



TOBY DOUGLAS
Director

State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
Governor

February 5, 2015

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 14-41
ALL COUNTY ADMINISTRATIVE OFFICERS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS
ALL COUNTY HEALTH EXECUTIVES
ALL COUNTY MENTAL HEALTH DIRECTORS
ALL PROBATION DIRECTORS

SUBJECT: Enrollment in the Former Foster Care Children's (FFCC) Program for
Mandatory Coverage Group and Optional Coverage Group— County Process for
Medi-Cal Applicants and Beneficiaries

The purpose of this All County Welfare Directors Letter (ACWDL) is to provide County Department of Social Services (Counties) with guidance on the handling of the former foster care youth in the Mandatory Coverage Group (MCG) and Optional Coverage Group (OCG). The mandatory coverage group includes youth who were receiving Medicaid (Medi-Cal) in foster care under the responsibility of any state or tribe on their 18th birthday or a later age. These youth are now eligible for benefits in the former foster care program until age 26 since January 1, 2014.

The optional coverage group includes youth that were not receiving Medicaid benefits while in foster care on their 18th birthday and are between the ages of 18 and 21. These youth may be covered under the former foster care program up to age 21. The Department of Health Care Services (DHCS) is currently developing an aid code for this optional group. In the interim, counties must place these youth under aid code 4M. Counties must flag such cases for tracking purposes. At annual renewal, these cases are to be switched to aid code 4U if applicable. Please note these youth do not need to have exited out of foster care but are only required to be in foster care on their 18th birthday.

For these youth who were in foster care on their 18th birthday but not on Medicaid, they may be eligible for coverage until age 21.

	Authority	Age	Income	In FC on 18 th birthday or later	On Medicaid on 18 th Birthday or when aged out	All States
Mandatory Coverage Group	42 CFR 435.150 1902(a)(10)(A)(i)(IX)	Under 26	Exempt	In FC on 18 th birthday or later	Yes	Yes
Optional Coverage Group	42 CFR 435.226 1902(a)(10)(A)(ii)(XVII)	Under 21	Exempt	In FC on 18 th birthday	No	Yes

The FFCC program provides a simplified eligibility determination and enrollment process for Medi-Cal coverage for this population through the use of self-attestation. It is important that this population be identified early in the application intake process to prevent any collection of unnecessary information (e.g. income or household composition) in order to streamline the eligibility determination and enrollment process. It is also important to ensure existing beneficiaries who are eligible for the FFCC program are moved seamlessly into this program without being terminated, having to reapply, or having to provide any additional information. Additionally, youth who are missing from placement when they leave foster care at age 18 or older, should also be moved seamlessly into this program without being terminated, having to reapply, or having to provide any additional information.

The first contact that many of these applicants have will be with the reception staff, in person or on the telephone. Therefore, it is imperative that these staff members are aware of the program expansion and the simplified application procedures in order to streamline the process for the applicants and provide immediate eligibility to the FFCC population.

The following county instructions are to be followed for both programs.

County Instruction:

The county should ensure that all staff members that come into contact with the applicants, whether in the local offices, on the telephone, or any other means, are aware of the age extension (up to age 26 for the MCG and up to age 21 for the OCG) to the FFCC program and that correct information is provided to the applicants.

Counties should ask applicants who call or come into a county office if they were in foster care at age 18 or older. Applicants for the FFCC program are not required to complete a full application or provide any additional information beyond the information requested on the Application for Medi-Cal for Former Foster Youth (MC 250A) form. Counties must use the MC 250A form for the FFCC program and expedite application processing. The youth applying for former foster care is not required to complete the MC250A. The requested information can be obtained by the county verbally, over the phone, electronically or by mail.

The MC 250A form has been updated and is available on the DHCS website under the heading labeled "Forms, Laws & Publications". The following URL address will link you to the form:

http://www.dhcs.ca.gov/formsandpubs/forms/Forms/MCED/MC_Forms/MC250A_Eng.pdf

or

<http://www.dhcs.ca.gov/formsandpubs/forms/Pages/MCEDFormsMC200.aspx>

Prior foster care status can be attested to by the FFCC applicant at the time of application and verified later by the county. If the individual applies as a FFCC applicant, the county is to immediately determine the individual eligible for FFCC program based on self-attestation. After enrollment, within 30 days, the county shall verify prior foster care status from any county, state (if not California) or tribe where the individual was in foster care.

