DPP-1258D (R. 5/2021)

	Agreement Number:
	TITLE IV-E FUNDED ADOPTION ASSISTANCE
1	STATE FUNDED ADOPTION ASSISTANCE

# COMMONWEALTH OF KENTUCKY CABINET FOR HEALTH AND FAMILY SERVICES

DEPARTMENT FOR COMMUNITY BASED SERVICES ADOPTION ASSISTANCE AGREEMENT
THIS AGREEMENT, made and entered into as of the day of , 20 by and between the Commonwealth of Kentucky, Cabinet for Health and Family Services, Department for Community Based Services (DCBS), hereinafter referred to as the Cabinet, and
hereinafter called the "adoptive parents", for the purpose of facilitating the legal adoption of (birth and adoptive name) , born on , TWIST# , and to aid the adoptive family in providing proper care for this child with special needs. Additionally, the eligible child is a minor parent who maintains custody and control of their own birth child.
WITNESSETH, THAT:
Whereas KRS Chapter 199 authorizes the payment of assistance to adoptive parents of special needs children.
Whereas KAR Chapter 922 establishes the parenting youth supplement.
Whereas the children may benefit from being adopted and the payment of assistance after the adoption shall increase the likelihood of the adoption; and
Whereas the Cabinet has determined the special needs of the child exist, pursuant to 922 KAR 1:050:
PROVISIONS OF AGREEMENT
I. Assistance
A. Monthly Maintenance Yes S No S
The amount of monthly maintenance is based on the needs of the child and has been determined by mutual agreement between the adoptive parents and the Cabinet. The amount of this payment shall not exceed the foster care maintenance payment, if the child was in foster care in the Commonwealth of Kentucky unless authorized by the commissioner or designee. Adjustments in monthly maintenance may be made with the concurrence of the adoptive parents based upon changes in the needs of the child, or changes in the maximum allowable adoption assistance payment. Documentation of changes in the child's needs may be required. If the child receives both title IV-E and Supplemental Security Income (SSI) payments, the SSI payment will be reduced dollar for dollar without application of any exception to the full amount of any title IV-E payment.
Monthly maintenance calculation is based upon the eligible child's daily rate to the family plus the daily parenting youth supplement of twenty-four dollars (\$24).
R Medical Care

Until the adoption is granted, the Cabinet is the personal representative of a child in the custody of the Cabinet for purposes of the HIPAA security and privacy rules, 45 CFR Part 164. At such time as the adoption is granted, the adoptive parents then become the child's personal representatives and possess the freedom to make decisions regarding the use and disclosure of the child's protected health information (PHI). Until the adoption is granted, however, the adoptive parents agree to respect and maintain the confidentiality of the child's PHI as specified in their foster parent contract with the Cabinet.

#### 1. State Funded and Title IV-E Eligible

Medical benefits as provided under title XIX of the Social Security Act (Medicaid) shall be available in accordance with the procedures of the Commonwealth of Kentucky. It is agreed that whenever possible the child shall be included under the adoptive family's health insurance, which shall be utilized to the fullest extent possible.

#### 2. Title IV-E Eligible Only

Medical reimbursement shall be provided by the Commonwealth of Kentucky if the child moves to another state and the cost of medical care provided under this agreement is not provided by title XIX in the state in which the child resides.

#### C. Social Services

Social services as provided under title XX of the Social Security Act shall be available in accordance with the procedures of the state of residence. Application for social services may be made at the local DCBS office.

This adoption assistance agreement shall continue in force in the event the adoptive family lives in or moves to a state other than Kentucky. Kentucky is a member of the Interstate Compact on Adoption and Medical Assistance. All necessary documentation shall be forwarded to the receiving state upon notification of a pending move of an active assistance family. Detailed instructions shall be supplied to the family at the time of the move with regard to how and where to apply for medical care and social services. Adoption assistance payments shall continue from the Commonwealth of Kentucky.

D. Total reimbursement under subsection A of this agreement shall not exceed a total of \$ for any fiscal year in which this agreement is in effect.

#### **II.** Notification of Change

- A. The adoptive parents shall immediately notify the Cabinet in writing if they are no longer legally responsible for the support of the child or are no longer supporting the child.
- B. Adjustments shall be made to the adoption assistance agreement if requested by the adoptive parents and considered by the Cabinet to be appropriate. Parents shall notify the Cabinet of changes of address or any other circumstances, which could make them ineligible for assistance or eligible for payments in a different amount.

### III. This agreement is in effect from \_\_\_\_\_ until termination, as outlined in Section IV.

## IV. Termination of adoption assistance shall occur in the following circumstances:

#### A. Federal title IV-E Funded Adoption Assistance

At the request of the adoptive parent;

When the child reaches age eighteen (18);

When the child reaches age twenty-one (21) if the state determines that the child has a mental or physical disability which would warrant continuation of assistance;

The Cabinet determines that the adoptive parent is no longer legally responsible for the support for the child, (i.e., termination of parental rights (TPR));

The Cabinet determines the child is no longer receiving support from the adoptive parents;

No adoptive parent who signed the adoption assistance agreement remains living; or

In the event of a new adoption assistance agreement.

### B. State Funded Adoption Assistance

When the child reaches age eighteen (18);

Upon high school graduation or the child's 19th birthday, whichever comes first;

Upon the death of the adoptive parents;

The Cabinet determines that the child is no longer receiving support from the adoptive parents;

The Cabinet determines that the adoptive parent is no longer legally responsible for the support for the child, (i.e., TPR);

Upon the child's death, full-time employment, marriage, or military service;

In the event the state legislature fails to appropriate funds to support the adoption assistance program; or

In the event of a new adoption assistance agreement.

# V. Temporary discontinuance of state funded adoption assistance shall occur during the period of time the adopted child resides in:

Foster Care:

A residential treatment facility;

A psychiatric residential treatment facility (PRTF);

A psychiatric hospitalization exceeding thirty (30) consecutive calendar days;

Detention outside of the home for a period of thirty (30) consecutive calendar days; or

Is absent from the home for a period of thirty (30) consecutive calendar days unless the child is absent due to medical care or school attendance.

Either party may exercise the right to terminate this agreement upon thirty (30) days written notice served upon the other party by registered mail with return receipt requested; provided, however, that the Cabinet may terminate this agreement for cause set forth in section IV, upon written notification to the second party.

The monthly maintenance payment which includes monies to care for the eligible child's birth child is contingent upon the status of the parenting youth as outlined in sections IV and V. In the event that the subsidy is suspended or terminated, this will include the entire monthly maintenance payment.

It is expressly understood that the Cabinet's care, custody, and control over the child shall cease upon entry of the adoption judgment as provided by law.

THIS INSTRUMENT HAS BEEN EXAMINED AND APPROVED AS TO FORM AND LEGALITY BY THE OFFICE OF LEGAL SERVICES, CABINET FOR HEALTH AND FAMILY SERVICES.

APPROVED:	ADOPTIVE PARENTS:		
Authorized Official, Cabinet for Health and Family Services	Date	Adoptive Parent	Date
		Adoptive Parent	Date