

Help:

A HANDBOOK FOR KENTUCKY GRANDPARENTS AND OTHER RELATIVE CAREGIVERS

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ACCESS TO JUSTICE FOUNDATION
LEGAL HELPLINE FOR OLDER KENTUCKIANS
Lexington, Kentucky

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EVERY EFFORT WAS MADE TO MAKE THIS DOCUMENT CURRENT THROUGH JANUARY 2007. PROGRAMS AND POLICES CHANGE, YOU SHOULD ALWAYS VERIFY THAT THE INFORMATION IS CURRENT BEFORE PROCEEDING. THE MORE TIME THAT PASSES, THE GREATER THE LIKELIHOOD THAT INFORMATION IS OUT OF DATE.

INTRODUCTION AND OVERVIEW

Each year thousands of grandparents and other relatives in Kentucky assume the responsibility of raising children for biological parents who are unable or unwilling or to be parents. The care provided by these caregivers impacts the lives of the children for a lifetime. The Caregivers are confronted by many legal and financial issues. The purpose of this handbook is to offer basic information and guidance to the most common legal issues and information about programs and benefits that may help the caregivers in the role of parent.

While we hope that the information contained in this handbook will help many people navigate the system on their own, many legal issues require the assistance of an attorney. We recommend that you find an attorney experienced in family law and that you develop a relationship with that attorney. There is a directory of all lawyers licensed to practice in Kentucky on the Kentucky Bar Association web site at www.kybar.org (use the lawyer locator listed under “membership”). Families with limited incomes and limited savings may be able to get help from the local legal aid program or volunteer lawyer program. You can locate your local program by looking under lawyers or legal aid in your local phone book. If you need help locating your local legal aid program, you can call the Legal Helpline for Older Kentuckians at 800-200-3633.

Grandparent Support Groups can also offer you information, support and a place to share your concerns with other grandparent caregivers. There are many grandparent support groups in Kentucky that provide support, information and company to grandparents and other relatives raising children. These support groups can be found by contacting school officials, health clinics, senior centers and community social services agencies who work with the elderly, children and families. To find out whether there is a grandparent support group near you, or to begin one, contact:

THE AARP
GRANDPARENT INFORMATION CENTER
601 E Street, NW
Washington, DC 20049
(202) 434-2296

Bluegrass Area Development District
Bluegrass Area Agency on Aging
699 Perimeter Drive
Lexington, Kentucky 40517-4120
859-269-8021

The challenges you face when caring for your grandchildren may sometimes seem overwhelming. However, you are not alone! The grandparent/grandchild relationship is a very special one, and we thank you for your hard work and sacrifices to keep your families together!

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CHAPTER ONE: LEGAL ISSUES

This chapter answers the most common questions that are asked by grandparents who are raising their grandchildren. The following topics are addressed: de facto custody; custody; foster care; kinship care; and guardianship.

CUSTODY

All parents have a legal right to make decisions about the care of their children. If parents do not wish to give custody to another person, no one can force them to do so. However, when extraordinary circumstances exist that make it necessary for a court of law to decide whether it would be in the child's best interest to be removed from the parents and be cared for by someone else, then the parent's rights are reduced. In addition, parents can voluntarily decide to give someone else custody of their child.

There are two general types of custody, physical custody or legal custody.

WHAT IS PHYSICAL CUSTODY?

Physical custody occurs when a grandparent takes care of a child without a court order to do so. Physical custody simply means that a person is caring for a child for a period of time. Physical custody does not grant any legal rights, but will contribute to qualifying for de facto custodian status.

WHAT IS LEGAL CUSTODY?

Legal custody exists when a grandparent is given the legal right to take care of the child by a judge. This is also called a "child custody determination". A grandparent who wants legal custody has to go to court and prove to the judge that it is in the best interest of the child for someone other than the birth parents to have custody. (When grandparents have legal custody, the parents have to go to court if they want their children back.)

WHAT DOES A COURT CONSIDER WHEN DECIDING TO GRANT LEGAL CUSTODY?

The court will determine custody in accordance with **the best interest of the child** and equal consideration will be given to each parent and to any de facto custodian.

When determining the child's best interest, the court will consider all relevant factors, including:

- The wishes of the child's parent or parents, and any de facto custodian, as to his custody;
- The wishes of the child;
- The interaction and interrelationship of the child with his parent or parents, his siblings, and any other person who may significantly affect the child's best interests;
- The child's adjustment to his home, school, and community;
- The mental and physical health of all individuals involved;

- Information, records, and evidence of domestic violence;
- The extent to which the child has been cared for, nurtured, and supported by any de facto custodian;
- The intent of the parent or parents in placing the child with a de facto custodian; and
- The circumstances under which the child was placed or allowed to remain in the custody of a de facto custodian, including whether the parent now seeking custody was previously prevented from doing so as a result of domestic violence and whether the child was placed with a de facto custodian to allow the parent now seeking custody to seek employment, work, or attend school.

WHAT ELSE IS CONSIDERED IN DETERMINING THE BEST INTEREST OF THE CHILD?

In determining the best interest of the child, the court may also consider extraordinary circumstances, including the following:

- Mental illness of the child which renders the parent unable to care for the child;
- Acts of abuse or neglect;
- Alcohol or drug abuse;
- Domestic violence;
- Any crime by a parent which leads to the death or physical or mental disability of member of the household; and
- The existence of any guardianship of the parent due to partial disability.

WHAT HAPPENS WHEN THERE ARE NO EXTRAORDINARY CIRCUMSTANCES?

If the court finds that no extraordinary circumstances exist, the court has no reason to interfere or take custody away from the parents; the parents will keep custody of the child.

WHO WILL GET LEGAL CUSTODY IF THERE ARE EXTRAORDINARY CIRCUMSTANCES?

If extraordinary circumstances are found, the legal custody of the child will be determined based on what is in the child’s best interest.

CAN GRANDPARENTS GET LEGAL CUSTODY OF GRANDCHILDREN IF THE PARENTS DO NOT CONSENT?

Grandparents may be able to get legal custody of grandchildren (even when the parents of the children do not agree), if they can prove to the court that there are extraordinary circumstances which require the judge to consider taking custody away from the parents, and it would be in the

child's best interest for the grandparent to have legal custody. If the grandparents do get custody, the parents may request, and the judge may allow, the parents to visit the children.

IF GRANTED LEGAL CUSTODY, DO GRANDPARENTS HAVE TO PAY FOR THEIR GRANDCHILD'S SUPPORT?

Grandparents have an obligation to support and care for the child that they have legal custody of. Grandparents (and parents) are bound to educate, maintain, and support the children under their care. Grandparents also have the right to apply for public assistance programs, such as the Child Care Assistance Program offered by the state of Kentucky or Medicaid, on behalf of their grandchildren to cover the expenses of the grandchild. Grandparents with legal custody can ask the court to order the birth parents to pay child support.

DO I NEED A LAWYER TO GET CUSTODY OF MY GRANDCHILDREN?

In most cases Yes. Even if everyone agrees to the custody someone still needs to file a motion with the court for the Judge to rule on. Unfortunately there are no "standard" forms for the motion. If all parties are not in agreement it is essential that you be represented by an attorney experienced in family law litigation. Contact your attorney or the local legal aid program for help.

IS LEGAL CUSTODY PERMANENT?

No. Legal custody is not permanent and can end when either of the child's parents asks the court to return legal custody to them or when it is no longer in the child's best interest to continue custody. However, the court will hold a hearing to determine whether the circumstances, which convinced the court to change custody of the children from the parents to the grandparents, have changed. If the court decides that circumstances have changed, the court must also decide whether it is now in the best interest of the child to be returned to the parents.

EXAMPLE:

Grandma has been caring for little Tommy for a long time. Tommy's mother is on drugs and is always threatening to take Tommy away. Both Tommy and grandma are afraid of Tommy's mother. Grandma decides to speak to a lawyer about going to court to get legal custody of Tommy. After a hearing, the court grants Grandma legal custody of Tommy. Grandma now has the legal right to make decisions for Tommy. However, Tommy's mother receives rehabilitation for her addiction and improves her relationship with Tommy and seeks to have legal custody of Tommy returned to her. A hearing must be held to determine if the circumstances have changed enough to convince the court that Tommy's mother should have legal custody returned to her.

VISITATION

CAN GRANDPARENTS STILL HAVE VISITATION RIGHTS IF NOT GRANTED LEGAL CUSTODY?

Yes. A court can grant visitation rights to a grandparent if the court feels it is in the best interest

of the child.

IF A PARENT HAS HAD THEIR RIGHTS TERMINATED BY THE COURTS, DOES THAT AFFECT A GRANDPARENT'S VISITATION RIGHTS?

No. If the rights of a parent (grandparent's child) have been terminated, it does not affect the visitation rights of the grandparent, unless the court finds that it is in the best interest of the child to do so.

WHEN CAN A GRANDPARENT BE DENIED VISITATION?

A grandparent can be denied visitation when it is in the best interest of the child to do so, or when the rights of the parent (grandparent's child) has been terminated due to abandonment for a period of 5 years or more.

DO GRANDPARENTS STILL HAVE VISITATION RIGHTS IF A STEP-PARENT HAS ADOPTED THE CHILD?

Yes. Even if a step-parent has adopted the child, grandparents can still seek visitation rights.

WHO DETERMINES IF VISITATION IS IN THE BEST INTEREST OF THE CHILD?

The court will determine if visitation is in the best interest of the child. The court might consider: the custodial parent's attitude; the possibility of conflict; the nature of the relationship between the child and grandparent; the preference of the child; and the mental and physical health of the parties.

DE FACTO CUSTODIAN

WHAT IS A DE FACTO CUSTODIAN?

A de facto custodian is a grandparent or other caregiver other than a biological parent who has been the primary caregiver and financial supporter of a child for at least the minimum time required under the statute. A grandparent or other caregiver of a child who qualifies as a de facto custodian has the legal right to be heard by a Kentucky court in a custody case. Without de facto custodian status, a grandparent can not seek custody of a grandchild without first proving that the biological parents are unfit to serve as parents.

HOW DO I QUALIFY AS A DE FACTO CUSTODIAN?

To qualify as a de facto custodian, you must prove you have been the child's primary caregiver and have provided financial support for:

- (a) A continuous period of six months or more for a child under the age of three; or
- (b) A continuous period of one year or more if the child is three years or older, or has been placed in the home by the department of community based services.

The de facto custodian must be (1) the primary caregiver and (2) the primary financial supporter

for (3) the requisite time period. Note that all three requirements must be met to achieve de facto custodian status. (If a parent has commenced an action to have the child returned the time after the commencement is not included in determining the required minimum time period.)

If you have questions about qualifying as a de facto custodian, consult an attorney.

WHAT ELSE SHOULD I KNOW ABOUT QUALIFYING AS A DE FACTO CUSTODIAN?

- De facto custodianship is not met if a parent pays child support to the grandparent and seeks visitation with the custody of the children.
- De facto guardianship is found where a grandparent has provided for the safety, shelter, and security of the children.
- The de facto custodian must be the primary caregiver and financial supporter, but must also do so to a greater degree than the natural parents. The grandparent must literally stand in the place of the natural parent.

WHAT ARE THE EFFECTS OF BEING A DE FACTO CUSTODIAN?

If you meet the de facto custodian requirements, then you possess standing equal to a biological parent in custody proceedings. This means that the court can listen to what you have to say in a custody proceeding.

AFTER BEING DECLARED A DE FACTO CUSTODIAN CAN MY RIGHTS BE REMOVED?

No. Once you are declared a de facto custodian your voice regarding the child's rights cannot be silenced.

CAN THERE BE MORE THAN ONE DE FACTO CUSTODIAN FOR ONE CHILD?

No. Currently, there can only be one de facto custodian for a child. However, the people who wrote the legislation intended to allow for multiple de facto custodians and the issue will soon to be resolved at the court of appeals, the state supreme court, or the state legislature.

CAN A DE FACTO CUSTODIAN SEEK LEGAL CUSTODY OF A CHILD?

Yes. A de facto custodian can ask the court for legal custody of a child. The court will grant legal custody of the child to the de facto custodian if the court determines it is in the best interest of the child.

WHAT DOES THE COURT CONSIDER IN DETERMINING LEGAL CUSTODY?

The court will always determine custody based on the best interest of the child, with equal consideration given to each parent and any person that meets the definition of a de facto custodian.

Additional factors the court may consider include the following:

- The wishes of the child's parent or parents, and any de facto custodian, as to the child's custody;
- The wishes of the child;
- The relationship of the child with his parent or parents, his siblings, and any other person who may significantly affect the child's best interests;
- The child's adjustment to his home, school, and community;
- The mental and physical health of the individuals involved;
- Information, records, and evidence of domestic violence;
- Extent to which the child has been cared for, nurtured, and supported by any de facto custodian;
- The intent of the parent or parents in placing the child with a de facto custodian; and
- The circumstances under which the child was placed or allowed to remain in the custody of a de facto custodian, including whether the parent now seeking custody was previously prevented from doing so as a result of domestic violence and whether the child was placed with a de facto custodian to allow the parent now seeking custody to seek employment, work, or attend school.

WHAT OTHER ISSUES RELATING TO DE FACTO CUSTODY SHOULD I BE AWARE OF?

- Just because you qualify as a de facto custodian based on the time the child is in your care does not necessarily mean that you will be granted custody of the child. If a parent leaves the child with the grandparent with the understanding that the parent will return and reassume care of the child, that intent to reassume care by the parent is taken into consideration and a grandparent may not automatically be granted custody. The same is true if the child was left in the grandparents care so the parent could seek work or attend school.

EXAMPLE:

Tommy is a one year old child. Tommy's mother made arrangements with her mother, Tommy's grandmother, to watch and care for Tommy so as she could look for a job. Eight months after dropping Tommy off, Tommy's mother returns and tells his grandmother that she wants to take Tommy back home with her because she has found a job and can support him. During her eight month absence, Tommy's mother made no contact with Tommy or his grandmother and sent no money to support Tommy. In fact Tommy's grandmother has been caring for Tommy from her own expenses. Tommy's grandmother would be considered a de facto custodian and have equal standing as a parent in custody proceedings but may not be granted custody by the court due to the mother's intent to return to care for the child.

- The court will not consider conduct of a proposed custodian that does not affect the

relationship to the child. If domestic abuse is alleged, the court shall determine the extent to which the domestic abuse has affected the child and the child's relationship to both parents

EXAMPLE:

Tommy's mother left Tommy with his grandmother because Tommy's father has been arrested for beating Tommy's mother. She needed to go through therapy as a result of the beatings. Upon returning to assume custody of the child, Tommy's grandmother refuses to allow Tommy's mother to take Tommy home with her because she feels that Tommy's mother is unfit as a result of the beatings. The court will determine the effect the abuse has had on Tommy; consider his relationship to his mother, and how the result will affect guardianship. Tommy's grandmother does not automatically have the right to deny Tommy's mother care of the child.

- The abandonment of the family residence by a custodial parent will not be considered where the abandoning parent was physically harmed or was seriously threatened with physical harm by her spouse, when such harm or threat was related to the abandonment.

EXAMPLE:

Jane is one year old. Jane lived with her mother, Ann, and father, John, at her grandparents' house, which Jane's grandmother, Thelma, owns and also lives in. Thelma supports John, Ann and Jane. John was abusive to Ann, and in an attempt to escape the abuse, Ann moved out to a shelter. A year goes by and John is killed in an auto accident. Ann returns and demands that Jane move back in with her to. Thelma would be considered a de facto custodian, but because Ann's abandonment of the home was a result of John's abuse, the abandonment will not be considered by the court.

- The court may grant joint custody to the child's parents, or the child's parents and a de facto custodian, if it is in the best interest of the child.
- If the court grants custody to a de facto custodian, the de facto custodian will have legal custody under Kentucky law.
- If either or both parents die while the child is in the care of a de facto custodian, the de facto custodian will be granted custody of the child if it is in the best interest of the child.

IF TWO PARENTS LIVE TOGETHER, ONE PARENT ADOPTS THE CHILD, AND THEN THE PARENTS SEPARATE, DOES THE PARENT WHO DID NOT ADOPT THE CHILD HAVE RIGHTS AS A DE FACTO CUSTODIAN?

It depends. If that parent can meet the time and financial requirements of a de facto custodian, then yes. If not, that parent cannot be considered a de facto custodian.

BOTTOM LINE

A de facto custodian has legal "standing" to be heard by the courts on custody matters. Being

able to establish de facto custodian status will enable a grandparent to get past the court room door.

FOSTER CARE

WHAT IS FOSTER CARE?

