ISSUE OVERVIEW

The Affordable Care Act (ACA) provides Medicaid to former foster youth until age 26 so they will have a healthy foundation upon which to build a successful adulthood (see #HealthCareFFY Issue Paper #1 (https://www.fosterclub.com/sites/default/files/docs/landingpage/HealthCareFFY_OverviewPaper-PDF.pdf). The former foster youth provision of the ACA was created to provide former foster youth parity with their peers, who can remain on a parent’s insurance plan until age 26.

Unfortunately, a federal interpretation of the law makes parity impossible and puts young people, who are by nature very mobile, at risk of losing their health insurance and access to vital treatment and care. Currently, a young person who relocates from the state they aged out of foster care to another state (whether to attend college, live with relatives, relocate for a job opportunity, or any other reason) runs the risk of losing eligibility for health coverage under the ACA’s former foster youth provision. At this time, only a handful of states have undertaken the steps necessary to ensure these ‘relocator’ youth are covered.

“When I moved to Oregon for employment, I was unable to get Medicaid as a former foster youth relocating to a new state. I did not know, prior to the move, this would be an issue. I was also unable to qualify for or afford other health insurance options. My lack of insurance led to medical bills, ongoing health issues, and created a barrier to my success.”

— Brian Morgantini, 14 years in Pennsylvania foster care system, currently a traveler who is chasing experience and a college degree, as well as a NYTD Reviewer and previous member of the National Policy Council

For more information or to partner in efforts to improve health outcomes for current and former foster youth, contact Kristen Torres, Director, Child Welfare & Immigration at First Focus (Kristen@firstfocus.org) at SPARC (email) or Shannon Symonds, Outreach Manager at FosterClub (shannon@fosterclub.com).
Following the enactment of this provision of the ACA there was some debate over how language in the provision should be interpreted regarding how states should treat young adults who were in foster care at age 18 or older and enrolled in Medicaid in one state, but then moved to another state after they left foster care. While the drafters of the original legislation have repeatedly stated that it was their intent that states be mandated to cover former foster youth regardless of where they were in foster care, the legislation’s use of the word “the” instead of “a” in front of “state” left room for different interpretations as to what was required of states under the FFY provision.

On January 22, 2013, CMS issued a notice of proposed rulemaking that addressed, among other things, its interpretation of relocator coverage. At that time, CMS stated it was not mandatory for states to cover youth who relocate but proposed to allow states the option to cover these youth through amendments to a state’s Medicaid Plan. Subsequently, the following states chose to include relocators in their Medicaid Plan: CA, GA, KY, LA, MA, MI, MT, NM, NY, PA, SD, UT, VA, and WI.

Then in late 2016, CMS then changed course in its interpretation of the relocator coverage. On November 30, 2016, CMS released its final rule, which stated the federal interpretation with respect to coverage of youth who relocate.

This Final Rule details the following federal interpretations of the former foster youth provisions:

- States are not mandated to cover former foster youth who relocate.
- States do not have the option to cover former foster youth who relocate through amendments to their Medicaid state plan.
- States can cover former foster youth who relocate through § 1115 Demonstration Waivers.
- States who previously had an approved plan amendment to cover former foster youth who relocate need to apply for a 1115 waiver in order to continue covering this population.

As of June 2018, only 9 states have pursued § 1115 Demonstration Waivers and received approval: CA, DE, KY, MA, PA, SD, UT, VA, WI. NM’s Waiver Application is pending approval.

“I could have lost my health care if I had left New York to go to Texas for a surgery that I needed. Losing my health care could have jeopardized all of my hard work and progress toward earning my college degree.”

— Cody Rivera, FosterClub Young Leader. Cody is a college graduate, former All-Star spent 12 years in the New York Foster Care system. While in the spring of his junior year at college in New York, Cody suffered a sports-related knee injury which required surgery and physical therapy.
WHY IT MATTERS

Whether a former foster youth has insurance coverage should not depend on the state in which they live. Youth should be able to relocate for education, a job, or to gain support from family or friends without fear of losing Medicaid. Here are some of the key reasons why providing coverage to all former foster youth regardless of where they live is so important:

- Young adults, including youth aging out of foster care, are very mobile. Often their moves are for reasons related to achieving goals that support the youth’s transition to adulthood.
- Youth may move to be with family, go to college, take a job, or make a fresh start.
- Youth should not have to choose between insurance coverage and taking steps that help them improve their chances and opportunities to succeed.
- Because former foster youth continue to be at high risk for being uninsured and because they often do not yet have the jobs or resources to access health insurance in the private market, losing their coverage under the FFY provision could mean losing access to care.

