GUARDIANSHIP SUBSIDY ELIGIBILITY DETERMINATION

CREATION DATE: October 7, 2009



Pointers to Remember:

Guardianship Overview

- 1. The mission of the Child and Family Services Agency (CFSA) is to ensure the Safety, Permanence and Well Being of the abused and neglected children of the District of Columbia.
- 2. The Guardianship Subsidy Eligibility screen is located within the FACES.NET system. It was developed to allow the IV-E Unit to determine guardianship subsidy eligibility.
- 3. The Guardianship Subsidy Eligibility Determination requirements include:
 - Determine the child's eligibility based on the child's relationship with the guardian.
 - Determine the child's eligibility based on the home removal.
 - Determine the child's eligibility based on the determination of Title IV-E Foster Care Maintenance Payment Eligibility and Placement with the Prospective Guardian.
 - Child eligibility based on determination by the agency.
 - Sibling eligibility.

Guardianship Subsidy Eligibility Screen

Steps Include:

- Step 1:Navigate to IVE Guardianship Subsidy Search Client screen by holding cursor over
Admin, Fin Admin, Eligibility, and IVE Guardianship Subsidy.
- Step 2: Click on Search Client.
- **Step 3:** Complete **Search** by entering **client's last name** and or **Client ID** number. Additional info can also be added (*see figure 2*).
- Step 4: Click Search.

1



Figure 2

Step 5: Select Client's Guardianship Case.

Step 6: Click **Show** to place case into focus.

	lmin rgar Wor	nizer 'kLo	Fi Fi a d	n Ad		Histo	Elig ry	ibility IVE Guardianship Subsidy Search Client Determination I Guardianship Subsidy Client Search * Denotes Required Fields ** Denotes Half-Mandatory Fields *Denotes AFCARS Fields	
+	My	Assi	gnn	ent	5		^	Search Criteria	
÷	My Units My Workers							☐ ☑ Client Characteristics First Name Last Name*	
±	ott	ner P	rogi	am	Area	35	~	REYSHAWN JACKSON	
4	n y i	Care O	ctob	er 2	009	_	N	Birth Date Gender	
5	1	Ч :	T	w	т	F	5		
27	2 2	28 1	29	<u>30</u>	1	2	3		
4		5	6	Ζ	8	2	<u>10</u>	SSN FACES Client ID	
11	1 1	12 3	13	<u>14</u>	<u>15</u>	<u>16</u>	<u>17</u>		
18	1	19 1	20	<u>21</u>	22	<u>23</u>	<u>24</u>		
25	5 2	26 3	27	<u>28</u>	<u>29</u>	<u>30</u>	<u>31</u>	Search Results	
1		2	3	4	5	6	Z	【 ◀ 🗓 2 3 4 5 6 7 8 9 10 🕨 ▶	
5:	S	ele	ct					Results 1 - 2	of 2
C			-1.	•				Client ID Client Name SSN Date of Birth Case	ID
Guai	ra	1ar	ISE	uр				977658 REYSHAWN JACKSON 09/02/1997 203631	5
(Ca	ise						P977658 REYSHAWN JACKSON 09/02/1997 20363:	/
	1000								
6. (C1	ماء	CI	b 0					
0:0		CK	3	110	w.				
		2		6	11			Search Show Clear Cancel	

Figure 3

Step 7: Click on **Determination** screen on the breadcrumbs.



Step 8: Review Eligibility History Information.

	- Client		
	Client ID	Date of Birth	
	977658	9/2/1997	
	Name	SSN	
	REYSHAWN JACKSON		
	Medicaid	Provider ID	
		8100	
	Provider Name		
8: Review	JOHNICE JACKSON		
Eligibility	IVE Guardianship IVE Foster Care	Agency Determination Sib	ling Subsidy Agreement
History Info.	– Eligibility History		
110001 jinto.	Start Date End Date Eligibility Type	Eligibility Status Determi	nation
	10/01/2009 IV-E (Guardianship)	Pending	
	Event Date Status	Туре	
	• 10/02/2009 Pending	Kemoval	

Figure 5



Note:

- IV-E Guardianship tab is "read only" information.
- Clicking the Determination button will calculate the overall eligibility status.
- A new guardianship subsidy eligibility record with "Pending" status will be created for guardianship records granted on or after January 1, 2009.
- Eligibility status will read "Pending" until the determination is completed.
- The start sate will be the date that Guardianship was granted.

Step 9: Click on IVE Foster Care tab.

Step 10: Complete the IVE Foster Care Eligibility Duration Information.

Step 11: Click Save.

