

Health Care Program for Children in Foster Care (HCPCFC) Program Activities: Navigating Health Care Services

HCPCFC Training Modules

» Program Activities

- Program Guidance
- Applicable Statutes and Regulations
- Program Measures
- Scope of Work
- Tools, Databases & Resources
- Confidentiality & Consent
- Psychotropic Medication Monitoring & Oversight (PMM&O)
- **Navigating Health Care Services**
- Understanding Child Welfare & Probation

Navigating Health Care Services

- » All children in foster care are entitled to Medi-Cal and Medi-Cal Dental with no share of cost and no income or resource limits.
- » This includes children who are under a legal guardianship from dependency court or who have been adopted through the foster care system, and non-minor dependent (NMD) in Extended Foster Care.
- » Extended Foster Care allows eligible youth in the child welfare and probation systems to remain foster care until age 21.
- » Former foster youth (FFY) under 26 who were in foster care on their 18th birthday or later (in any state or tribe) may be eligible.

Medi-Cal

- » Medi-Cal is jointly funded by the state and federal government, and it is administered by various agencies throughout the state.
- » When initially enrolled in Medi-Cal most individuals, including foster youth, are covered under Medi-Cal fee-for-service (FFS), and are then enrolled in a managed care plan (MCP) within 30-60 days.

Medi-Cal Managed Care

- » If a child or youth's placement changes to a different county, then the Medi-Cal MCP is responsible for providing Medi-Cal services will change as well. The resident county is generally responsible for health and behavioral health services for foster children and youth.
- » When a foster child or youth is placed in a Partnership or other County Organized Health Systems (COHS) counties, it is extremely important to have the county foster care eligibility unit quickly update the address to allow emergency enrollment into the COHS plan.

Enhanced Care Management (ECM)

- » Those enrolled in Medi-Cal managed care can receive ECM, a Medi-Cal benefit that provides comprehensive care planning and management across the various health care and social service delivery systems.
- » Children and youth involved in Child Welfare are eligible for ECM.

County Organized Health System (COHS)

- » Current policy states all foster care members who reside in a COHS county must enroll in an MCP.

Single Plan Counties

- » Current policy states foster care members who reside in Single Plan counties are voluntary members and have a choice to enroll in FFS or managed care.

Other Health Coverage

- » In some cases, foster children and youth have commercial insurance, Other Health Coverage (OHC).
- » This may have been court ordered or in place before the child or youth was detained.
- » State Third Party Liability blocks OHC for all foster aid codes, some providers and pharmacies will notice the OHC and will decline to treat the child or youth or dispense medications.
- » The HCPCFC PHN or the Eligibility Worker (EW) can request OHC removal by providing the following foster youth/beneficiary information:
 - Client Index Number (CIN) or Medi-Cal identification number located on the Beneficiary Identification Card (BIC)
 - First and last name
 - Date of Birth
 - Reason for termination (select the “Foster youth” box)
 - Insurance Carrier name and if available, carrier code
 - Insurance policy stop date

Oral Health Coverage (continued)

- » The Medi-Cal Dental Program covers a variety of dental services for Medi-Cal beneficiaries, such as diagnostic and preventive dental hygiene (e.g. examinations, x-rays, and teeth cleaning); emergency services for pain control; tooth extractions; fillings; root canal treatments (anterior/posterior); crowns (prefabricated/laboratory); scaling and root planning; periodontal maintenance; complete and partial dentures; and orthodontics for children who qualify.
- » Members can access dental services through Medi-Cal Dental enrolled providers, who will advise members on the best course of treatment, and under the specific conditions for which some of these services are allowable.

Behavioral Health

- » DHCS administers Specialty Mental Health Services (SMHS) for children and youth in out-of-home placement across the state through County Mental Health Plans (MHPs). The placing county provides a presumptive transfer to County Behavioral Health Access to Community Care & Effectiveness Services & Support (ACCESS) in the resident county.
- » If the social worker decides to continue mental health services with the current provider, a waiver is sent to the resident county. Presumptive county contacts are available online. Legislation has been expanded for easy access to appropriate Specialty Mental Health Services for children and youth in Child Welfare. All foster children and youth categorically meet access criteria for SMHS due to the CalAIM changes in SMHS access criteria.
- » For questions regarding Medi-Cal Managed Care and Mental Health Office of the Ombudsman, please call 1-888-452-8609 and select option 8, "Mental Health."

Pharmacy Benefits & Vision Care

- » Medi-Cal RX is the program that provides prescription drug coverage and related services to individuals enrolled in Medi-Cal.
- » Pharmacy
 - Medi-Cal Rx is responsible for Medi-Cal pharmacy services billed as a pharmacy claim, including but not limited to:
 - Outpatient drugs
 - Enteral nutrition products
 - Medical supplies
- » Vision benefits are covered for those with full-scope Medi-Cal benefits.

Presumptive Eligibility

- » Children's Presumptive Eligibility (CPE), formerly Child Health and Disability Prevention (CHDP) Program Gateway, Full Scope Medi-Cal Eligibility can be accessed through any provider that participates in CPE.

Additional Resources

- » [BenefitsCal](#) - Central resource from which health insurance, food, cash, and other assistance may be accessed
- » [County Offices](#) to Apply for Health Coverage, Medi-Cal, and Other Benefits
- » [Former Foster Care Youth \(FFY\) Health Coverage](#) - Individuals who were in foster care at age 18 are eligible for Medi-Cal until age 26. Children now have updated County Contacts in eligibility on their web page for FFY to contact when they change counties and must complete form MC 250A.
- » [Family PACT](#) - Covers the family planning needs of California residents who are low income and who have no other source of coverage. Beneficiaries can use this coverage if they prefer not to receive family planning services from their primary care provider.
- » [Kin-GAP](#) and [Adoption Assistance Program Benefits \(ACL11-86\)](#) - The expansion of the federal definition of a relative established by AB 1712 ([ACL 14-28](#)). Kin Gap and Adoptive youth who are placed out of their county of jurisdiction need a Service Authorization Request (SAR) to access mental health services to be sent to the resident County Mental Health Plan.
- » [Foster Care Aid Codes](#) - Used to identify the type of government aid or assistance (financial/Medi-Cal) a person is receiving.
- » [Parents Helping Parents](#)
- » [Family Urgent Response System](#)

Health Coverage Educational Resources

- » [Health-Care Coverage for Children and Youth in Foster Care—and After \(Children’s Bureau/ACYF/ACF/HHS, January 2022\)](#)
- » [Managed Care Answer Guide \(Patient Advocate Foundation\)](#)
- » [Center for Health Care Strategies Inc. – Introduction to Medicaid Managed Care for Child Welfare](#)
- » [Foster Care Model of Care Workgroup: Assessing Different Managed Care Options for Foster Youth in California \(National Health Law Group\)](#)
- » [Foster Care Children and the Affordable Care Act – New Report from CCF and Community Catalyst \(Georgetown University, July 24, 2012\)](#)

Contact Information

Questions may be directed to:
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