

## NOTICE OF DECISION ON ADOPTION ASSISTANCE ELIGIBILITY STATUS

**Use of form:** This form is used to notify adoptive parents of their child's eligibility for Adoption Assistance when a child is turning 18 or 19 years of age. Personally identifiable information on this form is used to verify the information necessary for providing benefits and will be used only for this purpose.

Provide Adoptive Parents' Names and Address Below:

Today's Date:

### Child Information

Name:

Birthdate:

18<sup>th</sup> Birthdate:

Case ID Number:

Provider ID Number:

### BASED ON THE INFORMATION YOU PROVIDED, YOUR CHILD'S ELIGIBILITY FOR CONTINUED ADOPTION ASSISTANCE IS INDICATED BELOW.

- I. Adoption Assistance (payment and / or Medical Assistance) will end the month of your child's 18<sup>th</sup> birthday. Your last payment will be in . Your child graduated from high school in .
- II. Adoption Assistance (payment and / or Medical Assistance) will end  the month of your child's graduation from high school. Your last payment will be in .
- III. Adoption Assistance (payment and / or Medical Assistance) will end the month of your child's 19<sup>th</sup> birthday. Your last payment will be in . For continuation of Adoption Assistance after age 19, your child must meet additional eligibility requirements listed on the enclosed letter.
- IV. Adoption Assistance benefits (payment and / or Medical Assistance) for your child have been approved to continue after age 19. Benefits will end **either** the month of graduation from high school **or** age 21, **whichever comes first**:
- the month / year of your child's graduation from high school
- the month / year your child turns age 21
- V. Adoption Assistance benefits (payment and / or Medical Assistance) for your child have **not** been approved to continue after age 19. Adoption Assistance will end the month of your child's 19<sup>th</sup> birthday. Your last payment will be in . Reason: Your child has not met all of the requirements for an extension of benefits.

### APPEALS PROCESS

If you disagree with this determination, you may request a hearing in writing or in person, within 45 days of the date of this notice. A written request should be sent to: Division of Hearings and Appeals, P.O. Box 7875, Madison, WI 53707. Appeals may be delivered in person to that office at 505 University Avenue, Room 201, Madison, WI. You should include a short statement about the matter you are appealing and the reason for your appeal.

### IF YOUR CHILD'S GRADUATION DATE CHANGES, IT IS YOUR RESPONSIBILITY TO NOTIFY THE DIVISION IMMEDIATELY. TO REPORT THE NEW GRADUATION DATE, SEND A LETTER BY MAIL OR FAX TO:

Adoption Assistance Accountant  
DSP / BPOHC  
P.O. Box 8916  
Madison, WI 53708  
Fax Number: (608) 264-6750  
Telephone Number: (866) 666-5532

Benefits:  Payment and MA  MA Only

**Comment [TM1]:** This field is pre-filled. This field is not editable on the template. The field pre-fills with the current date.

**Comment [TM2]:** This field is pre-filled. This field is not editable on the template. The Payee field pre-fills the Payee Names from the current open In-Home Service page.

**Comment [TM3]:** This field is pre-filled. This field is not editable on the template. The data can be corrected as follows: update the name fields on the Basic tab of the Person Management page.

**Comment [TM4]:** This field is pre-filled. This field is not editable on the template. If provider address information needs to be updated, contact the assigned Adoption worker to update the provider address.

**Comment [TM5]:** This field is pre-filled. This field is not editable on the template. The  [1]

**Comment [TM6]:** This field is pre-filled. This field is not editable on the template. The  [2]

**Comment [TM7]:** This field is pre-filled. This field is not editable on the template. The  [3]

**Comment [TM8]:** This field is pre-filled. This field is not editable on the template. The  [4]

**Comment [TM9]:** This checkbox is pre-filled. This checkbox is not editable on the template.  [5]

**Comment [TM10]:** This field is pre-filled. This field is not editable on the template. This  [6]

**Comment [TM11]:** This field is pre-filled. This field is not editable on the template. This  [7]

**Comment [TM12]:** This checkbox is pre-filled. This checkbox is not editable on the template.  [8]

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**Comment [TM26]:** This field is pre-filled. This field is not editable on the template. Wh  [22]



