

12 Month Authorization - At-Risk Referrals and Maintaining Purpose for Care

All at-risk SR referrals are subject to the 12-month eligibility authorization requirement. The client must maintain purpose for care with the allowable three month exception to continue receiving services. See the guidance below for additional clarification.

12 Month Eligibility Authorization		
Referral Period	3 Months to Re-Establish	Working Poor Eligibility
	Purpose for Care – Yes	Remainder of 12 Months
Assess a parent copayment based on income documentation submitted***	Copayment no longer waived. Parent responsible for initial assessment or new assessment if lower.	
This does not prevent an ELC/RCMA from waiving the assessed copayment in accordance with statute.		

12 Month Eligibility Authorization		
Referral Period	3 Months to Re-Establish Purpose	
	for Care - No	
Assess a parent copayment based on income documentation submitted***	Copayment no longer waived. Parent responsible for initial	Care is discontinued.
This does not prevent an ELC/RCMA from waiving the	assessment or new assessment if	
assessed copayment in accordance with statute.	lower.	

12 Month Eligibility Authorization		
Referral Period	Referral Period	
	Remainder of 12 Months	
Assess a parent copayment based on income documentation submitted***	Copayment no longer waived. Parent responsible for initial assessment or new assessment if lower.	
This does not prevent an ELC/RCMA from waiving the		
assessed copayment in accordance with statute.		

^{***}Referral Period as indicated above represents all referral periods (60 days, 90 days and 6 months).