**ACA and Former Foster Youth Questions and Answers**

**What is the Affordable Care Act (ACA)?**

The Patient Protection and Affordable Care Act, also known as the Affordable Care Act or ACA, is the federal healthcare reform law that President Obama signed on March 23, 2010. This law has provisions to expand coverage, control healthcare costs and improve healthcare delivery.

**What does it mean?**

Beginning in 2014, most Americans will be required to maintain a minimum level of health insurance coverage or pay a tax.

**When does the healthcare coverage start?**

Coverage under the Former Foster Care category of the ACA became effective January 1, 2014.

**What if someone does not currently have health insurance?**

Under the ACA, insurance companies cannot deny insurance to an individual or charge an individual more because of pre-existing conditions.

**What is a Federally Facilitated Marketplace?**

To facilitate the purchase and sale of qualified health coverage to individuals, the ACA created a Federally Facilitated Marketplace (FFM). States were given the option to run a state-based marketplace or allow the federal government to operate one in their state. Pennsylvania has elected to utilize the FFM.

**How does someone apply for health insurance coverage?**

Individuals may apply through COMPASS [www.compass.state.pa.us](file:///C%3A%5CUsers%5Cekiehl%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CTemporary%20Internet%20Files%5CContent.Outlook%5C68BOAG1I%5Cwww.compass.state.pa.us), Pennsylvania’s online application for health and human services programs; call the PA Consumer Service Center at 1-866-550-4355 to apply or ask questions; or apply through the FFM.

**Who is eligible for the Former Foster Care category?**

Youth who were in Pennsylvania’s or another state’s foster care system AND were enrolled in Medical Assistance (MA) at any time on or after their 18th birthday will be eligible for MA coverage until age 26.

**Who is considered to have been “in foster care” for the purpose of eligibility under this group? Are youth placed with a relative or in another non-licensed out-of-home placement, with respect to whom foster care payments are not being made, considered to be “in foster care”?**

According to federal regulations at 45 CFR 1355.20, “Foster care means 24-hour substitute care for children placed away from their parents or guardians and for whom the state or tribal agency has placement and care responsibility. This includes, but is not limited to, placements in foster family homes, foster homes of relatives, group homes, emergency shelters, residential facilities, child care institutions, and pre-adoptive homes. A child is in foster care in accordance with this definition regardless of whether the foster care facility is licensed and payments are made by the state, tribal or local agency for the care of the child, whether adoption subsidy payments are being made prior to the finalization of an adoption, or whether there is Federal matching of any payments that are made.”

Youth Development Centers (YDC)/Youth Forestry Camps (YFC), secure facilities, hospitals and psychiatric placements (PRTF) are not considered foster care.

Eligibility for the Former Foster Care category is determined solely on the basis of whether a youth was in a federally defined “foster care setting” on or after their 18th birthday and receiving MA.  Additionally, it doesn’t matter where the youth’s last placement was; as long as the youth was in an eligible setting and receiving MA at some point on or after their 18th birthday, they are eligible for MA coverage under the Former Foster Care category. The factors that have no impact on determining whether a youth is eligible for MA coverage under the Former Foster Care category include Shared Case Responsibility (SCR), whether the facility is licensed, where the funding for the foster care placement came from or what type of adjudication the youth experienced.

**What is placement and care responsibility?**

The County agency is legally accountable for the day to day care and protection of the child who has come into foster care through either a court order or a voluntary placement agreement. Sometimes this responsibility translates to “custody” or “care and control” of the child via a court order, but custody is not a title IV-E requirement. Placement and care responsibility allows the County agency to make placement decisions about the child, such as where the child is placed and the type of placement most appropriate for the child. It also ensures that the County provides the child with the mandated statutory and regulatory protections, including case plans, administrative reviews, permanency hearings and updated health and education records.

**Does “foster care” include those that are placed in non-secure, non-PRTF Drug & Alcohol treatment facilities?**

Yes, as long as it meets the federal definition of foster care.