If former foster care status verification is unavailable after a thorough examination of the existing circumstances, all county eligibility workers should attempt to verify prior foster care status in California using the Child Welfare System/Case Management System (CWS/CMS), whenever possible. This data base can be accessed by contacting the California Department of Social Services (CDSS). The CDSS contact should be identified in the CDSS county roster under Foster Care Programs. Further information on that process is provided below:

- When a call comes into the county, counties shall establish if the caller is a new applicant or an existing beneficiary and if the caller was in foster care at age 18 or older. If the caller indicates that he or she is a former foster youth and not a current Medi-Cal beneficiary, the county shall assist the caller by asking the caller if he/she prefers to provide the information requested on the MC 250A form by phone. If not and the applicant prefers to complete the form in-person, by fax, or by mail, he/she shall be provided with the location of the form online or a form will be mailed, emailed or faxed to the applicant upon request. The information collected on this form will enable the county worker to proceed with the eligibility determination and immediately enroll the applicant into coverage while any other verifiable information is being obtained by the county. If the caller is already on Medi-Cal under another program, the beneficiary can be enrolled directly into the FFCC program without having to complete the MC 250A form. In this scenario, the caller should receive clarification and information about the scope of their new coverage from the county representative followed by a Notice of Action (NOA).
- When an applicant is identified as a former foster youth by the county, whether through questioning by staff or self-attestation, efforts shall be made to determine if the FFCC program applicant has already filed an application for health insurance, online, by phone, by mail or an MC 250A form. If an application has been submitted, the county staff shall determine the status of the application. If the status can be immediately determined through the Statewide Automated Welfare System (SAWS) or the Medi-Cal Eligibility Data System (MEDS), staff shall expedite the processing of that application and provide immediate eligibility to the FFCC beneficiary. If staff cannot immediately determine whether an application has already been submitted, staff are to

ask the applicant for the information needed to complete the MC 250A form, and provide immediate eligibility under the FFCC aid code 4M while the county verifies former foster care status.

- If an applicant submits an MC 250A form and answers “no” or “not sure” when asked if he or she was in foster care on his or her 18th birthday or later, the county shall verify by utilizing all available resources, what age the applicant left foster care prior to determining the applicant ineligible for the FFCC program. Some eligible former foster youth may be unaware of what age they left foster care or may incorrectly believe they left foster care at an earlier age than they actually did. Youth that believe they may have been in foster care on their 18th birthday should be enrolled immediately.
- For applicants who did not receive Medicaid at the time of exit from foster care, resulting in the applicant falling under the coverage limitation of the OCG, the counties shall attempt to determine if the applicant was or should have been eligible for Medicaid at the time of his/her exit from foster care by utilizing all available resources.

If an application other than the MC 250A form was previously submitted, counties will need to ask the applicant which state or tribe was responsible for his/her foster care placement in order to identify if an applicant was in foster care outside of California or through a tribe or tribal social services program. If an application was not submitted or if the status of a prior application cannot be immediately ascertained, the county staff will ask the applicant to complete the MC 250A form and then provide immediate eligibility under the FFCC aid code 4M, while awaiting any former foster care status verification.

County eligibility workers will process FFCC cases in SAWS and provide the applicant with immediate eligibility. Verification of foster care status shall be obtained after the fact by the county, if not readily available. Counties shall provide the applicant with evidence of coverage at the time of application, such as a temporary benefits identification card, whether or not the applicant has immediate health care needs. Counties shall verify the individual's eligibility in MEDS, immediately, to ensure eligibility is also reported for future months. If the aid code did not post to MEDS, a manual EW15 transaction shall be completed to provide immediate eligibility under aid code 4M which must then be followed by an EW 20 transaction. Counties shall ensure eligibility is posted for the immediate need month and future months.

Access to the CWS/CMS or MEDS data bases should enable immediate verification of former foster care in California, even if the application county is not the county of record for the FFCC's foster care. If the CWS/CMS system is not accessible or verification is not obtained, the county where the applicant last resided in foster care should be contacted first for verification.

