

# CHANGE NOTICE FOR MANUAL NO. 23-07, EXPANDED FOSTER CARE PROGRAM

DATE: SEPTEMBER 28, 2007

**Manual:** Aged, Blind, and Disabled Medicaid

**Change No:** 23-07

**To:** County Directors of Social Services

**Effective:** 10-01-07

## I. BACKGROUND

Foster Care has been expanded to cover individuals through the month they turn age 21. See Family and Children's Change Notice 16-07 for more information. The Child Support requirements in the Aged, Blind, and Disabled Medicaid Manual are updated as a result of this change.

## II. CONTENT OF CHANGE

A. [MA-2352](#), **Terminations and Deletions**, adds the Expanded Foster Care Program (EFCP), as one of the possible aid program/categories, IAS or HSF, for individuals who may qualify for EFCP.

### B [MA-2375](#), **Child Support**

1. Exempt I-AS and H-SF adolescents in the Expanded Foster Care Program from cooperating with Child Support when they are caretakers of minor children.

There is no child or medical referral requirement for a foster adolescent who now has a child, as long as the individual remains covered in the Expanded Foster Care Program. However, if the individual's category of coverage is changed to a family group where child support requirements must be met as a condition of eligibility for the caretaker, then a referral must be made to Child Support.

Refer to the Family and Children's Medicaid Change Notice 16-07 for more information on the Expanded Foster Care Program (EFCP).

2. Changes from 12 to 20 days the length of time needed when requesting evidence for good cause. Instructs the caseworker to set a date of twenty calendar days and offer assistance if needed when requesting evidence necessary to determine if good cause exists.

3. Clarifies that the caretaker receiving SSI is exempt from cooperating with Child Support.
4. Instructs the caseworker not to complete a referral for any child receiving under the Expanded Foster Care Program (EFCP).

## **II. EFFECTIVE DATE**

This policy is effective October 1, 2007.

## **III. MAINTENANCE OF MANUAL**

A. Remove: MA-2352, Terminations and Deletions, pages 5-6.

Insert: [MA-2352](#), Terminations and Deletions, pages 5-6 effective 10-01-07.

B. Remove: MA-2375, Child Support, pages 1-10.

Insert: [MA-2375](#), Child Support, pages 1-10 effective 10-01-07.

If you have any questions, please contact your Medicaid Program Representative.

William W. Lawrence, Jr., M.D.,  
Acting Director

(This material was researched and written by Sandi Morrow, Medicaid Policy Consultant, Medicaid Eligibility Unit.)