

2010 AAICAMA Training

***ICAMA Compact Administration
Frequently Asked Questions***




Building Bridges Across State Lines:
The Interstate Compact on Adoption &
Medical Assistance (ICAMA)

AAICAMA Annual Conference
2010

The Association of Administrators of the
Interstate Compact on Adoption and Medical Assistance (AAICAMA)

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A Little History about
Adoption Assistance & Medical Assistance

- 1968 New York establishes the first adoption assistance (AA) program
- By 1980 all states had some form of adoption assistance available

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In 1980, Adoption Assistance and
Child Welfare Act (PL 96-272) enacted

- Established a federally aided AA program under title IV-E of the Social Security Act
- Fed. Govt. would contribute to states some of the costs of providing AA payments & Medicaid services and
- Mandated that states safeguard children's interests in interstate situations.

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Mandate to Protect the Interstate Interests of Children Receiving Adoption Assistance

The term "adoption assistance agreement" (AAA) means a written agreement...which at a minimum...shall contain provisions for the protection (under an **interstate compact** approved by the Secretary or otherwise) of the interests of the child in cases where the adoptive parents and child move to another State while the agreement is effective.

Section 475 (3)(B)

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1985 COBRA
Consolidated Omnibus Budget Reconciliation Act

Important provisions:

1. It **mandated** that Medicaid for IV-E children (foster care & adoption assistance) was to be provided by the state of the child's residence and
2. It gave states the **option** of providing Medicaid to children receiving **state-funded** (i.e., non IV-E) adoption assistance

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1985 with COBRA

- Title IV-E children could now get Medicaid in the state where they lived
BUT
 - ✓ But how did families go about getting that Medicaid set up?
 - ✓ How did the state of residence determine from the AA state if the child was eligible?
- What about Non IV-E children?

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COBRA DID NOT

Provide the mechanism to ensure that children receiving AA would actually receive Medicaid in the state of residence.

It's one thing to mandate something it is another to ensure that it happens.

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Adoption And Safe Families Act of 1997
Health Insurance Provisions for
Non-title IV-E Children Receiving AA

REQUIRES STATES TO PROVIDE HEALTH INSURANCE COVERAGE FOR ANY CHILD WITH SPECIAL NEEDS, PROVIDED THAT:

- The child has an AA agreement with the State
- The state has determined that due to the child's special needs for medical, mental health or rehabilitate care, the child cannot be placed without medical assistance.
 - ✓ Such coverage may be provided thru Medicaid or state health insurance program, but the benefits must be of the same kind/type as provided by Medicaid.

SECTION 471(a)(21) of the SSA: 42 U.S.C. 671(a)(21)

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Interstate Compact on Adoption and Medical Assistance
ICAMA

The compact document was enacted by 9 states
...Jan. 1986

- To ensure delivery of Medicaid & other services...
- Has force & effect of law with member states...

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What are interstate compacts?

- Are agreements between 2 or more states that bind them to the compact provisions (i.e., a contract)
- Establish a formal, legal relationship between states to address common problems
- Have the force & effect of statutory law and **supersedes** conflicting state laws

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Interstate Compact on Adoption and Medical Assistance
ICAMA

Is an agreement between and among states that provides the framework for formalized *interstate cooperation envisioned under the Adoption Assistance and Child Welfare Act of 1980.*

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When does ICAMA apply?

- When a child is **covered by active adoption assistance agreement**
AND (one of the following exists)
- Child is initially placed with a family in another state
- Child moves with family to another state while the agreement is in effect or
- Child is placed in a residential treatment facility in another state

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Benefits of ICAMA: a Summary

- Provides way to **uniformly** meet the mandates of PL 96-272 for children with special needs
- Has force and effect of **law** among members
- Provides standard forms and **uniform administrative procedures** for securing Medicaid and other services interstate
- Assigns **one** person, the Compact Administrator, in each state to contact to secure services

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

- July 1986, 15 States formed the Association
- APHSA selected as the Secretariat
- By-laws written for the Association
- Officers were selected
- Project director assigned

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**AAICAMA
Mission Statement:**

- Facilitate the administration of ICAMA **to ensure provision of medical & other services to adoption assistance-eligible children** in interstate situations;
- Train ICAMA practitioners;
- Assist in development of sound practices and policies in interstate adoptions;
- Build/strengthen partnerships with states and public-private adoption professionals to enhance services to children receiving AA.

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Services of the Association

- ✧ Interstate Services
 - Mediation
 - Facilitation
- ✧ Technical Assistance
 - Legal
 - Policy
 - Model programs
- ✧ Research
 - Provision of Medical Assistance for Children Receiving State-funded AA
 - Post-adoption Services
 - Interstate Barriers to Adoption
 - Children Receiving Adoption Assistance
- ✧ Education
 - Training
 - Annual Meeting/Regional Meetings



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NON-ICAMA MEMBER STATES

- Wyoming
- Territories – Puerto Rico, U.S. Virgin Islands, Guam

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How many children move or are adopted interstate?

- In 2005, 30 states reported a total of 223,350* children receiving title IV-E or state-funded AA.
- A total of **20,243*** of these children lived outside the AA state.

*AAICAMA Interstate Movement Study (2007)

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Number of AA Children Residing Out-of- State is growing

- So more than 9% of all children receiving AA resided in a **state other than the adoption assistance state** – this is up from 6% in 1998.
- Between 1998 & 2005, the numbers of adoption assistance-eligible children living outside the AA state increased by more than 70%!

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Increases in Interstate Adoptions are Likely...

- Interstate adoption plays a larger role in state efforts to increase adoptions from foster care.
- With AdoptUsKids web site & nat'l recruitment campaign, states are better equipped to find prospective adoptive families across the nation for waiting children.
- In fact, adoption exchanges report that **63%** of prospective families who respond to child-specific adoption recruitment **do not reside in the same state as the child!**

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ICAMA Compact and Deputy Compact Administrator

Key Roles & Responsibilities

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The Compact and Deputy Administrators are the most important people under the ICAMA

Without a proactive administrator, the provision and transfer of medical and other services to adoption assistance eligible children in interstate situations cannot happen.

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Key Responsibilities of the person who administers (CA) the ICAMA:

- Works with (in-state & out-of-state) colleagues & families to ensure that AA eligible children receive Medicaid when they are placed/ move to another state.
- Serves as an advocate & information resource for families.

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Key Responsibilities of the CA – con't

- Facilitates and processes ICAMA forms- for incoming and outgoing children to ensure timely and seamless provision of Medicaid interstate
- Educates partners (e.g. Medicaid) about the Compact
- Collects & reports interstate adoption data

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First:
Working with families is critical part of ALL the administrator's work

ICAMA Administrator is often the ONLY point of contact for adoptive parents in a new state regarding the availability of medical and post-adoption services.

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Needed services are often fragmented....

- Many parents – not familiar with how the “system works” and how to seek the support they need.
- Is helpful to families if there is ONE person who can help them locate and access services, REGARDLESS of the system or agency boundary.
- That person is the ICAMA administrator!

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Did you know...?

The most-cited reason adoptive parents gave for not being able to get a needed service is: NOT knowing where to go for information on available services!

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Did you also know that in a recent survey....

- When adoptive parents were asked to rank the key factors in their decision to adopt, the most important factor they cited was receipt of a Medicaid or a medical card?
- Medicaid was rated even more important than receipt of a subsidy!!

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The CA fills this role...

The ICAMA administrator connects families to services which may otherwise be difficult for them to find (e.g.; Medicaid, mental health services and Education).

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The CA's work:

- Promotes timely & seamless interstate provision of services to children with special needs
- Supports the success of adoptive placements; and
- Positively contributes to state's performance on the CFSTRs.

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Second:
Processes/Facilitates forms for both incoming and outgoing cases

- ICAMA *mandates* the use of common forms: 6.01, 6.02, and 6.03.
 - ✓ Facilitates the delivery of Medicaid to a child receiving AA & makes the process seamless to the family.
- Use of these 3 forms is an **obligation** among all members states.

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What if another state is not party to the Compact?

- Use ICAMA forms in dealing with non-compact states
- Wyoming honors the use of ICAMA forms to provide services to the child.

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Because services are essential to our population of children...

It's important to **initiate, process, and follow-up on** incoming and outgoing cases in a timely manner.

TIME is critical to a child waiting for medical or post-adoption services in a new state!

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CA collects Interstate Data

Collects and provides interstate data on:

- Number of children receiving title IV-E AA and state-funded AA in your state
- Number of children eligible for AA who reside outside your state and the states in which they live.

