

Navigating Medicaid for ICPC Children

It can take up to 45 days for Medicaid to be set up in the receiving state for eligible IV-E and state funded children. How Medicaid is handled is based on a case-by case basis. ***Only IV-E children placed in a licensed foster home receiving a IV-E maintenance payment are guaranteed Medicaid in the receiving state.*** If your child/youth does not meet that criteria it is very important to discuss options and implications with the placement, as well as, include the Health Advocacy staff in a CFTM **BEFORE** the child/youth is sent out of state to determine a medical plan for IV-E and state funded youth. It can take several weeks to months to determine a plan and identify a provider. Placing a child without a medical plan can result in an inability to access services for children/youth, inability to obtain medications, extensive expensed incurred at placement resources expense. A child should not be placed before this is discussed and determined with the placement resource and Child Health. Please include the Regional ICPC Representative on any CFTMs concerning ICPC planning.

ICPC Medical Plan Checklist

Please ensure the following have been completed prior to placing a youth out of state:

- ❑ **Confirm IV-E eligibility status** with CWB unit and make sure it is appropriately marked on the 100A. Unless the child entered custody within the last 30 days this should never be marked as pending. This is important as it can delay Medicaid past the 45 day wait period.
- ❑ **Submit ICPC Behavioral/Medical Referral (form CS-1234)** for **every** youth to your Regional ICPC Representative. The Regional ICPC Representative will also send this form to SelectKids_GM@bcbst.com if the youth being placed out of state will not have insurance coverage at the time of placement and will need a *SelectKids* Specialist available to assist. Failure to submit referral can result in delay in services and the inability to access services and medication that can result in a placement disruption.
- ❑ The **100B** needs to be submitted to your regional CWB unit, Central Office ICPC, and your regional ICPC Representative. A copy should also be provided to the foster parent. If you do not submit to each office/person, it can prevent proper processing of paperwork, a delay in approval and a delay in coverage past the 45 day mark.
- ❑ Any EPSD&T services should be obtained prior to the child leaving TN. Good Cause Exceptions (GCEs) will not be granted for ICPC children based on ICPC instance alone.
- ❑ Any outstanding medical needs to be completed prior to the youth leaving the state. This includes immunizations, vaccinations, etc. Inability to complete these prior to placement can prevent children from becoming enrolled in childcare and school programming.
- ❑ Check-up by current treating physicians are recommended, particularly for children with identified medical needs, in order to ensure there is no lapse in services. Often, if there is a delay with insurance in the receiving state and a provider has seen the child prior to them leaving the state, it will provide us with more options should an issue arise.
- ❑ It is very important that any medications should be filled **before** the child leaves TN to avoid a lapse in medication. It is suggested that you reach out to the prescribing provider and explain that the child is moving out of state and to request a 30-60 day supply until they can get a provider set-up in the receiving state.

How to Obtain Medicaid or Access Services for ICPC Youth

If your child is IV-E and receiving a IV-E foster board maintenance payment:

If the child is Title IV-E eligible **AND** receiving a IV-E maintenance payment this will confirm their eligibility resulting in Medicaid approval. It is important to discuss with the case worker in the receiving state how their state will process insurance for IV-E eligible youth. Each state is different. Some transition “automatically” while some state will need the family to apply in order to initiate the transition. If you have questions or experience issues, please contact your Regional ICPC Representative.

Children who are IV-E and are **NOT** receiving a foster board maintenance payment are **NOT** guaranteed Medicaid in the receiving state and a medical plan will need to be determined for these youth. See instructions below:

If your child is IV-E but not receiving a maintenance/board payment, options include:

- Discussing with placement about becoming a licensed foster home in order to access insurance.
- Determine if household income meets the receiving states Medicaid guidelines.
- Determine if receiving state has a child-only grant.
 - ◆ *This is rare and will need to be confirmed by receiving state and Child Health.*
- Place child/youth on family’s private insurance or determine plan in writing on how the family will access medical services.
 - ◆ *This should be detailed and explicitly explain how the family intends to fund services.*
- Submit [CS-1234, ICPC Behavioral/Medical Referral form](#) to determine TennCare providers that can serve youth in area.
 - ◆ *TennCare is a Tennessee based program and there are often not providers in the receiving state. It is not guaranteed that providers will be available near ICPC placement. It should be discussed with Placement Resource that failure to access services at provider out of network is not reimbursable by the department. Depending on geography of placement this can result in driving long distances for services.*

If your child is state funded (NOT IV-E Eligible), options include:

- Determine if household income meets the receiving states Medicaid guidelines.
- Determine if receiving state has a child-only grant
 - ◆ *This is rare and will need to be confirmed by receiving state and Child Health.*
- Place child/youth on family’s private insurance or determine plan in writing on how the family will access medical services.
 - ◆ *This should be detailed and explicitly explain how the family intends to fund services.*
- Submit [CS-1234, ICPC Behavioral/Medical Referral form](#) to determine TennCare providers that can serve youth in the receiving state.
 - ◆ *TennCare is a Tennessee based program and there are often not providers in the receiving state. It is not guaranteed that providers will be available near ICPC placement. It should be discussed with Placement Resource that failure to access services at provider out of network is not reimbursable by the department. Depending on geography of placement this can result in driving long distances for services.*

If your child is an SSI recipient:

For children receiving SSI, the Child Welfare Benefits Counselor will contact the local Social Security Administration to report a residence address change. This will result in the Medicaid changing to the new residence state.

If DCS divested legal custody to the foster parents, then the FSW will report this information to the Child Welfare Unit and the Child Welfare Benefits Counselor will notify SSA of this change.

If your child is placed with a parent:

Parent placements are solely responsible for accessing and applying for insurance for their children. The department is available to assist applying and answer questions when possible. Failure to apply in a timely manner can result in inability to access services and medications resulting in disruption.