

2853 – FOSTER CARE CMO PROCEDURES

POLICY STATEMENT	A child in placement qualifies for enrollment in the fee-for-services program and exemption from a care management organization (CMO). SSI recipients are enrolled in Georgia. Better Health Care and will have an assigned provider.
BASIC CONSIDERATIONS	<p>The Medicaid program provides funds to the state for the costs of providing medical services to Medicaid eligible recipients. County DFCS should utilize these funds for services to children in placement in order to conserve state funds for those children who have been determined Medicaid ineligible.</p> <p>County DFCS should make certain that all providers used for services to children in care are active Health Check providers. This information may be verified through the GHP web site, www.ghp.georgia.gov, “Find Health Check Resources” on the Provider Information Tab.</p>
PROCEDURES	<p>The following steps provide an overview of the eligibility determination process with the procedures for de-linking from CMO enrollment and county responsibilities.</p> <p>NOTE: Refer to Sections 2810 – Foster Care Application Processing, Section 2812 – Department of Juvenile Justice Medicaid of the Medicaid Policy Manual.</p> <p>Step 1 Once a child is taken into custody, the county DFCS office is responsible for screening the child on MHN for CMO enrollment and Medicaid eligibility.</p> <p>Step 2 If the child is enrolled in a CMO, within twenty-four (24) hours of entering care, the SSCM, the Social Services Supervisor or designated staff person shall contact the appropriate CMO and inform them of the child’s foster care status and MHN number.</p> <p>Step 3 The SSCM shall obtain a contact name, telephone number and fax number for the CMO representative assigned to manage the child’s health care services.</p> <p>Step 4 The SSCM or designated staff person shall provide the CMO case manager with the following:</p> <ul style="list-style-type: none"> • The child’s first name, middle initial and last name. • The child’s date of birth • The child’s address • The child’s legal county of residence • The date the child entered foster care • If applicable, the date the child received emergency medical services

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- If applicable, the name of the hospital, treatment facility, physician, etc. that provided the emergency medical services.

Step 5 After contact with the CMO, the SSCM or designated staff person shall fax a form 5459, Release of Information, to the CMO representative assigned to manage the child's health care services. The release of information will provide authorization for the approved Comprehensive Child and Family Assessment (CCFA)/Wrap-Around (WA) provider to coordinate the child's Health Check appointment and psychological assessment with the CMO. A copy of the release of information should also be faxed to the provider responsible for completing the CCFA.

Step 6 The SSCM ensures that the placement provider receives the name of the CMO and all contact information in the event that the child requires non-emergency medical treatment. All routine medical treatment for the child must be authorized by the CMO until the child is moved from CMO enrollment to the fee-for-services program.

Step 7 The SSCM or designated staff person shall complete Form 223 and 224 (Medicaid and IV-E Application for Foster Care and Adoption Assistance) as soon as possible but no later than five working days of a child's removal whether or not the child is active on MHN. Reference [Section 2810](#) – Foster Care Medicaid Application Processing and [Section 2817](#) – IV-E Adoption Assistance Medicaid.

Step 8 For children active on SUCCESS, the Revenue Maximization Unit will:

- Close the child/case for the ongoing month and register a new Medicaid case, coding the child's living arrangement as FC. This will generate the interface update to MHN. If the living arrangement FC code is on the member's file prior to the 24th of each month, the current CMO enrollment will close effective the first day of the following month and the child will move to fee-for-services program . If the living arrangement FC code is not on the member's file prior to the 24th of each month, the CMO enrollment closure will not be effective for an additional month. (**Example:** Child enters care October 23rd. RevMax processes application October 27th. CMO enrollment for this child will end effective December 1st.)
- The appropriate Revenue Maximization Regional Office will make the determination for funding (IV-E, IV-B, SSI, and Medicaid).

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Step 9

For children not active on SUCCESS, the Revenue Maximization Unit will:

- Make the appropriate Medicaid COA determination.
- Make the determination for funding (IV-E, IV-B).
- Notify the SSCM of the Medicaid number and/or send a temporary Medicaid card, if approved.
- The child will not be enrolled in a CMO but will be in fee-for-services program from initial determination.

For an SSI Child entering care, RevMax will open a Medicaid case on SUCCESS coding the child's living arrangement as FC. SSI recipients are exempt from CMO enrollment but are enrolled in Georgia Better Health Care and have an assigned primary care provider. Enter all standard SUCCESS documentation. Reference Appendix D – Documentation Standards. The SUCCESS interface with Social Security Administration will automatically terminate the CWFC (F40) and RSM (F22) SSI foster child in SUCCESS.

The SSCM will request an exemption from GBHC and the assigned provider through ACS at the time of discovery through GHP/MHN screening. ACS will forward the request to the Dept. of Community Health to approve. If the child needs immediate attention, the SSCM will contact the assigned primary provider listed on MHN for a referral to the preferred provider requested by the SSCM.

If a child meets eligibility for PeachCare for Kids, the SSCM will complete a PeachCare for Kids application notating in large, bold print on the application that applicant is a foster or adoptive child and to waive all fees. PeachCare for Kids will waive the monthly premium for children in placement.

NOTE: Once a child leaves DFCS custody, the SSCM must notify the appropriate Revenue Maximization Regional Office through Form 227, Notification of Change, indicating the new placement and address of the child so that a child's continuing Medicaid eligibility can be made and the child's living arrangement may be changed back to AH so that the child will be enrolled in a CMO without a gap in services. The child's case is not closed but transferred in SUCCESS to the county of residence.

Providers with billing problems should be referred to their ACS Provider Representative once the MES has determined that SUCCESS and GHP/MHN are correctly coded.