(AAICAMA is ONLY assn. that has compiled this data!)

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Advocate: the overarching role

- In daily activities—works to protect interests of children receiving AA in interstate situations
- With colleagues—works to overcome systemic barriers to the provision & coordination of services for adoptive families
- Is—an **Active Voice** for sound interstate practice, policy and services to improve the lives of children adopted with special needs.

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**ICAMA tools:
Standard Forms and Procedures**

- What forms are required to process an interstate case under ICAMA?
- How are these forms used?

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ICAMA requires the use of
Three (3) standard ICAMA forms

- A. **Form 6.01** - Notice of Medical Assistance Eligibility/Case Activation
- B. **Form 6.02** - Notice of Action
- C. **Form 6.03** - Report of Change in Child or Family Status

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ICAMA 6.01— Notice of Medical Assistance Eligibility/Case Activation

ALL the following information MUST be filled in:

- Name, birth date, gender, ethnicity and a valid **Social Security number (SSN)*** for each child. (Sect. A)
- The adoptive parents' name & address (Sect. B)
- Medical coverage other than Medicaid (Sect. C)
- Contact info for CA's in **both** states (Sect. D)
- Certification of **Medicaid eligibility** (Sect. E)

The 6.01 is sent to the new resident state.

**(Note: Can use the SSN assigned at birth or the new SSN obtained after adoption finalization.)*

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ICAMA 6.01- con't

Be sure to use the most current ICAMA 6.01 form

- The date can be found in the upper right hand corner.
- Most recent changes were made in 08/04.

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An Important Note about Social Security Numbers (SSN)

A valid SSN (i.e., one issued by the Social Security Administration (SSA)) is federally required in Medicaid cases. So, an SSN is required on the 6.01 when a child is placed/moves across state lines to ensure uninterrupted services.

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An Important Note about Social Security Numbers (SSN) – cont'd
(see memo in notebook)

- The ICAMA 6.01 requires a valid SSN and states **cannot** leave this information field blank.
- An individual will have only one valid SSN at a time. States must use either:
 - ✓ The child's SSN issued at birth by the SSA; or
 - ✓ If an adoptive family obtains a new SSN for the child at finalization, states must use the new SSN issued by the SSA. The SSN issued at birth is to be used during the waiting period for a new SSN requested at adoption finalization

What can you, as ICAMA professional, do if the SSN is missing?

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ICAMA 6.02 (Notice of Action)

Provides information about:

- **Current & new family addresses.**
- **AA state's CA contact information.**
- **Whether the new resident state is member of ICAMA.**

The 6.02 is **sent to the adoptive parents** to inform them that all necessary information on the child was sent to the new resident state.

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ICAMA 6.03 (Report of Change in Child/Family Status)

Is used to **notify** the other state about:

- **Any change(s)** in address, child's status (i.e., adoption, case status, etc) and Medicaid status.
- It is unique because it **used by both the AA state & the new resident state but for different purposes.**

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ICAMA 6.03 — Cont'd

Uses:

The Adoption Assistance state uses the 6.03:

- To report/notify the resident state (RS) of changes in the child or family status.

The new resident state (RS), uses the 6.03:

- To notify the AA state that a child receiving AA from their state has been issued an MA card in the new state.

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**Using the Forms:
ICAMA administrative procedures**

The ICAMA process (see flowchart):

The Administrator in the AA state:

- **Completes** the 6.01
- **Attaches** a copy of the most current **AA Agreement**
- Sends the 6.01 and the current AAA to the new resident state CA to indicate the child's eligibility for MA

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ICAMA Procedures - Con't

- The AA state administrator also sends a copy of the 6.01 to the adoptive parents with a copy of the completed 6.02 and
- Places a copy of the 6.01 in his/her case file

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It's Important to talk with the parents...

- Inform parents that paperwork has been sent to new state; and that they'll receive copies of 6.01 and 6.02 to confirm that the RS was notified.
- If the child is receiving state-funded adoption assistance from your state, talk with the parents about how medical services and benefits may be obtained the new state of residence.
- Tell parents that the new state may require citizenship documents for the child to meet new Medicaid requirements due to the Deficit Reduction Act of 2005 (DRA).

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Talk with parents – Cont'd

- Tell parents it can take up to 45 days (depending on new state's internal procedures) to obtain a Medicaid card in new state of residence:
 - ✓ Advise them to refill any needed prescriptions before they move
 - ✓ Inform them of possibility of obtaining a Medicaid number in new state if a medical emergency arises.
- Tell parents to NOTIFY their adoption worker if they move to a new state or child is placed in an RTF in another state.
- If they have any further questions about the new MA card or available services, tell them to contact the ICAMA administrator in the new state of residence.

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ICAMA 6.03

- The RS administrator sends a copy of the 6.03 to the AA state administrator once a Medicaid case is opened for the child.
- The receipt of the 6.03 closes the loop - it lets the AA state know that medical assistance was provided to the child in new state!

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Other CA responsibilities include:

- To ensure that the Secretariat has:
 - ✓ a current Designation of Compact Officials form on file
 - ✓ current contact information for your state
- To vote in annual election for members of the Executive Committee
- To train your state staff on the processes and protocols of the ICAMA
- To fulfill all legal obligations for your state required by membership in the ICAMA

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Some practice issues

- Direct deposit of AA checks can create address problems...
- County and state-administered states process ICAMA forms differently...
- Often adoptive parents don't inform anyone of their move...
- Others?

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To summarize:

- Be proactive.....Do whatever is needed to ensure service provision (outcome) to the child!
- Build relationships with your ICAMA colleagues. Call with questions or problems.
- Communicate and partner with Medicaid staff.
- Know your state's Medicaid & post-adoption services.
- Reach out to parents of children coming into your state!
- Use resources available from AAICAMA...


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Distinguishing ICAMA & ICPC

- ICPC governs the placement of children across state lines for "placement in foster care or as a preliminary to a possible adoption."
- The purpose of ICPC is to ensure that children are placed in suitable and safe environments. (i.e., foster care)
- ICAMA governs adoptive placements only.
- The purpose of ICAMA is to ensure continued medical coverage and other support services for IV-E and state-funded AA-eligible children who are adopted or move across state lines with their families after finalization.

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Questions/Discussion



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**ICAMA FORM 6.01
NOTICE OF MEDICAID ELIGIBILITY/CASE ACTIVATION**

A. CHILD IDENTIFYING INFORMATION

1. NAME/BIRTHDATE/SOCIAL SECURITY NUMBER ETC:

(a) Child A's Name:

Social Security # <i>Enter as: 000-00-0000</i>	Race*	Amer Indian Alaskan Nat	Asian	Black/African American	Native Hawaiian/ Other Pacific Islander	White	Unknown
		<i>*Check all boxes that are applicable</i>					
Birthdate: <i>Enter as: 00/00/00</i>	Ethnicity*						
	Hispanic/Latino						
Gender: Male Female	<i>*Check if applicable</i>						

(a) Child B's Name:

Social Security # <i>Enter as: 000-00-000</i>	Race*	Amer Indian Alaskan Nat	Asian	Black/African American	Native Hawaiian/ Other Pacific Islander	White	Unknown
		<i>*Check all boxes that are applicable</i>					
Birthdate: <i>Enter as: 00/00/00</i>	Ethnicity*						
	Hispanic/Latino						
Gender: Male Female	<i>*Check if applicable</i>						

(a) Child C's Name:

Social Security # <i>Enter as: 000-00-000</i>	Race*	Amer Indian Alaskan Nat	Asian	Black/African American	Native Hawaiian/ Other Pacific Islander	White	Unknown
		<i>*Check all boxes that are applicable</i>					
Birthdate: <i>Enter as: 00/00/00</i>	Ethnicity*						
	Hispanic/Latino						
Gender: Male Female	<i>*Check if applicable</i>						

2. ADOPTIVE PARENTS:**Parent 1- Name :**

	Race*	Amer Indian Alaskan Nat	Asian	Black/African American	Native Hawaiian/ Other Pacific Islander	White	Unknown
	<i>*Check all boxes that are applicable</i>						
	Ethnicity*	Hispanic/Latino					
	<i>*Check if applicable</i>						

Parent 2- Name :

	Race*	Amer Indian Alaskan Nat	Asian	Black/African American	Native Hawaiian/ Other Pacific Islander	White	Unknown
	<i>*Check all boxes that are applicable</i>						
	Ethnicity*	Hispanic/Latino					
	<i>*Check if applicable</i>						

3. CURRENT FAMILY ADDRESS:

Number and Street:

County:

City: State: Zip:

Enter 2 letters *Enter as: 00000-0000*

Telephone: (ext)

Enter as: 000-000-0000

4. FAMILY ADDRESS IN NEW RESIDENCE STATE:

Number and Street:

County:

City: State: Zip:

Enter 2 letters *Enter as: 00000-0000*

Telephone: (ext)

Enter as: 000-000-0000

5. IF CHILD IS NOT RESIDING WITH ADOPTIVE PARENTS GIVE REASON:*

**If additional explanatory room is needed please use page 7 of this form*

6. BASIS OF MEDICAID ELIGIBILITY:

Child A	Title IV-E/SSI State Funded Adoption Assistance/Medicaid Option	Title IV-E\AFDC
Child B	Title IV-E/SSI State Funded Adoption Assistance/Medicaid Option	Title IV-E\AFDC
Child C	Title IV-E/SSI State Funded Adoption Assistance/Medicaid Option	Title IV-E\AFDC

7. DATE OF MEDICAID CLOSURE: *Last day of the month the child is living in the originating state*

Child A:	<i>Enter as:00-00-00</i>	Child B:	<i>Enter as:00-00-00</i>	Child C:	<i>Enter as:00-00-00</i>
----------	--------------------------	----------	--------------------------	----------	--------------------------

8. DATE REQUESTED FOR MEDICAID OPENING: *First day of the following month*

Child A:	<i>Enter as:00-00-00</i>	Child B:	<i>Enter as:00-00-00</i>	Child C:	<i>Enter as:00-00-00</i>
----------	--------------------------	----------	--------------------------	----------	--------------------------

D. REFERRAL INFORMATION

FROM:

Compact Administrator's Name:

Number and Street:

County:

City:

State:

Zip:

Enter 2 letters

Enter as: 00000-0000

Telephone:

Enter as: 000-000-0000

(ext)

TO:

Compact Administrator's Name:

Number and Street:

County:

City:

State:

Zip:

Enter 2 letters

Enter as: 00000-0000

Telephone:

Enter as: 000-000-0000

(ext)

State Status: Current residence state **IS** **IS NOT** the Adoption Assistance State .

E. CERTIFICATION

This is to certify that the records of my office show the above named child(ren) to be eligible for the Medicaid Identification document(s) in his\her\their new residence state in accordance with the information contained herein, the attached Adoption Assistance Agreement, and the Interstate Compact on Adoption and Medical Assistance.

In addition, I hereby certify that the attached agreement is a true copy of the most current Adoption Assistance Agreement for the named child(ren) in the files of my office and is effective unless the residence state is notified that it has been terminated by the adoption assistance state.

Signed at:

City

State

This

day of

20

Signature:

Name:

Title:

Agency:

Telephone:

Enter as: 000-000-0000

(ext

)

DISTRIBUTION: *Send original with one (1) copy of current adoption assistance agreement to (new) Residence State, one (1) copy to adoptive parent(s), retain one (1) file copy in issuing office.*

PART 5. IF CHILD IS NOT RESIDING WITH ADOPTIVE PARENTS *(continued)*

**ICAMA FORM 6.02
NOTICE OF ACTION**

A. NOTIFICATION

TO: *Adoptive Parents:*

CURRENT FAMILY ADDRESS:

Number and Street:

City:

County:

State:

Zip:

Telephone:

ext.

We have been notified that on or about

your child(ren) will be living at the address below.

NEW FAMILY ADDRESS:

Number and Street:

City:

County:

State:

Zip:

Telephone:

ext.

2. Contact your child's new Residence State Adoption Compact Administrator named in **Section D** of the attached **ICAMA Form 6.01** to determine what steps, if any, you need to take in order to receive a Medicaid Identification Card in you new State of Residence

3. You may be instructed by the Compact Administrator to contact the Medicaid office to obtain a new Medicaid Identification card. You may be asked to complete an assignment of rights for medical support and payment. You may also be asked to provide other necessary information. Your new Medicaid office will also be able to provide you with information about the benefits available in the (new) Residence State.

4. If you are moving to a State that is not a member of ICAMA as indicated above, you may need to go to your local Medicaid office in the new residence State with these forms to apply for Medicaid on behalf of your child(ren). If you encounter a problem, contact the Compact Administrator listed on this form.

D. CHILDREN RECEIVING STATE-FUNDED ADOPTION ASSISTANCE

1. If your child is receiving state-funded adoption assistance as indicated in Section A of this form, then your child is not automatically eligible to receive Medicaid in the new State of Residence.

2. If your State of Residence is a member of ICAMA as indicated in Section B of this form, then contact the Compact Administrator in the new State of Residence as identified on **Form 6.01**.

3. If your new State of Residence is not a member of ICAMA, you need to go to the local department of social services in the new State of Residence and inquire about receiving medical assistance. If you have questions, contact your state's adoption assistance compact administrator as identified in **Form 6.01, Section D**.

ICAMA FORM 6.03 REPORT OF CHANGE IN CHILD\FAMILY STATUS

A. SENDING INFORMATION

TODAY'S DATE:

FROM: *Compact Administrator's Name:*

Number and Street:

County:

City:

State:

Zip: -

Telephone: - - (ext:)

TO: *Compact Administrator's Name:*

Number and Street:

County:

City:

State:

Zip: -

Telephone: - - (ext:)

REASON FOR REPORTING: (Check appropriate box)

- | | |
|--|---|
| <input type="checkbox"/> Address Change | <input type="checkbox"/> Adoption Status Change |
| <input type="checkbox"/> Update on Medicaid Status | <input type="checkbox"/> Change in Case Status |

B. CHILD IDENTIFYING INFORMATION

(a) Child A's Name:	Birthdate:	Social Security #
---------------------	------------	-------------------

(b) Child B's Name:	Birthdate:	Social Security #
---------------------	------------	-------------------

(c) Child C's Name:	Birthdate:	Social Security #
---------------------	------------	-------------------

2. ADOPTIVE PARENTS:

Parent 1:

Parent 2:

C. CHANGE IN MEDICAID STATUS

Child A	Child B	Child C
Medicaid Case Opened:	Medicaid Case Opened:	Medicaid Case Opened:
Medicaid Effective Date:	Medicaid Effective Date:	Medicaid Effective Date:
Medicaid ID #: <i>(New residence state)</i>	Medicaid ID #: <i>(New residence state)</i>	Medicaid ID #: <i>(New residence state)</i>

D.CHANGE IN CASE STATUS

Child A	Child B	Child C
Effective Date of Change:	Effective Date of Change:	Effective Date of Change:
Change is to <input type="checkbox"/> Active <input type="checkbox"/> Closed	Change is to <input type="checkbox"/> Active <input type="checkbox"/> Closed	Change is to <input type="checkbox"/> Active <input type="checkbox"/> Closed
Effective Date of Closing	Effective Date of Closing	Effective Date of Closing
Reason for Closing:	Reason for Closing:	Reason for Closing:

E. CHANGE IN ADDRESS**1.EFFECTIVE DATE:****2.CURRENT FAMILY ADDRESS:**

Number and Street:

County:

City: _____ State: _____ Zip _____ -

Telephone: - - (ext: _____)

3. NEW FAMILY ADDRESS:

Number and Street:

County:

City: _____ State: _____ Zip _____ -

Telephone: : - - (ext: _____)

F. CHANGE IN ADOPTION STATUS**1. EFFECTIVE DATE:****2. ADOPTION ASSISTANCE AGREEMENT:**

Child A	Child B	Child C
Adoption Assistance State:	Adoption Assistance State:	Adoption Assistance State:
Effective Date <i>Original agreement</i>	Effective Date <i>Original agreement</i>	Effective Date <i>Original agreement</i>
Expiration Date <i>Original Agreement</i>	Expiration Date <i>Original Agreement</i>	Expiration Date <i>Original Agreement</i>
Effective Date <i>Current Agreement</i>	Effective Date <i>Current Agreement</i>	Effective Date <i>Current Agreement</i>
Expiration Date <i>Current Agreement</i>	Expiration Date <i>Current Agreement</i>	Expiration Date <i>Current Agreement</i>

3. FINAL ADOPTION DECREE:

Child A	Child B	Child C
Pending <input type="checkbox"/> Yes <input type="checkbox"/> No*	Pending <input type="checkbox"/> Yes <input type="checkbox"/> No*	Pending <input type="checkbox"/> Yes <input type="checkbox"/> No*
*Date of Final Decree:	*Date of Final Decree:	*Date of Final Decree:
ICPC Notification Made via 100B <input type="checkbox"/> Yes <input type="checkbox"/> No	ICPC Notification Made via 100B <input type="checkbox"/> Yes <input type="checkbox"/> No	ICPC Notification Made via 100B <input type="checkbox"/> Yes <input type="checkbox"/> No

4. ADOPTION TERMINATED:

Child A	Child B	Child C
Has Adoption Terminated? <input type="checkbox"/> Yes* <input type="checkbox"/> No	Has Adoption Terminated? <input type="checkbox"/> Yes* <input type="checkbox"/> No	Has Adoption Terminated? <input type="checkbox"/> Yes* <input type="checkbox"/> No
*If Yes, Give Date	*If Yes, Give Date	*If Yes, Give Date

DISTRIBUTION: Prepare original and two (2) copies. Reporting state retains original (1); recipient state retains one (1); adoptive parents receive one (1).

