#### 2819 - FORMER FOSTER CARE MEDICAID

## POLICY STATEMENT

The Affordable Care Act allows Medicaid coverage to be extended to individuals who age out of foster care, or age out of Chafee, and were receiving Medicaid to the last day of the month they turn 26 years of age. Applicants may not be determined ineligible based on a diagnosis or pre-existing condition.

## BASIC CONSIDERATIONS

The Former Foster Care Medicaid became effective January 1, 2014, and retro coverage is not available prior to this date.

Former foster youth may apply for Former Foster Care Medicaid with the Right From the Start Medical (RSM) Assistance Group. or at any Division of Family and Child(ren) Services (DFCS) office.

The eligibility month is the month following a foster child's 18<sup>th</sup> birthday or the month following the closure of Chafee Medicaid.

## **Basic Eligibility Criteria**

The following basic eligibility criteria must be met to qualify for Former Foster Care Medicaid:

- Age: A youth must have been in foster care the month of his/her 18<sup>th</sup> birthday and be under the age of 26. The child could have been in foster care in any state. Self-attestation of receipt of Foster Care in another state at the time the youth turned 18 or aged out of the foster care system is acceptable.
- Enumeration;

**NOTE:** Enumeration is not a requirement for Emergency Medical assistance (EMA). Refer to Section 2054, EMA; Reference Section 2220, Enumeration.

- Residency, Reference <u>Section 2225</u>, Residency;
- Citizenship/Immigration Status/Identity **Note**: Individuals who were in foster care under Title IV-B or Title IV-E of the Social Security Act are exempt from providing additional documentary evidence of citizenship/immigration status/identity as long as they were in Foster Care in Georgia.
- Third Party Liability, Reference Section 2230, TPL;
- Application for other benefits, Reference <u>Section 2210</u>, Application for Other Benefits.

### **Other Considerations**

There are **no** income or resource limits for Former Foster Care Medicaid.

Former Foster Care Medicaid Cases are reviewed on an annual basis until the recipient turns 26.

Former Foster Care Medicaid recipients are eligible for retroactive Medicaid.

## Other Considerations (contd.)

EMA is available under Former Foster Care Independence Medicaid.

Former Foster Care recipients are enrolled in Amerigroup as their CMO enrollment.

Non MAGI recipients who are former foster children may request a Class of Assistance change to Former Foster Care Medicaid.

#### **PROCEDURES**

For determining eligibility for Former Foster Care Medicaid on new applications, complete the following steps:

- Verify that the individual was in foster care on his or her 18th birthday and receiving Medicaid by screening in SUCCESS, by contacting the Independent Living Coordinator, or by contacting the county with legal custody while the child was in foster care (if the individual was not enrolled in Chafee Medicaid).
- Verify the individual's Chafee Medicaid case has closed in SUCCESS.
- Assume the individual who ages out of care with the State of Georgia meets citizenship/immigration status/identity unless information to the contrary is known to the agency. No additional citizenship/immigration status or identity documents are required.

**Note:** Individuals who were in foster care under Title IV-B or Title IV-E of the Social Security Act are exempt from providing additional documentary evidence of citizenship/immigration status/identity as long as they were in Foster Care in Georgia.

- Verify citizenship/immigration status/identity for individuals who were in foster care in other states and request Former Foster Care Medicaid in Georgia after their 18th birthday.
- Accept the client's statement as to Georgia residency
- Complete the DMA 285 Third Party Liability
- Register the Medicaid application as an F40, Child Welfare Foster Care
- Process as an AU of one
- Code DEM1 Living Arrangement field "FF- Former Foster Care"
- Follow Appendix D Documentation Standards including FCAR.
- Request copies of documentation from the closed foster care case record from the appropriate Rev Max Regional Office.

### **Ongoing Cases**

Former Foster Care Medicaid cases that have an active or pending related case will remain with the county.

Former Foster Care Medicaid cases that have no active or pending related case will be transferred to the RSM Assistance Group. Contact Faye Lewis, ECS Team Supervisor, for transfer and mailing instructions at <a href="mailto:chafee@dch.ga.gov">chafee@dch.ga.gov</a>. Note this is for Former FosterCare Medicaid transfers.

Former Foster Care Medicaid Cases are required to have an annual review.

**NOTE**: Court orders and existing foster care documentation must be retained in the closed foster care case record and may NOT be cleansed when transferred to another county DFCS office.

### **Continuing Medicaid Determinations:**

If applicant ages out of Chafee (Age 21), the RSM Project will CMD the applicant to Former Foster Care and maintain the record if there is no related case. Case will remain as F40 but living arrangement will be changed from "IL" to "FF"

If applicant aged out of Foster Care at 18 but opted to return until age 21 (Child Welfare Foster Care), REV-MAX unit will CMD them into Former Foster Care and transfer the record to RSM if no related cases or to DFCS if there are other related cases. Case will remain as F40 but living arrangement will be changed from "FC" to "FF"

# Case Records for Children with Expired Eligibility

Closed Cases – Foster Care case records for recipients for whom eligibility has expired, i.e. where the recipient has turned age 26, should be maintained in Rev Max closed files following the retention schedule found in Section 2760 - Case Record Maintenance. Court orders and existing foster care documentation must be retained in the Chafee Medicaid case record and may not be cleansed.

**Retention of Case Records** – Due to IV-E Foster Care and Medicaid regulations, Former Foster Care Medicaid case records must be retained in their entirety (both IV-E FC material and Medicaid material) for a period of three years from the recipient's 26<sup>st</sup> birthday (i.e. no earlier than the recipient's 29<sup>h</sup> birthday).