Creating State Adoption Maintenance Subsidy (SAMS) Records

Knowledge Base Article

Creating State Adoption Maintenance Subsidy Records

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Department of Children & Youth

Creating State Adoption Maintenance Subsidy Records

Overview

This Knowledge Base Article discusses the **Adoption Subsidy** functionality detailing the steps for creation of a State Adoption Maintenance (SAMS) subsidy through completion of the approval process.

Navigating to the Adoption Subsidy Screen

From the Ohio SACWIS Home screen:

1. Click the **Financial** tab.
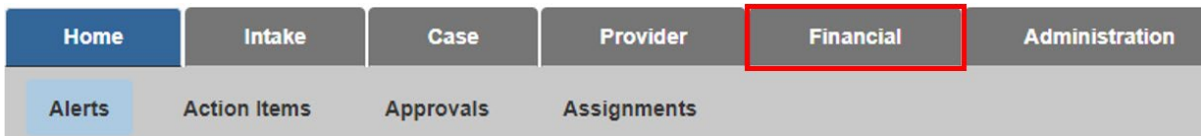
The sub-menu will change to display financial options.

2. Click the **Eligibility** tab.

The left navigation pane appears.

3. Click, **Adoption Subsidy** in the side navigation bar.

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The **Adoption Subsidy** screen appears, displaying the **Person Selection** grid.

4. Click the **Person Search** button.

Note: For information regarding a Person Search, please see the following Knowledge Base Article: Using Search Functionality.

    OR

4. Enter the **Person ID** for the child for which you are creating a subsidy.

5. Click the **Go** button.

Child details and the **Subsidy and Review History** appear.

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Adding a Subsidy

1. Verify the child's information for accuracy.

2. In the **Subsidy Type** field, select **SAMS** from the dropdown menu.

3. In the **Adoption Type** field choose the appropriate type of subsidy (see OAC 5101:2-49 for details).

4. Click the **Add Subsidy** button (not active until Subsidy and Adoption Type have been selected).

The **Select Provider** screen appears.

Choosing the Provider

1. Verify the **AA Provider Details**, when exists.
   OR
1. Choose a provider by clicking on **Provider Search** to locate the appropriate provider or enter the **Provider ID** number, then click **Go**.
2. Click **Continue**.

Financial / Eligibility / Adoption Subsidy

Select Provider

NAME / ID:	AGE, DOB:	CASE ID:
Jetson, Elroy / 99999999	16, 09/13/2004	999999992

Provider Information

AA Provider Name / ID:
An Adoption Assistance Subsidy does not exist

To link a different Provider use Provider Search or enter a Provider ID.

Provider Search   ~ OR ~   Provider ID: [   ] Go

Continue   Cancel

Note: When an AA subsidy exists the **AA Provider Name / ID** and **Payee Details** will auto populate as the selected provider.

The **SAMS Subsidy Summary** screen appears.

Completing the SAMS Subsidy for Public Adoptions

The Eligibility Criteria screen is a summary of the requirements and status of the requirements for the child.

1. Enter the **Child's Social & Medical History Form (JFS01616) Provided Date** when not populated from the Adoption Assistance subsidy.
2. Enter the **Application Received Date**.
3. In the **Anticipated Agreement Date** field, enter the date the SAMS Agreement is expected to be signed.

Adoption Details

Adoptive Placement Date:
10/30/2020

Adoption Finalized Date:

Child's Social & Medical History Form (JFS01616) Provided Date:

State Adoption Maintenance Subsidy (SAMS) Details

Application Received Date: *

Anticipated Agreement Date: *

Note: The Adoption Details will display from the Adoption Assistance subsidy when exists.

4. Click the **Eligibility Requirements** link.

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The **Eligibility Requirements** screen will appear.

Note: When there is an existing Adoption Assistance Subsidy for a child all details from that subsidy will pull into the requirements of the Nonrecurring Subsidy.

Completing the Eligibility Requirements for Public Adoptions

Child was denied for Adoption Assistance.

The system will determine **Has the selected provider and child been denied for Adoption Assistance?** as **Yes** or **No** and pull forward the **Adoption Assistance Denial Date** from the denied AA subsidy for the selected child and provider.

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Eligibility Requirements

1. Child was denied for Adoption Assistance.	
Has the selected provider and child been denied for Adoption Assistance?	**Yes**
Adoption Assistance Denial Date:	**11/09/2020**

Child is free for adoption.

1. Verify the information is correct, if updates are necessary, they can be completed within **Legal Actions** or the parent's **Person Profile** of Ohio SACWIS.