ICAMA Primary Contacts

April 14, 2010

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MEMORANDUM

TO: AAICAMA Compact and Deputy Compact Administrators

FROM: Stephanie Pettaway, AAICAMA President

SUBJECT: The Necessity of Using Valid Social Security Numbers

DATE: April 17, 2007

The Necessity of Using a Valid Social Security Number

The ICAMA 6.01 form is used between states to transfer adoption assistance cases and ensure the subsequent receipt of benefits in the new state, particularly Medicaid. A valid Social Security Number (SSN), meaning one that has been issued by the Social Security Administration (SSA), is federally required in Medicaid cases. Subsequently, a SSN is required on the ICAMA 6.01 form when an adoption assistance eligible child is placed or moves across state lines in order to facilitate the uninterrupted receipt of Medicaid services.

It has come to the Secretariat's attention that some states are using state-created, "dummy" numbers on the ICAMA 6.01 instead of the child's valid Social Security Number. States are employing this practice for various reasons, primarily for the protection of the child from the birth family or as a place holder when an adoptive family is requesting a new Social Security Number at adoption finalization from the Social Security Administration.

The use of state-created numbers, however, creates problems when Medicaid services are sought interstate. Most state medical assistance data systems will not accept state-created numbers and the new resident state is then unable to open a Medicaid case and issue a Medicaid card. The end result is that the child is delayed access to medical assistance.

To promote the uninterrupted receipt of Medicaid in interstate cases, ICAMA Member and Associate Member states must complete the ICAMA 6.01 form in its entirety. The 6.01 form requires a valid Social Security Number and states cannot leave this information field blank. AAICAMA directs state members to use valid Social Security Numbers on the ICAMA 6.01 and to discontinue the use of state-created numbers on the ICAMA 6.01.

Note: An individual will have only one valid SSN at a time. This means that states must use the SSN issued at birth from the SSA on the 6.01 form. If an adoptive family obtains a new SSN for the child at finalization, states must use the new SSN issued by the Social Security Administration. The SSN issued at birth is to be used during the waiting period for a new SSN requested at adoption finalization.

AAICAMA greatly appreciates your attention and assistance in this matter. Please do not hesitate to contact Stephanie Pettaway at 410.767.7506 (SPettawa@dhr.state.md.us) or Sharon McCartney at 202/682-0100 x 253 (SMcCartney@aphsa.org) if you have any questions or need assistance.

Building Bridges Across State Lines:
The Interstate Compact on
Adoption & Medical Assistance (ICAMA)

Frequently Asked Questions
2010

The Association of Administrators of the
Interstate Compact on Adoption and Medical Assistance (AAICAMA)

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FAQs

*The of CW Policy Manual
Section 8.2A.1- 8.2E
(IV-E Adoption Assistance program) *
is available on the ACF website at:
http://www.acf.hhs.gov/programs/cb/laws/cwpm/poliy_dsp_pf.jsp?id=8

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When can adoption assistance (AA)
begin?

- Many states (37) allow AA to begin prior to adoption finalization (e.g., at placement in the adoptive home)
- Some states (11) provide AA at adoption finalization

Go to the Child Welfare Information Gateway website at: <http://www.childwelfare.gov> for current information

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Which state is responsible for entering into an adoption assistance agreement (AAA) in interstate adoptions?

- If the state agency has responsibility for placement & care of a child, that state is responsible for entering into the AAA & paying the Title IV-E assistance, even if child is placed into adoptive home in another state.
- If state agency does not have responsibility for placement/care, it is the adoptive parents' state of residence where the AA application must be made.

See the CW Policy Manual at section 8.2A.1: Agreements, Interstate placements, Question #1

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What if a family moves to a different state while the AAA is still in effect?

- Any adoption assistance agreement (AAA) shall remain in effect regardless of the state of which the adoptive parents are residents at any given time.
- The state which enters into AAA must take measures to assure that the terms of the agreement are met.

See the CW Policy Manual at section 8.2A.1: Agreements, Interstate placements, Question #2

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Does a child need to be continuously eligible for AFDC during their period in FC in order to be eligible for AA after TPR?

- No, the child does not need to have been continuously eligible for IV-E Foster Care during tenure in Foster Care prior to initiation of adoption proceedings. The crucial time for meeting eligibility requirements for AFDC are at one point:
 1. **removal**

See the CW Policy Manual at section 8.2B: Eligibility, Question #2

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Does title IV-E require the state or local agency to perform annual renewals or eligibility re-determinations for AA?

- No. Federal law does not require annual renewals or re-certifications of eligibility for title IV-E AA.
- Once a child is determined eligible and receives AA, s/he remains eligible until age 18 (or 21, at state determination that the individual special needs of the child warrant continuation) unless the parent:
 1. Is no longer legally responsible for the child
 2. No longer provides any support to the child

See the CW Policy Manual at section 8.2B.9: Eligibility, Redeterminations, Question #2

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Must a child be in state custody to be eligible for title IV-E AA?

- No, the eligibility requirements for IV-E AA do *not* specify that the state public agency must have placement and care responsibility for a child to qualify for AA.

See the CW Policy Manual at section 8.2B.10: Eligibility, Responsibility for placement and care, Question #1

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Are there restrictions on how title IV-E AA funds may be spent?

- No. Once the AAA is signed and the child is adopted, the adoptive family is free to make expenditure decisions without further agency approval or oversight and the state cannot require an accounting of the expenditures.
- The amount of assistance may be adjusted periodically if there is a change in family circumstance, *but only with the concurrence of the adoptive family.*

See the CW Policy Manual at section 8.2D.1: Payments, Allowable costs, Question #1

See also 8.2D.4: Payments, Rates, Question #2 (It is impermissible for a state to include list of circumstances in the AAA under which it can automatically reduce AA rates)

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Can a state agency automatically suspend the AA payment for the duration of an adopted child's placement in FC and reinstate upon child's return home?

- No. An automatic suspension is, in effect, a termination of the AA payment and is impermissible under section 473(a)(3)(B) if the parent is legally responsible or providing any support to the child.
- However, renegotiation of payment amount is possible *with the concurrence of the adoptive family.*

See the CW Policy Manual at section 8.2D.5: Payments, Termination, Question #3

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The Association of Administrators of the Interstate Compact
on Adoption and Medical Assistance, Inc.



AAICAMA

COBRA Option/Reciprocity as of September 2009

STATE	COBRA Option Elected	COBRA-reciprocity extended	COBRA-reciprocity extended to children from		STATE	COBRA Option Elected	COBRA-reciprocity extended	COBRA-reciprocity extended to children from	
			All States	ICAMA member states				All States	ICAMA member states
AK	Yes	Yes	▪		MS	Yes	Yes	▪	
AL	Yes	Yes		▪	MT	Yes	Yes		▪
AR	Yes	Yes	▪		NC	Yes	Yes		▪
AZ	Yes	Yes	▪		ND	Yes	Yes		▪
CA	Yes	Yes	▪		NE	Yes	No		
CO	Yes	Yes	▪		NH	Yes	No		
CT	Yes	Yes		▪	NJ	Yes	Yes		▪
DC	Yes	No			NM	No	No		
DE	Yes	Yes	▪		NV	Yes	No		
FL	Yes	Yes		▪	NY	Yes	Yes	▪*	
GA	Yes	Yes	▪		OH	Yes	Yes	▪	
HI	Yes	No			OK	Yes	Yes	▪	
IA	Yes	Yes		▪*	OR	Yes	Yes	▪	
ID	Yes	Yes	▪		PA	Yes	Yes	▪*	
IL	Yes	No			RI	Yes	Yes		▪
IN	Yes	Yes	▪		SC	Yes	Yes	▪	
KS	Yes	Yes	▪		SD	Yes	Yes	▪	
KY	Yes	Yes		▪	TN	Yes	Yes	▪	
LA	Yes	Yes	▪		TX	Yes	Yes	▪	
MA	Yes	Yes	▪		UT	Yes	Yes		▪
MD	Yes	Yes	▪		VA	Yes	Yes		▪
ME	Yes	Yes	▪		VT	Yes	Yes	▪	
MI	Yes	Yes	▪		WA	Yes	Yes	▪	
MN	Yes	Yes	▪		WI	Yes	Yes	▪	
MO	Yes	Yes	▪		WV	Yes	Yes	▪	
					WY*	Yes	Yes	▪	

Key

WY* is not a signatory to the ICAMA

Reciprocity not offered

▪* These states offer Cobra-reciprocity to children from states who offer the same benefit to children from their states.