When an applicant from a state other than California or tribe identifies himself or herself as a FFCC, he or she is to be requested to complete the MC 250A form and have the application expedited, as was described above. If the applicant can provide any contact information or

other information that can be used for verification of FFCC status, this information should also be collected (e.g. the name and contact information of a social worker, if the youth has it). However, verification is the responsibility of the county and if an applicant does not have this information, it is not a barrier to immediate enrollment into this program. The link below provides the list of Independent Living Program (ILP) Managers by state that counties can use for points of contact in the out-of-state verification process. The following link is from the National Resource Center for Youth Development:

<http://www.nrcyd.ou.edu/state-pages/coordinators>

For applicants who were in foster care in California, counties may email ILPPolicy@dss.ca.gov to find out who is the ILP Coordinator where the applicant resided.

If the state or tribe in which the youth asserts to have been in foster care is unable to provide verification of age of prior foster care exit, counties shall have the applicant complete the Request for Household and Tax Information (RFHTI) form. Counties shall continue to keep the applicant in aid code 4M (fee-for-service) and not remove eligibility until after a determination has been made using the information on the RFHTI for other health programs.

After initial enrollment in the FFCC program, subsequent annual renewals should be automatic until age 21 (OCP) or age 26 (MCG) unless there is evidence indicating death, incarceration, or no California state residency. In the situation where there is doubt regarding residency, death or incarceration, counties shall perform an ex-parte review to determine if the beneficiary will continue eligibility under FFCC Medi-Cal Program for a subsequent year. Do not send any information to the beneficiary such as the MC250A or other forms unless other family members on the case should be receiving these forms.

At renewal, after the county has verified that the individual is not out-of-state, incarcerated, or deceased, the county will send a NOA to the beneficiary notifying him/her regarding his/her ongoing eligibility. (Note: Medi-Cal should not be terminated for youth who are incarcerated, eligibility should be handled in accordance with existing policy per ACWDL 14-26). If the mailed NOA is returned as a result of loss-of-contact, the county will attempt to verify the address through phone contact, authorized representative, social worker or other contact person listed on their case record history. If contact is not established, the county will continue the beneficiary on aid code 4M and place the FFCC beneficiary into fee-for-service if applicable. The FFCC beneficiary shall not be discontinued from coverage due to a loss of contact. If contact is re-established and the beneficiary resides within a county with a County Operated Health System (COHS) or prefers to be in a managed care plan, the county will assist the beneficiary/authorized representative in contacting the Office of the Ombudsman to initiate this transaction.

The county shall initiate a redetermination no later than 120 days prior to the FFCC youth attaining the age of 21 (OCG) or age 26 (MCG) to determine if the youth is eligible for any other Medi-Cal programs using available information. If not eligible for other Medi-Cal programs and additional information is required, the county shall notify the FFCC youth to

February 5, 2015

complete a "Request for Tax Household Information" form for an eligibility determination for other health programs.

If the redetermination process experiences delays, resulting in the FFCC youth reaching the age of exit without a completed redetermination and enrollment into other health programs, the county shall keep the youth in coverage until completion of redetermination and enrollment into another Medi-Cal program or other health insurance programs.

A Frequently Asked Questions (FAQ) document regarding the FFCC program is attached to provide general information regarding the extension of Medi-Cal for FFCC in regards to eligibility and enrollment. Counties are encouraged to share this FAQ document with local agencies providing support services to this population.

For other information and FFCC processing instructions, refer to ACWDL Nos.: 00-41, 00-61, and 01-41 and Medi-Cal Eligibility Division Information Letter Nos.: 13-07 and 14-05. The eligibility information in these ACWDLs and MEDILs, other than the special extensions, shall continue to be followed when processing FFCC eligibility.

If you have any questions, or if we can provide further information, please contact Jesus Torres at (916) 327-0410 or by email at Jesus.TorresJr@dhcs.ca.gov

Original Signed By:

Alice Mak, Acting Chief
Medi-Cal Eligibility Division

Enclosure

Former Foster Care Youth Frequently Asked Questions

1. How can I get Medi-Cal coverage as a former foster youth?

You can apply for Medi-Cal by contacting your local county social services office and telling them that you were in foster care. You can call, or mail in a shortened application, or go in-person to the local county social services office. The county will decide if you are eligible for the Medi-Cal program for former foster youth based on a few simple questions. Eligible former foster youth are not required to provide any proof of income to get Medi-Cal. You must live in California to receive Medi-Cal. Former foster youth can also apply by submitting a simple form called the Application for Medi-Cal for Former Foster Care Children (MC 250A) to their local county social services office. This form is available online at:

<http://www.dhcs.ca.gov/formsandpubs/forms/Pages/MCEDFormsMC200.aspx>

To find the telephone number and location of your nearest county social services office, go to <http://www.dhcs.ca.gov/services/medi-cal/Pages/CountyOffices.aspx> or to obtain additional help, go to

http://www.childrenow.org/uploads/documents/Coveredtil26_CountyContactList.pdf

2. Do I need proof that I was in foster care?

No, you are not required to provide proof of being in foster care when you apply for Medi-Cal. It would be helpful to provide information about the county, state or tribe where you were in foster care. Also please provide any paperwork, if you have any, regarding your foster care case to move the case along faster.