“What’s FosterClub hearing? We receive numerous calls from young people who have been in foster care about health insurance. Here are some of the recurring issues and concerns we have heard:

1. Youth have not been told and are not sure whether their Medicaid coverage under the FFY provisions will remain if they move out of state.
2. Youth are having trouble making decisions about whether to attend college out of state because they are worried about losing their health insurance.
3. Youth who have moved out of state and have chronic health care needs are having trouble getting health insurance and care.
4. Youth who moved out of state and lost their FFY coverage are having trouble finding and affording alternative health insurance and some are incurring debt as a result of not being able to pay for their care.”

— Shannon Symonds, FosterClub Outreach Manager
Verifying Former Foster Youth Status

California covers former foster youth regardless of what state they were in foster care. Moreover, the enrollment and retention processes are the same for both populations of former foster youth, which means that former foster youth who relocate to California have parity with those who remain in California after their foster care exit.

In California, former foster youth can apply for coverage through the county using a one-page short form specifically for former foster youth or online by completing California’s electronic Medicaid application (the single, streamlined application). Both applications ask whether applicants were in foster care in any state at age 18 or older. When applicants answer ‘yes’ to this question on the electronic application, the system is programmed to allow them to skip questions irrelevant to their eligibility as a former foster youth, such as income and tax questions.

The electronic application and short paper application for former foster youth both also ask what state the applicants were in foster care.

Including this question assists eligibility workers in knowing which state to contact to verify eligibility for this coverage group. All youth who self-attest to being in foster care at age 18 or older begin receiving coverage immediately while the county worker tries to verify former foster youth status. Although a youth from another state has the option to provide written proof of their former foster youth status at the time they apply for coverage (if they have it), they are only required to produce this documentation if an eligibility worker first tries and is unable to verify eligibility on its own.

California’s written policy guidance includes a link to a list of Independent Living Program managers in each state who can be used as points of contact to help verify former foster youth status for youth who have relocated from another state. Because youth are treated the same regardless of which state they were in foster care, all former foster youth are assigned the same aid code for tracking enrollment in the former foster youth eligibility group. However, the state is able to identify former foster youth from another state for purposes of reporting on the 1115 waiver based on the youth’s responses to the application question about which state the youth was in foster care.
NEXT STEPS

Fix the Federal Legislative Language
To enhance the health and life chances of transition aged youth leaving the foster care system advocates and policy makers should take action to ensure that former foster youth are categorically eligible for Medicaid until age 26 regardless of where they live, and that states are taking action to ensure these young people have health insurance and health care as they transition to adulthood. To that end, advocates and policy makers should:

• Support a federal fix to ensure Medicaid coverage for all former foster youth is mandated until age 26 regardless of where they live. (Legislation--H.R.4998 / S.1797-- has been introduced to provide this important fix.)

Take Steps to Cover Former Foster Youth NOW

• Advocate that states apply for Section 1115 Waivers so that youth who relocate will be covered under the former foster youth provision of the ACA. See the Medicaid.gov 1115 application process: https://www.medicaid.gov/medicaid/section-1115-demo/how-states-apply/index.html

• Ensure states are enforcing existing federal law related to the closure of Medicaid cases so that before Medicaid coverage is terminated all potential categories for eligibility are considered.

• Ensure states are enforcing existing federal law on child welfare transition planning, which requires that youth leave the child welfare system at age 18 or older with transition/discharge plans that include options and arrangements for health insurance and how health care needs will be met.

  1. If a youth is not eligible for Medicaid under the former foster youth provision because he or she is moving to state that does not cover relocators, actions should be taken to connect that youth to other coverage and care options as part of the transition plan.

  2. For example, if a young person is moving to a state that has expanded Medicaid to low-income, childless individuals under the ACA, he or she may be eligible for Medicaid under the expansion category. If the young person has a disability or is pregnant or parenting, he or she may be eligible for Medicaid on these bases.

  3. Because young people often have limited options available for insurance other than Medicaid, this transition planning should occur well before discharge so all options can be explored.

The #HealthCareFFY Campaign seeks to deliver on the promise of health insurance and health care for all former foster youth at least until age 26 so that they have a healthy foundation for adulthood.

The #HealthCareFFY campaign is a project in partnership:

[Logos for FosterClub, First Focus, and Juvenile Center]