

Family Care Coverage for Adults

DUPAGE FEDERATION ON
HUMAN
SERVICES
REFORM

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Summary:

- Parents and caretaker relatives caring for dependent children are now eligible for FamilyCare Share and FamilyCare Premium Level 1 up to 185% of the FPL. (Previously coverage was only available up 133% of FPL.)
- To qualify the adult must: Be an Illinois resident, provide a Social Security Number or proof of application for a Social Security Number; live with a child who at a minimum meets the nonfinancial eligibility criteria for All Kids; be a U.S. citizen or be a qualified non-citizen; and not have an outstanding Family Care Rebate overpayment
- The State Program Standards chart has been changed to reflect the new income standards and can be viewed at [http://www.dhs.state.il.us/OneNetLibrary/5/documents/Cash%20Food%20Stamp%20Medical%20Manual/WAG%2025-03-02%20\(07-01-09\)%20revised.pdf](http://www.dhs.state.il.us/OneNetLibrary/5/documents/Cash%20Food%20Stamp%20Medical%20Manual/WAG%2025-03-02%20(07-01-09)%20revised.pdf)

Action on Applications or Active Cases

If the family applies for Family Care at the local FCRC, IDHS will:

- Approve a Family Care Assist benefit for the Adult and children when the family income is at or below 133% of FPL.
- When income is above 133% of FPL but at or below 185% of the FPL, the IDHS worker will approve coverage as a Family Care Premium Level 1 case for both the children and the adult. Upon approval the case is sent to the All Kids Unit.
- When income is above 185% of FPL the adults are denied medical coverage under the Family Care Premium program. The FCRC will approve the Premium coverage for the children and will then send the case to the All Kids Unit. Staff in the Family Community Resource Centers (FCRCs) are responsible for notifying the adults who apply at their office of the outcome of their request for medical benefits. If the adults have high medical expenses, the FCRC is able to complete a Family Health Spenddown determination for the adults.

Existing Family Care Expansion Cases

A couple of years ago, the state had expanded Family Care eligibility to include adults with income from 185% to 400% of the FPL. This program ended in April 2008, but families that had enrolled in the window of opportunity remained eligible. These adults will continue to receive FamilyCare on these cases if all eligibility requirements continue to be met and income remains in this income range as long as there is no break in coverage. They must continue to meet the eligibility requirements.

FamilyCare Rebate

Adults with income greater than 133% and less than or equal to 200% of the FPL may qualify for FamilyCare Rebate as long as at least one child in the family is enrolled under any All Kids Plan and all other eligibility factors are met. Adults who are currently enrolled but have no child in the family who is enrolled in All Kids may continue to

Family Care Rebate (cont'd)

receive FamilyCare Rebate until the next renewal. If at renewal no child in the family is enrolled in an All Kids plan, the adult is only eligible for medical benefits under FamilyCare Share or Premium Level 1 at or below 185% of the FPL. If an adult on FamilyCare Rebate loses their insurance, they may qualify for FamilyCare Share or Premium Level 1 if income is at or below 185% of the FPL.

Program Debt and Cancelation Due to Non-Payment of Premiums

If the parent or caretaker relative has overdue premiums or unpaid Rebate overpayment, the debt must be repaid before Premium Level 1 or Family Care backdate for Premium Level 1 can be approved. This includes premiums incurred for All Kids, Health Benefits for Workers with Disabilities, and Veterans Care.

If a premium payment is overdue for an adult or a child and income levels now make the family Assist or Share eligible, the debt does not have to be paid before medical coverage is able to be approved.

Prior Coverage and Medical Backdates

Children: Prior Coverage

Only children are eligible for Prior Coverage. Prior coverage is available **only the first time** a child is approved for All Kids Share or Premium and begins 2 weeks before the date of application and ends the day All Kids Share or Premium coverage starts. To receive prior coverage, a request is to be made to HFS All Kids Unit within 6 months of the initial date of the request for All Kids Share or Premium. Only the All Kids Unit is able to determine eligibility for prior coverage for ALL Share and Premium cases, even those approved by IDHS local offices. Children who are eligible for Share or Premium Level 1 do not qualify for Family Care Backdate. Adults with income at or below 185% of FPL can receive medical coverage beginning with the month of application.

Adults: Family Care Backdate (Income between 133% and 185% of FPL)

Family Care Backdate, permits medical coverage to be provided for up to 3 months before the month of application and is only available if the adult meets all eligibility criteria. There is no limit to the number of times a backdate can be requested, and there is no time limit for making the request. **Only the All Kids Unit is able to authorize Family Care backdate on these cases.** Premiums have to be paid for any month backdating is needed and the backdate will not be approved until payment is received.

Family Care Backdate (Income over 185% FPL)

The family will be referred to the FCRC to help determine if the family is eligible for medical coverage as a Family Health Spenddown case. The application has to be filed at the FCRC within 3 months of the bill being incurred.

Family Care Backdate (Income at or below 133% of FPL)

Families with incomes at or below 133% of FPL are approved as a Family Care Assist case. Responsibility for these cases are retained with the FCRC. Medical Backdating is done by the IDHS caseworker as long as the individuals meet all eligibility requirements.

To read more about the changes in Family Care check out <http://www.dhs.state.il.us/page.aspx?item=44917&newssidebar=4107>