Children who are abused or neglected by their parents may be placed in the legal custody of the State (Cabinet for Health and Family Services or CHFS) after the court has decided that their parents cannot properly care for their children. Children removed from homes are placed in a foster family home, a group home, child care institution, health care facility, or with relatives.

WHEN A CHILD IS PLACED IN FOSTER CARE, DOES THE FOSTER PARENT HAVE LEGAL CUSTODY OF THE CHILD?

No. When a child is placed in a foster care setting, the state maintains legal custody of the child, not the foster parents.

WHAT ARE THE GOALS OF FOSTER CARE?

The Resource Parent Handbook states: “The goal of foster care is to promote the protection and care of children and to provide each child with a safe and nurturing home.” When a child is placed in foster care, the state has given the Cabinet for Health and Family Services (CHFS) the responsibility to plan for the care of the child. A child may be placed in Out-of-Home Care (OOHC) for a planned period of time when it is necessary for the child to separate from his or her parents.

Court orders grant approval for initial removal of a child from the parents, continuation of care outside of the parents’ home, establishment of a permanency goal and other actions taken by CHFS. CHFS staff works in cooperation with the district, family and circuit courts to make decisions following the removal.

IS FOSTER CARE PERMANENT?

Foster care is intended as a temporary placement. Children in foster care may be reunited with their parents or may be adopted by another family member.

WHAT ARE SOME INITIAL PLACEMENT CONSIDERATIONS?

The Cabinet for Health and Family Services (CHFS) provides an array of Out-of-Home Care placements with services and locations that are designed to meet the special needs of each child and family. Specialized placements include emergency shelter care, family foster homes, care plus homes, medically fragile homes, and residential treatment facilities.

WHEN WILL A CHILD BE REMOVED?

Prior to a child’s initial removal and placement in out of home care, the Cabinet for Health and Family Services (CHFS) and the Court make a determination that the child is:

- (a) In danger of serious physical injury or is being sexually abused;

- (b) A victim of physical or emotional injury (as confirmed by a Qualified Mental Health Professional) inflicted by a parent, or injury that was allowed to be inflicted by other than accidental means; or
- (c) In immediate danger due to the parents' failure or refusal to provide for the safety or needs of the child.

WHAT ARE CONSIDERATIONS FOR FOSTER CARE HOMES?

A child in the custody of the Cabinet for Health and Family Services (CHFS) will only be placed with a family and in a home that is approved or licensed; with a parent, when the parents' care/home has been determined to be safe (with permission from the court), or in an approved relative placement.

The Social Services Worker (SSW) places each child in a setting that is:

- (1) The most family-like;
- (2) The least restrictive placement that meets the child's needs; and
- (3) Closest in proximity to his home, community, school, relatives or significant attachments.

Factors that have a bearing on selection of a child's placement include:

- Available appropriate relatives;
- Ability to place siblings together;
- Age, physical, cognitive, mental and emotional level of development;
- Any special condition (including need for medical and behavioral treatment) that may require individualized services;
- Probable options for timely achievement of legal permanency;
- Any placement history that may indicate the need for a placement that provides certain characteristics or services;
- Resources and coping strategies that the child and caregiver possess;
- Physical health needs/screening and acute treatment if needed;
- Educational needs;
- Mental health needs;
- History of abuse or neglect;
- Maintaining contact with parents and other individuals with whom the child has significant attachment; and
- Social, cultural and environmental factors such as the child's language, religious preference, geographic location and parent and child circumstances.

WILL SIBLINGS BE PLACED TOGETHER?

It depends. When placing a child in foster care, the initial placement plan should be to place siblings together, unless circumstances exist that would not be in the child's best interest. The sibling bond is irreplaceable. Connections between siblings and significant others should be maintained to preserve the child's emotional well-being and self-esteem.

The Social Services Worker (SSW) seeks a placement for a child:

- In the most family-like, least restrictive setting;
- With the child's siblings;
- That is in closest proximity to the family's home; and
- That promotes continued contact with the child's family, friends, community, and other primary connections.

When placing a child that is in the custody of the Cabinet for Health and Family Services (CHFS), a Relative Placement is normally the first option considered as it is deemed the least restrictive Out-of-Home Care setting. Many grandparents and other relatives become caregivers of children as a result of placement by CHFS.

WHAT IS THE PROCEDURE FOR RELATIVE PLACEMENT?

The procedure for relative placement is:

- (1) The Social Services Worker (SSW) initiates a criminal records check, a domestic violence check, and a child registry check, and completes the relative home evaluation.
- (2) In some cases, the Family Services Office Supervisor (FSOS) approves placement in the relative's home after completing the records checks and home visit but prior to completion of the written home evaluation. If this occurs, the SSW completes the home evaluation within thirty (30) working days of the placement.
- (3) The decision to place the child with a relative is based on the child's needs and which setting is most suited to meet those needs. Criteria for the SSW's assessment of whether it is appropriate to place a child with relatives may include:
 - The child's relationship with the relatives;
 - The relative's ability to meet the child's basic needs and medical, emotional, educational, or treatment needs;
 - The relative's understanding of the risk factors that led to the child's removal;
 - The relative's ability to appropriately protect the child; and
 - The possibility of placing siblings together.
- (4) If the child is being placed with a relative, the SSW should provide information about the Kinship Care Program, which is described in the Kinship Care section below. There are

special rules that must be followed to place a child in foster care outside the state of Kentucky.

HOW DOES ONE BECOME A FOSTER PARENT?

To receive information describing the steps on how to become a foster parent, contact the office of your local Department for Community Based Services or call (800) 232-KIDS (5437). You will be sent a packet of information that describes the requirements for being approved as a foster parent, the different types of children, and the different types of foster homes.

WHAT HAPPENS AFTER I RECEIVE MY PACKET OF INFORMATION?

After you have received your packet of information, you should read through the information, and then attend an information meeting for families interested in foster care. This meeting provides families with information about the children in foster care and the general requirements for becoming an approved family with the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS). This meeting will give you the opportunity to ask questions, as well as talk to someone who is an experienced foster parent. Contact the office of your local DCBS or call (800) 232-KIDS (5437) for times and dates of information meetings.

WHAT ARE THE QUALIFICATIONS FOR BECOMING A FOSTER PARENT?

To qualify as a foster parent, applicants must be at least 21 years old and are expected to have an income sufficient to meet their family's needs. Applicants may be married or single, and applicants and family members must be in good physical and mental health. This requires a statement from a physician. Applicants must meet the requirements for housing safety and space, provide at least three references, and authorize the release of criminal records to the Department for Community Based Services. This will include a check of the child/spouse abuse registry. Applicants must complete 30 hours of training to help them understand the needs of children in foster care.

WHAT TYPES OF CHILDREN ARE IN FOSTER CARE?

Children placed in foster care are between the ages of 0 to 21 years. Many of these children have been abused, neglected, emotionally maltreated, exploited or sexually abused. Special needs children are those with multiple or severe problems, including medical disabilities, physical handicaps, special dietary needs, birth defects or chronic illness. They may also be mentally retarded as diagnosed by a qualified professional, have emotional or behavioral disturbances as evaluated by a qualified professional or have other circumstances or special needs that ordinary care does not meet.

WHAT ARE THE DIFFERENT TYPES OF FOSTER HOMES?

The different types of foster homes include:

- Regular foster homes;

- Medically Fragile Homes for children with unstable medical conditions;
- Care Plus homes for children who have behavioral problems and have not been successful in regular foster care placements;
- Emergency Shelters for children 12 years and older who are in need of immediate, unplanned placement for less than 30 days; and
- Relative Foster Homes.

WHO ARE SNAP KIDS? I SEE THEIR PICTURES IN THE NEWSPAPERS SOMETIMES.

The majority of SNAP (Special Needs Adoption Program) kids are considered hard to place or "special needs." "Special needs" can include white children over the age of 10; African-American children of all ages; members of sibling groups of three or more school-age children; and children with moderate to severe physical, mental and emotional disabilities.

CAN I GET FINANCIAL HELP FROM THE STATE TO CARE FOR A FOSTER CHILD?

Yes. Foster parents receive financial assistance in the form of a daily rate based on the needs and age of the child and the training and skill of the foster parent. The daily rate includes medical, mental health, school, diapers, day care, haircuts and other special expenses.

WHAT IS RESPITE CARE?

Respite providers are not foster parents but are essential because they help children and their foster parents by providing short-term relief or baby-sitting. Respite care may be provided by the hour, overnight or over a weekend.

WHAT KIND OF TRAINING DO I NEED TO BECOME A FOSTER PARENT?

The Department for Community Based Services provides training that meets the needs of foster parents. Foster parents are required to receive a minimum of six hours of ongoing training each year.

CAN I FOSTER ONLY A SPECIFIC AGE OR NEED CHILD?

Yes. You decide whether to accept any child, or children, referred to you by the Department for Temporary Foster Care.

CAN PEOPLE ON WELFARE BECOME FOSTER PARENTS?

Applicants will not be approved when their only source of income is foster care payments or anticipated adoption subsidy funds. Applicants will be expected to have an income sufficient to meet their present family needs and to insure that they can maintain a stable family home.

CAN I FOSTER OR ADOPT A RELATIVE, SUCH AS A GRANDCHILD?

A child may be placed with a relative when it is in the best interest of the child. A relative foster home must meet the same requirements for training and ongoing approval as non-relative homes.

ONCE I BECOME A FOSTER PARENT, ARE THERE OTHER FOSTER PARENTS I CAN CONTACT FOR ADVICE AND SUPPORT?

Support can be found through the Kentucky Foster/Adoptive Parent Support Network; call 1-877-70HEART.

WHAT OBLIGATIONS DO FOSTER PARENTS HAVE?

A foster parent's obligations can include:

- Arranging for child's educational needs;
- Providing the child with quality food;
- Keeping the child's clothes in proper condition;
- Providing proper toiletry items for the child;
- Cooperating with the Cabinet for Health and Family Services (CHFS) and the state and reporting any incident which affects the child's wellbeing;
- Allowing representatives from child services to enter the home and investigate formal complaints about the child care
- Informing the CHFS about any changes in the household, for example when a foster parent gets married or a new person moves into the home; and
- Recognizing and respecting the religious wishes of the parent.

CAN A GRANDPARENT BECOME FOSTER CARE PLACEMENT FOR A CHILD?

Yes. Under the relative placement care options, grandparents are, if qualified, a proper foster care placement for children.

HOW CAN A GRANDPARENT BECOME THE FOSTER PARENT OF A CHILD?

If a parent is placing a child in foster care or the Cabinet is seeking to remove the child from the parents' home, grandparents make sure that CHFS is aware that they are willing and able to serve as foster parents. A grandparent must meet all the requirements of a foster parent and must follow all the guidelines of the Cabinet for Health and Family Services (CHFS), but there is a preference for placing children with relatives whenever possible.

ONCE I AM MY GRANDCHILD'S FOSTER PARENT, CAN MY GRANDCHILD BE REMOVED FROM MY HOME BY CHILDREN'S SERVICES?

Yes. The Child Welfare Agency can remove the child from your home when they believe that the child's health or safety is at risk or for any other reason. The agency must, however, give you notice ten days before the child is removed, advising you of the reason for the removal, and of your right to seek a review of that decision. If the agency believes that the child's health or safety is in danger, they can remove the child from your home immediately.

WHAT CAN I DO IF MY GRANDCHILD IS TAKEN AWAY FROM MY HOME BY THE CHILDREN'S SERVICES?

If you are your grandchild's foster parent, you have the right to request a hearing to review the agency's decision to remove your grandchild from the home. If the agency believes that the child's health or safety is in danger, they can remove the child from your home immediately. If, however, they do not believe that the child is in immediate danger, they must give you written notice of their intent to remove the child from your home. The notice will tell you how to request a hearing. If you need assistance, contact your local legal aid office.

WHAT IS PERMANENCY PLANNING?

Foster care is temporary. Permanency planning involves efforts by Child Welfare Agency to provide a permanent, safe and stable home for children, whether with their parents or through adoption.

Permanency planning may include:

- Services offered to the family when the children are in foster care to correct family problems and to help reunite the family;
- Services offered to the family to prevent foster care placement; and
- Where the family problems cannot be corrected, the permanent placement of a child by terminating parental rights and freeing the child up for adoption.

WHAT IS THE ADOPTION AND SAFE FAMILIES ACT AND HOW DOES IT AFFECT ME?

The Adoption and Safe Families Act (ASFA) is a federal law which was passed in 1997. The goal of this law is to provide safe, permanent and healthy homes for children in foster care. Some of the provisions in the law affect grandparents caring for grandchildren who are in foster care. Those provisions include:

- All foster parents (and all adults over the age of 18 who live in their home) must submit to a criminal records check and finger printing;
- Permanency hearings must be held for children in foster care to decide the children's long term goals, including: whether the children will be reunited with their parents or placed for adoption; whether termination of parental rights should be started; whether the children will be placed permanently with an acceptable relative; or whether another living arrangement should be found for the child;

- Notice of all foster care court hearings must be given to relatives, as well as foster and adoptive parents, which gives them the right to voice their opinions to the judge;
- The safety of the children in foster care is the main concern when deciding the child's permanency goal; and
- Instructions for filing Termination of Parental Rights petitions (requests) for children who have been in foster care for 15 out of the last 22 months (except where the children are in foster care with relatives).

WHAT DO GRANDPARENTS HAVE TO SHOW WHEN THEY WANT LEGAL CUSTODY OF A GRANDCHILD WHO IS IN FOSTER CARE?

If grandparents want legal custody of a grandchild, they must show the court, at a hearing, that they would be appropriate foster parents who may want to adopt the child, and that they can provide a better adoptive home than the one chosen by the Child Welfare Agency responsible for the child. This is very difficult, especially when a child has been in foster care for a year or more and has become attached to the foster parent.

DO GRANDPARENTS HAVE THE RIGHT TO VISIT GRANDCHILDREN WHO LIVE WITH OTHER FOSTER PARENTS?

Grandparents may be allowed to visit their grandchildren in foster care if they have already gone to court and have a visitation order. They have to request that the order be enforced and the court must find that granting visits to the grandparents will not put the child's life or health in danger. If grandparents do not already have a visitation order, they may be allowed to visit their grandchildren in foster care if the court decides to hear their visitation request, and decides that visits by the grandparent are in the child's best interests. The court must sign an order giving the grandparent formal visitation rights.

GUARDIANSHIP

WHAT IS GUARDIANSHIP?

Guardianship is a legal relationship between you and your grandchild granted by a court of law. In order to obtain guardianship you must go to court and prove that the parents are not able to care for your grandchild. If you succeed, you will receive "letters of guardianship." This means that the court has approved your request and that you now have the legal right to make decisions on behalf of your grandchild.

WHAT IS THE GOAL OF GUARDIANSHIP?

The goal of guardianship is to provide protection, education, care, custody and decision-making for children when the court has determined that living with the parents and adoption is not in their best interest of the child.

WHAT ARE THE GENERAL ISSUES IN A GUARDIANSHIP SITUATION?

The issue in guardianship is to determine what is in the best interest of the child. There is no

concern over the capacity of the child, only for the ability of the parents to provide appropriate care.

WHERE ONE PARENT IS DECEASED, IS THE OTHER PARENT AUTOMATICALLY GRANTED LEGAL CUSTODY OF THE CHILD?

Yes, the surviving parent is assumed to be the legal custodian of the child. To overcome this presumption someone must ask a court to find that living with the surviving parent is not in the best interest of the child.

CAN A PARENT WAIVE LEGAL CUSTODY OF A CHILD?

Yes. A parent can waive legal custody of a child.

WHO HAS THE RIGHT TO LEGAL CUSTODY WHEN BOTH PARENTS ARE DECEASED?

When both parents are deceased, no one has right to custody, including any family members that may wish to raise the child. Any family members that wish to raise the child may seek legal custody, but ultimately the best interest of the child is the deciding factor on who will raise the child.

ARE GUARDIANSHIP AND LEGAL CUSTODY THE SAME?

Generally speaking, guardianship and legal custody are very similar because both are ordered by a court and both give the caregiver the legal right to make decisions for the child. Guardianship is easier to obtain than custody. A custody order is harder to change than guardianship (but both can be terminated or changed by the court.)

The powers granted to a custodian or guardian may be limited by the court order, but frequently include authority to:

- Make medical decisions on behalf of the child;
- Decide where the child will live
- Enroll the child in school
- Act in the role of parent of the child in legal and social service matters
- Claim the child for insurance or tax purposes

WHO CAN BE THE GUARDIAN OF A CHILD?

Any person may ask the court to be appointed guardian of a child under age 18. The guardian does not have to be related to the child.

WHAT ARE SOME OF THE BENEFITS OF GUARDIANSHIP?

