

# **Knowledge Base Article**

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## **Overview**

This document outlines the process of determining Bridges eligibility and reimbursability in Ohio SACWIS. Prior to completing the steps listed in this document, please ensure you have entered a completed housing record if one exists and any court rulings that have been obtained. These should be entered in the case module of Ohio SACWIS.

## **Security Requirements**

The following Ohio SACWIS security user group is needed for this functionality:

**Bridges Fiscal Worker** – This will permit the worker to add and edit eligibility and reimbursability records. The eligibility record will need to be routed to the appropriate state worker for final approval upon completion.

## **Determining Eligibility**

From the Ohio SACWIS Home Page:

- 1. Click the Financial tab.
- 2. Click Eligibility.
- 3. Click Eligibility/Reimbursability on the navigation pane.

Home	Intake	Case	Provider	Financial	Administration
Services Eligibilit	y Payment Ben	efits			
<>					
CRIS-E/OIES Inquiry Eligibility/Reimbursability Adoption Subsidy					
Nonrecurring					
PASSS					
KPIP					
Medicaid Eligibility					
CRIS-E/OIES Inquiry History					
Medicaid Mailing Info					

**Important**: Bridges eligibility can be determined without a pre-existing housing record. However, until the housing record is completed, the eligibility determination will be, "No."



The **Person Selection** screen appears.

1. Click Person Search.

Note: If you know the Person ID number:

- Enter the number into the **Person ID** box.
- Click Go.

If you do not know the Person ID number:

2. Click, Person Search on the Person Selection screen.

Home	Intake	Case	Provider	Financial	Administration
Services Eligibilit	y Payment Ber	nefits			
<>					
CRIS-E/OIES Inquiry Eligibility/Reimbursability	Person Selection				
Adoption Subsidy Nonrecurring	Person Search		~ OR ~	Person ID: 12345678	Go
PASSS KPIP					
Medicaid Eligibility					
Medicaid Mailing Info					

The Search For Person screen appears.

- 3. Enter Search Criteria.
- 4. Click Search.

Note: If Person ID or SSN are entered, all other search criteria will be ignored OR Last Name: First Name: Middle Name: Gender:	SN are entered, all other search criteria will be ignored	Person ID:			~ OR ~	SSN:	
OR Last Name: First Name: Gender:	OR           First Name:         Gender:           Image:         Image:           OR ~         Age Range:           From Age         To Age	Note: If Person ID o	or SSN are entered, all other s	search criteria will be ignored			
Aast Name: First Name: Middle Name: Gender:	Pirst Name: Gender: Cender: Cender: Cender: Cender: Cender: To Age To Age Idress Criteria ∼				OR		
		Last Name:	First Name:	Middle Name:		Gender:	
DOB: Age Range:	CR ~	DOB:				Age Range:	
~ OR ~ .	From Age To Age		<b>***</b>		~ OR ~		
From Age To Age	ddress Criteria_~					From Age To Age	
Name Match Precision Sort by:		veturns results match	iing enterea numes including AK	A namesmicknames	Releva	nce (Highest-Lowest)	
Name Match Precision         Sort by:           Returns results matching entered names including AKA names/nicknames         Relevance (Highest-Lowest)	ntered names including AKA namesmicinames Relevance (Highest-Lowest)		+ AKA/Nicknames				
Kame Match Precision     Sort by:       Returns results matching entered names including AKA names/hicknames     Relevance (Highest-Lowest)	+ AKA/Nicknames						



The Person Search Results grid appears.

