out-of-Home Care

When a child is placed into the care and custody of DCF, the child's Social Worker shall provide the information required on the DCF-MA1, "Medical Assistance Form," and any supporting documentation to the MAU to ensure that medical coverage is granted for the child.

Transmission of the DCF-MA1 by email to the MAU mailbox shall occur within 24 hours of the child entering care in order to avoid delays or lapses in the child's medical coverage. Supporting documentation may be transmitted via facsimile or by email.

Expedited processing of the DCF-MA1 may be requested by the Social Worker in urgent situations, the circumstances of which shall be outlined in the email.

The MAU Eligibility Services Worker shall inform the Social Worker via email that medical coverage has been granted or that it is being coordinated with the Department of Social Services.

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### When the Child has Private Medical Insurance

The Social Worker shall obtain private medical insurance information from the child's family and record it in the computer system and email it to the MAU mailbox.

Specific information shall include, but not limited to:

- name of policy holder
  - policy number
  - type of insurance
  - effective date
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### Guarantee of Payment

If the child does not have a medical number and one cannot be granted immediately, the Social Worker shall complete the DSS-W-1621, "Guarantee of Reimbursement for Medical Services," and send copies to the parties indicated on the form.

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**Guarantee of Payment (continued)** The DSS-W-1621 guarantees reimbursement to the provider for emergency or urgent medical services provided to the child for fifteen (15) days from the date issued.

The DSS-W-1621 form shall be used until a medical number is assigned.

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**State-Funded Medical Assistance** In the case of which a child enters out-of-home care and is determined to be ineligible for Title XIX medical coverage, the MAU shall grant state-funded medical assistance to the child via the DSS ImpaCT.

A child shall be ineligible for Title XIX in situations including, but not limited to:

- the child is placed in detention
- the child is a resident of another state
- the child is an undocumented immigrant
- the child's citizenship status is unverified

The Social Worker shall transmit the DCF-MA1 to the MAU within 24 hours of the placement. The MAU shall confirm via email with the Social Worker that medical coverage has been granted.

In rare circumstances, and at the discretion of the Deputy Commissioner for Operations, children admitted to the DCF Voluntary Services Program and residing at home may be enrolled in state-funded medical assistance. This shall be permitted only in unusual circumstances and only when it is an essential benefit needed to maintain the child at home.

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**Behavioral Health Partnership Coverage In-Home Cases** - The MAU shall be responsible for enrollment of DCF-involved children who are receiving in-home services through the Behavioral Health Partnership (BHP). This enrollment shall be entered into the DSS online Eligibility System and shall qualify certain providers to claim payments for certain services that are approved by the BHP.

Enrollment in the BHP shall be coordinated directly with the approved service providers and does not require any action on the part of the Social Worker. The MAU shall notify the Social Worker and the provider of the enrollment in BHP.

Note: The enrollment does not confer medical benefits upon the child.

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**Role of the Medical Assistance Unit** Redeterminations of eligibility for medical coverage shall be completed annually, or as directed by DSS, for all DCF children enrolled in Title XIX. Annual redeterminations will be transmitted through a DSS notification process via the mail or from email notifications by the DCF Health Advocates and/ or DCF Social Workers. The MAU shall be responsible for researching the child's information in the computer system to ensure that the information on record with DSS is accurate.

**Note:** It is essential that the computer system is maintained with accurate placement, address, legal and assignment information.

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### **Role of the Medical Assistance Unit (continued)**

The MAU shall ensure that any incorrect information is updated and forwarded to DSS for entry into the ImpaCT. The MAU may contact Social Workers for clarification of a child's legal, placement or assignment information as part of the redetermination process. Documentation may be requested from Social Workers in order to clarify discrepancies between the DSS eligibility system and DCF computer system or to confirm Title XIX eligibility.

Social Workers shall make every effort to respond to request for information from MAU in a complete and timely manner.

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### **Reporting Changes**

The Social Worker shall report changes to a child's status that may affect the child's eligibility for Title XIX or state-funded medical assistance by providing the updated information to the MAU on the DCF-MA1.

In cases in which an adolescent has left DCF care, but is enrolled in medical coverage until age 26, the adolescent shall be responsible for communicating changes in his or her contact information directly to DSS in order to continue to receive notifications and annual redetermination paperwork.