Once you are your grandchild's guardian:

- The parent of the child cannot take your grandchild away from you unless a court, after a hearing, ends your guardianship;
- You will be able to decide where the child will live, and make decisions about your grandchild's medical care and education, without interference from the parents; and
- The parents are still legally responsible for the financial support of the child (however, they may be allowed to visit them if they request visitation and the court orders it);
- It is easier to obtain than custody.

IS GUARDIANSHIP PERMANENT?

No. The rights and obligations of a guardian end when:

- The child reaches the age of 18;
- The child who is less than 18 years old gets married;
- The child's parent asks the court to end the guardianship, and the court agrees to end your rights as guardian; or
- Whenever the court orders the guardianship to end.

HOW DO I BECOME A GUARDIAN?

Any person can go to court to ask to be appointed the guardian of a child under 18 years of age. The parents must be notified whenever someone asks the court to be appointed guardian over their child. If the child is over the age of 14, the child can also ask the court to appoint or choose a guardian, and the child may voice his or her consent to the guardian who is chosen. The court will ask the child what is his or her preference for a guardian, and the court may consider the child's preference. Parents may also consent or agree to allow a grandparent to be the child's guardian.

As in legal custody cases, grandparents seeking to become their grandchild's guardian must first prove that there are extraordinary circumstances that make it necessary for the child to be placed in their care. If the grandparent can show extraordinary circumstances, the judge will decide who should be the child's guardian. In making that decision, the court will find out whether the person requesting guardianship has had a report of abuse or mistreatment of a child made against them and the outcome of that allegation. The court will use that information in making its decision.

DO THE RIGHTS OF THE PARENTS END IF I BECOME THE GUARDIAN?

No. Unlike in an adoption, the rights of the parents do not end if you become the guardian of your grandchild. The parents are still responsible for the financial support of your grandchild and may be ordered to pay child support. The parents cannot take the child away from your

home without first going to court, but if the court orders it the parents may be allowed to visit the child.

WHY WOULD A GRANDPARENT ASK THE COURT TO BE APPOINTED GUARDIAN OF A GRANDCHILD?

A grandparent may want to ask the court to be appointed guardian of a grandchild if:

- The child's parents are unable to provide a safe and stable home for the child;
- The child's parents are dead or missing and someone needs to have the authority to make major decisions for the child;
- The child's parents are abusing the grandchildren;
- The child's parents are in jail, or addicted to drugs, or are otherwise not able to care for the children;
- The grandparents are having trouble getting necessary medical care for the child and do not know where to find the child's parents;
- The child has funds from an inheritance or as a result of a lawsuit or settlement, or owns property, and an adult is needed to make decisions about the child's financial affairs;
- The grandparents need legal authority to enroll the children in school;
- The parents are unable to supply a safe and stable home for the child.

WHAT DOES THE COURT CONSIDER WHEN DECIDING WHETHER TO GRANT GUARDIANSHIP TO A GRANDPARENT?

When deciding whether to grant guardianship to a grandparent, the court will look at all of the circumstances, decide whether the parents are able to adequately take care of the child, and if not, then decide who will be appointed the guardian of the child based on the best interest of the child. In addition, the court will want to know the following:

- Where the child's parents are;
- Why the parents are not able to care for the child (remember, parents are the natural guardians of their children unless the court finds that they are not fit to be guardians or are not able to care for their children); and
- Who the child is living with.

CAN A GRANDPARENT EVER BE THE GUARDIAN OF A GRANDCHILD IF A PARENT DISAGREES?

Yes. A judge will have to decide whether extraordinary circumstances exist which make it necessary to allow guardianship of the children based on what is in their best interest. The court will appoint a grandparent as guardian only if the court believes that it would be in the best interest of the child.

CAN THE PARENT GO TO COURT AND ASK THAT THE GUARDIANSHIP END?

Yes. A parent can go to court at any time and ask that the guardianship end. The court will decide whether the guardianship should end or continue after a court hearing.

AS MY GRANDCHILD'S GUARDIAN, MUST I PAY FOR MY GRANDCHILD'S SUPPORT?

Yes. A grandparent who is the child's guardian is financially responsible for the grandchild's support. The parents remain responsible for the financial support of their children. You may be able to apply for public benefits on behalf of your grandchild, such as Family Assistance and Medicaid. If the child is eligible for these programs, you can obtain income and health care coverage for the child. The court may also order the birth parents to pay child support.

WHAT ARE MY RIGHTS AND RESPONSIBILITIES AS MY GRANDCHILD'S GUARDIAN?

If the court appoints you as your grandchild's guardian of the person, you are responsible for the care of your grandchild as if you were the child's parent. You can make all decisions regarding your grandchild including decisions about your grandchild's medical needs, education and where you and the child will live. However, you will need to ask permission of the court to move to another county, another state, or out of the country.

If you are appointed by the court as the guardian of the child's property, you are responsible for that property and cannot waste, sell or destroy the child's property, without being held responsible for the damage or waste. You will also be required to report annually to the court about what has been done with the child's property and/or funds.

Most guardianship appointments are for both the person and the property.

CAN A GUARDIAN CONSENT TO NECESSARY MEDICAL CARE FOR A GRANDCHILD?

Yes. A grandparent who is the grandchild's guardian can consent to necessary medical treatment on behalf of the grandchild, unless the court order appointing the guardian says otherwise. There may be limits on some procedures without court approval.

AS THE GUARDIAN OF MY GRANDCHILD, CAN I DESIGNATE SOMEONE TO TAKE CARE OF MY GRANDCHILD IN MY WILL?

No. Only the birthparents of a child or the child's adoptive parent can designate a guardian in their will to take care of their grandchild. Such guardians are called "testamentary guardians." While guardians cannot designate a successor guardian in a will, under many circumstances, a grandparent guardian can name a substitute guardian by filling out a document to designate a standby guardian.

AS GUARDIAN OF MY GRANDCHILD, CAN I DESIGNATE SOMEONE TO TAKE CARE OF MY GRANDCHILD IF I BECOME ILL OR IF I DIE?

Yes. Grandparents who are the legal guardians, legal custodians, or primary caretakers of their grandchildren can designate someone to be the legal guardian of their grandchild when they become too sick to care for the child or when they are going to die. A grandparent can do this by filling out a document to designate a **standby guardian**.

HOW DO I FILE FOR GUARDIANSHIP OF A CHILD?

Guardianship of children is filed in District Court. Talk to the court clerk for filing procedures in your county. You should talk to an attorney before you file to make sure that filing is the right thing to do.

ADOPTION

WHAT IS ADOPTION?

Adoption is the legal process of changing the legal parents of a child.

SHOULD I ADOPT MY GRANDCHILD?

The answer depends on the circumstances of the birth parents, not on the desires of the proposed adoptive parents. Adoption is the last resort for the family law system, only to be granted when it appears that there is no hope that the birth parents will be able to supply a safe and stable home for the child.

WHAT MUST BE PROVEN FOR A CHILD TO BE ADOPTED?

Before a court can order an adoption it must find that:

The birth parents are “unfit” to be parents; or

That the birth parents are willing to knowingly and voluntarily terminate their parental rights;

AND

That adoption is in the best interest of the child.

WHY WOULD I WANT TO ADOPT MY GRANDCHILD?

Adoption is permanent; it cannot be undone unless the legal process is flawed. Adopted children are treated in the law the same as children born to the adoptive parents. Adoption may make it easier (or possible) for you to add your adopted child to your health insurance. Adopted children are entitled to Social Security Benefits based on the adoptive parents’ earnings records.

WHY WOULD I NOT WANT TO ADOPT?

Adoption is time consuming and expensive. It requires the assistance of attorneys with

expertise in adoption (adoption should not be attempted without the assistance of an expert attorney.) Adoption terminates the right of the child to collect benefits or to inherit from the birth parents. The court process for adoption can be difficult in that it may require you prove very negative things about a member of the family to prove that the parents are unfit.

CHAPTER TWO: BENEFITS

This chapter offers an overview of some of the benefits programs that grandparents may be eligible for.

SOCIAL SECURITY FOR CHILDREN

CAN MY GRANDCHILDREN RECEIVE SOCIAL SECURITY BENEFITS?

Maybe, children who are disabled may qualify for Supplemental Security Income (SSI), Social Security Disability Insurance (SSDI) benefits, or Survivor Benefits if they qualify.

WHAT IF MY GRANDCHILD IS DISABLED?

A child who meets the Social Security Definition of disabled is eligible for SSI from birth to age 18 if the family income and assets are within the limits of the program, and for SSDI from age 18 on if the child becomes disabled before the age of 22.

WHO IS DISABLED?

Social Security has a strict definition of disability for children under the age of 18.

- The child must have a physical or mental condition(s) that very seriously limits his or her activities; **and**
- The condition(s) must have lasted, or be expected to last, at least 1 year or result in death.

The definition of disability for a person age 18 or older is:

Based on an inability to work because of a medical condition, to be considered disabled:

- The adult must be unable to work and because of a medical condition.
- The disability must last or be expected to last for at least one year or to result in death.

To receive SSDI based on the earnings history of a parent, the disabling condition must start before the age of 22.

If you think that your grandchild is disabled, you should make an appointment and apply for benefits. If your application is denied, contact your attorney or local legal aid program to review the decision for possible appeal.

WHAT ARE THE DIFFERENCES BETWEEN SSI AND SSDI?

To qualify for SSI a child must be under age 18 and live in a household that has very limited income and assets. SSI is very limited in the amount it pays. A disabled adult child becomes eligible for SSDI based on the earnings history of a parent, on their 18th birthday if they have a permanent

disabling condition that begins before their 22nd birthday. SSDI has no limits on household income or assets. SSDI benefits are based on the earning history of the person they are based on and can be significantly higher than SSI benefits.

CAN MY GRANDCHILD RECEIVE SOCIAL SECURITY IF THEIR BIRTH PARENTS HAVE DIED?

Probably Yes. 98% of surviving children, children who have lost a wage earning parent, are able to draw Social Security Benefits until they turn 18 or 19 if still in high school based on the earnings of the deceased parent. The rules regarding prior work experience are much more generous for survivor benefits than they are for other forms of Social Security. If one of your grandchildren's parents is deceased, you should contact Social Security for more information.

CAN A CHILD RECEIVE BENEFITS ON THE EARNINGS RECORD OF A GRANDPARENT?

A dependent grandchild or step-grandchild may receive benefits on the record of a grandparent if the following requirements are met:

- The grandchild's natural or adoptive parents are deceased or disabled:
 - At the time the grandparent became entitled to retirement or disability insurance benefits or died; or
 - At the beginning of the grandparent's period of disability which continued until he or she became entitled to disability or retirement insurance benefits or died.
- The grandchild was legally adopted by the grandparent's surviving spouse in an adoption decreed by a court of competent jurisdiction within the U.S.
- The grandchild's natural or adopting parent or stepparent must not have been living in the same household and making regular contributions to the child's support at the time the grandparent died.
- The grandchild must have lived with the grandparent in the U.S. before reaching age 18 and received at least one-half support from the grandparent for the year before the month the grandparent began receiving retirement or disability benefits or died.

THE TRANSITIONAL ASSISTANCE PROGRAM

WHAT IS THE TRANSITIONAL ASSISTANCE PROGRAM?

If you are taking care of your grandchild and you need financial assistance, you can apply for the Kentucky Transitional Assistance Program. You do NOT need a legal relationship to your grandchild, such as guardianship or custody, to apply for Family Assistance for yourself or your grandchild.

The Transitional Assistance Program provides cash assistance to low-income families with children under the age of 15 (or under 16, 17, or 18 if in regular full-time attendance in elementary, junior high, or high school equivalent or an equivalent level of vocational or technical school, or if the child is under age 18 and a high school graduate) to meet rent, food and other needs. However, the program provides assistance to families **for only five years**,

and the program requires an adult applicant or recipient to register to work and develop a self-sufficiency plan in order to qualify or continue to receive benefits.

The Cabinet for Health and Family Services (CHFS), Department of Community Based Services (DCBS) is in charge of the Family Assistance Program statewide.

WHO IS ELIGIBLE FOR TRANSITIONAL ASSISTANCE?

The following people are eligible for Transitional Assistance:

- Adults who have low incomes and resources and who are part of a benefit group that includes needy children. When parents or adult relatives are eligible for Transitional Assistance for themselves and the children in their household, the family can get up to five years of benefits. This five-year limit is a "lifetime limit", meaning that once the five years are up, the family will not be eligible to receive any more Transitional Assistance. In addition, the adults in the home will be required to register for work and develop a self-sufficiency plan in order to receive assistance. An exception to the five year lifetime limitation exists for grandparents or other relatives (except for parents) caring for an eligible child who would otherwise be placed in foster care. If qualifying for this exception the caretaker relative must still register for work, unless the caretaker is over age 60.
- Children who are under the age of 15 (or 16-18 if they are in full-time or part-time school attendance) and who live with grandparents or other relatives. These children are not subject to the lifetime limit of five years and they are also not required to work to receive Transitional Assistance. The relatives who are applying on behalf of the children are also not required to work if they are not receiving Transitional Assistance themselves.

EXAMPLES:

- Grandmother applies for Transitional Assistance for herself and her grandchildren. If they are found eligible, the family can receive Transitional Assistance for a lifetime limit of five years. Grandmother will have to register for work and develop a self-sufficiency plan in order to continue to receive assistance, unless she qualifies for one of the exceptions. The Transitional Assistance that the children receive while they are minors usually does not count toward the five-year lifetime limit for them.
- Grandmother applies for Transitional Assistance for her grandchild only (she receives Supplemental Security Income (SSI), or gets income from another source). Her grandchild can receive Transitional Assistance until the age of 15 (or 18 if he or she is enrolled in school full-time or part-time). Since she herself, is not receiving Transitional Assistance, grandmother will not be required to work. Her grandchild will also not be required to work because he or she is a full-time student.

IS THERE ANY WAY TO AVOID THE FIVE-YEAR LIFETIME LIMIT?

Yes. You can avoid the five-year time limit if you apply for Family Assistance for your grandchild only. If you need cash assistance for yourself, find out what other benefits are available to you (for example, find out whether you might be eligible for Supplemental

Security Income (SSI), Social Security Survivors benefits, Social Security Disability benefits, Veteran's benefits, or unemployment insurance).

The five-year time limit can also be waived if you are unable to work because of a physical or mental condition or if you receive SSI.

AM I ELIGIBLE FOR TRANSITIONAL ASSISTANCE IF I AM HERE ILLEGALLY?

No. If you are in the United States illegally, you are not eligible for Transitional Assistance benefits. You may, however, be eligible for other assistance. For more information on immigrants' benefits, contact an immigration group or your local legal aid office.

CAN SSI RECIPIENTS OBTAIN FAMILY ASSISTANCE?

No. If you receive Supplemental Security Income (SSI) benefits, you are not eligible for Transitional Assistance, but you can apply for Transitional Assistance benefits for your grandchild. Your income will not affect the amount of benefits received by your grandchild. Your grandchild should receive a full grant for one person if they have no other income. In addition, the five-year time limit will not apply.

If your grandchild is the recipient of SSI and meets all other K-TAP requirements, you may still receive K-TAP benefits if all other eligibility factors are met.

CAN I WORK AND STILL BE ELIGIBLE FOR TRANSITIONAL ASSISTANCE?

Yes. You can work and still be eligible for Transitional Assistance because certain income from wages does not count when determining whether you are eligible for Family Assistance. To find out if you are eligible for Transitional Assistance, you should always apply. The Transitional Assistance Program does not count the first \$90 of income earned from a job or a certain portion of the remaining income, up to the income limit for Transitional Assistance for a family of your size.

CAN FAMILIES WHO OWN A HOME STILL BE ELIGIBLE?

Yes. Families that apply for Transitional Assistance can own the home they live in and still be eligible for Transitional Assistance. Additionally, the proceeds from the sale of a home (sale price less indebtedness) is not included in the resources limitation amount for six months if the family plans to invest the money from the sale of the home into another home.

DO I HAVE TO APPLY FOR TRANSITIONAL ASSISTANCE FOR MYSELF IN ORDER TO APPLY FOR MY GRANDCHILD?

It depends. Grandparents who have adopted their grandchildren are treated differently than grandparents who have legal custody or guardianship or grandparents who have not gone to court to get custody or guardianship. The rules are complex but in general they are as follows:

- If you have not adopted your grandchild, you can apply for Transitional Assistance for both yourself and your grandchild or for your grandchild alone. Also, if you apply for Transitional Assistance for your grandchild alone, your income and resources will not be

counted when the child's eligibility for cash assistance is determined.