5. Click, **select**, in the appropriate row.

Person S	earch Results				
Result(s) 1 t	to 1 of 1 / Page 1 of 1				
Include	only active case members				
	Person Name / <u>ID</u>	Address	Gender	(Age) DOB	Active Case
select	Lane, Lois / 12345678	123 Clark Drive, Sunny OH 12345	Female	(2) 01/01/2021	Yes
$\smile$	Related Persons V				

The **Program Eligibility and Program Reimbursability** grids appear, indicating whether there are any existing records for the Person. If you need to add an eligibility record, follow the steps below:

- 1. Select the **Determination Type** from the dropdown within the **Program Eligibility** grid. This can include one of the following:
  - a. **Initial** This option will be available if an eligibility record does not exist for the most recent custody episode for the person. The system should create an initial pending record with the custody episode's start date as the effective date once the young adult enters care and placement.
  - b. Ongoing This option will be available if ALL conditions below exist:
    - i. A completed initial eligibility record exists for the most recent Bridges custody episode.
    - ii. A pending eligibility record DOES NOT exist for the most recent custody episode.

**Note**: The system will automatically create an ongoing eligibility record when the Best Interest ruling is due. Workers can also manually create this record if needed.

2. Click Add Eligibility.

**Note**: You can click the **legal status history** link in the **Person Selection** grid to view information in the **Legal Custody Episode & Status Information** grid.

**Important**: The young adult's name, in the graphic below, is a hyperlink that will take you to the Person record; on the Person record, you can make any necessary changes before you proceed (e.g., adding resources for the eligibility determination)



Person Selection		
Person Search	~ OR ~	Person ID: Go
Name / ID: Lane, Lois / 12345678	Age, DOB: 1/1/2015 Age 8,	
Assigned Workers:	Title IV-E # / Medicaid Recipient ID:	Legal Status History
Program Eligibility		
Include Created in Error		
Determination Type:	I Eligibility	
Program Reimbursability		
Effective Date: End Date:	Add Reimbursability	

The **Eligibility Details** screen appears. The steps for the next series of screens will provide the elements needed for the person's eligibility determination.

- 3. Provide the required information (denoted with a red asterisk) in the **Eligibility Details** grid.
- 4. If applicable, ensure a **Housing Record** exists for the person in the case module of Ohio SACWIS.
- 5. If applicable, ensure you have recorded **Best Interest** and **Reasonable Efforts** rulings for the person in the case module of Ohio SACWIS.
- 6. Ensure the **Effective Date** and **Eligibility Month** fields are correct if they have populated based on the young adult entering care and placement or enter/revise them accordingly.
- 7. Click, View Requirements 1 to 7.

Eligibility Details		
Eligibility Month: * 11/2021	Effective Date: *          11/01/2021         Termination Date:	
Initial Program Eligibility		
Initial Removal and corresponding placement exists.		YES
Removal Date: 11/01/2021	Requirements 1 to 7	
View / Update Requirements 1 to 7		
1. The child is a citizen or a qualified alien.		YES
2. Legal responsibility was obtained.		YES
3. Best Interest was obtained in the appropriate time frame.		YES
4. Reasonable Efforts were obtained in the appropriate time frame.		YES
5. The child met the age requirement.		YES
6. The child was living with the specified relative within the eligibility month of	or in the previous six months.	YES
7. The child met the deprivation requirement.		YES

The **Requirements 1 to 7** grid appears.



# **Completing Requirements 1 to 7**

1. Select **Yes** or **No** from the dropdown for **U.S. Citizen** to complete **Requirement 1**.

Note: If the answer is, No, complete the Qualified Alien Worksheet.

- 2. Verify that **Requirements 2 through 4** have populated the correct **Legal Status**, **Best Interest Statement**, and **Reasonable Efforts Statement**, respectively, from the person's case.
- 3. Select the appropriate **Age Eligibility** option, and document **How Verified** in the text box to complete **Requirement 5**.
- 4. For **Requirement 6**, verify the **Specified Relative**.

**Note:** verify the date that populates is accurate based on when the young adult voluntarily entered the Bridges program.

- 5. For **Requirement 7**, Click **Deprivation Type**, Select a **Deprivation Type** from the drop-down menu, Select **Which Parent** for whom the deprivation type applies. Document **How Verified** in the text box.
- 6. Click, Save.



