

Former Foster Care Medicaid Eligibility Policy

The District of Columbia's Department of Health Care Finance (DHCF) has issued a new policy on Medicaid eligibility for former foster youth, as required by the Affordable Care Act,ⁱ which requires expanding Medicaid to cover individuals who were previously wards of the District and enrolled in DC Medicaid. The policy went into effect on January 1, 2014.ⁱⁱ Below are key highlights of the policy.

Section A: Eligibility Standards

Eligibility under the former foster care youth category is limited to youth ages 18-25 who were enrolled in DC Medicaid when they aged out of the District's foster care system, regardless of income. The youth must be a resident of the District. Eligible youth will receive fee-for-service Medicaid.

The following groups **ARE NOT** eligible under this coverage group (but may still be eligible for Medicaid through other categories):

- Youth who were emancipated before turning 18.
- Youth who were adopted before turning 18.
- Youth who were permanently reunited with their families before turning 18.
- Youth who were permanently placed in guardianship before turning 18.

Section B: Seamless Medicaid Coverage for Youth Aging Out of Foster Care

Section B details CFSA's responsibilities for ensuring youth who age out of foster care remain enrolled in Medicaid. The goal is to have CFSA ensure youth are enrolled and re-enrolled automatically rather than the youth being responsible for enrolling themselves or for re-certification yearly.

When foster care youth ages 18-21 are ready to exit from the foster care system, CFSA's responsibilities include:

- Verifying the youth is currently enrolled in Medicaid and ensuring the youth's Medicaid ID number is documented in the youth's transition plan.
- Providing the youth with a copy of the Medicaid Transition Info Sheet and the youth's Medicaid ID number.
- Reviewing the Medicaid Transition Info Sheet with the youth and explaining the following:
 - The eligibility requirements.
 - The youth's coverage through the last day of the month in which the youth turns 26 or when the youth moves out of the District.
 - The youth may use the same Medicaid card or Medicaid ID number they are currently using when they age out.

Section B of the policy also includes a separate section on youth who have dependent children or are pregnant.

ⁱ Title II, Section 2004 of the Affordable Care Act

ⁱⁱ District of Columbia Department of Health Care Finance, Transmittal 14-18 Former Foster Care Medicaid Eligibility Policy