SUNSHINE HEALTH CHILD WELFARE SPECIALTY PLAN

CARE GRANT OVERVIEW & PROCEDURES

Update effective 12/1/18

OVERVIEW:

Sunshine Health will provide Care Grants for Child Welfare Specialty Plan members up to a total of \$150 per member per calendar year for expenses not covered by Medicaid or alternate funding. These Care Grants can be requested for a range of services or supplies for a Child Welfare Specialty plan member, but may only be provided directly for social, physical, and educational activities for the member. Examples of services or supplies that are for healthy social, physical, and educational activities include, gym memberships, swimming lessons, sports equipment or supplies, art supplies, and application fees for post high school education.

CARE GRANT ELIGIBILITY & CRITERIA

- Meets eligibility for, and is enrolled in, the Sunshine Health Child Welfare Specialty Plan at the time of request.
- Ages birth to 21 years of age.
- May benefit from involvement in a healthy social, physical, or educational activity.
- Service or supply requested must be used for a healthy social, physical, or educational activity.
- Service or supply requested must benefit the member's health and well-being.
- Service or supply must be used for the member directly.
- Care Grants must not exceed \$150 per member per calendar year.
- Supporting documentation disclosing services/supplies and total amount paid, must be included at the time of request.
- Requests may be incrementally requested throughout the calendar year but may not exceed the
 total benefit of \$150 per member per calendar year. Each incremental request must include a
 full Care Grant Request packet to include the form and supporting documentation.
- Care Grant funds not used within one (1) calendar year cannot be carried over to the next calendar year.

REQUEST PROCEDURE

- Requests for Care Grants may be received from Child Welfare Community Based Lead Agencies (CBCs), CBC sub-contracted Case Management Organizations (CMOs), adoptive parents, and adult Child Welfare Specialty Plan members only. Child welfare stakeholders and community providers (such as group homes or service providers) may contact the assigned child's CBC or CMO to recommend a Care Grant request be submitted to Sunshine Health.
- 2. The request must be submitted on the Sunshine Health approved Care Grant Request Form. All information on the form must be completed in full to include:

- a. Date of request
- b. Name, address, phone number of CBC/CMO, adoptive parent, or adult member
- c. If CBC/CMO is requestor, then list name of staff member making the request
- d. Member name, member date of birth and member Medicaid ID
- e. List of services or supplies requested
- f. Explanation of how the requested services or supplies supports the member's social, physical or educational development
- g. Description of the supporting documentation containing list of services/supplies and total amount being requested
- h. Total Care Grant amount not to exceed \$150 per member per calendar year
- 3. Supporting documentation describing services and/or supplies, along with verification of cost, must be submitted at the time of initial request. The supporting documentation is to be attached to the Care Grant Request Form. Any forms received without supporting documentation will not be processed. Examples of supporting documentation are receipts, printouts of cost from websites, flyers from school or other programs, or written estimate of services to be provided. Documentation should clearly demonstrate the cost of the services or supplies to be equal to the amount requested, which cannot exceed \$150 per member per calendar year.
- 4. The completed Care Grant Request From and supporting documentation are submitted via email to caregrants@centene.com. If unable to access email, requests may also be submitted by fax to 1-855-478-2890 or by regular mail to Sunshine Health's Child Welfare Operations Department at 1301 International Parkway Sunrise, Florida 33323. For those submitted by email, a "Confirmation of Receipt" email is automatically sent to the requesting party.

REVIEW PROCEDURE

- 1. The Care Grant Request form and supporting documentation will be received by a designated Sunshine Health Child Welfare (CW) staff member. Within two (2) business days of receipt, the staff member logs receipt and documents into an internal tracking system. The staff member will review the request for accuracy and completion. If additional information is needed, the CW staff member will make two (2) documented attempts to obtain necessary information from requesting party. If there is no response or continued lack of necessary information, the request will be denied and the requesting party will be notified within seven (7) business days of the original request.
- The CW staff member will verify the member indicated on the Care Grant Request form is active
 in Sunshine Health Child Welfare Specialty Plan at the time request. If the member was not
 active in the SH CWSP at the time of the request, the care grant request will not be processed
 and the requestor will be notified.

PAYMENT PROCESS

Sunshine Health Child Welfare Specialty Plan Care Grant Overview & Procedures Rev. 11/29/18

- 1. The following are appropriate payees: CBC lead agencies and CMOs, adoptive parents or adult Child Welfare Specialty Plan members.
- 2. If the requesting party is a CBC lead agency or CMO, the check will be issued to the respective agency. The agency is responsible for disbursing payment to the member or member's representative.
- 3. If the requesting party is an adoptive parent or an adult Child Welfare Specialty Plan member, a W-9 form is required to process payment. The check for payment will be issued to the adoptive parent or the adult Child Welfare Specialty Plan member, as appropriate.
- 4. Payment will be sent to the requesting party through standard U.S. mail within 45 calendar days of the finance department receiving the fully completed, approved payment request, with all required back-up documentation.