DHCS JENNIFER KENT Director State of California





January 13, 2016

To:ALL COUNTY WELFARE DIRECTORSLetter No: 16-01ALL COUNTY LETTERLetter No: 16-03ALL COUNTY ADMINISTRATIVE OFFICERSALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS

## SUBJECT: Foster Care and Medical Assistance for California's Unaccompanied Refugee Minors Program

The Department of Health Care Services (DHCS) and the California Department of Social Services (CDSS) are issuing this joint letter for the purpose of clarifying Medi-Cal eligibility for youth in the Unaccompanied Refugee Minors (URM) Program.

## URM Program Background

The URM Program provides culturally and linguistically appropriate child welfare, foster care, and independent living services to minors, who do not have parents in the United States (U.S.), or who enter the U.S. unaccompanied by a parent, an immediate adult relative, or an adult having documentable legal evidence of custody of the minor. These youth enter the U.S. several different ways, but are designated into the URM Program by the federal Office of Refugee Resettlement (ORR) and are eligible for the URM Program based on their status as a refugee, asylee, Cuban/Haitian entrant, victim of human trafficking, or because they have been granted a Special Immigrant Juvenile Status or a U-Visa. These youth do not enter the state's child welfare system, because they are usually not removed from the home due to abuse or neglect, or through a voluntary agreement.

California has two URM Program service providers, who contract with CDSS: Catholic Charities of Santa Clara County (CCSCC) and Crittenton Services for Children and Families (Crittenton) in Orange County. Both service providers place URM youth with certified foster parents in the counties surrounding Santa Clara County and Orange County.

## The URM Program and Legal Responsibility

Unlike state foster care, ORR regulations do not require an URM youth be placed in the care and custody of the state. ORR regulations require states to ensure legal

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responsibility, including legal custody and/or guardianship, is established for each URM youth in accordance with applicable state law (45 Code of Federal Regulation [CFR] § 400.115).

In California, legal responsibility for youth in the URM Program is established by the creation of a private, probate guardianship, with a contracted URM Program service provider. The providers place the youth with licensed or certified foster parents, licensed group homes, etc. Although youth in the URM Program are not in state foster care in California, CDSS has been informed by ORR that it considers youth in the URM Program to be in a foster care program, even when legal responsibility is established through the guardianship with a private agency.

#### Verification of Immigration Status

Because URM youth are eligible for foster care coverage, they receive full-scope Medi-Cal regardless of their immigration status. URM youth, who are not in a satisfactory immigration status for full-scope Medi-Cal, must be granted full-scope eligibility and tracked as a state-funded full-scope immigrant in the Medi-Cal Eligibility Data System (MEDS).

Counties are required to verify the immigration status of URM youth using the Systematic Alien Verification for Entitlements system when establishing eligibility for foster care Medi-Cal coverage (aid code 45), and through the federal data services hub for Former Foster Youth Medi-Cal coverage (aid code 4M) if they meet the requirements.

If immigration status cannot be electronically verified through the federal data services hub for URM youth in former foster care, the county must then follow current administrative verification requirements to verify immigration status for URM youth. In either case, do not delay establishing eligibility during the immigration status verification process.

Current and former URM youth in aid code 45 or 4M should be coded with the appropriate Citizen/Alien indicator code according to their particular immigration status. Using the appropriate Citizen/Alien indicator in MEDS will ensure services, which federal financial participation is not available, will be paid for with state funds. The Citizen/Alien indicator of "2" will be used for **Special Immigrant Juvenile Status** (with URM Program Approval Letter from ORR) and for **Non-citizen victims of domestic violence and serious crimes** (U-Visa) (with URM Program Approval Letter from ORR). In addition, all URM Program beneficiaries must be tracked in MEDS with the appropriate Citizen/Alien indicator code for their particular immigration status.

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### **Benefits and Services**

In accordance with 45 CFR 400 Sub-part H, CDSS administers the URM Program to provide foster care type services to certain non-citizens. Youth in the URM Program receive many of the same child welfare benefits and services as other foster children of the same age in California (45 CFR § 400.112 and 400.116).