Removal Information				
Removal Date: 11/01/2021		Removal Circumstances: PCSA received custody		
Primary Caretaker:		Secondary Caretaker:		
Requirements 1 to 7				
Citizenship Information - Requirement 1				
U.S. Citizen: Yes				
Birth City, State, Country:				
Birth City, State and/or Country need to be entered on the Person. Test, Adult				
Legal Responsibility - Requirement 2				
		577 - C - D - (		
Agency Legal Status: Ex-parte		11/01/2021		
Termination Date: 11/02/2021				
Best Interest - Requirement 3				
Best Interest:				Best Interest Received
Ruling Date:	Ruling Received:		Ruling Type:	
11/01/2021	Best Interest		Custody	
Reasonable Efforts - Requirement 4				
Reasonable Efforts:				Reasonable Efforts Received
Ruling Date:	Ruling Received:		Ruling Type:	
11/01/2021	RE to Prevent Removal - Initial		Custody	
Age Eligibility - Requirement 5				
Eligibility Month:		DOB:		
11/2021		10/31/2008		
Child's Age at the time of Removal: 13 years, 1 months				
Age Eligibility:				
Child under 18 during eligibility month	~			
How Verified: *				
Birth Certificate				✓ABC
				3983
				10

Living with Specified Relative - Requirement 6	
Was the child removed from a specified relative?	
Name of Relative: Change Specified Relative	Relationship to Child: Biological Mother Update Relationship
Did the child live with the specified relative in the eligibility month or any one of the preceding six months? Yes v	
How Verified:	
Case Worker	✓ ABC 3969
	li li
Deprivation - Requirement 7	
Deprivation Type: * Continued Absence from the Removal Home	
Which Parent: *	
Father 🗸	
Hans Marifa da +	
	ARC
OIL3	
	3996
	le le

The Eligibility Details screen appears.

**Note**: The **Effective Date** and **Eligibility Month** have been saved. The word "**Yes**" now displays beside **Completed housing record exists**, and for **Requirements 1 to 7**. The response to the existence of a completed housing record, and/or to the status of any Requirements, may be, "**No**," under other circumstances). Additionally, the **Determine Eligibility** button now displays near the bottom of the screen.

7. Click, View Requirements 8 to 9.

Eligibility Details	
Eligibility Month: *	Effective Date: *       11/01/2021       Termination Date:
Initial Program Eligibility	
Initial Removal and corresponding placement exists. Removal Date: 11/01/2021	YES
Requirem	ents 1 to 7
View / Update Requirements 1 to 7	
1. The child is a citizen or a qualified alien.	YES
2. Legal responsibility was obtained.	YES
3. Best Interest was obtained in the appropriate time frame.	YES
4. Reasonable Efforts were obtained in the appropriate time frame.	YES
5. The child met the age requirement.	YES
6. The child was living with the specified relative within the eligibility month or in the previous six months.	YES
7. The child met the deprivation requirement.	YES
Requireme	
View / Update Requirements 8 and 9	
8. The resources available to the SFU were equal to or less than \$10,000.	YES
9. The income available to the child was less than the July 1996 ADC, need standard.	YES

## The Requirements 8 to 9 grid appears.

# **Completing Requirements 8 to 9**

For requirement 8, Click SFU Information

The screen expands, listing the young adult in the Available Case Members grid.

**Note:** The young adult has been automatically added as the only member in the **SFU Members** grid. This will add the young adult for inclusion in the **Needs Standard Summary –** Requirement 9.

Standard Filing Unit (SFU) Members - Requirement 8					
Available Case Members					
Person	Relat	ionship to Child	Receives SSI/FCI	WAA	Worksheet Completed
Test, Adult Male Age 30, DOB:	Non-Relative		No		
Test, Child Female Age 14, DOB:	Self		No		
Add SFU Member					
SFU Members					
Name / ID	Relationship to Child	Address	Income Verified	Resource Verified	Expense Verified
Test, Adult	Biological Mother	Unknown Address	Verified	Verified	Verified
Test, Self	Self	Unknown Address	Verified	Verified	Verified

**Important**: Clicking the **edit** link next to the name of the young adult will take you to the **Person Profile** where income, resource, and expense information (and other items) can be updated, if necessary.