Interstate Compact on Adoption and Medical Assistance (ICAMA)

ICAMA Guidelines for Adoption Workers

When a child moves or is placed with a family outside the adoption assistance (AA) state

Each state party to the Interstate Compact on Adoption and Medical Assistance (ICAMA) has a designated compact administrator to manage day-to-day administration of the compact.

If you have any questions, don't hesitate to pick up the phone and contact your state's ICAMA administrator. To contact AAICAMA call 202-682-0100

Does ICAMA apply?

The answer is yes if:

- | | |
|-----------------------------|---|
| a. <input type="checkbox"/> | The child has an adoption assistance agreement in effect |
| b. | AND One of the following situations exist: |
| <input type="checkbox"/> | the child is being placed with an adoptive family in another state (and written approval has been obtained "to place" the child under the Interstate Compact on the Placement of Children (ICPC)).* |
| | OR |
| <input type="checkbox"/> | the child is moving to another state with his/her adoptive family after finalization. |

If you have checked **both a and one box under b** ICAMA does apply.

What is the ICAMA protocol in your state? To find out:

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Ask your supervisor how the ICAMA process is initiated in your state . <i>This is important because the process varies by state.</i> |
| <input type="checkbox"/> | Ask specifically what your role is in the ICAMA process. |
| <input type="checkbox"/> | Ask what forms & documents you are required to prepare. |

ICAMA Process: An Overview

Required ICAMA Form and Document:

NOTE: Two documents are necessary to initiate the ICAMA process

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Adoption Assistance Agreement (AAA) – copy of the child's most recent AAA |
| <input type="checkbox"/> | ICAMA 6.01 – This form notifies the new resident state that a child covered by an adoption assistance agreement with another state has moved or is moving into that state and may be eligible for to receive Medicaid from the new state. The child's ability to receive Medicaid from the new state depends on whether the child is eligible for Title IV-E or state-funded adoption assistance (AA): |
| <input type="checkbox"/> | If Title IV-E eligible: the child is automatically eligible for Medicaid from the new state. |
| <input type="checkbox"/> | If state-funded eligible (i.e., non IV-E): the child is not guaranteed Medicaid from the new state. The child will receive Medicaid from the new state only : |
| <input type="checkbox"/> | If the new state has a policy of COBRA-reciprocity AND it extends reciprocity to your state; then the child will receive Medicaid as it is offered in the new state. |

If the child is being placed for adoption with a family in another state, a family assessment and written approval to place the child must be obtained through the Interstate Compact on the Placement of Children (ICPC) **BEFORE the ICAMA process can be initiated. If the ICPC process has not been initiated/completed, contact your state ICPC Administrator*

Interstate Compact on Adoption and Medical Assistance (ICAMA)
ICAMA Guidelines for Adoption Workers

The ICAMA Process specifically	
<i>Depending on your state, your responsibilities for the ICAMA process will likely follow one of the two approaches described below:</i>	
A	1. You will call and notify your state ICAMA Compact Administrator (ICA) of a child's placement or move to another state, and 2. You will forward a copy of the most recent AAA to your compact administrator. The ICA will complete the 6.01 and forward both documents to the ICA in the new state.
OR	
B	You or another agency worker will be responsible for completing the ICAMA 6.01. <i>Below is the information needed to complete the ICAMA 6.01</i>
Section A <i>Child Identifying Information</i>	
<input type="checkbox"/>	Child(ren)'s name, valid Social Security number(SSN) , birth date, gender, race, and ethnicity. (<i>You can enter up to 3 children from the same family on one form</i>) <i>Note: pseudo SSNs are not acceptable.</i>
<input type="checkbox"/>	Adoptive parents' name, race, and ethnicity.
<input type="checkbox"/>	Current adoptive family's address.
<input type="checkbox"/>	Adoptive family's address in the new state.
<input type="checkbox"/>	Basis of Medicaid eligibility for each child (<i>i.e., Title IV-E, SSI, etc.</i>).
<input type="checkbox"/>	Date requested for MA opening in new state.
Section B <i>Medicaid coverage for children eligible for state-funded AA: to be completed by your state's ICA</i>	
<input type="checkbox"/>	Does the new state offer Medicaid coverage for state-funded AA eligible children.
Section C <i>Other medical coverage</i>	
<input type="checkbox"/>	Continued eligibility for other medical assistance from AA state.
<input type="checkbox"/>	Other Medical Coverage thru SSI, third party coverage, Tri-Care, or private insurance.
Section D <i>Referral information: to be completed by your state's ICA</i>	
Section E <i>Certification: to be completed by your state's ICA</i>	
Your state's ICA will then forward the ICAMA 6.01 and a copy of the AAA to the ICA in the new residence state and will send a copy of the ICAMA 6.01 to the adoptive parents.	
Your state's ICA administrator will also send the ICAMA 6.02 to the adoptive parents to inform them that the new resident state was notified of the move or placement.	
Remember... When in doubt, pick-up the phone and talk with your ICAMA administrator.	

Interstate Compact on Adoption and Medical Assistance (ICAMA)
ICAMA Guidelines for Adoption Workers

The ICAMA Process: Keeping Parents informed and prepared	
Talk with the parents after you have forwarded the ICAMA 6.01 and AAA to your state's compact administrator:	
<input type="checkbox"/>	Inform the parents that necessary paperwork for the child has been completed and will be sent to the new state of residence and that they will receive copies.
<input type="checkbox"/>	If the child is receiving state-funded (i.e., non-IV-E) adoption assistance from your state, talk with the parents about how medical services and benefits may be provided in the new state of residence.
<input type="checkbox"/>	If the child is receiving state-funded adoption assistance from your state, tell parents that the new state may require citizenship and identity documents for the child to meet new Medicaid requirements.
<input type="checkbox"/>	If the child has been receiving Medicaid from your state, explain that the Medicaid services offered in the new state may differ from those offered by your state.
<input type="checkbox"/>	Inform the parents that it can take up to 45 days (depending on the new state's internal procedures) to obtain a new Medicaid card in new state of residence. They may need to refill a child's medications before they move to the new state.
<input type="checkbox"/>	If the parents have any questions about the new Medicaid card or available services,** they should contact the ICA in the new state of residence, whose name and contact information are on Section D of the ICAMA 6.01.
<input type="checkbox"/>	If the child is receiving an adoption assistance payment from your state, be sure you have the correct mailing address(es) of the new or any interim residences.
NOTES:	
**	Additional state-specific information on available services can be found on the Adoption Assistance state pages at: http://www.childwelfare.gov/adoption/adopt_assistance/

INTERSTATE COMPACT ON ADOPTION AND MEDICAL ASSISTANCE

TEXT AND COMMENTARY

This Commentary is an explanation of the individual provisions of the Compact. It supplies background and interpretation except where a provision is entirely self explanatory, there is a specific comment, interpretation or other informational statement provided. In a few instances, the comments are on entire Articles. For the most part, however, they are written on a provision-by-provision basis. (The Compact text appears in Italic type and the Commentary in Roman type.)

ARTICLE I. FINDINGS

The states which are parties to this Compact find that:

- (a) *In order to obtain adoptive families for children with special needs, states must assure prospective adoptive parents of substantial assistance (usually on a continuing basis) in meeting the high costs of supporting and providing for the special needs and the services required by such children.*
- (b) *The states have a fundamental interest in promoting adoption for children with special needs because the care, emotional stability, and general support and encouragement required by such children can be best, and often only, obtained in family homes with a normal parent-child relationship.*
- (c) *The states obtain fiscal advantages from providing adoption assistance because the alternative is for the states to bear the higher cost of meeting all the needs of children while in foster care.*
- (d) *The necessary assurances of adoption assistance for children with special needs, in those instances where children and adoptive parents live in states other than the one undertaking to provide the assistance, include the establishment and maintenance of suitable substantive guarantees and workable procedures for interstate cooperation and payments to assist with*

the necessary costs of child maintenance, the procurement of services, and the provision of medical assistance.

