Extending Medicaid Eligibility to Former Foster Care Youth

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NEW YORK PUBLIC WELFARE ASSOCIATION
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Objectives

- Describe New York State implementation of the ACA provision.
- Highlight particular importance of health insurance for this population.
- Discuss outreach and engagement.
Affordable Care Act (ACA) – Medicaid to 26

Background:

The ACA includes a provision that allows young adults to remain on their parent’s health insurance until age 26.

Foster care youth who age out of the child welfare system may remain on Medicaid until age 26; regardless of income.
Implementation in New York
## Medicaid to 26

<table>
<thead>
<tr>
<th>Group</th>
<th>Anticipated Number of Youth and Actions</th>
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<tbody>
<tr>
<td>Currently Aging out of Foster Age at age 18</td>
<td>Number of youth varies from year to year; In 2012, this included approximately 1800 youth aging out of care. With system support, LDSS will authorize Medicaid in the Medicaid System (WMS).</td>
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<tr>
<td>18 -21 Current Chafee Population</td>
<td>Approximately 4000 youth fall within this group. Medicaid Chafee Indicator on Record will be converted to new benefit.</td>
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<tr>
<td>21-26</td>
<td>Approximately 5000 young adults fall within this group. Young adult can initiate this benefit by contacting the LDSS directly or via the new Health Exchange. Through the Health Exchange, a referral for Medicaid will be initiated and sent to LDSS for processing. If LDSS/HRA can verify Foster Care and Medicaid status, an application will be forwarded to the young adult.</td>
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Eligibility

A youth must meet **all** of the following criteria:

- The final discharged youth must have been in the custody of a Commissioner of a local department of social services or the Commissioner of the Office of Children and Family Services on their 18th birthday; **AND**

- The youth must have been in receipt of Medicaid on their 18th birthday or the day of their final discharge.

This provision applies to any youth who meets this criteria and was discharged after January 1, 2007.
System Support Expected to be Implemented 2/18/14

Youth Discharged after System Support Implementation

- The existing Special Population Field (SP) indicator “C” will be redefined to identify Former Foster Care (FFC) youth.
- Edits requiring the entry of the “C” indicator at the next under care/recertification transaction in WMS, when a youth in foster care (Individual Category Codes 32, 77, 78 and 81) turns 18 years of age, will remain.
- Continuous Save Date (CSD) will set to the last day of month in which the individual turns 26.
System Support Expected to be Implemented 2/18/14

Former Foster Care Youth - Current “C” Indicator

- Individuals who are MA active with a SP indicator “C” will be identified as FFC.
- Continuous Save Date (CSD) will be changed to reflect the last day of the month in which the individual turns 26.
• Individuals who were discharged from 2007-2013, meet FFC criteria and are over 21 but still under 26 years of age.
  
  ▶ OCFS has created file of individuals who meet this criteria. DOH will compare list to Upstate WMS based on CIN and create a transaction to populate SP Indicator with a “C”.

• Active Medicaid (MA or TA) – CSD will be generated to reflect the last day of the month in which the individual turns 26.
No Active Medicaid - NYS

- Individual applies for assistance through the Health Exchange. Question will ask if they were a former foster child and in which state they resided while in care. Individual answers Yes and NYS.

- Individual is advised that a referral will be sent to the LDSS in which the individual resides.

- LDSS registers application in WMS. Clearance reflects the SP Indicator “C”. LDSS will send application to youth requesting that they complete, sign and return.

- Clearance does not reflect SP Indicator “C”. LDSS must contact applicant to obtain the district in which they resided while in care. LDSS will contact Services Unit in that district to verify.

  - If verified, application is sent and returned, LDSS opens WMS case and enters “C” indicator. CSD will generate.

  - If unable to verify, LDSS will contact their DOH Liaison.
No Active Medicaid - Other State

Individual applies for assistance through the Health Exchange. Question will ask if they were a former foster child and in which state they resided while in care. Individual answers Yes and state other than NYS.

The application will continue to be processed through the Health Exchange.

In addition, the individual will be referred to the Call Center. The Call Center will advise the individual that they may be eligible for MA to 26 and what documentation is necessary. They will also be advised when they obtain the necessary documentation they should contact the LDSS in which they reside.
Individual contacts LDSS. Documentation verifies that individual meets FFC criteria. LDSS opens WMS case and enters SP indicator “C”. CSD will generate.

Acceptable documentation – Statement from State, County or Agency responsible for placement verifying individual was in their custody at age 18. Copy of Court Order verifying that the individual was in the custody of the State or County at age 18. Copy of Foster Care Transition Plan that includes foster care and Medicaid status.