- If you have legal custody or guardianship of your grandchild, you can also apply for assistance for both yourself and your grandchild or for your grandchild alone.
- Grandparents who have adopted their grandchildren cannot apply for Transitional Assistance for the children alone. Adoptive parents are considered the legal parents of the children and are treated as a single family unit. You will have to apply for Transitional Assistance for both you and your grandchildren; your income and resources will be counted; and you and your grandchildren will only receive cash assistance under the Transitional Assistance program for a five-year time limit.

APPLYING FOR FAMILY ASSISTANCE AS A FAMILY UNIT

Applications for Transitional Assistance can be made through the Cabinet for Health and Family Services (CHFS), Department of Community Based Services (DCBS). Contact the DCBS for more information about where to apply. You can look in the phone book under Workforce Development—Special Programs or contact your local DCBS. All applications are processed in your county of residence.

WHAT DOCUMENTS ARE NEEDED TO APPLY FOR TRANSITIONAL ASSISTANCE?

To apply for transitional assistance, you will need to fill out an application. You will have to provide verification of income, resources, and technical eligibility. As a result, you should bring as many of the following documents with you as you can when you apply for Transitional Assistance:

- Birth certificates (to show your identity and your age);
- Social Security numbers;
- Rent receipts (to show where you live and how much rent you pay);
- Gas and utility receipts;
- Proof of citizenship such as a birth certificate or proof of legal immigration status;
- Proof of income, if any (to show income from any and all sources); and
- Proof of bank and savings accounts, if any
- Proof of identity such as a driver license.

You should apply for assistance even if you do not have all of these documents. You will be given an opportunity to bring them later.

WHAT HAPPENS IF I CANNOT GET THE REQUESTED DOCUMENTS?

If you have tried but cannot get the documents that are requested, you should call your

caseworker and tell your caseworker immediately. If you tell your caseworker that you cannot get a specific document, your caseworker has a duty to help you get the documents requested or may ask you for a different document that can prove the same thing.

HOW MUCH MONEY CAN A FAMILY HAVE AND STILL BE ELIGIBLE FOR FAMILY ASSISTANCE?

Those who apply for Transitional Assistance are subject to income and resource limits. The income limit takes into account the amount of monthly income the person earns, before taxes are deducted, and the Transitional Assistance "standard of need." The standard of need is the amount of assistance provided to a family depending on family size, the amount of rent the family pays, the cost of utilities, and other basic needs. The standard of need may be different from county to county. The best way to find out whether you are eligible for the program is to apply for assistance.

IF I RECEIVE SOCIAL SECURITY DISABILITY, RETIREMENT, OR VETERAN'S BENEFITS WILL THAT AFFECT OUR FAMILY ASSISTANCE BENEFITS?

It depends. If you apply as a transitional family unit, your income from any source will count. If you apply for Transitional Assistance for your grandchild only, your income from social security disability, retirement, or veteran's benefits will not affect your grandchild's benefits. Your social security disability, retirement, or veteran's benefits will only affect your Transitional Assistance benefits if you have adopted your grandchild and you apply for both yourself and your grandchild.

Also, although your income is not counted under the Transitional Assistance program when you apply for your grandchild only, the Cabinet for Health and Family Services (CHFS), Department of Community Based Services (DCBS) will count your income under the Food Stamp Program. This means that the DCBS will ask about your income to see if you and your grandchild will receive food stamps. Because of your income, you may receive little or no food stamps.

WHAT ARE CONSIDERED RESOURCES FOR FAMILY ASSISTANCE PURPOSES?

A "resource" for Transitional Assistance purposes is anything which can be converted to, or turned into, cash. Resources include money received from the following:

- Pensions;
- Health insurance payments;
- Cash value of life insurance policies;
- Property;
- Stocks and bonds;
- Securities;
- Savings and checking accounts;
- Trust funds;
- Settlements;
- Veteran's benefits; and
- Support orders.

ARE THERE INCOME AND RESOURCES THAT ARE NOT COUNTED FOR TRANSITIONAL ASSISTANCE?

Yes. Income and resources that are not counted for Transitional Assistance purposes include:

- Your family's home and proceeds from the sale of a home if you plan to spend the money on to buy another home within 6 months;
- Funds in an individual retirement account, and a retirement or deferred compensation account (while the funds are not available to you);
- Donated food and supplemental food assistance (including your monthly food stamp allotment);
- Principal and accrued interest of an irrevocable trust (while the funds are not available to you);
- The first \$50 of child support collected from your grandchild's parent(s);
- Prepaid burial funds;
- One burial plot or space for each household member;
- A non-recurring lump sum Supplemental Security Income (SSI) retroactive payment that is made to a K-TAP recipient who is not eligible for ongoing SSI I (for the month paid and the following month);
- The value of Kentucky Works supportive services;
- Educational grant, loan, scholarship, and work study income;
- Clothes, furniture, and household appliances;
- Earned income tax credit refunds (for the month received and the following month); and
- Some trust funds for children.

The above is only a sample of income and resources not counted for Transitional Assistance purposes. If you are unsure if you are eligible for Transitional Assistance due to a certain income or resource, you should apply to determine your eligibility.

HOW MUCH TRANSITIONAL ASSISTANCE WILL I RECEIVE?

The amount of Transitional Assistance you will receive depends on the number of people in your family who need assistance and the income and resources of your family, the "assistance unit."

HOW LONG DOES IT TAKE TO PROCESS AN APPLICATION FOR TRANSITIONAL

ASSISTANCE?

The application for Transitional Assistance must be processed within 45 days from the date of the application.

ONCE ACCEPTED FOR TRANSITIONAL ASSISTANCE, IS THERE ANYTHING ELSE I MUST DO?

Once you and your family (or your grandchild by himself) is accepted for Transitional Assistance, you must report changes in circumstances to the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) within 10 days. You must:

- Inform your caseworker of any changes in income;
- Inform your caseworker if any people who have moved in or out of your home;
- Go to all appointments scheduled for you (if you do not go to scheduled appointments, your case may be closed);
- "Recertify" or prove that you are still eligible for assistance from time to time; and
- Inform your case worker immediately when your grandchild will be out of your home for 30 days or more.

ARE THERE ANY EXCEPTIONS TO THE REPORTING RULE?

Yes. There are exceptions to the reporting rule if you have a good reason for not reporting your grandchild's absence from your home. The "good cause exception" allows for you not to report the child's absence when:

- Your grandchild is hospitalized (and expected to return home within a reasonable time);
- Your grandchild is attending school; or
- Your grandchild is absent because he or she was placed in foster care.

If your grant has been reduced because you did not report that grandchildren were away from the home, and you want to know whether you had "good cause," contact your local legal aid office.

IF I RECEIVE TRANSITIONAL ASSISTANCE FOR BOTH MYSELF AND MY GRANDCHILD, DO I HAVE TO WORK?

Yes. If you receive Transitional Assistance for both yourself and your grandchild, not only are you both subject to the five year lifetime limit on the receipt of cash assistance, but you must participate in the Kentucky Works Program and develop a self-sufficiency plan unless you are excused.

HOW CAN I BE EXCUSED FROM THE WORK REQUIREMENT?

You will not have to participate in the work requirement if you are:

- 60 years of age or older;
- Personally taking care of a grandchild under the age-of twelve months (this excuse is available for a lifetime maximum of twelve months and can be consecutive or cumulative);
- Needed at home because someone in the home has a mental or physical handicap which is confirmed by a doctor and no one else available to help;
- Ill or injured or cannot work for up to three months (you must show medical documents or a report from your doctor); or
- Disabled (you must show proof of your disability, generally within ten days. You may also be required to go to a doctor chosen by the Department of Social Services for further verification of your disability).

Children under the age of 16 (or under the age of 19 if attending school (full-time) are also not required to work.

Check with the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) for the exemptions (or excuses) to the work requirement. If you believe you should be excused, you must talk to your caseworker about getting excused from the work requirements. If you think you have an excuse for not working but are not able to prove it to the DCBS or if you need assistance, contact your local legal aid office.

CAN I RECEIVE CHILD CARE TO GO TO WORK?

Yes. Families with children under 13 years of age who receive Transitional Assistance are eligible for child care (provided by family day care, child day care centers, school-age child programs, or home care) if it is necessary for the caregiver to work. The amount provided for the care is decided by the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS).

HOW WILL I KNOW WHETHER THE APPLICATION FOR FAMILY ASSISTANCE HAS BEEN ACCEPTED?

The Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) must inform you, in writing, whether you are accepted or denied for Transitional Assistance. You should receive a notice, in writing, with the decision taken on your application. If you do not receive a notice within 45 days, call the DCBS and ask about your application and when the notice will be sent to you. You can also ask for a fair hearing if it has been more than 45 days since the day you applied for Transitional Assistance and you have not received a decision on your application.

WHAT CAN I DO IF THE APPLICATION IS DENIED?

If you were found not eligible for Transitional Assistance and you disagree with the reason for the denial, you can appeal the decision by asking for a "fair hearing". A fair hearing is an administrative procedure before a hearing officer who will decide whether the decision made by the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) was correct. Fair hearings can also be used when you believe that the amount of money your family receives is not correct, when you receive a notice that you are no longer eligible for Transitional Assistance, or any other decision.

Sometimes the DCBS will tell grandparents that they must first get guardianship or custody for the child, before they can apply for assistance. This is not correct. If this happens to you, you must ask for a denial of your Transitional Assistance application in writing. You will then be able to ask for a fair hearing to have your case reviewed.

WHAT CAN I DO IF THE FAMILY ASSISTANCE BENEFITS ARE REDUCED?

The Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) must inform you, in writing, if your grant is going to be reduced, increased, terminated or suspended 10 days before such action. The notice must also tell you of your right to request a conference and a fair hearing if you disagree with the action taken by the DCBS. Hearings must be requested within the time limit described in the notice. Read your notice carefully and do not wait to request a hearing. If your benefits are reduced and you did not receive notice, ask for a fair hearing immediately, and contact your local legal aid office.

APPLYING FOR FAMILY ASSISTANCE BENEFITS FOR A GRANDCHILD ONLY

NOTE: This section does NOT apply to grandparents who have adopted their grandchildren.

WHO CAN APPLY FOR TRANSITIONAL ASSISTANCE ON BEHALF OF A CHILD?

Any relative with whom the child lives can apply for Transitional Assistance on behalf of a child that lives with them, as long as they have not adopted the child. These relatives include grandparents, sisters, brothers, aunts, uncles, cousins, nephews, and nieces.

Grandparents with legal guardianship or legal custody can apply for Transitional Assistance as a family unit or for their grandchildren alone. If they apply for their grandchildren only, they will not be subject to the five-year time limit. If eligible, the children will receive Transitional Assistance until the age of 18 if they are full-time students.

MUST I HAVE LEGAL CUSTODY OR GUARDIANSHIP TO APPLY FOR TRANSITIONAL ASSISTANCE FOR MY GRANDCHILD?

No. Grandparents and other family members can apply for Transitional Assistance on behalf of their grandchild, even if they have no formal legal relationship with the child. Guardianship or custody is not needed to apply for Transitional Assistance for the child.

The child must live with the relative and the child's parents must usually live outside of the home.

IS ADOPTION TREATED THE SAME AS LEGAL GUARDIANSHIP AND LEGAL CUSTODY?

No. Grandparents who have adopted their grandchildren become the legal parents of the children and are considered financially responsible for them. This means that they cannot apply for Transitional Assistance for the grandchild only. They can apply for Transitional Assistance as a family unit, if their combined income and resources are very low. If the entire family is found eligible for Transitional Assistance, they are subject to the five-year lifetime limit for cash assistance and the work requirements.

WHAT MUST I PROVE TO APPLY FOR FAMILY ASSISTANCE ON BEHALF OF MY GRANDCHILD?

To apply for family assistance on behalf of your grandchild, you must prove that:

- Your grandchild is under 15 years old (or 18 if he or she is in school full-time);
- You are related to your grandchild; and
- Your grandchild lives with you in your home.

WHAT DOCUMENTS CAN I USE TO PROVE THAT I AM RELATED TO MY GRANDCHILD?

Some of the documents you can use to prove that you are related to your grandchild include:

- Birth certificates listing the alleged parents;
- Legal papers, including hospital records, juvenile court record, or a will;
- A sworn statement or affidavit of either parent acknowledging the relationship plus one of the following: school record, Bible record, immigration record, naturalization record, or baptismal certificate.

The above listing is not all-inclusive. If you are unsure as to what you need to provide to prove that you are related to your grandchild, you should contact the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) or your local legal aid society.

WILL I HAVE TO SHOW PROOF OF MY INCOME IF I APPLY FOR MY GRANDCHILD ALONE?

Yes. The Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) will ask you for proof of your income if you apply for Transitional Assistance for your grandchild only.

WHY DOES THE DCBS NEED PROOF OF MY INCOME IF MY INCOME IS NOT

COUNTED?

Although your income and resources do not count when applying for Transitional Assistance for your grandchild alone, your income and resources *do* count for Food Stamp purposes. An application for Transitional Assistance is also an application for Food Stamps. The Food Stamp program counts all people who live together and buy food together as a family to determine how much assistance the family is eligible for.

If the combined income and resources of you and your grandchild are over the eligibility level for food stamps but within the eligibility levels that apply to Transitional Assistance for the child alone, your grandchild will receive cash assistance from the Transitional Assistance program, but you and your grandchild will not be eligible for food stamps.

IS MY GRANDCHILD ELIGIBLE FOR TRANSITIONAL ASSISTANCE BENEFITS IF I RECEIVE SUPPLEMENTAL SECURITY INCOME (SSI)?

Yes. Your grandchild may be eligible for Transitional Assistance benefits if you receive SSI, and you can apply for Transitional Assistance for your grandchild only. Your income and resources will not affect the amount of cash assistance that your grandchild receives.

IS MY GRANDCHILD ELIGIBLE FOR TRANSITIONAL ASSISTANCE IF I WORK?

It depends. If you work and are applying for Transitional Assistance **for your grandchild only**, your grandchild may be eligible for benefits if he or she has little or no income or resources, whether or not you work. If you work and are applying **for yourself and your grandchild**, both of you may be eligible for Transitional Assistance depending on how much you earn from your job.

WILL MY GRANDCHILD'S TRANSITIONAL ASSISTANCE BE LOWERED IF I CLAIM MY GRANDCHILD AS A DEPENDENT ON MY INCOME TAX RETURN?

No. Claiming your grandchild as a dependent and applying for the Earned Income Tax Credit will not reduce your grandchild's Transitional Assistance.

MUST I GO TO WORK IF MY GRANDCHILD GETS TRANSITIONAL ASSISTANCE?

No. You can apply for Transitional Assistance for your grandchild alone if you do not need cash assistance for yourself. Since you would not be part of your grandchild's Transitional Assistance benefits, you would not be required to participate in the Kentucky Works Program.

MUST I REPORT ANY MONEY I RECEIVE REGULARLY FROM MY GRANDCHILD'S PARENT?

Yes. Remember, if you receive Transitional Assistance, you must report any and all income you and your grandchild receive. If your grandchild is receiving Transitional Assistance and you are receiving money from the absent parent regularly, you must report it. Failure to report income can result in your receiving more money than you are entitled to. If you receive an overpayment the Cabinet will require you to pay it back.

WHAT HAPPENS IF I DO NOT REPORT MONEY THAT IS RECEIVED BY MY

GRANDCHILD OR MYSELF?

You must report any money received by your household if your household receives Transitional Assistance. The amount of income and resources your household has determines the amount of your Transitional Assistance benefits. If you do not report money your household receives and the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) finds out, your grant will be reduced until you have paid back all of the money you should have reported.

IS MY GRANDCHILD ELIGIBLE FOR TRANSITIONAL ASSISTANCE IF THE CHILD IS HERE ILLEGALLY?

No. If your grandchild is not legally in the United States, your grandchild is not eligible for Transitional Assistance benefits. For more information on immigrants' benefits, contact an immigration group, your local legal aid office.

MUST I HELP THE DEPARTMENT OF SOCIAL SERVICES FIND MY GRANDCHILD'S PARENTS?

Yes. When you apply for Transitional Assistance, you sign over to the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) your right to collect child support on behalf of your grandchild, and you must help DCBS find your grandchild's parents so that they can help support your grandchild.

You must cooperate by helping to prove who the father of the child is, and by providing information about the absent parents that will help DCBS locate them. Some of the procedures you will need to assist the DCBS in include:

- Identifying the non-custodial parent;
- Assisting in locating the non-custodial parent and enforcing a child support order;
- Cooperating in a review of a child support order; and
- Establishing paternity, if required.

You may also have to go to the DCBS or local child support enforcement office to provide information, and may have to appear as a witness in family court.