ARTICLE II. PURPOSES

The purposes of this Compact are to:

- (a) Strengthen protections for the interests of children with special needs on behalf of whom adoption assistance is committed to be paid, when such children are in or move to states other than the one committed to provide adoption assistance.*
- (b) Provide substantive assurances and operating procedures which will promote the delivery of medical and other services to children on an interstate basis through programs of adoption assistance established by the laws of the states which are parties to this Compact.*

COMMENTARY

ARTICLES I AND II

Strictly speaking, Findings and Purposes provisions are said to be non-operational parts of the laws or other legal documents in which they appear. Nevertheless, they are important. They are used by administrators, courts, affected persons and others as aids to the interpretation and meaning of the document (in this case the Compact). They also can help to explain the reasons for the Compact.

Articles I and II of this Compact contain at least three important types of explanatory material:

- (i) advantages for children and adoptive parents.
- (ii) advantages for the states.
- (iii) declarations (later elaborated) that the Compact relates to special needs children who are or may come to be the subjects of adoption assistance agreements.

An additional attribute of these two Articles is that they expressly set forth the objectives of the Compact, i.e. to provide interstate services, protections and guarantees for the class of children

covered. Section 475 of the Adoption Assistance and Child Welfare Act of 1980 (Public Law 96-272) requires that the states assure protection of the interstate interests of adoption assistance children as a requisite for federal financial contribution to the state Adoption Assistance and Medicaid Programs. It also expressly refers to an interstate compact as a means of satisfying the federal requirement.

ARTICLE III. DEFINITIONS

As used in this Compact, unless the context clearly requires a different construction:

(a) *"Child with special needs" means a minor who has not yet attained the age at which the state normally discontinues children's services, or a child who has not yet reached the age of 21 where the state determines that the child's mental or physical handicaps warrant the continuation of assistance beyond the age of majority, for whom the state has determined the following:*

1. *That the child cannot or should not be returned to the home of his or her parents;*
2. *That there exists with respect to the child a specific factor or condition (such as his ethnic background, age, or membership in a minority or sibling group, or the presence of factors such as medical condition or physical, mental, or emotional handicaps) because of which it is reasonable to conclude that such child cannot be placed with adoptive parents without providing adoption assistance;*
3. *That, except where it would be against the best interests of the child because of such factors as the existence of significant emotional ties with prospective adoptive parents while in their care as a foster child, a reasonable but unsuccessful effort has been made to place the child with appropriate adoptive parents without providing adoption assistance.*

(b) *"Adoption assistance" means the payment or payments for the maintenance of a child which are made or committed to be made pursuant to the adoption assistance program established*

by the laws of a party state.

- (c) *"State" means a state of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, the Commonwealth of the Northern Mariana Islands, or a Territory or Possession of the United States.*
- (d) *"Adoption assistance state" means the state that is signatory to an adoption assistance agreement in a particular case.*
- (e) *"Residence state" means the state in which the child is a resident by virtue of the residence of the adoptive parents.*
- (f) *"Parents" means either the singular or plural of the word "parent".*

COMMENTARY

ARTICLE III

Words and phrases in the Compact are to be taken as having their normal English meanings, unless they are specially defined in the Compact. Article III provides several such special definitions. Whenever these words and phrases appear in the text of the Compact, the meaning ascribed to them is that contained in the definition of the term found in this Article. However, a precautionary exception is made by the lead-in phrase at the very beginning of the Article. If to apply the definition contained in Article III would be clearly wrong in view of the context in which it appears, then the normal English meaning is to be used.

(a) "Child With Special Needs"

These are the children who are frequently referred to as the "hard to place." The reasons for difficulties in obtaining suitable family placements for them are set forth in the definition. Also, the definition contains an important test to be applied, i.e., except in certain cases of children in foster care, reasonable efforts to place the child in a non-subsidized adoption

must have been made. These efforts, or the acceptable reason for not making them, should be documented in the case file.

(b) Adoption Assistance

Children in subsidized adoption programs of the states may receive a variety of services and benefits designed to make it more feasible for the would-be parents to undertake the adoption and thereafter to aid them in providing proper care and upbringing. Medical assistance (including Medicaid) is expressly dealt with in the Compact. Other services and benefits when provided on an interstate basis may be implemented pursuant to the Compact or by supplementary agreements developed pursuant to Articles IV and VI. This definition confines the meaning of "adoption assistance," as used in the Compact, to the type of aid described therein and is not to be interpreted to mean any of these other kinds of aid, some of which are referred to in Article IV (d).

(c) State

This definition determines which jurisdictions may become members of the Compact because Article VII provides that joinder is open to "states." Since there are a number of jurisdictions other than the 50 states which are part of the United States or administered by the United States, it is expressly provided that they, as well as each of the states, have the opportunity to participate on the same basis as states. While each of the 50 states has adopted more compacts than other jurisdictions, these other governmental units sometimes participate, if allowed by the Compact text and by their own laws to do so. The purpose of this broad definition of "state" is to make participation possible by all United States jurisdictions or United States administered entities having appropriate kinds of child welfare programs.

(d) Adoption Assistance State

The Compact deals with children and adoptive parents upon whom rights and obligations are conferred by and in states other than the one which has signed the adoption assistance agreement. Consequently, it needs to be clear that the adoption assistance state is the one which has signed the agreement which creates the rights and obligations, even when that

state may not be the one providing or administering some of the services or benefits received.

(e) Residence State

This term is defined to make clear the identity of the state obligated to provide Medicaid eligibility and certain other services and benefits which may be instituted pursuant to supplementary agreements.

(f) Parents

It is normally understood in a legal document that the singular of a term may include the plural and vice-versa. In this case, coverage of both single and married adults is particularly important so as to recognize that single parents may adopt or may have adopted children under adoption assistance programs. However, eligibility to adopt a child and determinations in individual cases concerning eligibility and the consummation of the adoption are matters addressed by the individual state laws and procedures.

ARTICLE IV. ADOPTION ASSISTANCE

(a) *Each state shall determine the amounts of adoption assistance and other aid which it will give to children with special needs and their adoptive parents in accordance with its own laws and programs. The adoption assistance and other aid maybe made subject to periodic reevaluation of eligibility by the adoption assistance state in accordance with its laws.*

(b) *The adoption assistance, medical assistance, and other services and benefits to which this Compact applies are those provided to children with special needs and their adoptive parents from the effective date of the adoption assistance agreement.*

(c) *Every case of adoption assistance shall include a written adoption assistance agreement between the adoptive parents and the appropriate agency of the state undertaking to provide the adoption assistance. Every such agreement shall contain provisions for the fixing of actual or potential interstate aspects of the assistance so provided as follows:*

1. *An express commitment that the assistance so provided shall be payable without regard for the state of residence of the adoptive parents, both at the outset of the agreement period and at all times during its continuance;*
 2. *A provision setting forth with particularity the types of care and services toward which the adoption assistance state will make payments;*
 3. *A commitment to make medical assistance available to the child in accordance with Article V of this Compact;*
 4. *An express declaration that the agreement is for the benefit of the child, the adoptive parents and the state and that it is enforceable by any or all of them; and*
 5. *The date or dates upon which each payment or other benefit provided thereunder is to commence, but in no event prior to the effective date of the adoption assistance agreement.*
- (d) *Any services or benefits provided for a child by the residence state and the adoption assistance state may be facilitated by the party states on each other's behalf. To this end, the personnel of the child welfare agencies of the party states will assist each other, as well as the beneficiaries of adoption assistance agreements, in assuring prompt and full access to all benefits expressly included in such agreements. It is further recognized and agreed that, in general, all children to whom adoption assistance agreements apply will be eligible for benefits under the child welfare, education, rehabilitation, mental health, and other programs of their state of residence on the same basis as other resident children.*
- (e) *Adoption assistance payments on behalf of a child in another state shall be made on the same basis and in the same amounts as they would be made if the child were living in the state making*

the payments, except that the laws of the adoption assistance state may provide for the payment of higher amounts.

