

Medical Plan for ICPC Placement

The Public Consulting Group will help DCF staff to determine the Title IV-E Eligibility of a child. If a child is IV-E eligible and will be placed out of state, the IV-E eligibility will assure access to a Medicaid card in that state.

New PCG Contact Info:

Email: ICPCMA@pcgus.com

Hotline: 617-717-1280

A referral should contain the following information:

- FamilyNet Case ID
- Child's Name, SSN and DOB
- Social Workers Name, Full Phone Number, Area Office

As of October 1, 2011, there is a new Regulation 2 that requires that all new ICPC referrals submit the Title IVE documentation at the time of the referral.

- **Title IVE Eligibility Verification: An explanation of the current status of the Child's Title IVE eligibility under the Federal Social Security Act and Title IVE documentation, if available. Documentation must be provided before placement is approved.¹**

In the past when the ICPC placement had been approved and a child is IV-E eligible is to be placed out of state, the case manager contacted PCG Hotline and requested that a copy of the Title IVE documentation be sent to the resource when the placement request was approved. Now, we have to send this documentation at the time of the initial request. We will probably have to send it to the resource once the placement is approved as well. Some states will activate the Medicaid for the child when the child is placed.

If the case manager is unable to establish the child's IV-E eligibility with PCG at the time the ICPC referral is sent to the Receiving State, the Cover Letter should state that the IV-E eligibility is pending. When eligibility is established, the case manager should contact ICPC with the status. Please note all states are requiring **LICENSING** for any placement of children who are Title IV-E eligible.

If a child is determined not to be IV-E eligible, the Area Office needs to develop an alternative Medical Plan for the child. This is important as DCF is financially responsible for the child and services provided to the child as long as the child is in DCF custody. Alternative medical plans to be considered include:

1. If the child is to be placed in a border state, returning the child to Massachusetts for his/her health care with MassHealth card.

¹ See Medical Plan section for more information about how to request a Title IVE eligibility. Part of the new requirements for Regulation 2 is that we now have to provide a copy of the child's eligibility in the ICPC packet. In the past, this documentation was sent to the resource directly once the child was placed.

2. If the placement is with a relative, relative applies for Grantee Relative Medicaid in their state. This usually requires the relative to document relationship through birth certificates. Note: it is recommended that relative appeal decision if denied. Not all local Medicaid offices understand the eligibility process.
3. Identifying MassHealth vendors in the placement state. Approaching vendors who agree to apply to become MassHealth vendor. Note: application process is time consuming. Information about physicians, hospitals and pharmacies who are existing MassHealth vendors in other states can be provided by emailing CARTS@maximus.com
4. Resource can add child to their existing health plan and MA DCF will reimburse. Must include letter from the health plan stating that the resource is able to add a “foster child” to their health plan.
5. Resource purchases independent health plan for child and MA DCF will reimburse the resource.
6. The Area Office purchases an independent health plan for the child.
7. Resource pays for child’s medical expenses out of pocket and MA DCF will reimburse the resource for the expenses. Not recommended as accident or serious illness could create financial liability to Area Office budget.

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