WHAT CAN I DO IF I AM AFRAID TO PROVIDE THE REQUIRED INFORMATION?

If you have a good reason for not cooperating or helping the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS), the caseworker should tell you that you could claim "good cause" for not wanting to cooperate. To claim good cause, you must prove that you are afraid that cooperation may result in physical or emotional harm to the child or yourself.

To find out more about what good cause is, speak to your caseworker. For assistance in

proving that you have good cause for not cooperating, contact your local legal aid office.

WHAT HAPPENS IF I REFUSE TO COOPERATE?

If you have provided all of the information you have on the absent parents, you should be offered the opportunity to sign a statement, which states that you have given all the information you have on the absent parents and that you have no other information. If your benefits are reduced "for failure to cooperate with child support enforcement," you should ask for a "fair hearing" and contact your nearest legal aid office. If your grandchild is the only one who was receiving Transitional Assistance, his or her benefits will not be affected.

HOW LONG WILL THE PENALTY LAST?

You will be penalized until you cooperate the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) in locating the absent parents. If you need assistance or want to find out whether the DCBS correctly reduced your grant, contact your local legal aid office.

WHAT HAPPENS IF THE DEPARTMENT OF SOCIAL SERVICES GETS SUPPORT FROM THE ABSENT PARENT?

If the Department of Social Services receives child support from your grandchild's parents, you will receive the first \$50 a month of any support received by them in addition to your Transitional Assistance grant.

FAMILY ASSISTANCE AND ADOPTED CHILDREN

NOTE: This section applies to grandparents and all other relatives who have ADOPTED the children in their care and are now financially responsible for them.

CAN I APPLY FOR TRANSITIONAL ASSISTANCE FOR BOTH MY GRANDCHILD AND MYSELF IF I HAVE ADOPTED MY GRANDCHILD?

Yes. If you have little or no income and resources, you can apply for Transitional Assistance for both of you as a family unit. You cannot apply for the child alone. If you apply for Transitional Assistance for yourself and your grandchild, you and your grandchild will only receive Transitional Assistance for a lifetime limit of five years and you will be subject to the Family Assistance work requirements.

WILL MY INCOME COUNT WHEN I APPLY FOR TRANSITIONAL ASSISTANCE FOR MYSELF AND MY GRANDCHILD?

Yes. If you have income and apply for Transitional Assistance on behalf of yourself and your grandchild, your income will count for Transitional Assistance purposes and the amount of your household's total income will determine:

- (a) Whether you and your grandchild will be eligible for assistance;
- (b) How much cash assistance you will receive; and
- (c) Whether you will have to participate in the Kentucky Works Program.

IF I GET A JOB, WILL MY PAY COUNT UNDER THE TRANSITIONAL ASSISTANCE PROGRAM?

Yes. If you are working, you may be eligible for some assistance from the Transitional Assistance Program until your income makes you no longer eligible for benefits. If you receive Transitional Assistance and work, you must fill out a report showing your earnings to the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) so that they can determine whether you are eligible for Transitional Assistance.

KENTUCKY CAREGIVER SUPPORT PROGRAM

WHAT DOES THE FAMILY CAREGIVER PROGRAM DO?

The Kentucky Caregiver Support Program (FCSP) provides grants of up to \$750 per year to grandparents with a household income of up to 150% of the federal poverty level, who are raising grandchildren to help pay for clothing, education, medical or dental care or legal services.

WHO QUALIFIES FOR FCSP?

Kentucky grandparents who are the primary caregiver of a grandchild who lives with them in a household with an income of not more than 150% of the federal poverty level. Grandparents who receive payments from the Kinship Care program are not eligible for this program.

WHAT IS THE INCOME LIMIT?

The income limits for 2006 are in the table below. The limits will increase each year.

Persons in Family or Household	Gross Income
1	\$14,700
2	\$19,800
3	\$24,900
4	\$30,000
5	\$35,100
6	\$40,200
7	\$45,300
8	\$50,400

For each additional person, add	\$5,100
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WHAT INCOME IS COUNTED?

All income of everyone living in the home as a family is included.

WHERE DO I APPLY?

You apply through the local Area Development District, Area Agency on Aging.

WHAT DO I NEED TO APPLY?

To apply you need proof of total household income, such as W-2, pay stubs, pension and Social Security letters, and documentation to show where you live and who lives with you. The applying agency will ask questions about your household and family to see if there are other programs or services that you may be eligible for.

WHAT CAN THE GRANT BE SPENT ON?

The grant can be used to pay for clothing, school supplies, educational needs, unmet medical needs of the child, short term child care to provide a break for the caregivers (respite care,) or legal assistance to establish or maintain guardianship or custody of the child. The grant is paid directly to the merchant or service provider; you will be given a list of approved retailers and services providers.

NATIONAL FAMILY CAREGIVER SUPPORT PROGRAM (NFCSP)

WHAT IS THE NATIONAL FAMILY CAREGIVER SUPPORT PROGRAM?

The National Family Caregiver Support Program was created as an amendment to the Older Americans Act Reauthorization of 2000. In addition to supporting the needs of caregivers of elderly persons, the NFCSP is also charged with supporting grandparent caregivers of minor children.

Although funding for this work is very limited, grandparents and older relatives who are the primary caregivers to their (grand) children, and who are over the age of 55, are eligible for program services, regardless of income.

WHO IS ELIGIBLE FOR NFCSP SERVICES?

- Grandparent or older relative caregiver 55 years of age or older
- Who are the primary caregiver to a minor child or children, related by birth, or adoption of the natural parent
- Regardless of income or assets.

WHAT SERVICES CAN BE OBTAINED THROUGH THE NFCSP?

Primarily, the program provides information and referrals for grandparent caregivers.

The program can assist with access to local, regional, state, and federal benefits and services.

The program can pay for respite care services in the form of after school or summer camp programs for children being cared for by their grandparents or other older relatives.

The program can also pay some recreational, activity, or school fees for children on behalf of grandparent or older relative headed households.

And finally, the program can pay expenses and fees related to the training, counseling, support group activities, or informational needs of a grandparent or older relative caregiver.

HOW DO I APPLY FOR NFCSP SERVICES?

Application materials can be obtained from the Area Development District - Area Agency on Aging in your region. A listing of the ADD and AAA serving your region can be obtained by e-mail at info@kycadd.org, or by calling (502) 875-2515. Not all services may be available in all areas, and application processes and funding limits can differ greatly from one region to the next.

KINSHIP CARE

WHAT IS KINSHIP CARE?

The Kinship Care Program has been established to provide a stable home for children who have been or may be removed from their parent's home. Kinship Care is an alternative to foster care placement and is provided to children who may otherwise be placed in foster care by the Cabinet for Health and Family Services (CHFS) due to:

- (1) The death of both parents;
- (2) A substantiated finding of abuse or neglect by CHFS; or
- (3) A determination that placement with a relative rather than a non-relative is in the best interest of the child.

There are 3 primary agencies involved in the Kinship Care Program: (1) the Division of Family Support, (2) the Division of Child Support, and (3) the Division of Protection and Permanency.

WHAT ARE THE REQUIREMENTS OF KINSHIP CARE?

The Kinship Care Program applies only when removal of the child from the parent's home by the Cabinet for Health and Family Services (CHFS) is imminent. A child is at risk of placement

in foster care if a petition has been filed by CHFS for removal of the child and, one of the following conditions exists:

- (a) An investigation is in process and abuse or neglect will be substantiated; or
- (b) An ongoing case where abuse or neglect has been substantiated.

If both parents are deceased, a dependency petition must be filed for the child to be eligible for the Kinship Care program.

If a child is currently in foster care and the Social Services Worker (SSW) has identified a potential relative placement, the child may be eligible for Kinship Care upon temporary custody being granted to the relative by the court.

WHAT TYPES OF CHILDREN DOES THE KINSHIP CARE PROGRAM SERVE?

The Kinship Care Program serves children who are:

- In need of protection and unable to remain in the parental home;
- Removed from the parental home for a protection issue;
- In placement with a caring relative who has been determined by the Cabinet for Health and Family Services (CHFS) to be a preferable alternative to placement with a non-relative;
- At risk of commitment to CHFS due to abuse or neglect;
- Currently in a non-relative foster care placement; or
- In a child-only Kentucky Transitional Assistance Program (K-TAP) case, with a prior protection case on record and the relative placement arranged by the CHFS.

WHAT DOES THE KINSHIP CARE PROGRAM PROVIDE?

The Kinship Care Program provides:

- (1) Financial assistance; and
- (2) Case-management service to each non-parental relative caring for the child in his or her home.

WHO CAN BE CONSIDERED A CAREGIVER RELATIVE FOR KINSHIP CARE?

A caregiver relative for the Kinship Care Program must be an adult who is related to the child by blood, marriage or adoption.

WHAT ARE THE REQUIREMENTS FOR A RELATIVE SEEKING KINSHIP CARE?

In determining whether a relative is eligible for Kinship Care, the Social Services Worker (SSW) will consider the relative's:

- Ability to protect the child from abuse or neglect;
- Understanding that they are to seek permanent custody;

- Willingness and ability to pay legal fees involved in gaining permanent custody;
- Commitment to, abilities and functional abilities to provide for the ongoing care of the child, including emotional, cognitive and functional abilities.

A relative whose home is being considered for placement of a child must:

- (1) Receive an approved home evaluation by the staff of the Cabinet for Health and Family Services (CHFS);
- (2) Pass a criminal record check;
- (3) Be free of a substantiated child or adult abuse or neglect report; and
- (4) If the relative has a conviction or substantiated charge other than minor traffic offenses, provide evidence of rehabilitation by submitting a character reference from (1) a person with good standing in the community who is not a relative or close friend; and (2) an employer or other person able to attest to the person's character.

If rehabilitation has been sufficiently demonstrated, the evaluation will continue.

WHAT HAPPENS AFTER A RELATIVE MEETS THE REQUIREMENTS FOR KINSHIP CARE?

After a relative meets the requirements for Kinship Care, the Cabinet for Health and Family Services (CHFS) will recommend to the court that the caretaker relative be granted temporary custody of the child.

After a period of twelve (12) months from the date of placement, CHFS will:

- (1) Review the placement; and
- (2) Draft a recommendation to the court regarding permanent custody or guardianship.

WHAT IS THE GOAL OF KINSHIP CARE?

The ultimate goal of Kinship Care is permanent custody with a caregiver relative if returning the child to the parent(s) is not in the best interest of the child. The Social Services Worker (SSW) will continue to work with the parent(s) in an attempt to reunite the child with the parents during the 6 months before the recommendation to the court. If it is determined that the best interest of the child is permanent custody with a caregiver relative, the SSW will make this recommendation to the court.

WHAT ARE THE RESPONSIBILITIES OF A CAREGIVER RELATIVE?

The caregiver relative must:

- (1) Cooperate in a child support activity; and
- (2) Participate in an annual eligibility review.

CAN I QUALIFY FOR CHILD CARE WHILE IN KINSHIP CARE?

Yes. Child Care resources may be provided if you need assistance with child care. Child day care is defined as the provision of essential child care for a portion of a day on a regular basis and is designed to supplement, but not substitute for, the family's responsibility for the child's protection, development and supervision. Child Care may be provided but not for a continuous 24-hour time period. Child care funds may not be used to pay for respite care.

WHAT CAN KINSHIP CARE MONEY BE SPENT ON?

Kinship care money may be used for:

- Clothing for the child;
- School supplies for the child, that the school has requested in a list form; and
- Additional furniture for the child.

HOW MUCH CAN A CAREGIVER RELATIVE GET FOR KINSHIP CARE?

The monthly payment scale and limit on the child's income for Kinship Care are as follows:

Number of Eligible Children	Monthly Payment and Income Limit
1 Child	\$ 300
2 Children	\$ 600
3 Children	\$ 900
4 Children	\$ 1200
5 Children	\$ 1500
6 Children	\$ 1800

CAN I BE FOUND INELIGIBLE FOR KINSHIP CARE?

Yes. As a caregiver relative, you may be found ineligible for Kinship Care and payments will stop if:

- You adopt the child;
- You move out-of-state (because residency is a requirement);
- The child reaches (1) age 16 and not attending school, (2) age 18 and not attending school full-time at or below the high school level, or (3) age 19;
- The child receives too much income from another source;
- The child receives Supplemental Security Insurance (SSI);
- The child leaves Kinship Care without good cause;

- The Social Services Worker (SSW) determines that the child's parent(s) is residing in the same household with you;
- The child is reunited with a birth parent; or
- You refuse to accept permanent custody (although you may still be eligible for other benefits provided by other state-operated programs).

WHAT EFFECT DOES PERMANENT CUSTODY HAVE ON KINSHIP CARE?

Permanent custody is the desired outcome of the Kinship Care Program and does not stop Kinship Care payments. The Social Services Worker (SSW) will notify the Department of Family Support and request that the Kinship Care payments be discontinued if payments have been received for twelve (12) months and you have not pursued permanent custody. In assessing whether you have pursued permanent custody, the SSW will consider the following:

- Whether you have attempted to obtain permanent custody through the district or family court;
- Whether the SSW has sought assistance from an attorney with the Office of the General Counsel on your behalf;
- Whether you have consulted with a private attorney regarding obtaining permanent custody through the district, family or circuit court; or
- Whether the SSW has been notified by the Office of the General Counsel that an attorney has agreed to file petition or motion on behalf of the Cabinet for Health and Family Services (CHFS).

CHAPTER THREE: NUTRITIONAL ASSISTANCE

There are some exceptions to the general rules for nutritional assistance. If you need help, contact your local Cabinet for Health and Family Services office and apply.

THE FOOD STAMP PROGRAM

WHAT IS THE FOOD STAMP PROGRAM?

Help with buying basic food is provided to eligible households in the form of stored value or electronic benefits transfer cards. These cards work like a debit card, with additional benefits being added to the account on a monthly basis. The cards can be used to purchase food at grocery stores, supermarkets and farmers' markets. They are available to families who have low income and resources.

The Kentucky Food Stamp Program is managed by the Cabinet for Health and Family Services (CHFS). For more information about the Food Stamp Program, call the Food Stamp Center in the county where you live or call the Ombudsman toll free at (800) 372-2973. For the Food Stamp Center closest to your home, you can call EBT/Food Stamps Information at (502) 564-7050 or Ricky May, Branch Manager at (502) 564-3440.

WHO IS ELIGIBLE FOR FOOD STAMPS?

Low income adults and dependent children, living in one household, are eligible for the Food Stamp Program.

WHAT IS CONSIDERED A "HOUSEHOLD" UNDER THE FOOD STAMP PROGRAM?

For purposes of the Food Stamp Program, a household is any person, family or group of people who live and buy and eat food together. Generally, children who are in the care of an adult other than their parents are considered to be part of that adult's household. Therefore, grandparents and their grandchildren, who are living together, are considered one household for purposes of the Food Stamp Program. All of the household's income and resources count when the family applies for Food Stamps, unless exempted under the program rules.

WHAT IS THE INCOME LIMIT FOR THE FOOD STAMP PROGRAM?

The amount of income a household can receive and still be eligible for Food Stamp benefits depends on household size. Money from wages or other payments to any household member is counted as income, though some earned income is not counted. Many benefits payments are not counted as income.

WHAT CAN BE DEDUCTED FROM INCOME?

Your household may qualify for deductions from the household's income, such as:

- Rent;

- Utilities;
- Legally obligated child support paid to someone outside the household; and
- Babysitting expenses.

If your household includes older or disabled members, you may also be able to deduct medical costs.

Proof of income and expenses must be provided to receive deductions. Such proof can be provided with pay stubs, Social Security letters, rent and utility receipts or savings account statements. The amount of Food Stamp benefits your household will receive is based on household size and income after deductions.

WHAT IS THE FOOD STAMP RESOURCE LIMIT?

To be eligible for the Food Stamp Program, a household may have no more than \$2000 in cash or money in the bank. If a member of the household is 60 or older, the household may have no more than \$3000 in resources.

WHAT ARE RESOURCES UNDER THE FOOD STAMP PROGRAM?

A resource for purposes of the Food Stamp Program is anything that can be used to buy food and that is not income. Resources include:

- Money in a checking or savings account;
- Savings certificates;
- Stocks or bonds;
- Real estate other than an owner occupied home.

WHAT IS NOT CONSIDERED A RESOURCE?

The following are not considered resources for purposes of the Food Stamp Program:

- Your dwelling;
- Household belongings (television, clothes, furniture, etc.);
- Personal belongings;
- Vehicles;
- Cash value of pensions and IRAs;
- One burial plot for each member of the household.

