H-3100 FORMER FOSTER CARE CHILDREN

H-3110 GENERAL INFORMATION

In accordance with §1902(a)(10)(A)(i)(IX) of the Patient Protection and Affordable Care Act (ACA) of 2010, Medicaid coverage must be extended to all individuals under age 26 who were formerly children in foster care.

These individuals are applicants/beneficiaries, under 26 years of age, who were receiving Medicaid and were in foster care under the responsibility of the state at the time of their 18th birthday.

The Patient Protection and Affordable Care Act (ACA) has been amended to grant eligibility and enrollment to former foster care youth who were enrolled in Medicaid and who aged out of foster care in another state on or after January 1, 2023.

There is no income or asset test required and beneficiaries may have other insurance and remain eligible.

Former Foster Care Children (FFC) may also be applicants or beneficiaries who lost eligibility due to moving out of state, but reestablished residency prior to reaching age 26.

H-3110.1 COVERAGE

Individuals enrolled in FFC are eligible for the full range of Medicaid covered services.

H-3120 ELIGIBILITY DETERMINATION PROCESS

Determine eligibility by applying the following criteria. The elements have been listed in the most logical order, but work on all steps simultaneously.

H-3120.1 DETERMINE ASSISTANCE UNIT

The assistance unit consists of the applicant/beneficiary that was formerly a child in foster care and is no longer in state custody.

H-3120.2 ESTABLISH CATEGORICAL REQUIREMENT

Establish that the applicant/beneficiary:

- Is at least age 18, but under age 26;
- Currently lives in Louisiana;
- Was a child in foster care in Louisiana's custody upon reaching age 18 prior to January 1, 2023; or
- Was a child in foster care in any state's custody upon reaching age 18 on or after January 1, 2023.
- Was enrolled in *** Medicaid upon reaching age 18.
- Is not enrolled in another mandatory eligibility group. Refer to <u>F-100.1 Mandatory Coverage Groups</u>.

Verification of Foster Care Status

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The process to verify foster care status is coordinated between Child Welfare which administers the foster care program and State Independent Living and Education and Training Voucher (ETV) Coordinators. The individual will contact the ETV coordinator assigned to their state to obtain a verification letter. If the individual needs assistance in obtaining the required verification the agency is to contact the ETV Coordinator assigned to the individual's state. A list of ETV Coordinators can be found_here.

If the individual was in Foster Care in Louisiana, Child Welfare will electronically update the system with the updated foster care status. If the information has not been electronically updated in the system a request for information will be sent to the individual to provide verification.

Types of Verification:

- <u>Proof of aging out of foster care and being enrolled in Medicaid</u> <u>upon reaching age 18.</u>
- Proof of FFC eligibility in another state.
- <u>Refer to S-0000 Verification and Documentation</u>

H-3120.3 ESTABLISH NON-FINANCIAL ELIGIBILITY

Verify eligibility with regard to the following factors:

- Age MAGI-Related I-100
- <u>Assignment of Third Party Rights I-200</u>
- <u>Citizenship / Identity and Qualified Non-Citizen Status I-300</u>
- Enumeration I-600
- <u>Residence</u>
 I-1900

H-3120.4 ESTABLISH NEED

There are no income or resource tests in determining eligibility.

H-3120.5 ELIGIBILITY DECISION

Evaluate all requirements to determine eligibility.

H-3120.6 CERTIFICATION PERIOD

The certification period may be effective no earlier than three (3) months prior to the application date provided the individual is otherwise eligible. The months of retroactive coverage are not included in the twelve (12) month certification period. The twelve (12) month certification period.

Retroactive medical eligibility shall be explored for the three months prior to the month of application. Refer to <u>H-1800 Retroactive Medical</u> <u>Eligibility (RME)</u>.

Note:

Prior to closure of Former Foster Care Children, eligibility in other programs must be explored.

H-3120.7 NOTICE OF DECISION

Send the appropriate notice of decision to the applicant/beneficiary.