2. Child is free for adoption.	
Is the Child in the Permanent Custody / Permanent Surrender of the Agency, and either parent's rights have been terminated or they are deceased?	**Yes**
Legal Status:	Permanent Custody
Mother's Termination of Parental Rights (TPR) Ruling Date:	09/23/2019
Father's Termination of Parental Rights (TPR) Ruling Date:	09/23/2019

Note: If parent(s) have a **Deceased Date** and it is prior to any **Termination of Parental Rights Ruling**, that parent's Deceased Date will display.

Child has Special Needs Factors.

1. Clinically Diagnosed Characteristics that are active as of the Anticipated Agreement Date will display. Verify the information is correct, if updates are necessary, use the **Update Characteristics** button to complete in the Characteristics tab of the person record.

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4. Child has Special Needs Factors. ⓐ

In order to be eligible, a child must have at least one Clinically Diagnosed Special Needs Factor supported by one or more Person Characteristic(s) OR at least one Other Special Needs Factor.

Person Characteristics ∧

Displaying only clinically diagnosed person characteristics.

Characteristics	Category	Begin Date	End Date
ADHD	Mental Health/Substance Abuse	08/26/2016	
Adjustment Disorder	Mental Health/Substance Abuse	04/04/2016	
Anxiety Disorder	Mental Health/Substance Abuse	08/26/2016	
Depression	Mental Health/Substance Abuse	08/26/2016	

Update Characteristics

2. Place a checkmark(s) in the check box(es) beside applicable special needs that apply to the child under the **Clinically Diagnosed Special Needs Factors** and **Other Special Needs Factors**.

Note: Any factors that were selected in the child's AA subsidy will display.

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Note: To assist in selecting the special needs and negotiating the Subsidy Amount the hyperlink **View child's Case Services** and **View child's Medical History** allows the user to access the child's medical history.

3. Complete the **How were Special Needs verified** textbox.

Child meets maximum Age Requirement.

Note: The system will populate the following fields using the child's **Date of Birth** from the **Person Profile** and the **Anticipated Agreement Date** entered on the **SAMS Subsidy Summary** screen:

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- **Is the Agreement Date on or before the end of the month of the child's 18th birthday?**
- **Anticipated Agreement Date**
- **Child age as of Agreement Date**

4. Child meets maximum Age Requirement.	
Is the Agreement Date on or before the end of the month of the child's 18th birthday?	**Yes**
Anticipated Agreement Date:	01/05/2021
Child's age as of Agreement Date:	**17 years**
Is the child mentally or physically disabled as diagnosed by a qualified professional?	▾

1. Select **Yes** or **No** for the question **Is the child mentally or physically disabled as diagnosed by a qualified professional?**

Note: Will only display when the child is 18 years or older.

2. Ensure **Clinically Diagnosed Characteristics** are recorded if **Is the child mentally or physically disabled as diagnosed by a qualified professional?** is answered **Yes.**

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Is the child mentally or physically disabled as diagnosed by a qualified professional?

Yes	⌄

Person Characteristics ∧

Displaying only clinically diagnosed person characteristics.

Characteristics	Category	Begin Date	End Date
ADHD	Mental Health/Substance Abuse	08/02/2017	
Autism Spectrum Disorder	Mental Health/Substance Abuse	08/02/2017	

Update Characteristics

3. Complete the **How verified** text box.

How verified: (expand full screen)

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Provider meets Eligibility Requirements.

1. Verify the details populated on the screen.

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5. Provider meets Eligibility Requirements.

Home Study Details:

Approval Date:

03/18/2020

Subsidy Details:

Parent 1:	BCI Received Date:	FBI Received Date:
	10/01/2020	11/02/2020

Parent 2:	BCI Received Date:	FBI Received Date:
	11/01/2020	10/04/2020

Note: The **Approval Date** will populate from the provider's most recent Home Study as of the Adoptive Placement Date. If the provider's home study is not in Ohio SACWIS, the **Approval Date** will need to be entered.

Note: The **BCI and FBI Received Date(s)** will populate from the Adoption Assistance subsidy when exists. If they do not exist, these will need to be entered.

Provider meets SAMS Income Requirement.

1. Enter the number of household members to the **Family size including adopted children**.

Note: The **120% Medicaid Income for a family the same size** will populate when the user clicks off the **Family size including adopted children** field.

2. Enter the **Provider's Annal Gross Income**.
3. Click **Save**.

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6. Provider meets SAMS Income Requirement.

Family size including adopted children:

120% Median Income for a family of the same size:

Provider's Annual Gross Income: $

[Apply] [Save] [Cancel]

The **SAMS Subsidy Summary** screen will appear.

Completing the SAMS Subsidy for Private and Independent Adoptions

The Eligibility Criteria screen is a summary of the requirements and status of the requirements for the child.