Once the young adult's addition as an **SFU Member** has been confirmed:

1. For **Requirement 9**, the **Needs Standard Summary** will appear showing Need Standard Budget.

Needs Standard Summary - Requirment 9	
Need Summary	Result
	\$0.00
Stepparent Budget	\$0.00
Minor Parent Living with Parent(s) Budget	\$0.00
Undocumented Alien Parent(s) Budget	\$0.00
Alien Parent(s) Sponsors Income Budget	\$0.00
Intentional Program Violation Budget	\$0.00
Total SFU Members	1
Total Countable Income	\$0.00
185% Need Standard Test	
Need Standard Based on SFU Members	\$1,046.00
Does the child meet the 185% Need Standard?	Yes
100% Need Standard Test	
Need Standard Based on SFU Members	\$566.00
Does the child meet the 100% Need Standard?	Yes

A link for the Income/Resource Summary worksheet appears below budget grid.

2. Click the link titled, Income/Resource Summary.

Budget Worksheets	
1. Income/Resource Summary	4. Minor Parent living with Parent(s)
2. Alien Sponsor Worksheet	5. Stepparent
3. Intentional Program Violation (IPV)	6. Undocumented Alien

The Income and Resources Summary Worksheet Search Criteria screen appears.

**Note**: The young adult's name has automatically been added as the **SFU Member**.

NAME / ID: <u>Test, Child</u> / 12345678	AGE, DOB: 16, 08/04/2006	CASE ID: 12345
Income and Resources Summary Worksheet Search Criteria		
SFU Member: * Test, Adult - All Verified	Eligibility Month/Year: 01/2023	

The Income and Resources Summary grid appears.

- 3. Review the **Resources**, **Expenses**, and **Income Summary** grids to be certain information has correctly populated from the Person record.
- 4. If the record is correct, select the **Verified** option from each drop-down menu.
- 5. Click, Calculate.
- 6. In the **Reasons for not including** text box, enter the following text when not including income: **Child only case**, **income not considered**.
- 7. Click, Save.

R	Resources Summary							
	Туре	Amount (Subtract Lien Amount)	Less Disregard	Less Expenses	Total Countable	Do Not Include	Verified *	
	Total Resources	\$0.00	\$0.00		\$0.00		Verified 🗸	

nses Summary						
Туре	Amount	Less Disregard	Less Expenses	Total Countable	Do Not Include	Verified *
Total Expenses	\$0.00	\$0.00		\$0.00		Verified
ne Summary Type	Amount	Less Disregard	Less Expenses	Total Countable	Do Not Include	Verified *
Type Total Earned Income	Amount \$0.00	Less Disregard \$0.00	Less Expenses	Total Countable \$0.00	Do Not Include	Verified *
Type Total Earned Income Total Unearned Income	Amount \$0.00 \$0.00	Less Disregard \$0.00 \$0.00	Less Expenses	Total Countable \$0.00 \$0.00	Do Not Include	Verified *

Calculate



The Requirements 7 to 9 grid appears.

8. Click, Save

The Eligibility Details screen appears.

- 1. Verify that all **Yes** or **No** responses are accurate based on the previous steps.
- 2. Click, **Determine Eligibility**.

Initial Program Eligibility	
Initial Removal and corresponding placement exists. Removal Date: 01/25/2023	YES
Requirements 1 to 7	
View / Update Requirements 1 to 7	
1. The child is a citizen or a qualified alien.	YES
2. Legal responsibility was obtained.	YES
3. Best Interest was obtained in the appropriate time frame.	YES
4. Reasonable Efforts were obtained in the appropriate time frame.	YES
5. The child met the age requirement.	YES
6. The child was living with the specified relative within the eligibility month or in the previous six months.	YES
7. The child met the deprivation requirement.	YES
Requirements 8 and 9	
View / Update Requirements 8 and 9	
8. The resources available to the <u>SFU</u> were equal to or less than \$10,000.	YES
9. The income available to the child was less than the July 1996 ADC need standard.	YES

The **Eligibility Details** screen appears, displaying the eligibility determination. Click, **Process Approval.** 



Eligibility Details					
Determination Type: *	Initial	•	Effective Date: *	10/01/2017	
Eligibility Month: *	10/2017		Termination Date:	12/31/2017	
			6 anno 100 Ann		
Comments:			Comments		
[Eligibility Automatically Terminate	d by System(Aged Batch) on:Mon Jan 01	02:00:23 EST 2018]			
4000					
Created in Error					
					IV-E Eligibile: Yes
Determine Eligibility Process Approva					

The Process Approval screen appears.

