Creating an ICAMA Record



Knowledge Base Article

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Overview

This article provides step-by-step instruction for creating an ICAMA (Interstate Compact on Adoption and Medical Assistance) record to establish Ohio Medicaid.

Important: Upon receipt of an ICAMA referral, a FINS- ICAMA Intake must be created, screened-in, and linked to a Case.

Navigating to the ICAMA Screen

From the Ohio SACWIS Home Page:

- 1. Navigate to the Case Overview screen.
- 2. Click the **ICPC/ICAMA** link.

Case Overview				
Activity Log	CASE NAME / ID:	ICPC		
Attorney Communication	Sacwis, Susie / 123456	Open (02/07/2020)		
Intake List				
Safety Assessment	ADDRESS:	CONTACT:		
Substance Abuse Screening	123 Test. Rd Test. Oh 12345			
Earms/Notices	ACENCY:			
Category/Bathway Switch	Test County Children Services Board			
Safety Dian	PRIMARY WORKER:	SUPERVISOR(S):		
Actuarial Disk Assessment	Assign Primary Worker	Test, Supervisor		
Eamily Assessment				
Family Assessment	Case Actions			
Ongoing Case A/I				
Specialized A/I Tool	View Case Information 0 Linked Cases Proc	gram Categories Case Status History		
Law Enforcement				
Justification/Waiver	One or more active case members under ane 22 is missing ICWA information in Person Demographics			
Case Services			3.4	
Legal Actions				
Legal Custody/Status	Case members have unspecified relation	iships.		
Living Arrangement /				
Guardianship				
Initial Removal	Action Items	Case Alerts	Dashboard	Assignments / Eligibility
Placement Request				
Placement/ICCA	No Action Items Found			
Residential Treatment Information				
Independent Living				
Case Plan Tools	Dismiss Action Items			
Visitation Plans				
Review Tools	Close			
Family Team Meeting				
Safety Reassessment				
Reunification Assessment				
Case Conference Note				
Human Trafficking				
Child Fatality/Near Fatality				
100000000				

The ICPC/ICAMA screen appears.

- 3. Select the child's name from the active case members listed in the **Child Name** drop-down menu (**ICAMA List grid**).
- 4. Click, Add ICAMA Information.



ICPC List					
Showing (3) records:					
ICPC / NEICE ID	Name	Sender / Recipient	Ohio Agency	Type / Status	Placement Resource
Incoming/Outgoing Placement Type:	Add I	ICPC Information			
ICAMA List					
Showing (0) records:					
ICAMA ID	Name	Sending State	Receiving A	Agency	Status
Child Name:	Add ICAMA Informat	ion			

The ICAMA Details screen appears.

Completing the ICAMA Details Screen

1. Make a selection from the Sending State drop-down menu. (Receiving Agency

will be pre-populated.)

- 2. Enter the **AA Agreement Date**.
- 3. Enter the ICAMA 700 Form Date.
- 4. Click, **Search Person**, to add a parent(s) to the record. For information regarding a person search, please see the following KBA: <u>Using Search Functionality</u>. If the person does not exist in Ohio SACWIS, you will need to create a new person.

Note: At least one parent must be part of the record. A second parent may be added, as applicable.

Important: You must add the adoptive parent's address and contact information to the person record. Medicaid information will be sent to the address of the first listed adoptive parent.

Note: The child's address also displays on the ICAMA Details page. The address listed is where the Medicaid card will be sent. To add or update the child's address, you will need to go to the child's person record. You may use the hyperlink in the page header.



- 5. Enter the **Ohio Medicaid Effective Date**.
- 6. Click, Save.

ICAMA Details		
Sending State: *	Receiving Agency: Test County Children Services Board	
AA Agreement Date: *	ICAMA 700 Form Date: *	
Adoptive Parent/Guardian: Please specify at least one parent involved in this adoption. Search Person		
Child's Address: Medicaid card will be sent to this address.		
Ohio Medicaid Effective Date: *	Ohio Medicaid Termination Date:	
Status:		
	Save Cancel	

Terminating Ohio Medical

On the ICAMA Details screen:

- 1. Enter the Ohio Medicaid Termination Date.
- 2. Click, Save.

ICAMA Details	
Sending State: *	Receiving Agency:
~	Test County Children Services Board 🗸
AA Agreement Date: *	ICAMA 700 Form Date: *
Adoptive Parent/Guardian:	
Please specify at least one parent involved in this adoption. Search Person	
Child's Address:	
inedicaid card will be sent to this address.	
Ohio Madiasid Effective Datas	Ohio Mediarid Terminetine Dates
Status:	
	Save Cancel

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