ARE THERE WORK REQUIREMENTS IN THE FOOD STAMP PROGRAM?

Yes. Anyone in a household who is 16 to 60 years old and can work must register for, look for and accept work. There are some exceptions to the work requirements.

WHAT ARE THE EXCEPTIONS TO THE WORK REQUIREMENTS?

The following are exceptions to the work requirements:

- Students enrolled at least half-time in school (training program or institution of higher education) unless they graduate, are suspended or expelled from school, or if they do not intend to return to school;
- Persons under 18 or over the age of 50; and
- Persons who are medically certified as physically or mentally unfit for work.

HOW DO I APPLY FOR FOOD STAMPS?

To apply for Food Stamps, the head of your household, or an authorized representative, must be interviewed by a Food Stamps caseworker in the Community Based Services office in the county where you live. You should complete and turn in your household's application as soon as possible. Benefits begin the date your application is received.

For assistance with Food Stamps, call the Food Stamp Program where you live or the Ombudsman at (800) 372-2973. Also, you can call the EBT/Food Stamps Information at (502) 564-7050.

- Your household may name someone to be your authorized representative to act on your household's behalf in completing the interview for Food Stamp benefits and to use your benefits to purchase food for your household if you are unable to do so.
- If your household needs help right away, you may be able to get your Food Stamp benefits within a few days after applying.
- If you are 60 or older and disabled and you cannot go to the Food Stamp Center and no one can go for you, or if you must travel more than 30 miles to the Food Stamp Center, call the local office to make other arrangements for an interview.
- If you must miss work to apply, call ahead and make an appointment. This will help reduce the time you must miss from work.

WHAT DOCUMENTS MUST I BRING WHEN I APPLY FOR FOOD STAMPS?

When you apply for the Food Stamp Program, you must bring the following documents:

- Proof of income, including pay stubs, income tax returns, W-2 forms, Social Security or unemployment insurance, Supplemental Security Income (SSI) award letters, veteran's payments, etc.;
- Proof of United States citizenship (most legal immigrants are not eligible for federal Food Stamps);
- Proof of savings, including bank books or bank statements;
- Gas bills/electric bills;
- Rent or mortgage receipts;
- Medical bills if anyone in your home is disabled or over 60 years old;
- Social Security numbers for all household members; and
- Birth certificates.

HOW LONG WILL I HAVE TO WAIT BEFORE I RECEIVE FOOD STAMPS?

After you complete your Food Stamp application and submit it to the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) office, you will receive a notice within 30 days telling you whether or not your household is approved for Food Stamp benefits.

If your household is approved, you will receive a letter telling you the amount of benefits you will receive and advising you when you must be interviewed again to continue receiving benefits.

HOW MUCH HELP CAN MY FAMILY RECEIVE?

It depends. The amount of Food Stamps a family can receive depends on the amount of the combined income of the household members and the number of people applying for Food Stamps.

Food Stamps

2007 figures

(October 1, 2006 - September 30, 2007)

Figures used to calculate eligibility for Food Stamps Program are revised each year in October.

Food Stamp Resource Limits

Countable resources per food stamp household - \$ 2,000

Countable resources per household with at least one person age 60 or older or disabled - \$ 3,000

Fair market value of countable vehicle up to \$ 4,650

Food Stamp Income Deduction Levels

Standard deduction (48 states & DC)†	\$ 134 per month (for one person; varies by household size)
Shelter deduction (48 states & DC)†	\$ 417 per month maximum (No cap for elderly/disabled)
Dependent care deduction per dependent medical expense deduction	\$ 175 (\$ 200 for children up to age 2) out-of-pocket expenses over \$35 per month

Monthly Income Eligibility Limits

Note: Elderly need only satisfy the NET income test.

No. Persons in Household (48 states, DC, Guam, Virgin Islands)‡	NET 100% poverty	GROSS 130% poverty
1 person	\$817	\$1062
2 persons	1,100	1,430
3 persons	1,384	1,799
4 persons	1,667	2,167
5 persons	1,950	2,535
6 persons	2,234	2,904
7 persons	2,517	3,272
8 persons	2,800	3,640
Each additional person	+ 284	+ 369

Maximum Monthly Food Stamp Allotments (48 states & DC)†

1 person	\$155
2 persons	284
3 persons	408
4 persons	518
5 persons	615
6 persons	738
7 persons	816
8 persons	932
Each additional person	+117

*For people who purchase and prepare food together, have elders who can't prepare own food, and want separate household status. 7 C.F.R. § 273.1(b)(2).

HOW ARE FOOD STAMP BENEFITS USED?

Your household's Food Stamp benefits will be deposited into a Food Stamp account each month. Your household will receive an Electronic Benefit Transfer (EBT) card and a Personal Identification Number (PIN) in the mail to use to access your Food Stamp account.

Sign the back of your EBT card right away. Food Stamp benefits can be used just like money to purchase almost any food item, except ready-to-eat hot foods. You may also use Food Stamps to buy seeds and plants to grow fruits and vegetables. The following items cannot be purchased with Food Stamp benefits: tobacco, alcohol, pet food, soap and other household products, medicines and other non-food items.

HOW WILL I FIND OUT WHETHER I AM ACCEPTED FOR FOOD STAMPS?

You should receive a decision in writing telling you whether you have been accepted or denied Food Stamps within thirty (30) days of the date of your application. If you have provided all the documents requested and have not received a decision during that time, call the Ombudsman's office at 1-800-372-2973 or 1-800-627-4702 (TTY). If you are not satisfied with the response you receive, you can ask for a fair hearing (see below).

MUST I DO ANYTHING ELSE ONCE I AM ACCEPTED FOR FOOD STAMPS?

Yes. Once you are accepted for the Food Stamp Program, you must report all changes to your household which may affect your eligibility for Food Stamps. For instance, you must report changes in your income and resources (if your income and resources increase or are reduced), when people move in or out of the household, or when you move.

CAN I GET FOOD STAMPS IF I WORK?

Yes. Families can get Food Stamps even if they work, as long as their income is within the Food Stamp income limits. The best way to find out if you are eligible for Food Stamps if you work is to apply for benefits.

IF I HAVE INCOME, DOES MY INCOME COUNT IF I APPLY FOR FOOD STAMPS FOR MY GRANDCHILD?

Yes. A household for Food Stamps purposes includes all the people who live together and purchase and prepare meals together. You and your grandchild will be considered one household, and the income of the entire household is counted for Food Stamp purposes.

CAN MY GRANDCHILD AND I GET SEPARATE FOOD STAMP GRANTS?

No. You and a grandchild who lives with you cannot get separate Food Stamp grants.

CAN I APPLY FOR FOOD STAMPS FOR MY GRANDCHILD ALONE?

In general, you **cannot** apply for Food Stamps for your grandchild only. You and your grandchild will always be considered one family for Food Stamp purposes. But, if you already have Food Stamps, and your grandchild moves in with you, then you can request that the child be added to your Food Stamp case which may result in an increase in the amount of assistance that you receive.

CAN WE RECEIVE FOOD STAMPS IF WE ARE NOT IN THE UNITED STATES LEGALLY?

No. If you or your grandchildren are not in the United States legally, you are not eligible for Food Stamps.

CAN WE APPLY FOR FOOD STAMPS IF WE ARE LEGAL IMMIGRANTS?

Most legal immigrants that are not citizens are not eligible for Food Stamps from the Federal government. Contact the Maxwell Street Legal Clinic at 859-233-3840 for advice on eligibility for public benefits by recent immigrants.

WHAT CAN WE DO IF MY GRANDCHILD AND I HAVE NO FOOD?

If you and your grandchild have no food, you should go to the nearest food stamp office. You and your grandchild may be eligible for “expedited Food Stamps.”

WHAT ARE EXPEDITED FOOD STAMPS?

Expedited Food Stamps are food coupons, which can be used to buy food in emergency situations. These coupons are time-limited and are meant to meet emergency food needs only.

HOW LONG WILL IT TAKE TO GET EXPEDITED FOOD STAMPS?

Your family may be able to get Expedited Food Stamps in 2 to 5 days following the date of your application if your household is eligible.

WHAT CAN I DO IF THE FOOD STAMP PROGRAM MAKES A MISTAKE IN MY CASE?

If you think that the Food Stamp Center has made a mistake in your case, you can ask for a Fair Hearing to have the decision on your case reviewed by a judge.

WHAT KIND OF DECISIONS MADE BY THE FOOD STAMP OFFICE CAN I APPEAL?

You can appeal any decision made by the Food Stamp Center, such as: a denial of your application; termination of your case; the amount of Food Stamps you get; and any reduction in Food Stamps. These are just a few examples. If you want to have a decision made on your Food Stamp case reviewed, ask for a fair hearing, and contact your local legal aid office.

WHAT IS A FAIR HEARING?

A fair hearing is a hearing before a judge who will listen to you and decide whether the decision made by the Food Stamp Center was correct.

WHEN DO I REQUEST A FAIR HEARING?

The notice that you receive telling you about any changes in your food stamp eligibility will tell you how long you have to file an appeal and request a hearing. Read the notice and make sure that your request is filed before the deadline.

If you disagree with a decision made by the Food Stamp Office, ask for a fair hearing right away. **DO NOT WAIT.** The hearing can be requested by contacting the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) office in writing to request for a hearing. If you need help with the hearing, contact your local legal aid office.

THE WOMEN, INFANT AND CHILDREN PROGRAM (WIC)

The Women, Infant and Children (WIC) Program is available to buy nutritious food like milk, cheese, eggs, juice and cereal. The program is primarily designed to offer assistance to pregnant women, women who have recently given birth, or children under the age of five, who are at risk of malnutrition.

Grandparents, who are taking care of very young children under the age of five, can apply for these benefits for their grand children. Grandparents do not need a legal relationship, such as legal guardianship, legal custody, or adoption to apply for WIC benefits for their grandchildren. The income and resources of the grandparents, however, will be counted when they apply for the WIC program on behalf of grandchildren. To be eligible for the program, the child must be under 5 years old, live in Kentucky, and be at risk of malnutrition.

To find out more about the WIC Program including where to apply, please call the local WIC Program in your county, or call the Division of Adult and Child Health, WIC Program at (502) 564-3827 or (800) 462-6122.

WHAT IS THE WOMEN, INFANT AND CHILDREN (WIC) PROGRAM?

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is a short-term intervention program designed to influence lifetime nutrition and health behavior in a targeted high-risk population. WIC is funded by the United States Department of Agriculture (USDA).

WHO IS ELIGIBLE FOR WIC?

WIC is available to pregnant women, women who have just given birth or who are breast feeding, and infants and children up to the age of 5 who live in Kentucky, have low incomes, and are at risk of malnutrition.

DO I NEED A LEGAL RELATIONSHIP TO MY GRANDCHILD SUCH AS CUSTODY OR GUARDIANSHIP TO APPLY FOR WIC BENEFITS?

No. A legal relationship to your grandchild such as guardianship, custody or adoption is not needed to apply for WIC benefits for your grandchild.

IS THERE AN INCOME LIMIT FOR APPLICANTS FOR THE WIC PROGRAM?

Yes. The income limit for the WIC Program changes every year. If you think your grandchild may be eligible, or if you do not know whether your grandchild is eligible for WIC benefits, you should apply.

WHAT KIND OF BENEFITS DOES THE WIC PROGRAM PROVIDE?

The WIC Program provides a variety of benefits.

All participants receive:

- Screening for nutrition and health needs;
- Information on how to use WIC foods to improve health;
- Food Instruments to buy foods that help keep you and your grandchildren healthy and strong; and
- Referrals to doctors, dentists, and programs like Food Stamps, Healthy Start and Head Start.

Women Receive:

- WIC Foods;
- Information on healthy eating during pregnancy and breastfeeding; and
- Breastfeeding support.

Infants Receive:

- Breastfeeding support or infant formula;
- Immunization referrals; and
- Grandparents/caretakers receive information on taking care of babies.

Children Receive:

- WIC Foods;
- Immunization referrals;
- Grandparents/caretakers receive information on shopping, recipes, and tips on feeding your grandchild.

Health Benefits of WIC:

- Premature births reduced;
- Low birth weight reduced; and
- Long-term medical expenses reduced.

Food Benefits:

- Milk and cheese;
- Vitamin C-rich juices;
- Iron-rich cereals;
- Eggs;
- Dried Beans or Peanut Butter; and
- Babies may receive infant formula, infant juice, and infant cereal.

DOES MY INCOME COUNT WHEN THE WIC PROGRAM DECIDES WHETHER MY GRANDCHILD CAN RECEIVE BENEFITS?

Yes. The income of the family is counted. You and your grandchild are a family for WIC purposes and your income will be counted when the WIC program decides whether your grandchild is eligible for WIC benefits.

WHAT IS CONSIDERED INCOME FOR WIC PURPOSES?

Income for purposes of the WIC program is income before tax deductions and includes:

- Wages and salaries;
- Income from self-employment;
- Public benefits, including Family Assistance;
- Unemployment benefits;
- Social Security benefits;
- Dividends and interest on stocks and bonds;
- Veteran's payments;
- Pension or military retirement payments;
- Alimony and child support;
- Foster care payments; and
- Cash from saving or investments.

HOW DO I APPLY FOR WIC?

To apply for WIC benefits, contact your county Health Department. The application process generally includes the following steps:

- (1) Staff will ask for your identity and residence. You be asked to show an identification card and proof of there you live.
- (2) Staff will ask for your household income to see if you meet income guidelines. You will meet these if you show proof of any of these:
 - You receive KTAP, Food Stamps, or Medicaid;
 - A pregnant woman or infant in your family receives Medicaid;
 - A member of your family receives KTAP; or
 - Your household income is at or below 185% of poverty.
- (3) Staff will ask you to do a simple health and diet screening to see if you have any nutritional or health needs.

WIC Income Eligibility Guidelines 185% of U.S. Poverty Income Guidelines Effective April 1, 2006 through March 31, 2007									
	Household Size								For each additional household member add:
	1	2	3	4	5	6	7	8	
Weekly	\$349	\$470	\$591	\$712	\$833	\$954	\$1,075	\$1,196	+\$121
Bi-Weekly	\$698	\$940	\$1,182	\$1,424	\$1,665	\$1,907	\$2,149	\$2,391	+\$242
Twice-Monthly	\$756	\$1,018	\$1,280	\$1,542	\$1,804	\$2,066	\$2,328	\$2,590	+\$283
Monthly	\$1,511	\$2,035	\$2,560	\$3,084	\$3,608	\$4,132	\$4,656	\$5,180	+\$525
Annual	\$18,130	\$24,420	\$30,710	\$37,000	\$43,290	\$49,580	\$55,870	\$62,160	+\$6,290
Persons who receive Medicaid or Food Stamp benefits automatically meet the income requirements for the WIC Program.									

HOW CAN I FIND OUT MORE INFORMATION ABOUT THE WIC PROGRAM?

To find out more information about the WIC Program, call the Division of Adult and Child Health, WIC Program at 1-800-462-6122 or (502) 564-3827 or (800) 648-6056 (TTY).

CHAPTER FOUR: HEALTH CARE

HEALTH CARE DECISION MAKING

WHO CAN MAKE HEALTH CARE DECISIONS FOR MY GRANDCHILD?

You need legal authority to make health care decisions. A court of order of guardianship or custody will generally say who can make health care decisions. The authority granted by guardianship or custody order should be listed in the court order. Always give a copy of the court order to the health care provider when you take your grandchild in for care.

IS THERE ANYTHING THAT CAN BE DONE WITHOUT A COURT ORDER?

The child's birth parent may also grant you authority to make health care decision in a durable power of attorney. To do this the birth parent (or parents) need to know what they are doing when they sign the document. Doctors and other health care providers may be reluctant to honor a power of attorney. If you think that your grandchild's parents would be willing to sign, talk to an attorney about preparing a power of attorney for health care for your grandchild. There is not a standard form for a health care power of attorney in Kentucky.

WHAT IF I HAVE ADOPTED MY GRANDCHILD?

An adopted child is your legal child and you have full legal authority to make decisions for that child, the same that you would for a biological child.

THE MEDICAID PROGRAM

WHAT IS THE MEDICAID PROGRAM?

Medicaid is a health care program for low-income families that pays for a wide range of medical services in Kentucky. Grandparents and their grandchildren can apply for Medicaid if they don't have adequate medical insurance and have little or no income and resources.

For more information, you can call Medicaid Member Services at 1-800-635-2570. The Medicaid Member Services Office is open Monday through Friday from 8:00 A.M. to 4:30 P.M. You may also call Medicaid Member Services for an application or the address of the Medicaid office closest to your home.

WHAT DOES MEDICAID COVER?