1. Enter the **Child's Social & Medical History Form (JFS01616) Provided Date** when not populated from the Adoption Assistance subsidy.
2. Enter the **Application Received Date**.
3. In the **Anticipated Agreement Date** field, enter the date the SAMS Agreement is expected to be signed.

Adoption Details

Adoptive Placement Date: Adoption Finalized Date:

Child's Social & Medical History Form (JFS01616) Provided Date:

Completing the Eligibility Requirements for Private and Independent Adoptions

Child was denied for Adoption Assistance.

The system will determine **Has the selected provider and child been denied for Adoption Assistance?** as **Yes** or **No** and pull forward the **Adoption Assistance Denial Date** from the denied AA subsidy for the selected child and provider.

Eligibility Requirements	
1. Child was denied for Adoption Assistance.	
Has the selected provider and child been denied for Adoption Assistance?	**Yes**
Adoption Assistance Denial Date:	**11/09/2020**

Child is free for adoption.

1. Select the child's current Legal Status from the **Legal Status** dropdown menu.
2. Select where the child was adopted from in the **Child Adopted From** dropdown menu.
3. Entered either the **Parent 1 Termination of Parental Rights (TPR) Ruling Date** or **Parent 1 Deceased Date**, whichever occurred first.
4. Entered either the **Parent 2 Termination of Parental Rights (TPR) Ruling Date** or **Parent 2 Deceased Date**, whichever occurred first.

Eligibility Requirements

1. Child is free for adoption.

Legal Status:	Permanent Surrender ⌄
Child Adopted From:	Within the State of Ohio ⌄
Parent 1 Termination of Parental Rights (TPR) Ruling Date:	04/29/2019 📅
Parent 1 Deceased Date:	03/08/2019 📅
Parent 2 Termination of Parental Rights (TPR) Ruling Date:	04/29/2019 📅
Parent 2 Deceased Date:	03/04/2019 📅

Note: If parent(s) have a **Deceased Date** and it is prior to any **Termination of Parental Rights Ruling**, that parent's Deceased Date will display.

Child has Special Needs Factors.

1. Clinically Diagnosed Characteristics that are active as of the Anticipated Agreement Date will display. Verify the information is correct, if updates are necessary, use the **Update Characteristics** button to complete in the Characteristics tab of the person record.

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4. Child has Special Needs Factors. ⓐ

In order to be eligible, a child must have at least one Clinically Diagnosed Special Needs Factor supported by one or more Person Characteristic(s) OR at least one Other Special Needs Factor.

Person Characteristics ∧

Displaying only clinically diagnosed person characteristics.

Characteristics	Category	Begin Date	End Date
ADHD	Mental Health/Substance Abuse	08/26/2016	
Adjustment Disorder	Mental Health/Substance Abuse	04/04/2016	
Anxiety Disorder	Mental Health/Substance Abuse	08/26/2016	
Depression	Mental Health/Substance Abuse	08/26/2016	

Update Characteristics

2. Place a checkmark(s) in the check box(es) beside applicable issues that apply to the child under the **Clinically Diagnosed Special Needs Factors** and **Other Special Needs Factors**.

Note: Any factors that were selected in the child's AA subsidy will display.

View child's Medical History

Clinically Diagnosed Special Needs Factors *(Check all that apply to the child):*

- ☑ **Developmental disability**
- ☐ Physical impairment limiting 1 or more major life activity
- ☐ Mental impairment limiting 1 or more major life activity
- ☐ Physiological impairment, cosmetic disfigurement, or anatomical loss affecting 1 or more body systems
- ☐ Mental or psychological impairment (such as intellectual disability, emotional mental illness, or a learning disability)
- ☐ Medical condition causing distress, pain, dysfunction or social problems requiring ongoing treatment

Other Special Needs Factors *(Check all that apply to the child):*

- [ ] Child or their biological family has a social or medical history establishing a substantial risk for developing a Clinically Diagnosed Special Needs Factor
- [ ] Part of a sibling group being adopted together or is placed in the same adoptive placement of a sibling previously adopted
- [ ] Over 12 months and is a member of a minority, racial, or ethnic group making it difficult to place the child for adoption
- [ ] 6 years old or older
- [x] **Remained in Permanent Custody for more than 1 year before an adoptive placement**
- [ ] Been in the prospective adoptive parent's home for at least 6 months directly preceding the adoptive placement and would experience severe separation and loss if removed from the home
- [x] **Experienced a previous adoption disruption or 3 or more placements**

Note: To assist in selecting the special needs and negotiating the Subsidy Amount the hyperlink **View child's Medical History** allows the user to access the child's medical history.

4. Complete the **How were Special Needs verified** textbox.

How were Special Needs verified: (expand full screen)

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Child meets maximum Age Requirement.