- 1. Make a selection from the **Action** drop-down menu.
- 2. Make a selection from the **Agency** drop-down menu. For Bridges young adults, this will be the **Ohio Department of Job and Family Services** unless otherwise instructed.
- 3. Make a selection from the **Reviewers/Approvers** drop-down menu.
- 4. Click, Save.

Process Approval			
Work Item			
ID: Task ID:	<u>1212</u> 2323	Type: Task Type:	Reference: Task Reference:
Routing/Approval Action	1		idon sidius.
Action: * Comments:	Please Sel	ict An Action 🗸	
Agency:	Spell Check	Clear 2000	
Reviewers/ Approvers:	Testing C Please Sele	ounty Children Services Board	~
Save Cancel			

The Program Eligibility and Program Reimbursability history grids appear.

**Note**: After final approval of an initial eligibility record, the system will create a pending initial reimbursability record. If this record is not created, or deleted for any reason, a new record can be added by entering the **Effective Date** and clicking the **Add Reimbursability** button.

	Reimbursability Type	Status	IV-E Reimbursable	Effective Date	End Date	
iew	Annual Reasonable Efforts	Complete	Yes	05/10/2023		L â
iew	Placement	Complete	Yes	05/09/2023	05/09/2023	<b>b î</b>
iew	Placement	Complete	Yes	04/25/2023	05/08/2023	<b>L</b>
iew	Initial	Complete	Yes	01/25/2023	04/24/2023	L ô

## **Determining Reimbursability**

From the Ohio SACWIS Home Page:

- 1. Navigate to the **Program Eligibility** and **Program Reimbursability** history screen based on the steps above.
- 2. Click the edit link next to the word, Initial, in the Program Reimbursability grid.

Progra	m Eligibility							
Incl	Include Created in Error							
Legal I	egal Responsibility of Testing County Children Services Board from 01/25/2023 to Present ^							
	Determination Type	Status	IV-E Eligible	Effecti	ve Date	Termination Date		
<u>edit</u>	Initial	Complete	Yes	01/25/202	23			
Progra	m Reimbursability							
Initial I	Eligibility from 01/25/2023 - Pro	resent ^						
	Reimbursability Type	Status	IV-E Reimb	ursable	Effective Date	End Date		
view	Annual Reasonable Efforts	Complete	Yes		05/10/2023		L â	
<u>view</u>	Placement	Complete	Yes		05/09/2023	05/09/2023	L Ó	
<u>view</u>	Placement	Complete	Yes					
	120127070780720026	oomproto	0.757		04/25/2023	05/08/2023		

The Initial Reimbursability Screen appears.

1. Verify that the **housing information** is correct within the **Initial Reimbursability** grid.

Note: The child must be **placed in a reimbursable housing type** for **Reimbursability** to be **Yes**.

 Verify that the child's countable income was less than the cost of care paid by your agency. This can be reviewed by clicking the Income/Resource Summary link within the Worksheets grid.