**If a child is in foster care after the age of 18 and then becomes adopted or is placed into a secure juvenile detention facility, would they still qualify for the Former Foster Care category? If a youth who leaves care after the age of 18 and enters into an ineligible agreement or facility, will they still be eligible for this category?**

Yes, as long as they were in foster care on or after their 18th birthday and receiving MA.

**Are kids with PLCs being considered ‘former foster’ and under what conditions?**

Youth who exit foster care to adoption or PLC/SPLC arrangements prior to reaching age 18 are ineligible for MA coverage under the Former Foster Care category. These youth may apply for healthcare coverage through their local County Assistance Office, COMPASS or the Federally Facilitated Marketplace (FFM). They also may be able to receive healthcare coverage under their guardian or parent’s insurance until age 26.The former foster care provision of the ACA was developed to provide access to healthcare coverage for foster youth who leave care without the benefit of parent/guardian support in a manner that is commensurate with the access to the healthcare coverage available to youth who have the benefit of parent/guardian support; these youth are now able to receive healthcare coverage benefits through the insurance plan of their parent/guardian until age 26.

**What if a youth has private insurance, can they apply for Medical Assistance (MA) coverage and be eligible for the Former Foster Care category? What if the private coverage is costly or not comprehensive? Will MA coverage act as secondary coverage?**

Currently, an individual with private or employment based health insurance can apply for MA; MA would be the payer of last resort (see below).

55 Pa Code § 178.6. Third-party liability for all categories of MA**.**

 (a)  An applicant/recipient may have sources other than MA that cover the cost of his medical services and care. The third-party liability sources which are available to pay for medical services and care shall be identified and used to the fullest extent possible before payment is made by MA. The Department is the payer of last resort.

**Will immigrants/refugees be eligible for the Former Foster Care category of the ACA if they were in foster care on or after their 18th birthday and receiving Medical Assistance (MA)?**

The current policy is as follows:

* Eligible -Under age 21 and not a U.S. citizen but is lawfully residing in the U.S.
* Eligible-Age 21 to under age 26 and is a permanent resident who has been lawfully residing in the U.S. for more than five years.
* Ineligible -Age 21 to under age 26 and is a permanent resident who has been lawfully residing in the U.S. for less than five years, or who is a temporary resident, *unless* they are pregnant or have an emergency medical condition.
* Ineligible -An undocumented non-citizen, *unless* they have an emergency medical condition.

**Will there be a break in coverage upon discharge from foster care?**

Beginning January 1, 2014, the established protocol between the Children and Youth Agency (CYA) or Juvenile Probation Office (JPO) and the County Assistance Office (CAO) ensures that there will be no break in coverage for foster youth discharging from care who are age 18 or older and receiving MA. When an individual receiving MA exits foster care on or after their 18th birthday, the CY60 will be completed by the CYA or JPO which notifies the CAO of the youth’s discharge. This will serve as the application for the youth to be enrolled in the Former Foster Care category. The CY60 will need to have the permanent address of the youth in order for them to receive MA and to receive notices of annual renewals.

Individuals under the age of 26 who left foster care in Pennsylvania on or after their 18th birthday prior to January 1, 2014, will need to submit an application to be reviewed for eligibility under the Former Foster Care category. The CAO will verify via the Electronic Client Information System (eCIS) that the Pennsylvania youth was in foster care on or after age 18 and receiving MA.

Individuals who move to Pennsylvania from another state must submit an application and provide the CAO with verification that they were in foster care on or after age 18 and receiving MA in that state.

**What information is needed to complete the application?**

Individuals who are not yet age 26 and were in foster care and enrolled in MA at any time on or after their 18th birthday will need to complete a full healthcare application and provide all required documentation, including verification of income, in order to have eligibility determined for healthcare coverage. Individuals must fully answer the questions on the healthcare application related to former foster care status to ensure they are considered for eligibility under the Former Foster Care category.