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### **Changes That Must Be Reported**

The changes that shall be reported by the Social Worker to MAU for purposes of updating a child's eligibility are:

- placement or address
- child's name
- child's assigned Social Worker
- receipt of insurance or inheritance fund
- existence of commercial insurance
- child's transition to college or vocational program;
- child's transition or oversight by another state agency
- case closing (including those for clients ages 21 to 23)

The Eligibility Services Worker shall process the changes by forwarding the updated DCF-MA1 to DSS.

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### **Additional Documentation**

Additional documentation may be required at the time interim changes are reported or independent of other changes, e.g., DCF-779, "Notice at Age of Majority," shall be required prior to the child's 18th birthday, whether or not the child is changing placements at age 18.

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### **Case Closure**

All efforts shall be made to ensure that complete and timely notification or case closure is shared with the MAU so that the child can be screened for continuing medical eligibility.

When a child is determined to be eligible for another Medicaid program, the MAU shall facilitate transition to that program by submitting the DCF-MA1 on behalf of the child.

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**Social Worker Responsibilities at Case Closure**

The Social Worker shall inform the MAU whenever a child returns home or leaves DCF care, including when a child has been on "runaway" status for greater than seven (7) days. These changes shall be transmitted to the MAU by emailing the DCF-MA1 within 24 hours.

For those children who return home or whose services are terminated, the Social Worker shall include on the DCF-MA1 the parents' or guardians' names and the last address for the child.

At the time a child is discharged from care to return home, the Social Worker shall advise the parents or guardians to follow up with DSS through [www.accesshealthct.com](http://www.accesshealthct.com) to ensure a smooth transition of medical coverage.

If a child is being discharged into his or her own care upon or after reaching 18, he or she shall be advised to follow up with DSS through [www.accesshealthct.com](http://www.accesshealthct.com) to explore his or her medical coverage options.

If a child qualifies for medical coverage until age 26, the Social Worker shall inform the child of his or her responsibilities to update DSS with any address changes. The MAU shall be responsible for the annual redeterminations.

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**MAU Responsibilities at Case Closure**

The MAU shall review each notification of case closure carefully to ensure the greatest coordination of medical coverage for the child.

If a child is eligible for Chaffee Foster Care Independence Act medical coverage, the MAU shall complete the required application to ensure a smooth transition to that coverage, which can be retained until age 21.

Children who have been enrolled in state-funded medical coverage are not automatically referred to DSS for screening at the time of case closure. However, the MAU shall notify the Social Worker of the end of the child's medical coverage and will direct them to refer the parents to DSS.

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**Coverage for Adolescents**

All adolescents who were in foster care at age 18 AND who were receiving Medicaid benefits are also entitled to medical coverage through their 26th birthday, whether or not they choose to continue receiving services from DCF.

The DCF Social Worker shall notify the MAU when the DCF case closes and ensure that an accurate address for the adolescent is provided.

If a DCF-779, "Notice at Age of Majority," has not yet been submitted to the MAU, this shall be done in conjunction with the final DCF-MA1.

At case closure, the Social Worker shall inform the adolescent that he or she is responsible for communicating any address changes directly to DSS in order to keep their medical coverage active.

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**Subsidized  
Adoption and  
Subsidized  
Guardianship  
Medical  
Coverage**

The MAU shall ensure the smooth transfer of medical coverage for children who are either being adopted and receiving an adoption subsidy, or who are permanently placed with a kinship guardian and receiving a guardianship subsidy.

Once a subsidy for either an adoption or a guardianship has been finalized, and all necessary paperwork has been received by the DCF Subsidy Unit, the Subsidy Unit shall forward the appropriate IV-E determination documents to IV-E Eligibility Unit so that the initial IV-E determination can be made. The IV-E Eligibility Unit shall notify MAU of the eligibility status.

For those children being adopted, the MAU shall coordinate with DSS to transition the child's medical coverage from the birth name to the adoptive name. The MAU shall coordinate with DSS to ensure that the child's medical coverage continues undisturbed by the transition to the adoptive name.

The DCF Subsidy Unit shall be responsible for providing DSS with any updates to changes of address for the families of both the subsidized adoptions and subsidized guardianships.

The MAU shall ensure that the annual medical redeterminations for both the adoptions and kinship guardianship subsidies – that are determined to be "IV-E yes" – are placed on an automatic renewal track for the duration of the agreed-upon subsidy period.

This automatic renewal track also applies to children receiving adoption subsidies who are determined to be "IV-E no".