The Medicaid program pays for the following health care services:

- Provider/Clinic visits (routine, urgent and emergency care);

- Outpatient services (hospital services when you don't stay overnight);
- Hospital stays;
- Specialty care;
- Emergency care and ambulance transportation for emergencies;
- Transportation to and from Medicaid-covered services (if you don't have a car);
- Mental Health services;
- Family Planning (including birth control and OB/GYN);
- Medical care during pregnancy;
- Maternity and newborn care;
- Disease screening and treatment for sexually transmitted diseases (STD), tuberculosis, HIV and AIDS;
- Prescription drugs;
- X-rays and laboratory services;
- Durable Medical Equipment (DME) and supplies (such as wheelchairs, crutches, etc.);
- Chiropractic care;
- Home Health (including physical, occupational and speech therapies);
- Home and Community Based Waiver services;
- Nursing Home Care;
- Hospice;
- Immunizations (shots) by participating providers and Health Departments;
- Early Periodic Screening, Diagnosis and Treatment Services (EPSDT) (health check-ups for children); and
- Basic dental, vision, and hearing care.

*Medicaid can only pay for services that are determined to be medically necessary. Also, service providers must be Medicaid providers. Call Member Services for details.

WHAT DOESN'T MEDICAID COVER?

Medicaid does not cover the following services:

- Services from providers who are not Kentucky Medicaid providers;
- Services that are not medically necessary;
- Transportation to pick up prescriptions at drug stores;
- Some injections (shots) and allergy serums;
- Massage therapies and hypnosis;
- Abortion (unless the mother's life is in danger or in the case of incest or rape);
- In vitro fertilization, paternity testing, and hysterectomy for sterilization purposes;
- Hospital stays for procedures that could be done as outpatient;
- Cosmetic surgeries;
- Fertility drugs;
- Smoking cessation drugs;
- Braces for teeth, dentures, partials, and bridges for persons 21 and over;
- Glasses for persons 21 and over, contact lenses, and trifocals;
- Hearing aids for persons 21 and over, and binaural hearing aids;
- Private duty nursing; and
- Fans, air conditioning, humidifiers, air purifiers, computers, and home repairs.

*Services that Medicaid usually does not cover may be covered for children under 21 through Early Periodic Screening, Diagnosis and Treatment Services (EPSDT) (health check-ups for children).

WHO IS ELIGIBLE FOR MEDICAID?

In order to be eligible for Medicaid, applicants must have little or no income and little or no resources. For more information regarding income requirements, please contact Medicaid Member Services. Some of the persons who may be eligible for Medicaid include:

- Couples with children, where the primary wage earner has been unemployed for a long period of time;
- Single parents who are unable due to work due to illness or disability
- Children under 18;
- Elderly persons (those 65 years of age or older);
- People who are certified blind or permanently disabled (any age); and
- Families with dependent children.

HOW DO I APPLY FOR MEDICAID?

To apply for Medicaid, contact the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS). If you cannot get to the office, you may write or call the office, or have someone apply for you.

Aged, blind or disabled persons receiving Supplemental Security Income (SSI) benefits are automatically eligible for Medicaid.

If you need an application or the location of the nearest center to apply for Medicaid, contact Medicaid Member Services.

WHAT DOCUMENTS DO I NEED TO APPLY FOR MEDICAID?

You should bring the following documents when you apply for Medicaid:

- Social Security card for everyone applying in the household;
- Proof of Income (last 8 pay stubs for everyone receiving income in the household);
- Any utility bills;
- Lease from your landlord, if applicable;
- Checking account statements for everyone in the household;

- Bank Statements for everyone in the household; and
- Legal documentation identifying your relationship to your grandchild (such as legal custody, legal guardian, foster parent, or adoption papers).

WHAT HAPPENS IF I CANNOT GET THE DOCUMENTS REQUESTED?

If you cannot get the documents that were requested, you should immediately contact your caseworker at the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) or Medicaid Member Services and tell them that you are having trouble getting the requested papers. The worker may ask for a different document or may be able to assist you in getting the required document.

WHAT IS A HOUSEHOLD FOR MEDICAID PURPOSES?

A household for Medicaid purposes includes all of the people who live together in your home and who are applying for Medicaid. If you apply for your grandchild only (and not for yourself) you will still be considered part of the "Medicaid household" and your income and savings will be counted, as you will both be considered part of one household.

CAN I APPLY FOR MEDICAID FOR MYSELF ONLY?

Yes. You can apply for Medicaid for yourself only, even though your grandchild lives with you.

CAN I HAVE MEDICARE AND MEDICAID AT THE SAME TIME?

Yes. Many older or disabled people have both Medicare and Medicaid at the same time.

CAN MY GRANDCHILD OR I APPLY FOR MEDICAID IF WE ARE NOT IN THE COUNTRY LEGALLY?

Immigrants who enter the United States on or after Aug. 22, 1996, are not eligible to receive Medicaid benefits for five years from the date they enter the country with a status as a "qualified alien." The clock on the five years begins to run from the date the immigrant obtains qualified alien status. The following qualified aliens are exempt from the five-year time period: refugees, asylees, Cuban and Haitian entrants, victims of trafficking, aliens whose deportation is being withheld, American immigrants, legal permanent residents (LPR) who first entered the country under another exempt category and later converted to LPR status, members of a federally recognized Indian tribe, or American Indians born in Canada.

Other exemptions from the five year time period include qualified aliens who are honorably discharged U.S. military veterans currently on active duty, or the spouse (including a surviving spouse who has not remarried), or unmarried dependant child of an honorably discharged veteran, or an individual on active duty in the U.S. military.

CAN MY GRANDCHILD OR I RECEIVE MEDICAID IF WE GET BENEFITS FROM SSI?

Yes. You and your grandchild are automatically eligible for Medicaid assistance if you are aged, blind, or disabled and already receive Supplemental Security Income (SSI) benefits from the Social Security office.

IF I APPLY FOR MEDICAID FOR BOTH OF US, WILL MY INCOME AND RESOURCES BE COUNTED?

Yes. If both you and your grandchild are applying for Medicaid, you and your grandchild will be considered one household for Medicaid purposes. All of your income and the income of your grandchild will be added to determine whether both you and your grandchild are eligible for Medicaid.

WHAT IS THE INCOME LIMIT FOR MEDICAID?

The Medicaid Program calculates a family's monthly income after deducting some income that is not counted under the program, and work related expenses and child care expenses. The monthly income remaining, after the deductions is then compared to the Medicaid limits for the category of assistance the family falls under to determine if the family is eligible for Medicaid.

The Medicaid Program has different income limits depending on the applicant's situation and the category of assistance that a family applying for Medicaid falls under. The size of a family, whether there is a pregnant woman, children under the age of one, or children under the age of 19 applying for Medicaid (each have their own guidelines.)

The best way to find out whether you or your grandchild is eligible for Medicaid is to apply for the program.

WHAT IS CONSIDERED INCOME FOR THE MEDICAID PROGRAM?

Income for purposes of the Medicaid Program consists of any payment received by the person(s) applying for or receiving Medicaid. The following are included in "income": wages, tips, commissions, bonuses, Social Security payments, veterans payments, pensions, interest and dividends, income from rental property, and insurance proceeds.

WHAT ARE CONSIDERED RESOURCES FOR THE MEDICAID PROGRAM?

Resources for purposes of the Medicaid Program include: checking accounts, savings accounts, cash on hand, stocks, bonds, CD's, and other assets. However, resources that are not counted under the Medicaid program include: a home, burial reserve, a vehicle that is used for employment or as transportation to get medical treatment, or specially equipped vehicles for disabled people, and equity in other vehicles up to \$4500.

The individual resource limit is \$2000, while the resource limit for couples is \$4000. However, these resource limits, as well as the dollar amounts of resource exclusions are likely to change each year. Contact your caseworker at the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) or Medicaid Member Services.

CAN YOU TELL ME MORE ABOUT INCOME AND RESOURCES?

The income and resources of the family members who may receive Medicaid coverage must be within Medicaid program guidelines. If a parent is under age 21 and lives with her/his parent(s), her/his parent's income is considered in the Medicaid eligibility determination. The income limits are based on family size. For pregnant women, an additional family member is added for each unborn child.

The family's income, after deductions, cannot be more than the following income limits. (Deductions include a work expense deduction up to \$90 and a dependent child care deduction for child care cost. The maximum dependent child care deduction for family members under two years of age is \$200 for family members over two years of age is \$175 for full-time employment and \$150 for part-time employment.)

Monthly Income Amounts for Families

Size of Family	Monthly Income
1	\$217
2	\$267
3	\$308
4	\$383
5	\$450

For each additional member add \$60 to the monthly income amount.

For pregnant women and children up to age one, the limit is 185% of the federal poverty levels as follows:

Size of Family	Monthly Income
1	\$1,511
2	\$2,035
3	\$2,560
4	\$3,084
5	\$3,608

For each additional member add \$525 to the monthly income amount.

For children up to the age of 19, the limit is 200% of the federal poverty level as follows:

Size of Family	Monthly Income
1	\$1,634
2	\$2,200
3	\$2,767
4	\$3,334
5	\$3,900

For each additional member add \$567 to the monthly income amount.

Resources (checking and savings accounts, cash on hand, stocks, bonds, CD'S, etc.) are considered in the Medicaid determination and must not be more than \$2,000 for a family size

of one and \$4,000 for a family size of two. Fifty dollars is added to the resource limit for each additional family member.

Note: Resources are not considered in the Medicaid determination for pregnant women and children.

CAN I RECEIVE MEDICAID EVEN IF MY INCOME IS MORE THAN THE MEDICAID INCOME LIMIT?

Maybe. If after you pay your share of your medical care, what you have to live on is at or below the income limits you may qualify for Medicaid based on an “income spend down.” Contact your local Community Based Services Office for more information.

CAN I OWN A HOME AND STILL BE ELIGIBLE FOR MEDICAID?

Yes. You can own the home you live in and still be eligible for Medicaid. There is no limit on the value of an owner occupied home for Medicaid purposes.

HOW LONG DOES A MEDICAID APPLICATION TAKE?

An application for Medicaid will take no longer than 30 days to be processed. You will be notified within 30 days of your application whether or not you have been approved for the program.

HOW WILL I KNOW WHETHER OR NOT I HAVE BEEN APPROVED FOR THE PROGRAM?

You should receive a letter informing you that you have been accepted or denied Medicaid.

WHAT CAN I DO IF I AM DENIED MEDICAID?

If you have been denied Medicaid eligibility or if you have been denied a service by Medicaid, you have the right to ask for a fair hearing. If Medicaid has denied you a service, it is best to mail your written hearing request to Medicaid within 10 days of receiving notice of the denial. If your benefits are being discontinued and you ask in your letter for your benefits to be continued while you appeal, you may be able to keep Medicaid benefits until the end of the hearing process. If you lose the appeal, Medicaid will ask you to repay the cost of benefits paid while the appeal was pending.

The process involved is generally as follows:

- (1) The first step after denial of eligibility or a service is to contact Medicaid Member Services in writing and tell them that you want to appeal.
- (2) You need to send a written hearing request to Medicaid (a sample letter is included at the end of this chapter) and contact your caseworker.
- (3) You will then receive written notice of the date of your hearing. The hearing date should be no more than 30 days from the date of your written hearing request. The hearing will take

place close to your residence or you may request that the hearing take place over the telephone.

- (4) You must then show up at your hearing at the correct date, time, and location. During the hearing you will be allowed to discuss your problem with a hearing officer. You are permitted to bring a friend or an attorney with you. To find an attorney, look in the phone book for the local legal aid office. Medicaid may have an attorney at the hearing to explain their decision regarding your case.
- (5) Within 90 days of the date you sent your written hearing request, you will be mailed the decision of the hearing officer regarding your hearing. If the conclusion of the officer is not satisfactory, you have 30 days to appeal to a circuit court, in which it is recommended you contact an attorney.

For more information on requesting a hearing you may contact the Cabinet for Health and Family Services (CHFS) Ombudsman at 1-877-807-4027.

WHAT IS A FAIR HEARING?

A fair hearing is a hearing before a lawyer, who is called an Administrative Law Judge, who reviews the facts of your case and decides whether the decision taken on your case was correct. At a fair hearing, you have the opportunity to give the judge any information to show that the decision made by the Medicaid Office was not correct and that you are eligible for Medicaid. For help with a fair hearing, contact your local legal aid office, legal services for the elderly, or the nearest bar association (association of lawyers—see your phone book for the number).

WHEN DO I ASK FOR A FAIR HEARING?

You must ask for the fair hearing, in writing, within 10 days of the date you receive a notice from the Medicaid Office. If you miss the deadline, your request for an appeal may be denied.

WHAT HAPPENS IF I DO NOT ASK FOR A FAIR HEARING WITHIN THE REQUIRED TIME?

Generally, if you do not ask for a fair hearing within 10 days, you lose the opportunity to appeal the decision taken on your case. However, you can immediately reapply, and if denied again, ask for a fair hearing within 10 days of the second denial. However, if you are approved on the second application, benefits are only paid back to the date of the second application.

CAN I APPLY FOR MEDICAID FOR MY GRANDCHILD ONLY?

Yes. You can apply for Medicaid for your grandchild alone if your grandchild does not have medical insurance.

MUST I HAVE LEGAL CUSTODY OR LEGAL GUARDIANSHIP OF MY GRANDCHILD TO APPLY FOR MEDICAID THE CHILD?

No. You do not need a legal relationship, such as legal custody, legal guardianship or adoption to apply for Medicaid for your grandchild. A statement from you, that you take care of your grandchild and that your grandchild lives with you, along with a signed application which indicates your relationship to your grandchild is all that is needed.

WHAT DOCUMENTS MUST I BRING WHEN I APPLY FOR MEDICAID FOR MY GRANDCHILD?

When you apply for Medicaid for your grandchild, you must bring the following documents:

- Social Security card for everyone applying in the household;
- Proof of Income (last 8 pay stubs for everyone receiving income in the household);
- Any utility bills;
- Lease from your landlord, if applicable;
- Checking account statements for everyone in the household;
- Bank Statements for everyone in the household; and
- Legal documentation identifying your relationship to your grandchild (such as legal custody, legal guardian, foster parent, or adoption papers).

CAN THE MEDICAID OFFICE ASK ME TO PROVE THAT I AM RELATED TO MY GRANDCHILD?

Yes. The Medicaid office can ask you to prove that you are related to your grandchild if they have reason to believe that you are not related.

WHAT DOCUMENTS CAN I USE TO PROVE MY RELATIONSHIP TO MY GRANDCHILD?

You can prove your relationship to your grandchild by showing any one of the following documents:

- Birth certificate;
- Baptismal certificate;
- Court papers;
- Adoption papers;
- Marriage certificate; or
- Other documents, such as a letter from a school or social services agency (a social worker) which states your relationship to your grandchild.

IF I APPLY FOR MEDICAID FOR MY GRANDCHILD ONLY, WILL MY INCOME BE COUNTED?

Yes. Everyone in your household's income will be counted to determine if your grandchild is eligible for Medicaid.

IS THERE A TIME LIMIT FOR RECEIVING MEDICAID?

No. Medicaid services are available until the family is no longer eligible for benefits.

IS THERE A CO-PAY WITH MEDICAID?

Yes for many services. Medicaid requires a co-pay for some services and may limit the amount of services that Medicaid will cover. The co-pays and limits vary depending on how a person qualifies for Medicaid and what category of Medicaid they are approved for.

MEDICAID MANAGED CARE (KenPAC)

WHAT IS MEDICAID MANAGED CARE (KenPAC)?

Kentucky Patient Access and Care Program (KenPAC) is Kentucky's Medicaid Managed Care program. KenPAC will connect you with the provider of your choice that will manage your health care needs. The provider will be known as your Primary Care Provider (PCP). A majority of Kentucky Medicaid members are KenPAC members.

WHAT DOES KenPAC COVER?

KenPAC covers the same services as Medicaid.

WHO IS NOT INCLUDED IN KenPAC?

- People who get both Medicare and Medicaid;
- Children (age 18 and under) who receive Supplemental Security Income (SSI) benefits;
- Children in foster care;
- People enrolled in Passport Health Plan;
- People in a nursing home, mental hospital, or ICF-MR (Intermediate Care Facility for people with Mental Retardation);
- People in a Medicaid community-based waiver program;
- People with a Spend Down medical card; and

- People in the Kentucky Health Insurance Premium Program.

DO I HAVE TO JOIN A MANAGED CARE PLAN WHEN I RECEIVE MEDICAID?

Yes. You must participate in KenPAC when you receive Medicaid, unless you are a member of the list of those who cannot enroll in KenPAC (see list above).