3. I was in foster care in California. I left the State when I turned 18. I am now living in California again. Can I get Medi-Cal again?

Yes, if you were in foster care at any age in any state or tribe and are under age 26, you may qualify for free Medi-Cal and get Medi-Cal in a program for former foster youth.

4. I used to live in another state, and I was in foster care in that state or a tribe in that state. Can I get Medi-Cal in California?

If you were in foster care on your 18th, 19th, 20th, or 21st birthday in another state or tribe and you are now under age 26, you may qualify for the Medi-Cal program for former foster youth. You will receive Medi-Cal benefits while the county verifies your former foster care status. You may continue to receive Medi-Cal up to 26. It would be helpful to give the county as much information as you can about your former foster care case.

Former Foster Care Youth Frequently Asked Questions

5. Do I need to complete the regular Medi-Cal application?

No, you do not need to complete the full application. Ask for the shortened application form for former foster youth. It is called the MC 250A. You can also download a copy of the form at:

<http://www.dhcs.ca.gov/formsandpubs/forms/Pages/MCEDFormsMC200.aspx>

6. Can I still get Medi-Cal if I already have insurance through my job?

Yes, you can have Medi-Cal and health insurance through a job at the same time. Medi-Cal can be used to cover medical costs that your other health insurance does not cover.

7. Can I qualify for the Medi-Cal program for former foster youth if I have a job?

Yes, if you left foster care when you were 18, 19, 20, or 21 and are still under age 26, you may be eligible to receive Medi-Cal until your 26th birthday. Your income and resources do not matter for this program.

8. What happens when I reach the maximum age for the Medi-Cal program for former foster youth?

Before your Medi-Cal program ends, the county will check to see if you can still qualify for Medi-Cal under a different program. If you are eligible for another program, the county will put you in that program after it looks at any information needed to decide if you qualify for that program.

There are different ways to qualify for Medi-Cal. If the county cannot determine whether you will stay eligible for Medi-Cal with the information they have, the county may send you paperwork or ask you for additional information to decide if you qualify for another program. You may be asked to give income and tax information when this program ends, or other information that will help the county decide if you can keep your Medi-Cal or can get other financial help to buy low-cost health insurance through Covered California. If the county decides that you are no longer eligible for Medi-Cal, you will get a Notice of Action and information about how to appeal if you disagree with the decision.

Former Foster Care Youth Frequently Asked Questions

9. I went to the emergency room or other place for medical treatment. They told me they will be sending me a bill. What do I do now?

If you are not on Medi-Cal, you or someone on your behalf should contact your county social services office and tell them that you want to enroll in the Medi-Cal program for former foster youth and need “retroactive coverage” to pay for medical services you received. Make sure to tell the county that you are a former foster youth and ask for Form MC 250A. If you need to pay for medical services you received anytime during the three months before you applied for Medi-Cal, make sure you check the box at the top of the MC 250A asking for “retroactive coverage.”

10. Is there a telephone number I can call to get more information?

Yes, you can call the numbers listed below.

- Medi-Cal Helpline-1-800-541-5555
- Call your local county social services office. To find out the telephone number to the nearest county office, go to <http://www.dhcs.ca.gov/services/medi-cal/Pages/CountyOffices.aspx>

11. Where can I find information about Medi-Cal and other benefits programs?

You can find information about Medi-Cal online at

<http://www.dhcs.ca.gov/services/medi-cal/eligibility/Pages/Medi-CalFAQ2014.aspx>

or to obtain additional helpful information, go to

<http://www.coveredtil26.com>

You can find information other benefits programs at <http://www.benefitscal.org>

This site is an online resource for California public benefits and connects you to applications for other programs such as County Medical Services Program, CalFresh (formerly known as Food Stamps) and CalWORKS (California Work Opportunity and Responsibility to Kids).