**Why do they require income information?**

Coverage under the Former Foster Care category does not require an income or resource test, but income information is used to determine eligibility for other healthcare categories that are considered before placing an individual in the Former Foster Care category.

**If the youth doesn’t provide the income verification, will they be declined/removed from Medical Assistance (MA)?**

There is no income test for the Former Foster Care category. If a former foster youth does not provide requested documentation to verify income, they will not be denied, declined or removed from MA. The youth will be kept in the Former Foster Care category since the County Assistance Office will not be able to assess eligibility for any other category.

**If a former foster youth is put into a Modified Adjusted Gross Income (MAGI) category due to income, and then becomes ineligible for that category, will they automatically be put into the Former Foster Care category or will they need to reapply?**

It depends on the reason for ineligibility. If the youth exceeds the income limit, they’ll automatically be placed in PC40, the Former Foster Care category, and there is no need for the youth to reapply. If however, the County Assistance Office receives returned mail and cannot verify the youth’s residence, his or her MA would be closed due to “whereabouts unknown”. In an instance like this, the individual may need to reapply, depending on the amount of time that has elapsed since his or her benefits were closed.

**What if someone lives in PA now but was in foster care in another state?**

Pennsylvania has elected to cover former foster youth from other states who meet the eligibility requirements. They will need to provide verification of prior placement in foster care, when they left care and if they were receiving MA. Some ways to verify this are prior court orders and/or letters from an official agency.

**Who can help a former foster youth get the required documentation?**

If a former foster youth needs assistance in obtaining verification of prior placement in foster care and receipt of MA, they should contact the child welfare agency responsible for them while they were in foster care. The Children and Youth Agency where they currently reside can also be a resource to assist in obtaining the required documentation. It is the applicant’s responsibility to obtain this verification, but if the applicant is unable to, the County Assistance Office will assist.

**Is there a provision available to have youth apply early – for example, as in the 90 day window that Social Security affords to youth prior to their 18th birthday?**

No, there is no reason for foster youth who are 18 years of age and older and leaving care to apply for coverage “early” because the established protocol between the Children and Youth Agency and the County Assistance Office is that there will be no break in coverage for these youth.

**What if someone who is receiving benefits moves to another residence?**

If an individual receiving benefits moves to another residence, it is important that they contact their local County Assistance Office (CAO) to update their information. Mail from a CAO cannot be forwarded to a new address and will be returned to the CAO. If the CAO receives returned mail and cannot verify the youth’s residence, his or her MA would be closed due to “whereabouts unknown”. In an instance like this, the individual may need to reapply, depending on the amount of time that has elapsed since his or her benefits were closed.

**Is this a one-time application or does one have to re-apply to continue receiving benefits?**

All individuals enrolled in the Former Foster Care category will be subject to an annual renewal process used to verify ongoing eligibility. When an individual is due for renewal, the County Assistance Office (CAO) will send a renewal form in the mail that must be completed, signed and submitted to the CAO with required verification, including income and resource information. The renewal form can be completed online using COMPASS [www.compass.state.pa.us](file:///C%3A%5CUsers%5Cekiehl%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CTemporary%20Internet%20Files%5CContent.Outlook%5C68BOAG1I%5Cwww.compass.state.pa.us) in place of completing the paper renewal form provided by the CAO.

**If the youth doesn’t complete the annual renewal, will they be removed from the Former Foster Care category of Medical Assistance (MA)?**

Based on guidance from the Centers for Medicare & Medicaid Services (CMS), an annual renewal must be attempted to evaluate whether a former foster youth is eligible for MA coverage under other categories of MA. However, if the annual renewal is not returned, the former foster youth’s MA may not be closed. Only under certain circumstances, such as a move out of state or voluntary withdrawal, will a former foster youth’s MA be closed. If however, the County Assistance Office receives returned mail and cannot verify the youth’s residence, his or her MA would be closed due to “whereabouts unknown”.