COMMENTARY

ARTICLE IV

- (a) The Compact does not specify the kinds or amounts of assistance which states must give adoption assistance children or their adoptive parents. That is left to state law in each party state. It follows that the services and benefits which each state will provide pursuant to the Compact and its other laws can (and almost certainly will) vary from state to state, depending on the content of its programs. This provision is an express statement which results in that conclusion. However, each party state has a Medicaid Program. Under the Compact, each party state must provide Medicaid eligibility for each resident child covered by an adoption assistance agreement (whether one signed by that state or another Compact state). For an elaboration of this point, see Article V. Its interstate commitments for other kinds of adoption assistance related services and benefits may be set forth in supplementary agreements to the Compact to which it may be signatory.
- (b) Normally, the child will be placed after the adoption assistance agreement has been executed by the subsidizing state agency and the adoptive parents. If it is decided that foster parents will be given a subsidy to enable them to adopt the child, physical presence in the adoptive home will antedate execution of the agreement. In any case, the prospective adoptive parents usually will begin to care for the child and provide for its needs before the adoption is consummated. Unless the adoption assistance agreement fixes a later time, the services provided by the adoption assistance state and by the residence state can begin upon the execution of the agreement.
- (c) Adoption assistance agreements are key legal documents which contain the elements of the subsidy commitment. This provision specifies the items which must be present in such agreements to afford the interstate protections which it is the purpose of the Compact to assure. As mentioned previously in this Commentary, federal law also requires that the state protect the interstate interests of the children involved as an element of qualification for federal contribution to state adoption

assistance and Medicaid programs.

- (d) The Compact is an agreement having the force of law. Therefore, the officers and employees of the party states will cooperate with one another in seeing that the interstate services and benefits in interstate cases will be properly provided. This cooperation is not a matter of courtesy as many acts performed at the request of agencies in other states may be. Cooperation under the Compact and pursuant to the pledge represented by this provision is a legal obligation. Its implementation will be informal and develop as a matter of practice in many instances. Over time, cooperative practices could also be implemented under supplementary agreements.

The last sentence of the provision does not create any new rights, but it is useful as a specific declaration and confirmation of the situation under existing law. Since the legal residence of a child normally follows that of the parents, the children adopted with the aid of subsidies are residents of the state in which their parents reside. Consequently, they are eligible for the state services and benefits mentioned in this sentence customarily provided children who are state residents. Any services which continue to be the responsibility of the adoption assistance state will be identified in the adoption assistance agreement, laws of the adoption assistance state, or in agreements supplementary to the Compact.

- (e) States have sometimes sought to confine some aspects of their financial obligations to recipients living within their own state. Whether or not such limitations are appropriate in some other programs, they are contrary to the purposes of adoption assistance programs and inconsistent with the Compact and with the requirements of federal law that states assure the protection of the interstate interests of the child. Consequently, this provision assures adoption assistance children and their adoptive parents that payments to which the adoption assistance state is committed will be forthcoming on no less favorable a basis than if the adoptive family were in the adoption assistance state. The permissive wording with regard to the possibility of increased payments is in recognition of the likelihood that circumstances, e.g., a higher cost of living in the Resident State, may necessitate subsidy payments above the rates applicable in the adoption state.

ARTICLE V. MEDICAL ASSISTANCE

- (a) *Children for whom a party state is committed, in accordance with the terms of an adoption assistance agreement to provide federally aided medical assistance under Title XIX of the Social Security Act, are eligible for such medical assistance during the entire period for which the agreement is in effect. Upon application therefore, the adoptive parents of a child who is the subject of such an adoption assistance agreement shall receive a medical assistance identification document made out in the child's name. The identification shall be issued by the medical assistance program of the residence state and shall entitle the child to the same benefits, pursuant to the same procedures, as any other child who is covered by the medical assistance program in that state, whether or not the adoptive parents are themselves eligible for medical assistance.*
- (b) *The identification document shall bear no indication that an adoption assistance agreement with another state is the basis for its issuance. However, if the identification is issued pursuant to such an adoption assistance agreement, the records of the issuing state and the adoption assistance state shall show the fact, and shall contain a copy of the adoption assistance agreement and any amendment or replacement thereof, as well as all other pertinent information. The adoption assistance and medical assistance programs of the adoption assistance state shall be notified of the issuance of such identification.*
- (c) *A state which has issued a medical assistance identification document pursuant to this Compact, which identification is valid and currently in force, shall accept, process and pay medical assistance claims thereon as it would with any other medical assistance claims by eligible residents.*
- (d) *The federally aided medical assistance provided by a party state pursuant to this Compact shall be in accordance with paragraphs (a) through (c) of this Article. In addition, when a child who is covered by an adoption assistance agreement is living in another party state, payment or reimbursement for any medical services and benefits specified under the terms of the adoption assistance agreement, which are not available to the child under the Title XIX*

medical assistance program of the residence state, shall be made by the adoption assistance state as required by its law. Any payments so provided shall be of the same kind and at the same rates as provided for children who are living in the adoption assistance state. However, where the payment rate authorized for a covered service under the medical assistance program of the adoption assistance state exceeds the rate authorized by the residence state for that service, the adoption assistance state shall not be required to pay the additional amounts for the services or benefits covered by the residence state.

- (e) *A child referred to in paragraph (a) of this Article, whose residence is changed from one party state to another party state shall be eligible for federally aided medical assistance under the medical assistance program of the new state of residence.*

COMMENTARY

ARTICLE V

- (a) A child who is the beneficiary of an adoption assistance agreement is entitled to eligibility for Medicaid. The question of eligibility is separate from the eligibility status of the parents. Thus, it frequently happens that the child should have a Medicaid card but that neither the parents nor any other family member is eligible for Medicaid.

The Compact first came into effect on January 31, 1986 as law among nine states which signed it at that time. Prior to that date, it was the law throughout the country that Medicaid for adoption assistance children was provided by the adoption assistance state. Since the Consolidated Omnibus Budget Reconciliation Act Amendments to Titles IV-E and XIX (P.L. 98-272) became effective on October 1, 1986, the obligations of the residence state to provide Medicaid for adoption assistance children covered by agreements signed by other states is consistent with the federal law applicable to federal financial contribution to state adoption assistance and Medicaid programs.

The provision uses the phrase "medical assistance identification document" rather than "Medicaid card" because the formats for identifications may differ in different states. In fact,

some states issue separate cards or other identifications for medical services and for prescriptions. Since the children to whom Article V applies are entitled to all of the services and benefits of the residence state's Medicaid program, they are to receive all of the Medicaid identifications received by other Medicaid recipients in the state program.

- (c) This is a declaratory statement which reinforces the child's entitlement.
- (d) Some adoption assistance states undertake to provide, in their adoption assistance agreements, medical assistance in addition to Medicaid to which the federal government contributes. Where the laws of a state so provide, this additional medical assistance is required to be made available to children who are in other Compact states pursuant to the adoption assistance agreements executed by the adoption assistance states party to the Compact. A state which provides only federally assisted Medicaid is not obligated to provide anything more by virtue of this provision. Further, it is important to note that where a service or benefit is covered by the program of the residence state at a lower rate, the adoption assistance state, is not required to make up the difference.
- (e) This provision complements Paragraph (a) of the Article and is in further explanation of it.

ARTICLE VI. COMPACT ADMINISTRATION

- (a) *In accordance with its own laws and procedures, each state which is a party to this Compact shall designate a Compact Administrator and such Deputy Compact Administrator as it deems necessary. The Compact Administrator shall coordinate all activities under this Compact within his or her state. The Compact Administrator shall also be the principal contact for officials and agencies within and without the state for the facilitation of interstate relations involving this Compact and the protection of benefits and services provided pursuant thereto. In this capacity, the Compact Administrator will be responsible for assisting child welfare agency personnel from other party states and adoptive families receiving adoption and medical assistance on an interstate basis.*
- (b) *Acting jointly, the Compact Administrators shall develop uniform forms and administrative*

procedures for the interstate monitoring and delivery of adoption and medical assistance benefits and services pursuant to this Compact. The forms and procedures so developed may deal with such matters as:

- 1. Documentation of continuing adoption assistance eligibility;*
- 2. Interstate payments and reimbursements; and*
- 3. Any and all other matters arising pursuant to this Compact.*

(c) (1) Some or all of the parties to this Compact may enter into supplementary agreements for the provision of or payment for additional medical benefits and services, as provided in Article V (d); for interstate service delivery, pursuant to Article IV (d); or for matters related thereto. Such agreements shall not be inconsistent with this Compact, nor shall they relieve the party states of any obligation to provide adoption and medical assistance in accordance with applicable state and federal law and the terms of this compact.

(2) Administrative procedures or forms implementing the supplementary agreements referred to in paragraph (c)(1) of this Article may be developed by joint action of the Compact Administrators of those states which are party to such supplementary agreements.

(d) It shall be the responsibility of the Compact Administrator to ascertain whether and to what extent additional legislation may be necessary in his or her own state to carry out the provisions of this Article or any supplementary agreements pursuant to this Compact.

