

TITLE IV-E INITIAL SUBSIDY ELIGIBILITY DETERMINATION

DEPARTMENT OF HEALTH AND HUMAN SERVICES CHILDREN AND FAMILY SERVICES-ADOPTIONS SFN 855 (7-2024)

Name of Child	CCWIPS Case Nur	nber Date Adoption Proc	ceedings are to be Initiated
Foster Care Eligibilty Determination IV-E EA OR Regular Match Tribal 6	38	·	
A. SPECIAL NEEDS REQUIREMENT: Adoption assistance payments may be made to parchild, the child shall not be considered a child with sestablished criteria, that the child cannot or should No - STOP: The child is not eligible. Yes - Has the State/Tribe determined that there reasonable to conclude that the child cannot medical assistance as indicated on the SF Age 7 or older Member of a sibling group: First name Member of a minority group Physical, mental or emotional disability List Conditions At high risk for physical, mental or emotional disability	special needs unless the follonot return to the home of his/feexists with respect to the chilot be placed with adoptive partial (Check all that apply) (s) of siblings being placed with	wing are met. Has the state of her parents? Id a specific factor or because trents without providing adopt; th:	determined pursuant to e of which it is
while in the care of the pare	ole. Ined that, except where it would be as the existence of signification of the second optive parents without providumentation and GO TO B.	ld be against the best interes nt emotional ties with prospe able, but unsuccessful, effort ing adoption assistance unde Location of Documentation	st of the child ective adoptive parents t has been made to place er this section or medical
No - STOP: The child is Yes - Specify relationship	not eligible.	Relationship	
B. REMOVAL INFORMATION - APPLICABLE CHILD At the time of initiation of adoption proceedings, wa Tribal agency pursuant to an involuntary removal of that continuation in the home would be contrary to t relinquishment; No - Go to C. Yes - Go to F.	s the child in the care of a pul f the child from the home in ad	ccordance with a judicial dete	ermination to the effect
C. SSI: Does the child meet all medical or disability required No - Go to D. Yes - Go to F.	ments of Title XVI with respec	t to eligibility for SSI benefits	i?

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such foster family home or child care institution pursuant to an	itution with the child's minor parent, and the child's minor parent was in involuntary removal of the child from the home in accordance with a e would be contrary to the welfare of the child; or a voluntary placement		
E. PRIOR ADOPTION:			
Was the child determined eligible for adoption assistance payments with respect to a prior adoption (or who would have been determined eligible for such payments had the Adoption and Safe Families Act of 1997 been in effect at the time that such determination would have been made); and is available for adoption because the prior adoption has been dissolved and the parental rights of the adoptive parents have been terminated or because the child's adoptive parents have died? No - STOP: The child is not eligible. Yes - Go to F.			
F. ADOPTION SUBSIDY AGREEMENT:			
Is the Subsidized Adoption Agreement signed by the parent(s)?			
No - STOP: The child is not eligible.			
Yes - The child is eligible for IV-E Adoption Assistance Benefits.			
Subadopt Worker Signature	Date		
Effective Date of IV-E Subsidy Eligibility	Effective Date of State Funded Subsidy		
Effective Date of Subsidy Exception	Effective Date of MA for Tribal Subsidy Payment		

Instruction to Worker: Case information should be added to the Applicable Child Spreadsheet if the child was NOT IV-E eligible in foster care and becomes IV-E eligible for adoption assistance purposes due only to the applicable child provisions (applicable child only status).