**What kind of coverage is provided under the Former Foster Care category?**

Youth who are between 18 and 21 years of age who receive MA under the Former Foster Care category will be eligible for the full range of benefits available to all children under the MA program. Currently, individuals age 21 and older who receive MA under the former foster care category will qualify for the most comprehensive level of benefits currently offered to adults enrolled in the MA program.

**Are there copayments?**

There are copayments associated with some services for individuals of any age in the Former Foster Care category.

**Are youth eligible for retroactive coverage under this category?**

If a youth has unpaid medical bills, they can request retroactive coverage for up to 3 months.

**What happens when the youth reaches the age of 26?**

When an individual loses eligibility under the Former Foster Care category, upon attaining age 26, the County Assistance Office must determine if the individual is eligible for coverage under any other category before terminating MA coverage.

**What other states are covering former foster youth from out of state?**

Few other states have decided to cover former foster youth from other states. The two that have are Kentucky and California. Each state may have healthcare programs that the youth may qualify for. Therefore, they should apply for healthcare with that state to determine if they are eligible for coverage. In addition to the other important documents youth receive at discharge, Children and Youth Agencies and Juvenile Probation Offices should provide Pennsylvania youth with a copy of the CY60 for youth to use as verification in the event they are applying for Medicaid coverage under the Former Foster Care category in another state.

**How are youth that are 18 or over, who discharge from an eligible placement notified that their Medical Assistance (MA) coverage continues? Will the youth receive a letter when they are moved into a new category?**

Juvenile Probation Offices (JPOs) and Children and Youth Agencies (CYAs) should be informing youth, age 18 or over who were receiving MA on or after age 18 and discharge from an eligible placement, that their MA coverage will continue. The youth should understand what MA coverage provides, how their coverage will be continued, what their ongoing obligations are to ensure continued coverage and who their resources/contacts are should they have questions or experience difficulties. Developed in collaboration with the Youth Advisory Board (YAB), a letter for youth entitled “Important Information about Your Healthcare Coverage” is also available for JPOs and CYAs to distribute to youth. This letter is also available on the YAB webpage at <http://www.independentlivingpa.org/files/Hey%20You%20_%20ACA%20letter.pdf> under Affordable Care Act.

A youth will only receive notice/letter from the County Assistance Office (CAO) when there is a change in the youth’s benefits; not a change in category. If a youth ages 18, 19 or 20 is moved from a Foster Care category to the Former Foster Care category, they will not receive a notice from the CAO because there is no change in their benefits; these youth continue to receive the child benefit package under MA. When a youth turns 21 years of age, they will receive notice from the CAO about a change in their benefits - they move from receiving the child benefit package to the adult benefit package.

**Should Juvenile Probation Offices (JPOs) and Children and Youth Agencies (CYAs) not send *Maher* letters and MA applications for these youth so that we don’t confuse them?**

At this time, county JPOs and CYAs should continue to provide *Maher v. White* letters and MA applications as they have been. *Maher v. White* letters are to be mailed when a youth, regardless of age, is discharged from foster care to their birth parent(s), adoptive parent(s), or legal guardian(s)/permanent legal custodian(s). Additional research is being done regarding continued use of these letters and possible revisions.

**Is there someplace online where more information is available?**

Information is available now on [www.healthcare.gov](http://www.healthcare.gov), the federal information source for those seeking insurance through the FFM. Pennsylvania’s information source is located at [www.dpw.state.pa.us](http://www.dpw.state.pa.us). The COMPASS homepage [www.compass.state.pa.us](file:///C%3A%5CUsers%5Cekiehl%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CTemporary%20Internet%20Files%5CContent.Outlook%5C68BOAG1I%5Cwww.compass.state.pa.us) will have a hyperlink available that will navigate users to the FFM to “Learn More about the Health Insurance Marketplace.”

**What if someone does not have internet access?**

Individuals without internet access may call the federal hotline at 1-800-318-2596. Individuals may also call the PA Consumer Services Center at 1-866-550-4355 to apply or ask questions.