Note: The following fields will be system populated using the child's **Date of Birth** from the **Person Profile** and the **Anticipated Agreement Date** entered on the **SAMS Subsidy Summary** screen:

- **Is the Agreement Date on or before the end of the month of the child's 18th birthday?**
- **Anticipated Agreement Date**

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- **Child age as of Agreement Date**

4. Child meets maximum Age Requirement.	
Is the Agreement Date on or before the end of the month of the child's 18th birthday?	**Yes**
Anticipated Agreement Date:	01/05/2021
Child's age as of Agreement Date:	**17 years**
Is the child mentally or physically disabled as diagnosed by a qualified professional?	▾

1. Select **Yes** or **No** for the question **Is the child mentally or physically disabled as diagnosed by a qualified professional?**

Note: Will only display when the child is 18 years or older.

2. Ensure **Clinically Diagnosed Characteristics** are recorded if **Is the child mentally or physically disabled as diagnosed by a qualified professional?** is answered **Yes.**

Is the child mentally or physically disabled as diagnosed by a qualified professional?

Yes ⌄

Person Characteristics ⌃

Displaying only clinically diagnosed person characteristics.

Characteristics	Category	Begin Date	End Date
ADHD	Mental Health/Substance Abuse	08/02/2017	
Autism Spectrum Disorder	Mental Health/Substance Abuse	08/02/2017	

Update Characteristics

3. Complete the **How verified** text box.

How verified: (expand full screen)

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Provider meets Eligibility Requirements.

1. Verify the details populated on the screen.

5. Provider meets Eligibility Requirements.

Home Study Details:

Approval Date:

03/18/2020

Subsidy Details:

Parent 1:	BCI Received Date:	FBI Received Date:
	10/01/2020	11/02/2020

Parent 2:	BCI Received Date:	FBI Received Date:
	11/01/2020	10/04/2020

Note: The **Approval Date** will populate from the provider's most recent Home Study as of the Adoptive Placement Date. If the provider's home study is not in Ohio SACWIS, the **Approval Date** will need to be entered.

Note: The **BCI and FBI Received Date(s)** will populate from the Adoption Assistance subsidy when exists. If they do not exist, these will need to be entered.

Provider meets SAMS Income Requirement.

1. Enter the number of household members to the **Family size including adopted children**.

Note: The **120% Medicaid Income for a family the same size** will populate when the user clicks off the **Family size including adopted children** field.

2. Enter the **Provider's Annal Gross Income**.
3. Click **Save**.

6. Provider meets SAMS Income Requirement.	
Family size including adopted children:	
120% Median Income for a family of the same size:	
Provider's Annual Gross Income:	$

Apply Save Cancel

The **SAMS Subsidy Summary** screen will appear.

Determining Eligibility

Under the **Eligibility Requirements** section of the **SAMS Subsidy Summary** screen.

1. Click **Determine Eligibility**.
2. Enter any **Comments**.

Note: If you have failed to complete any required information used in determining eligibility, validation messages will display at the top of the **SAMS Subsidy Summary** screen.

3. Once Eligibility is determined, the screen will expand to show the **Subsidy Details**.

When **Eligible** is **No**, the screen will expand to show the **Subsidy Details**.

4. Enter the **Denial Date**.

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Determine Eligibility

Eligible: **NO**

Comments: (expand full screen)

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Subsidy Details

Denial Date:

📅

When **Eligible** is **Yes**, the screen will expand to show the **Medicaid Eligibility** and **Subsidy Details** section.

5. Verify the **Medicaid Eligibility**.

Determine Eligibility

Eligible: YES

Comments: (expand full screen)

✔ ABC   4000

Medicaid Eligibility

Is the child eligible under SAMS Medicaid?   Yes ▾

Please refer to 5101:2-44-05.1 Medicaid Eligibility for Children with special needs.

6. Enter the **Approval Date**.

7. Enter the **Agreement Date**.
8. Enter the **Subsidy Effective Date**.
9. Enter the **Subsidy Amount**.

Note: When the **Subsidy Details** section is complete, click the **Process for Approval** button. If you have failed to complete any required information for the SAMS Subsidy, validation messages will display at the top of the **SAMS Subsidy Summary** screen with any incomplete fields.

Processing for Approval

1. If all requirements for the SAMS Subsidy have been completed, the **Process Approval** screen appears.
2. Select from the **Action** dropdown menu.
3. If you do not have approval access rights, select from the **Reviewers/Approvers** dropdown menu.
4. Click **Save**.

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The **Adoption Subsidy History** screen appears, displaying the status of the subsidy.

If you need additional information or assistance, please contact the OFC Automated Systems Help Desk at sacwis_help_desk@childrenandyouth.ohio.gov .