

## 1.7 MEDICAID FOR DEEMED AFDC RECIPIENTS

### A. EXTENDED MEDICAID

**NOTE:** Eligibility is based on income, assets and deprivation of parental support of the AFDC Medicaid coverage group. See Section 16.5,B,1 for the eligibility requirements that must be met.

The client must be notified that his Medicaid continues and of the eligibility period. If the case is closed in error, the client cannot be required to reapply. The Worker must evaluate the client for all other coverage groups when Extended Medicaid ends.

#### 1. Redetermination Variations

Extended Medicaid cases are not redetermined.

#### 2. The Benefit

A new medical card is received on approximately the first day of each month.

#### 3. Ending Date Of Eligibility

The ending date of eligibility is the last day of the month of the 4-month Extended Medicaid period.

At the end date of eligibility, all AG members must be evaluated for all other Medicaid coverage groups.

### B. CHILDREN COVERED AS RECIPIENTS OF ADOPTION ASSISTANCE

The Office of Social Services is responsible for these cases.

### C. CHILDREN COVERED AS RECIPIENTS OF FOSTER CARE PAYMENTS

The Office of Social Services is responsible for these cases.