COMMENTARY

ARTICLE VI.

(a) Unless otherwise specifically provided by the laws of a state, its designation of a Compact Administrator should be an action of the chief executive officer of the state department or agency in which the Compact is being administered. If, however, a legislative enactment has

determined who shall be the Compact Administrator, that enactment governs. Normally, the head of a state welfare or human services agency who undertakes to serve as Compact Administrator will not perform the day-by-day tasks of administering the Compact in person. or that matter, heads of major divisions of a large state agency may not perform them in person. Designation of one or more Deputy Compact Administrators is a practical step to provide for proper exercise of authority in accordance with accepted principles of administration. Of particular importance for this Compact is the fact that it involves at least two major service areas, (and perhaps more): (1) adoption assistance, and (2) medical assistance. If the Compact Administrator comes from one of these parts of the Department, or if these two types of services are administered by different agencies or units, it may be desirable to designate a Deputy Compact Administrator from the other service field. If the overall head of the Department is the Compact Administrator, it is likely to be desirable to have a Deputy Compact Administrator from each of the two or more programs involved. There may also be other professional employees in the offices of the Compact Administrator or Deputy Compact Administrator who assist in performing operational tasks under the Compact. It is not necessary to designate them as Deputies. They can function under the ordinary rules for administrative delegation and supervision in effect in the state agency involved. However, it is important to note that for purposes of this Compact's Administrators Association which is the vehicle for joint action pursuant to Article VI (b) of the Compact, only Compact Administrators and Deputy Compact Administrators can vote.

- (b) The performance of many functions, especially those involving individual cases and the basic methods for handling certain types of cases requires uniformity or consistency among the Compact states. Continuity in administrative processes is necessary because agencies of two or more states rather than only one are involved. Forms and procedures adopted by joint action pursuant to this provision are to be used by the state agencies and, where appropriate by other affected persons and entities, in processing matters to which the Compact applies. Their use is an important part of the contractual obligations undertaken by Compact member states.
- (c) (1) Some or all of the party states may wish to use the framework of the Compact to effect

other interstate service deliveries for adoption assistance children which are not expressly or sufficiently provided for in the basic Compact (Articles I-VIII). It is likely that such additional services or benefits will be initiated by less than all of the party states. It is possible that once a supplementary agreement has been placed in initial operation, other states will decide that they wish to participate. Thus the membership in a supplementary agreement may grow. If participation reaches 100 percent of the Compact membership, the supplementary agreement may become virtually a part of the basic Compact. However, a supplementary agreement which has less than all of the Compact members as parties is an additional agreement of a related character. If provisions of the supplementary agreement were inconsistent with the basic Compact, or if actions under it undercut or interfered with the operation of the basic Compact and obligations assumed under it breaches and violations of the basic Compact would occur. This would especially be the case if they impaired rights and obligations undertaken toward or possessed under the Compact by states not party to the supplementary agreement. This provision is not only designed to authorize supplementary agreements from interfering with the Compact as in effect among all the party states.

- (c) (2) This is a parallel provision to Paragraph (b) of this Article. The reasons for it are similar to those for Paragraph (b).
- (d) Most of the states party to the Compact have executed it on the basis of statutory authority which is broad enough to authorize the appropriate state officials to make the commitments embodied in the basic Compact. Their laws (the statute authorizing the Compact and other statutes) also provide sufficient legislative authorization for the commitments undertaken in Article V of the Compact. Some states have enacted Compact texts on the basis of which they have been able to execute the Compact provisions for which this is a Commentary. Since the content of supplementary agreements (not formulated at the time when the basic Compact first came into effect) could not be known, a comprehensive determination could not be made as to whether particular supplementary agreements which might be developed in the future would be such as administrative officials of all the states wishing to participate in them could bind their states to observe. Consequently, this provision places the responsibility for determining whether the then existing statutory authority possessed by the

state agency or agencies which contemplate signing on behalf of their state is sufficient to enable them to execute the supplementary agreement in question in a particular instance. Each Compact Administrator will determine this for his or her own state's situation when considering whether to sign a supplementary agreement.

ARTICLE VII. JOINDER AND WITHDRAWAL

- (a) *This Compact shall be open to joinder by any state. It shall enter into force as to a state when its duly constituted and empowered authority has executed it.*
- (b) *In order that the provisions of this Compact may be accessible to and known by the general public, and so that they may be implemented as law in each of the party states, the authority which has executed the Compact in each party state shall cause the full text of the Compact and a notice of its execution to be published in his or her state. The executing authority in any party state shall also provide copies of the Compact upon request.*
- (c) *Withdrawal from this Compact shall be by written notice, sent by the authority which executed it, to the appropriate officials of all other party states, but no such notice shall take effect until one year after it is given in accordance with the requirements of this paragraph.*
- (d) *All adoption assistance agreements outstanding and to which a party state is a signatory at the time when its withdrawal from this compact takes effect shall continue to have the effects given to them pursuant to this Compact until they expire or are terminated in accordance with their provisions. Until such expiration or termination, all beneficiaries of the agreements involved shall continue to have all rights and obligations conferred or imposed by this Compact, and the withdrawing state shall continue to administer the Compact to the extent necessary to accord and implement fully the rights and protections preserved hereby.*

COMMENTARY

ARTICLE VII

- (a) The phrase "duly constituted and empowered authority" means the person who has the

authority under the laws of his or her state to bind the state to the terms of the Compact. Those states which have enacted legislation authorizing the execution of an Adoption and Medical Assistance Compact will also have identified the department or agency head who may execute the Compact on behalf of the State. Most Compacts in recent years have been entered into by enactment of their texts by the state legislatures. However, administrative officials may receive delegations of power to enter into Compacts having the force of law. These delegations are contained in statutes. Many older Compacts use this execution method. The special reasons why it has been used in the case of this Compact are set forth in materials prepared by the Secretary to the Association of Administrators of the Interstate Compact on Adoption and Medical Assistance now in its keeping. In the case of those states which have enacted a Compact text, the authority to execute the present Compact stems from the common elements in the Compact text enacted by the Legislature and the determination that any additional or different commitments are not beyond the general authority of the officer who has executed or may execute the Compact.

- (b) This provision is self explanatory. The procedures to be followed for publication of notices will depend on the usages in each state.
- (c) One of the basic legal characteristics of the Compact is that it is a contract. If a contract sets the terms and procedures on which a party may withdraw from the agreement, withdrawals must be in accordance with the prescribed procedures.
- (d) As noted earlier, a prime purpose of the Compact is to provide protection of the interstate interests of adoption assistance children. This paragraph of the Article is part of those protections and reinforces them. The party states commit themselves to assure the stability of existing adoption assistance agreements. The one year withdrawal provision of this Article is also intended to assure that if there are any disruptions of the programs and arrangements on which children and their adoptive parents have depended, they will not occur precipitously. This provision should be read in conjunction with provisions of Article IV which set forth required contents of adoption assistance agreements for protecting the interstate interests of children and which expressly make adoption assistance agreements

legally enforceable by the children and their adoptive parents, as well as by the adoption assistance states.

ARTICLE VIII. CONSTRUCTION AND SEVERABILITY

The provisions of this Compact shall be liberally construed to effectuate the purposes thereof. The provisions of this Compact shall be severable, and if any phrase, clause, sentence, or provision of this compact is declared to be contrary to the Constitution of the United States or of any party state, or where the applicability thereof to any government, agency, person, or circumstance is held invalid, the validity of the remainder of this Compact and the applicability thereof to any government, agency, person or circumstance shall not be affected thereby. If this Compact shall be held contrary to the constitution of any state party thereto, the Compact shall remain in full force and effect as to the remaining states and in full force and effect as to the state affected as to all severable matters.

COMMENTARY

ARTICLE VIII.

This is a technical provision. While the Compact has been developed carefully with thought to matters of constitutionality, controversies concerning any law can arise. Since the Compact and supplementary agreements which may be entered into thereunder deal or could deal with many different matters, it is important to establish that the parties will remain bound to all remaining parts of the Compact, even if the participation of one of the parties or the validity of one aspect of the contract is called into question successfully.

The Article also provides that the Compact shall be liberally construed. There are a number of legal rules for the interpretation of legal documents and laws. Some of them tend to narrow the scope or applicability of a law, while others give it more effect. Since the purpose of the Compact is to protect special needs children and to improve their opportunities to find adoptive families who will care for them and see to their upbringing, the party states have declared, as part of their agreement, that the document is to be interpreted broadly in favor of children and their adoptive parents.