



## MACSIS Residency Verification

The purpose of this form is to clarify which county is responsible for adjudicating claims for behavioral health services provided to the client being enrolled. It should be completed and provided to the enrolling board when:

- The county of the treating facility does not match the legal county of residence of the client as noted on the enrollment form (child or adult, out-of-county).
- The physical address of the client as noted on the enrollment form does not match the legal county of residence of the client (example: domestic violence shelter case, client temporarily living with relatives, child or adult, out-of-county).
- The child's physical address as noted on the enrollment form does not match the legal custodian's address (child only, in or out-of-county).

A client's or legal custodian's signature on this form shall be sufficient for documenting residency with the exception of adults who reside in specialized residential facilities or who are committed pursuant to special forensic categories referenced in the residency guidelines.\*

### Adult

Client is an adult?  Yes  No *If yes, complete the following information.*

Client Name (please print)

Street Address for Residency Determination Purposes

City, State, and Zip for Residency Determination Purposes

Signature of Client

Date

### Minor

Client is a minor?  Yes  No

*If yes, indicate if child is in legal custody of the following (this is not the foster parent):*

Parent  CSB  DYS  Court  Other (specify): \_\_\_\_\_

Client Name (please print)

Name of Legal Custodian Marked Above

Phone No. of Legal Custodian

County of Legal Custodian

If Parent, Address of Parent (if different from client's physical address on the enrollment form)

Signature of Legal Custodian

Date

\*For the special exceptions noted, this form should not be used. Refer to the residency guidelines for more information on how to determine residency in these cases and/or what documentation is needed to provide proof of residency.