Individual contacts LDSS but states they need assistance obtaining necessary documentation, LDSS will contact their DOH Liaison.
No Active Medicaid - NYS

- Individual applies for assistance through the Health Exchange. Question will ask if they were a former foster child and in which state they resided while in care.

- Individual answers No.

- The application will continue to be processed through the Health Exchange.

- Individual will not receive Medicaid coverage to 26 as a former foster care youth.
Individuals who were identified as Chafee Youth with SP Indicator “C” and have turned 21 after 12/31/13 but before system support is implemented.

- DOH has sent a list to LDSS of Chafee Youth who turn 21 between 1/1/14-2/28/14.
- If youth has coverage beyond 2/28/14, no action is necessary prior to system support.
- If youth does not have coverage beyond 2/28/14, authorization must be extended to cover any gap in coverage.
  - Leave SP Indicator blank. Enter appropriate individual category code and coverage code 01. No MBL budget is necessary.
- After system support, districts will need to manually enter the SP Indicator “C” for all youth on the list.
A new Special Population Indicator “T” will be implemented to identify True Chafee youth.

These are youth who were in LDSS or OCFS custody but because of the setting in which they were placed, were not in receipt of Medicaid at age 18 or when final discharged.

OCFS will notify LDSS when youth is discharged from ineligible setting.

“T” indicator must be manually entered by LDSS.

Edits will support MA to 21.
System Questions

Contact your local district DOH Liaison
Why this provision is important
Importance of Provision

- Access to health and behavioral health services is critical for former foster care youth to transition to adulthood.
- Foster Care youth face a myriad of health (both physical and behavioral) risks.
- High-quality services are essential.
- Health insurance supports access to those services.
Exposure to adverse childhood experiences are common.
- 2/3 of study participants reported at least one ACE
- Over 1/5 reported three or more ACEs

Outcomes include health and social problems:
- Illicit drug use, Risk for intimate partner violence, Multiple sexual partners, Sexually transmitted diseases (STDs), Smoking, Suicide attempts, Unintended pregnancies, Early initiation of smoking, Early initiation of sexual activity, Adolescent pregnancy, Alcoholism and alcohol abuse

As the number of ACEs increase, the risk for health problems increases in a strong and graded fashion.
National Survey of Child and Adolescent Well-Being (Stambaugh et al., 2013)

National study of 5,873 children, ages 2 mo. - 17.5, who had contact with the child welfare system btw 2008 and 2009.

68% 11-17 yr olds
38% 0-2 yr olds
Uninsured

Receive less medical care

Receive less timely care

Have worse health outcomes

Carry a fiscal burden for themselves and their families

What we can do

- Implement ACA provision – afford youth in foster care seamless health coverage until 26.

- Educate communities about long-term and lingering risks associated with trauma so young adults can receive needed services.

- Engage in outreach efforts to educate young adults who left the child welfare system about this provision.
Outreach and Engagement
Our mission is to enhance and advance the lives of today’s and tomorrow’s foster youth by supporting our sense of self and responsibility. To do this, we pledge to educate everyone involved in the various systems Youth In Progress members represent, to the realities of this experience.

Youth are leading the effort to educate current and former foster youth about the ACA.
Who do we need to tell about the ACA?

Current and former foster youth, guardians and caregivers, workers.

TIPS to Educate:

- Workshops/Classes about ACA for foster parents, workers, caregivers
- These should highlight cost-comparison, statistics, and on-going care vs. emergencies
Youth-to-Youth

- The **best way to reach youth**
- "Trust" – Adults are suspect
- "Buzz" - The power of word-of-mouth
- Your youth know what works
Messaging Content

- Relevant to young adults (your youth know)
- Make it practical
- Use stories, give examples
- “Good for you” doesn’t work
- Solves problems
What are the best strategies to engage former foster care youth?

- Reinforce the importance of medical insurance and why they should register.

- Connect to cost saving and lowering medical out-of-pocket expenses.
Shanice
Brandon
Where do we find youth?
Who can help?

- Community Partners (LDSS, voluntary agencies, drop in centers, community youth programs, career centers)
- Permanency Resources (foster/adoptive parents, mentors, former workers)
- Aftercare Programs and Services
- Education and Training Voucher (ETV) recipients
What are some tools?

- Social media (Facebook, twitter, etc.)
- Youth groups, youth advocate programs, and leadership teams
- Flyers, newsletters, etc.
Resources
Resources

- SCAANY.ORG
- Two webinars
- Informational Flyer
- Frequently Asked Questions
- Two newsletter templates
- Videos
- This power point
Resources

- OCFS.NY.GOV
  - Youth page, Topics for Youth

- Youthinprogress.org

- National
  - First Focus, State Policy Advocacy and Reform Center (SPARC)
Thank You
For More Information

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