Although URM youth are not in state foster care and are not eligible for Title IV-E benefits, California's URM Program was developed to parallel California's foster care program. CCSCC and Crittenton provide or arrange for a variety of child welfare services directly, similar to those received by children in the state foster care program. See the enclosed table showing a comparison of state foster care to the URM Program. Examples of how the URM Program mirrors state foster care services and benefits include the following:

- ORR-funded the URM Program maintenance payments follow the rate set by CDSS for state foster care and are updated annually;
- State foster care requirements such as the monthly face-to-face visit, semi-annual permanency reviews, and notification of personal rights are paralleled; The personal rights are defined in the Foster Care Bill of Rights (Welfare and Institutions Code § 16001.9(a));
- URM youth can participate in an extended URM program from ages 18 to 21 that mirrors the state extension of foster care authorized by the California Fostering Connections to Success Act (Assembly Bill 12);
- Regardless of whether URM youth elect to participate in or age out of extended foster care, they are eligible for Medi-Cal under the Former Foster Youth coverage group up to age 26, if they were in URM foster care and enrolled in Medicaid when they turned age 18, and are otherwise eligible for Medi-Cal. Note: the Former Foster Youth coverage group does not have an income eligibility requirement;
- Youth participate in the URM Program's version of Independent Living Program activities and receive services to help increase self-sufficiency in preparation for emancipation. Each URM youth has a Transitional Independent Living Plan that is updated at least annually with his/her CCSCC or Crittenton social worker;
- URM youth, who emancipate from foster care after age 18 or later, may elect to participate in a program that mirrors the state's Transitional Housing Program (THP) Plus from ages 18 to 24 for a cumulative total of up to 24 months; and
- According to All County Information Notice I-40-15, URM youth, who meet the eligibility participation requirements for THP Plus and are completing

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> secondary education or an equivalent program, may remain in THP Plus up until their 25th birthday and for up to 36 cumulative months

All child welfare benefits and services are funded by ORR through CDSS administered contracts with the two URM Program providers. URM youth do not receive assistance payments through the county.

#### **Medical Coverage**

Although youth in the URM Program are not in the state's foster care system, CDSS has been informed by ORR that it considers youth in the URM Program to be in foster care. Based on this representation, the Centers for Medicare and Medicaid Services has informed CDSS and DHCS that URM youth may be covered under Medicaid as foster youth and former foster youth.

ORR State Letter 15-02 directs states to provide medical assistance under each state's Medicaid state plan, state-funded medical assistance, or through the Health Insurance Marketplace before requesting ORR funding for medical assistance.

URM youth have medical benefits determined to the same extent as the state's foster care youth; therefore, counties shall enroll URM youth in foster care aid code 45. The designation or verification letter, described below, will serve as proof of foster care status in the URM Program, as determined by ORR. Foster care aid code 45 provides full-scope Medi-Cal benefits and is voluntary for managed care enrollment in non-County Organized Health System (COHS) counties.

When the URM Program service provider applies for Medi-Cal on behalf of URM youth at a county office, the county staff authorized to establish eligibility for aid code 45 should utilize Form MC 250. This one-page form is designed for children not living with a parent or relative, and for whom a public agency is assuming some financial responsibility. Form MC 250 is located on-line at: http://www.dhcs.ca.gov/formsandpubs/forms/Forms/mc250.pdf.

Enclosed is a chart entitled, "Comparison of Foster Care and Unaccompanied Refugee Minors (URM) Services and Medical Care."

URM youth will have either an approval letter from ORR or a verification letter from CDSS to confirm his or her status as an URM youth, when applying for Medi-Cal at a county office. "Refugee" is the only eligible immigration status in the URM Program that does not receive an approval letter from ORR. In those cases, CDSS will provide a letter verifying the youth's status in the URM Program. Each letter will have a date the

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URM Program services commence for the youth. CCSCC or Crittenton must provide a copy of the approval or verification letter confirming an URM youth's status when applying for Medi-Cal on behalf of a youth in the URM Program. Form MC 250, along with the approval or verification letter confirming an URM youth's status, is sufficient to enroll the youth in aid code 45.