**Note:** The young adult's countable income cannot exceed this amount for **Reimbursability** to be "**Yes**."

3. Click the **Determine Reimbursability** button.

Initial Reimbursability			
Program Eligible Date: 01/25/2023	Effective Date: 01/25/2023	End Date: 04/24/2023	
Child's Placement			
Was the child placed in a reimbursable setting as	s of the Effective Date?		YES
Placement Provider:		Service Type: Treatment Foster Home Special Needs	
License Date: 10/27/2021		Licensed/Certified Placement: Yes	
Placement Begin Date: 01/25/2023		Placement End Date: 04/25/2023	
View Service Authorization			
Income/Cost of Care			
Was the child's countable income less than the o	cost of care paid by the agency?		YES
Worksheets Income / Resource Summary Child's Need			
Override Reimbursability			
Child should not be reimbursable			
Comments:			
✓ ABC 4000			le
		IV-E Reimbursable	Not Determined
Determine Reimbursability			

**Important**: You have the ability to override reimbursability if the young adult should not be reimbursable, (i.e., if Ohio SACWIS displays a determination of 'Yes' when it really should be 'No'), by selecting the checkbox within the **Override Reimbursability** section below. Document your reason in the comment box.

The Initial Reimbursability grid appears, displaying the reimbursability decision.

1. Once your determination has been made, click the **Save** button.

Override Reimbursability		
Child should not be reimbursable		
Comments:		
✓ ABC 4000		
		IV-E Reimbursable: Yes
Determine Reimbursability		
Created By:	Created Date:	
Modified By:	Modified Date:	
	Save Cancel	

The following message appears:

2. Click **Ok**.



The **Program Reimbursability** history screen appears. The reimbursability record is now marked, **Complete**.

Progra	Program Reimbursability						
Initial	Reimbursability Type	Status	IV-E Reimbursable	Effective Date	End Date		
view	Placement	Complete	Yes	05/09/2023	05/09/2023	L â	
view	Placement	Complete	Yes	04/25/2023	05/08/2023	L ô	
view	Initial	Complete	Yes	01/25/2023	04/24/2023	<b>1</b>	

**Important:** With the exception of the annual reasonable efforts criterion, the program reimbursability steps outlined above are also applicable to **Continued Reimbursability** records. If the **Continued Reimbursability** record is the result of an Ongoing Eligibility Determination, then the system will create a pending reimbursability record. However, the user can also manually add a **Continued Reimbursability** record by entering the **Effective Date** and clicking, **Add Reimbursability**.

The Continued Reimbursability screen appears.

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/2023
/2023 🗎 🏛
/2023
/2( /2(

## **Determining Continued Reimbursability**

The **Continued Reimbursability** grid appears.

**Note:** The system will create a pending **Annual Reasonable Efforts** reimbursability record when one is due and has not been created.

**Important:** Reimbursability will stop if the user does not complete the pending **Annual Reasonable Efforts** determination timely.

- 1. Make a selection from the **Reason** drop-down menu.
- 2. Ensure all **Housing** information is correct.

**Note:** The child must be in a reimbursable housing type and the reasonable efforts requirement must be satisfied for the determination to be, Yes.

3. Click the **Determine Reimbursability** button.

ontinued Reimbursability				
ason:	Effective Date: 05/01/2023		End Date:	
Child's Placement				
Was the child is placed in a reimbursable setting	ig as of the Effective Date?			Y
Placement Provider:		Service Type: Treatment Foster Home	Special Needs	
License Date: 10/27/2021		Licensed/Certified Place Yes	ment:	
Placement Begin Date: 11/01/2021		Placement End Date:		
View Service Authorization				
Annual Reasonable Efforts				
Were the Annual Reasonable Efforts to finalize	the Permanency Plan obtained in the ap	propriate time frame?		Y
Ruling Date: 02/21/2023	Ruling Received: RE to Finalize Permane	ncy Plan - Subsequent	Ruling Type: Permanent Custody	
verride Reimbursability				
Child should not be reimburseable				
nments:				
ABC 4000				
Determine Reimbursability			IV-E Reimbursabi	e: Not Determ
e Continued Reimbu	<b>sability</b> screen ap	pears, displayi	ng the determination.	
termine Reimbursability			IV-E R	eimbursable: )
ed By:		Created Date:		



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The follow message appears. Click the **Ok** button.



If you need additional information or assistance, please contact the OFC Automated Systems Help Desk at <u>SACWIS HELP DESK@childrenandyouth.ohio.gov</u>