HOW DOES THE KenPAC PROGRAM WORK?

Upon selecting a Primary Care Provider (PCP), you must first call your PCP in order to receive most medical care. Your PCP will help you arrange routine care and will work with you to schedule specialist care when needed. If you do not select your PCP within 30 days of acceptance to Medicaid, one will be assigned to you.

WHO IS MY PCP?

Your Primary Care Provider (PCP) can be chosen from the following:

- A pediatrician, an internist, a family doctor, a general doctor or an OB/GYN;
- Nurse practitioner; or
- Physician assistant who works in a rural health center or primary care center.

Your PCP will be available by phone 24 hours a day, 7 days a week to assist you. In addition, your PCP will keep immunization (shots) and screening records up to date for your grandchildren.

CAN I CHANGE MY PCP?

Yes. You can change your Primary Care Provider (PCP) within the first 90 days after you enroll in KenPAC at your yearly Medicaid or Supplemental Security Income (SSI), or at any time if you have a good reason (such as moving to a different county) and with permission from your caseworker or the Department for Medicaid Services. .

IS THERE A DIFFERENCE BETWEEN MEDICAID MANAGED CARE (KenPAC) AND REGULAR MEDICAID?

Yes. KenPAC enrollees must see their Primary Care Provider (PCP) before seeking care from other doctors or their care may not be fully covered by Medicaid.

THE KCHIP PLAN

WHAT IS KCHIP?

KCHIP is Kentucky Children's Health Insurance Program. KCHIP provides health insurance, for little or no cost, to children under age 19, who have no other form of health insurance and qualify for the program.

WHO IS ELIGIBLE FOR KCHIP?

Uninsured children, under the age 19, who live in families (have been adopted) with income at or below 200% of the federal poverty level (FPL) are eligible for KCHIP.

Number of Family Members (include parents and children) *	Total Monthly Family Income (before taxes)	Total Annual Family Income (before taxes)
1	\$1,634	\$19,608
2	\$2,200	\$26,400
3	\$2,767	\$33,204
4	\$3,334	\$40,008
5	\$3,900	\$46,800
6	\$4,467	\$53,604
7	\$5,034	\$60,408
8	\$5,600	\$67,200

Note: These income limits change around April of each year. This table shows the 200% FPL guidelines.

*A family is considered as a child or children and the natural or adoptive parents residing together in a household. For family units of more than eight members, add \$567 per month or \$6,804 per year for each additional member. If you owe a premium, you will receive a letter that tells how to pay the \$20 premium.

WHAT DOES KCHIP COVER?

Services *generally* covered by KCHIP include:

- Inpatient hospital services;
- Outpatient hospital services and surgery (hospital services when you don't stay overnight);
- Emergency services;
- Physician, Nurse Practitioner and Primary Care services;
- Early and Periodic Screening, Diagnosis and Treatment Services (EPSDT) (health check-ups for children);
- Preventive services in health departments;
- Vision, hearing and dental care;
- Allergy serum and injections;
- Family planning services (including birth control and OB/GYN);
- Pharmacy;
- Lab and x-rays;
- Home Health (including physical, speech, and occupational therapies);
- Therapies (physical, speech and occupational—limited settings);

- Durable medical equipment and supplies;
- Transportation (emergency and non-emergency);
- Renal dialysis;
- Hospice;
- Nursing home care;
- Inpatient and Outpatient mental health services;
- Early intervention for infants and toddlers with disabilities;
- Services provided by school districts for children with disabilities; and
- Some additional specialized services for people with disabilities.

HOW DO I APPLY FOR KCHIP FOR MY GRANDCHILD?

You can apply for KCHIP by calling the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) office, which will make an appointment for you. You can also go to your local DCBS office to schedule an appointment. To locate your local DCBS office, call 1-877-KCHIP-18.

WHAT DO I NEED TO TAKE WITH ME WHEN I APPLY FOR KCHIP?

When you apply for KCHIP for your grandchild, you must bring the following:

- **Proof of Income:** For wages, take copies of pay stubs for the last 2 months or a letter from your employer. The letter should include your wage, employer's name, address, phone number and original signature. For self-employment, bring a copy of your last income tax return. **For unearned income**, bring your most recent award letter or other proof of amount. Examples of unearned income include: KTAP, disability, pension, child support, alimony, cash gifts, annuities, interest, Social Security, veteran's benefits, etc. For child support, include copies of checks, a statement from your grandchild's parent or a statement from the child support collection agency in your county.
- **Proof of expenses:** For childcare or disabled adults living in your home. Bring copies of receipts or a statement from the care provider.
- **Health insurance information:** If anyone in your family has health insurance that pays for doctor's office visits and hospital care, bring the following information: name of the insurance company; group number and policy number; effective date of the policy, name of policy holder; and names of people who are covered.

WHAT WILL HAPPEN IN THE FACE-TO-FACE INTERVIEW AT THE DCBS OFFICE?

During the interview at the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) office, you will provide information to the caseworker who will complete the application. The caseworker will ask you to choose your child's primary care provider. You should talk with the caseworker about other benefits you might be eligible for. You will learn about healthcare benefits covered under KCHIP and Medicaid and about how to use your KCHIP or Medicaid healthcare card. Be sure to ask questions about anything you do not understand.

WHAT HAPPENS AFTER I HAVE APPLIED FOR KCHIP FOR MY GRANDCHILD?

After you have applied for KCHIP for your grandchild, you will receive a letter telling you if your grandchild has been approved and if you owe a premium. If your grandchild is not approved, you will receive a letter explaining why the child was denied benefits. The Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) office has 30 calendar days or less from the date of the face-to-face interview to determine eligibility.

CAN I HAVE A FAIR HEARING IF I HAVE BEEN DENIED FOR KCHIP?

Yes. KCHIP denials are subject to the same fair hearing requirements as those for Medicaid, which are described in the Medicaid section above.

DO I OWE A PREMIUM UNDER KCHIP?

If your family is above the 150 percent of the Federal Poverty Level (FPL), you will be required to pay premiums for your grandchild's enrollment in KCHIP.

IF I OWE A PREMIUM, WHAT DO I DO?

If you owe a premium, you will receive a bill in the mail. Do not send in your premium payment until you receive a bill from the Premium Payment Center (PPC). Your caseworker cannot take your money. Two premium payments will be due the first time only. This is because you must pay in advance. You can make a quarterly payment (for three months of KCHIP benefits) of \$54, which includes a discount. You have 60 days from the date you applied for KCHIP to pay the bill. Your grandchild's card will be mailed after your payment is received. Pay the bill as soon as you receive it. If you do not pay the premium, a KCHIP card will not be issued. If you do not pay the premium within the first 60 days you will have to re-apply for KCHIP at the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) office.

HOW MUCH ARE PREMIUMS?

The premium for enrollment in KCHIP is \$20 per month per family. It does not matter how many children are in the family. The premium payment is always \$20 per month.

WHAT IF I DO NOT OWE A PREMIUM?

If you do not owe a premium, your grandchild's card will be mailed within 7 to 10 days of your acceptance.

DO I OWE A CO-PAY UNDER KCHIP?

It depends. There are some co-pays that only 18 year olds have to pay for certain services. Some prescription drugs have co-pays that must be paid to the pharmacy when a prescription is filled. Also, services provided by dentists, chiropractors, eye, foot and ear doctors are also subject to co-pays.

Co-pays are not charged for some dental services, including oral exams, cleaning and fluoride

application, sealant, space maintainers or x-rays. If your grandchild receives other dental services during that same visit, you may still owe a co-pay.

If you cannot pay the co-pay at the time of service, you still owe it. If the total premiums and co-payments you pay during the 12 months from the date of your application reach 5 percent of your annual income, call 877-KCHIP-18. You may not have to make any more payments for the rest of the year.

HOW DOES KCHIP COVERAGE WORK?

Once accepted, you will choose a Primary Care Provider (PCP) for your grandchild, similar to the PCP described in the KenPAC section above. The PCP is the first person you should contact for health services for your grandchild. If your grandchild needs to see a specialist, the PCP will determine this and refer a specialist. Your grandchild should also visit his/her PCP regularly for checkups.

WHO SHOULD I NOTIFY OF CHANGES?

You should notify your caseworker of any income changes; additions to the family; employment changes in the family; and if someone in the family obtains health insurance.

IF MY GRANDCHILD HAS HEALTH INSURANCE, IS THE CHILD ELIGIBLE FOR KCHIP?

No. If your grandchild has health insurance, the child cannot get KCHIP, but may still be eligible for Medicaid. For certain income levels, a child must not have other health insurance coverage for a period of 6 months before applying for KCHIP. There are exceptions if the child loses health insurance for reasons that cannot be controlled. Contact the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) office to see if your grandchild is eligible.

HOW OFTEN DO I MUST I RENEW KCHIP AND MEDICAID FOR MY GRANDCHILD?

If your grandchild has KCHIP or Medicaid, you will receive a renewal form in the mail once a year. To renew, you must do the following:

- Complete, sign and return the renewal form, or complete a telephone interview;
- Send proof of income for the last 2 months;
- Send proof of unearned income;
- Send proof of expenses for childcare and care for disabled adults living in your home; and
- Send health insurance information.

It is very important to send complete information about earned and unearned income and health insurance. Failure to provide complete information could result in loss of benefits or prosecution for fraud.

If you do not send back the renewal form by the date printed on your notice, your grandchild's coverage will stop, and you will have to go to the Cabinet for Health and Family Services (CHFS), Department for Community Based Services (DCBS) office to re-apply.

MUST MY GRANDCHILD BE AN AMERICAN CITIZEN TO BE ELIGIBLE FOR KCHIP?

Immigrants who enter the United States on or after Aug. 22, 1996, are not eligible to receive Medicaid or KCHIP benefits for five years from the date they enter the country with a status as a "qualified alien." The clock on the five years begins to run from the date the immigrant obtains qualified alien status. The following qualified aliens are exempt from the five-year time period: refugees, asylees, Cuban and Haitian entrants, victims of trafficking, aliens whose deportation is being withheld, American immigrants, legal permanent residents (LPR) who first entered the country under another exempt category and later converted to LPR status, members of a federally recognized Indian tribe, or American Indians born in Canada.

Other exemptions from the five year time period include qualified aliens who are honorably discharged U.S. military veterans currently on active duty, or the spouse (including a surviving spouse who has not remarried), or unmarried dependant child of an honorably discharged veteran, or an individual on active duty in the U.S. military.

WILL MY GRANDCHILD BE AUTOMATICALLY ENROLLED IN THE PROGRAM IF THE CHILD RECEIVES MEDICAID?

No. Children who receive Medicaid are not eligible for KCHIP. KCHIP is available for children who meet income requirements and have no other form of insurance, including Medicaid.

*All dollar figures quoted in this handbook are current as of 2006 but are subject to change in coming years.

**APPLY FOR KCHIP
BENEFITS BEFORE
YOUR CHILD
NEEDS HEALTH
CARE COVERAGE!**



Kentucky Children's Health Insurance Program

How to Apply For KCHIP

To Apply for KCHIP

Go to your local eligibility office in the county where you live. Office hours are from 8:00 a.m. - 4:30 p.m. Monday through Friday. You can find your local office by looking in the phone book under Kentucky Department for Community Based Services (DCBS), by calling 1-877-KCHIP-18 or by visiting the DCBS website at http://cfc.state.ky.us/office_phone_list.asp

When You Go to Apply

Take proof of income:

- For wages, take copies of pay stubs for the last two months for all persons in the household.
- For unearned income such as disability, Social Security, pension, etc., take the most recent award letter.

Take proof of childcare:

- Take copies of receipts or statement from the care provider.

Take health insurance information if your child has been insured during the last six months:

- Name of insurance company
- Group number and policy number
- Effective date
- Name of policy holder
- Names of people who are covered

If you apply for other benefits, you may need to send more information.

At the Local DCBS Office

You will see a caseworker who will interview you. The caseworker will answer your questions, give you information and perhaps ask for additional information or verification.

You **must** return the additional verification within 10 days, if requested, before your child can be approved for KCHIP benefits.

When Your Information Is Complete

You will receive a letter telling you if you have been approved and if you owe a premium. If you are not approved, you will receive a letter explaining why your child was denied benefits.

If You Owe a Premium Payment ?

You will receive a bill from the Premium Payment Center. Only families with children over certain income limits owe a premium. Do **not** send your premium payment in until you receive a bill from the Premium Payment Center (PPC). (Your caseworker **cannot** take your money.) **Two (2) premium payments will be due the first time only.** This is because you have to pay in advance.

You can make a quarterly payment (for three months of KCHIP benefits) of \$54, which includes a discount. You have 60 days from the date you applied for KCHIP to pay the bill. Your children's card will be mailed after your payment is received. Pay the bill as soon as you receive it. **If you do not pay the premium, a KCHIP card will not be issued.**

If You Do Not Owe a Premium

Your child should receive a KCHIP/Medicaid card in 7 - 10 days.

If You Pay Your Premium on Time

Your child's coverage has a start date from the day you applied for KCHIP at your local eligibility office. Within 7 – 10 days after mailing the premium payment, you should receive your KCHIP card. **After you pay your initial bill, you will receive a bill at the end of each month. Premium payments are due by the 5th of every month.**

If You Do Not Pay Your Premium Within the First 60 days

You will have to re-apply at the local eligibility office and go through the entire process again.

THINGS TO REMEMBER ABOUT PREMIUM PAYMENTS

- ✓ Children who have KCHIP do not get coverage back to the first of the month. Eligibility begins the day you went to the DCBS office to apply.
- ✓ The premium is \$20 per month per family. It does not matter how many children are in the family. The premium payment is always \$20 per month.
- ✓ Do not pay your premium until you receive your bill in the mail from the Premium Payment Center (PPC).
- ✓ After you mail your premium, allow several days for your payment to be received and processed by the Premium Payment Center (PPC). DO NOT wait to mail your premium in until the due date listed on your bill.
- ✓ Premiums are paid in advance. Pay the amount listed on your bill. You can choose to pay monthly (\$20) or quarterly (3 months of premiums for \$54) or semi-annually (6 months of premiums for \$108) for a 10 percent discount.
- ✓ If you get behind in your premium payments or you are late paying your premiums, your child will lose KCHIP coverage.
- ✓ If you are discontinued for non-payment of premium and you want to get your child's coverage back, you must pay the PPC \$20 and go to your local office to re-apply. Do not pay more than \$20 to the PPC until you receive a bill!
- ✓ Always remember to update all your case information or report any changes to your caseworker. Your caseworker must have your current home address in order for you to receive your card. Mail will not be forwarded. It will take about a week for your KCHIP card to be mailed to your home. If you have questions about your premium payment, contact the Premium Payment Center at 1-866-9KY-CHIP. Do not contact the local eligibility office about paying your premium.

SAMPLE HEARING REQUEST LETTER

(Date)

Cabinet for Health and Family Services (CHFS)
Department for Medicaid Services
Division of Administration and Financial Management
275 East Main Street, 6W-C
Frankfort, KY 40621-0001

Attn: Hearing Request

Dear Sir or Madam:

I am writing to ask for a hearing.

My Name Is: _____

My Social Security number is _____.

Medicaid Case Number is _____.

My address is _____.

My telephone number is _____.

(Below write the reason you are requesting a hearing.)

Thank you.

Sincerely,

(Sign your name) _____

Address _____

Phone _____

IMPORTANT PHONE NUMBERS

For further information regarding any of the previous information, please contact:

Legal Helpline for Older Kentuckians

(800) 200-3633

Foster Care Information

(800) 232-KIDS (5437)

Kentucky Foster/Adoptive Parent Support Network

(877) 70HEART (877-704-3278)

Food Stamps Information

(502) 564-7050

(502) 564-3440 (for Ricky May, Branch Manager)

Food Stamp Center Ombudsman

(800) 372-2973

Immigrant Eligibility for Public Benefits

(859) 233-3840 Maxwell Street Legal Clinic

Division of Adult and Child Health, WIC Program

(502) 564-3827

(800) 462-6122

KCHIP Toll-Free Hotlines

(877) KCHIP-18 (877-524-4718)

(800) 648-6056 or 711 (for deaf or hard of hearing persons)

(800) 662-5397 (if Spanish language services are needed)

Passport Health Plan Member Services

(800) 578-0603

(800) 691-5566 (for the hearing impaired)

KenPAC and Medicaid Member Services

(800) 635-2570

Premium Payment Center

(866) 9KY-CHIP (866-959-2447)

Cabinet for Health and Family Services (CHFS) Ombudsman

(800) 372-2973

KCHIP Email Address

chfs.kchip@ky.gov

Kentucky Bar Association

www.kybar.org