Once an URM youth reaches age 18 or older, and elects to participate in extended foster care (placement in foster care between ages 18 and 21), an URM youth should remain in aid code 45. If an URM youth exits from foster care at any time after age 18, or reaches age 21 while participating in extended foster care, treat this scenario as a change of circumstance and enroll the individual in the Former Foster Youth Medi-Cal program utilizing aid code 4M.

Similar to aid code 45, aid code 4M also provides full-scope Medi-Cal benefits, is voluntary for managed care enrollment in non-COHS counties, and only requires a simplified non-income annual continuing state residency validation as outlined in All County Welfare Directors' Letter (ACWDL) 14-41, once eligibility is established. Coverage under aid code 4M ends when an individual reaches age 26. For more information on the Former Foster Youth Medi-Cal Program, please refer to ACWDL 14-41: <u>http://www.dhcs.ca.gov/services/medi-cal/eligibility/Documents/ACWDL2014/14-41.pdf</u>.

If you have any questions regarding the URM Program, or related clarification provided in this letter, please direct your inquiry to Camille Ancona, Manager, Funding, and Data Unit, by phone at (916) 653-7785 or by e-mail at <u>Camille.Ancona@dss.ca.gov</u>. For questions related to Medi-Cal, please direct your inquiry to Harold Higgins, Chief, Policy Operations Branch, by phone at (916) 322-5214 or by e-mail at <u>Harold.Higgins@dhcs.ca.gov</u>.

Sincerely,

Todd R. Bland Deputy Director Welfare to Work Division California Department of Social Services René Mollow, MSN, RN Deputy Director Health Care Benefits and Eligibility California Department of Health Care Services

Enclosure

# Comparison of Foster Care and Unaccompanied Refugee Minors Services and Medical Care

	Mainstream Foster Care		URM (Refugee Foster Care)	
Age	Services/Benefits	Medical	Services/Benefits	Medical
Up to 18th Birthday	<ul> <li>Foster Care Maintenance Payment;</li> <li>Case Planning and Management;</li> <li>Independent Living Program (ILP) classes (youth 16+); and</li> <li>Education Services.</li> </ul>	Medi-Cal/ Categorical Foster Care (Full-Scope)	<ul> <li>Foster Care Maintenance Payment [Office of Refugee Resettlement (ORR) funded - equivalent to mainstream foster care];</li> <li>Case Planning and Management;</li> <li>ILP classes (youth 16+) (equivalent to mainstream foster care);</li> <li>Education Services (tutoring); and</li> <li>Acculturation Services.</li> </ul>	Medi-Cal/Categorical Foster Care (Full-Scope)
18 to 21	<ul> <li>Extended Foster Care (AB 12) – Foster Care Maintenance Payment;</li> <li>ILP classes; and</li> <li>Education Services (Chafee).</li> </ul>	Medi-Cal/ Categorical Former Foster Youth (Full-Scope)	<ul> <li>Extended Foster Care – Foster Care Maintenance Payment (equivalent to AB 12);</li> <li>ILP classes; Education Services (equivalent to mainstream Chafee); and</li> <li>Acculturation Services.</li> </ul>	Medi-Cal/Categorical Former Foster Youth (Full-Scope)
22 to 26	Transitional Housing Program-Plus (THP-Plus) up to age 24/or for 24 total months. For counties, which have opted to extend services per Senate Bill 1252, the time and age limits are 36 cumulative months and age 25.	Medi-Cal/ Categorical Former Foster Youth (Full-Scope)	THP-Plus (equivalent to mainstream THP-Plus)	Medi-Cal/Categorical Former Foster Youth (Full-Scope)
Funding	Foster Care (federal/state/local funding ratio)	Medicaid/Medi-Cal (federal/state ratio)	ORR (100%)	<ul> <li>URM - Medicaid/Medi-Cal (federal/state funding ratio);</li> <li>URM medical costs not payable under other medical programs are 100 percent ORR funded.</li> <li>Former Foster Youth - Medicaid/Medi-Cal (federal/state ratio).</li> </ul>