4

	Olivert ID			Dial of Dial		
	977658			9/2/1997		
	Name			SSN		
	REYSHAWN JACKSON					
9: Click on	diasid			Provider ID		
WE Easter				8100		
IVE Foster	vider Name					
Care tab.	INICE JACKSON					
	IVE Guardianship	IVE Foster (Care Agency	Determination	Sibling	Subsidy Agreement
—	Guardianship Has guardianship bee Date Guardianship Grante 10/02/2009	n granted to this ch d*	ild?			
	► Is the child related (u	p to 5 degrees) to a	nyone of the guardia	ns?		
	Relationship between	the child and the	guardians			
	JOHNICE JACKSON	is t	he Aunt (Maternal)	of	REYSHAWN JACKSON	
	Specify					
10: Comple	te	ist	the	of	REYSHAWN JACKSON	
Info.	cify					
						<u> </u>
	— IVE Foster Care Eligibi	lity Duration				
_	Was the child eligible	for IVE Foster Care	maintenance payme	nts for at least 6 consecuti	ve months prior to the dat	e guardianship was
	granted?					
	Explain *					
_						×
	System calculated IVE fost	er care eligibility sta	atus during that time			
	Unable to Determine					
	Placement Duration					
	🗹 Was the child placed w	vith the guardian du	ring the 6 consecutiv	e months that he/she was	eligible for IV-E Foster Car	re maintenance
	payments?					
	Placement Episodes					
	Date Entered	Date Exited	Provider Type	Provider Name	Status	Location Category
	01/01/2009	LO/02/2009	Non-Contracted	JOHNICE JACKSON	Authorized	Regular
	Provider License Was the guardian licer	sed and approved i	during those 6 conse	cutive months?		
	Licensing Status					
	License Number	License Type	Current Status	Approved By	Approval Date Start I	Date End Date
			,	,	,,	
1 [FACES Review					
11: Click	Status Ineligible					
Save	Save Cancel					
Save.			г.	. (



- Figure 6
- The "Date Guardianship Granted" field can be updated to rectify any mismatch between dates entered on the "Guardianship Information" screen. If changed the date will be updated on the Guardianship Information screen.
- The "Is the child related...field" can be changed by the eligibility unit. If changed, it will factor • in the determination of eligibility.
- If the child was eligible for IV-E Foster Care maintenance payments for at least 6 consecutive • months prior to the date guardianship was granted, the checkbox is not checked, and an explanation is mandatory. (See Figure 6).

Step 12: Click on Agency Determination tab to preview only.

- Client	
Client ID	Date of Birth
977658	9/2/1997
Name REYSHAV Medicaid Provider JOHNICE JACKSON	SSN Provider ID 8100
IVE Guardianship IVE Foster Care Agency Det	ermination Sibling Subsidy Agreement
Determination By Agency Has Reunification or Adoption been ruled out for this child? Does the child demonstrate a strong attachment to the prospective Does the relative guardian have a strong commitment to caring pe	relative guardian? rmanently for the child?
Is the child 14 years or older?	Has child been consulted regarding the kinship guardianship arrangement?
FACES Review Status Eligible	

Figure 7

Step 13: Click on **Sibling** Tab to preview only.

Client J	ID			Date of Birth			
977658	8			9/2/1997			
Name				SSN			13: Click Sibling ta
REYSH	HAWN JACKSON						8
Medica	aid			Provider ID			
				8100			
Dunid	en Merree					/	
Provide	er Name				/		
роните	CE JACKSON				K		
_							
TUI	/E. Quardianshin	TUE Eastar C	`ara	Determination	Sibling	Subsidy Agreement	
IVi	/E Guardianship	IVE Foster C	Care Agency	Determination	Sibling	Subsidy Agreement	
IVI - Siblin	/E Guardianship ing Eligibilty	IVE Foster C	Care Agency	Determination	Sibling	Subsidy Agreement	
IV Sibli	/E Guardianship	IVE Foster C	Care Agency	Determination	Sibling	Subsidy Agreement	
IV	/E Guardianship ing Eligibilty Client ID	IVE Foster C Sibling Name	Care Agency Provider ID	Provider Name	Sibling Relationship	Subsidy Agreement Sibling Guardianship Subsidy Eligibility	
Siblin	/E Guardianship ing Eligibilty Client ID	IVE Foster C Sibling Name	Care Agency Provider ID	Provider Name	Sibling Relationship	Subsidy Agreement Sibling Guardianship Subsidy Eligibility Status	
IVI	/E Guardianship ing Eligibilty Client ID	IVE Foster C Sibling Name	Care Agency Provider ID	Provider Name	Sibling Relationship	Subsidy Agreement Sibling Guardianship Subsidy Eligibility Status	
IV	/E Guardianship ing Eligibilty Client ID	IVE Foster C Sibling Name	Care Agency Provider ID	Provider Name	Sibling Relationship	Subsidy Agreement Sibling Guardianship Subsidy Eligibility Status	
Sibli	/E Guardianship ing Eligibilty Client ID	IVE Foster C Sibling Name	Care Agency Provider ID	Provider Name	Sibling Relationship	Subsidy Agreement Sibling Guardianship Subsidy Eligibility Status	
Sibli	/E Guardianship ing Eligibilty Client ID	IVE Foster C Sibling Name	Provider ID	Provider Name	Sibling Relationship	Subsidy Agreement Sibling Guardianship Subsidy Eligibility Status	
IV	/E Guardianship ing Eligibilty Client ID	IVE Foster C	Care Agency Provider ID	Provider Name	Sibling Relationship	Subsidy Agreement Sibling Guardianship Subsidy Eligibility Status	
IV	rE Guardianship ing Eligibilty Client ID	IVE Foster C	Care Agency Provider ID	Provider Name	Sibling Relationship	Subsidy Agreement Sibling Guardianship Subsidy Eligibility Status	
- FACE	rE Guardianship ing Eligibilty Client ID ES Review	IVE Foster C	Provider ID	Provider Name	Sibling Relationship	Subsidy Agreement Sibling Guardianship Subsidy Eligibility Status	
- FACE	rE Guardianship ing Eligibilty Client ID ES Review s [Ineligible	IVE Foster C Sibling Name	Provider ID	Provider Name	Sibling Relationship	Subsidy Agreement Sibling Guardianship Subsidy Eligibility Status	

Figure 8



- The Sibling tab is read only information that will indicate whether the child is eligible or ineligible for IV-E Guardianship Subsidy due to another sibling being eligible.
- If one sibling is eligible, then all other siblings placed with the same provider are considered to be eligible as well.

Step 14: Click on Subsidy Agreement tab to preview only.

Client			
Client ID	Date of Birth		
977658	9/2/1997]	
Name	SSN		
REYSHAWN JACKSON]	
Medicaid	Provider ID 8100		14: Click Subsidy
Provider Name DOHNICE JACKSON			Agreement tab.
IVE Guardianship V IVE Foster	Care Agency Determination Sibling	Subsidy Agreement	
Guardianship Subsidy Agreement			
Has CFSA negotiated and entered into	a written & binding kinship guardianship assistance agreement with the pro	ospective relative	
guardian?			
Agreement Date			
10/02/2009			
FACES Review			
Status Eligible			
·			



- 2

- If the "Agreement Date" is after the "Guardianship Granted Date" then the "FACES Review" status will be "Ineligible.
- **Step 15:** Navigate back to the **IVE Guardianship** tab.
- **Step 16:** Click on **Determination** button.

	Guardianship Subsidy Dete * Denotes Required Fields **	rmination Denotes Half-Mandatory Fi	elds ‡ Denotes AFCARS Fields			
	Client					
	Client ID		Date of Birth			
	977658		9/2/1997			
	Name		SSN			
	REYSHAWN JACKSON					
15. Click IV-F	Medicaid		Provider ID			
			8100			
Guardianship	Provider Name					
tab.	JOHNICE JACKSON					
taor	TVE Cuardianchin	IVE Easter Care	Agency Determination	Sibling	Subsidy Age	amant
	Eligibility History Start Date End Date 10/01/2009	Eligibility Type IV-E (Guardianship)	Eligibility Status Pending	Determination		16: Click Determination
	Event Date	Status	Туре			button
	10/02/2009	Pending	Removal			Dutton.
			Figure 10			

Clie	ent ID		Date of Birth		
977	7658		9/2/1997		
Nan	ne		SSN		
REY	YSHAWN JACKSON]
Med	dicaid		Provider ID		
			8100		
Pro	vider Name				
JOH	HNICE JACKSON				
_					
	IVE Guardianship	IVE Foster Care	Agency Determination	Sibling	Subsidy Agr
- El	ligibility History				
	Start Date End Date	Eligibility Type	Eligibility Status	Determination	
Þ	10/01/2009	IV-E (Guardianship)	Ineligible		
	Event Date	Status	Туре		
	10/09/2009	Ineligible	Determination		
	10/09/2009	Ineligible	Determination		
		Pending	Removal		
	10/02/2009	renaing			
	10/02/2009	, chang			

Figure 11



- The Determination status will appear in the bottom grid after clicking on the Determination button.
- The IV-E Unit has the ability to click the Determination button more than once if changes were made in FACES regarding the IV-E Eligibility for a case. For example, since the last determination was made on the current client, a sibling placed with the same provider was determined to be eligible. If the current client was not previously eligible, then clicking Determination again will make them eligible.