



Office of Children and Family Services

Andrew M. Cuomo
Governor

52 WASHINGTON STREET
RENSELAER, NY 12144

Sheila J. Poole
Acting Commissioner

Administrative Directive

Transmittal:	15-OCFS-ADM-17
To:	Commissioners of Social Services Executive Directors of Voluntary Authorized Agencies Office of Children and Family Services Facilities Directors
Issuing Division/Office:	Office of Strategic Planning and Policy Development
Date:	September 1, 2015
Subject:	Patient Protection and Affordable Care Act and Medicaid to Age 26
Suggested Distribution:	Directors of Social Services Child Welfare Supervisors Foster Care Supervisors Adoption Supervisors Staff Development Coordinators
Contact Person(s):	Questions concerning this release should be directed to the appropriate Regional Office, Division of Child Welfare and Community Services Buffalo Regional Office- Dana Whitcomb (716) 847-3145 Dana.Whitcomb@ocfs.ny.gov Rochester Regional Office- Karen Buck (585) 238-8201 Karen.Buck@ocfs.ny.gov Syracuse Regional Office- Sara Simon (315) 423-1200 Sara.Simon@ocfs.ny.gov Albany Regional Office- Kerri Barber (518) 486-7078 Kerri.Barber@ocfs.ny.gov Spring Valley Regional Office- Yolanda Désarmé (845) 708-2499 Yolanda.Desarme@ocfs.ny.gov New York City Regional Office- Raymond Toomer (212) 383-1808 Raymond.Toomer@ocfs.ny.gov Native American Services-Heather LaFrome (716) 847-3123 Heather.LaForme@ocfs.ny.gov
Attachments:	The following standardized letters for youth can be accessed on the Policies pages, cited below, of the OCFS websites. Locate this policy; links to the letters are listed there below the policy. Letters must be copied onto local agency letterhead, with text unchanged (except the heading). http://ocfs.ny.gov/main/policies/external/ (Internet) http://ocfs.state.nyenet/policies/external/ (intranet) Attachment 1: Medicaid Eligible Until Age 21 Letter, New York City Version Attachment 1S: Medicaid Eligible Until Age 21 Letter, New York City (Spanish) Attachment 2: Medicaid Eligible Until Age 21 Letter, Upstate Version

Attachment 2S: Medicaid Eligible Until Age 21 Letter, Upstate Version (Spanish) Attachment 3: Medicaid Eligible Until Age 26 Letter, New York City Version Attachment 3S: Medicaid Eligible Until Age 26 Letter, New York City (Spanish) Attachment 4: Medicaid Eligible Until Age 26 Letter, Upstate Version Attachment 4S: Medicaid Eligible Until Age 26 Letter, Upstate Version (Spanish)

Filing References

Previous ADMs/INFs/LCMs	Releases Cancelled	NYS Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
08 OHIP/LCM-1 09 OHIP/ADM-1 09-OCFS-ADM-15 09-OCFS-ADM-16	09-OCFS-ADM-15	18 NYCRR 430.12(j)	Foster Care Independence Act (FCIA) of 1999 (P.L. 106-169); Patient Protection and Affordable Care Act (ACA) (P.L. 111-148); 42 U.S.C. §§ 1396a, 1396d; Social Services Law § 366(1)(b)(5) & (c)(9)		GIS #09-001 GIS #09-12

I. Purpose

The purpose of this Administrative Directive (ADM) is to inform local departments of social services (LDSSs), including the St. Regis Mohawk Tribe, and voluntary authorized agencies (VAs) of changes pertaining to requirements for Medical Assistance (Medicaid) eligibility under the federal Patient Protection and Affordable Care Act (ACA) [P.L. 111-148] for youth and young adults formerly in foster care who are under the age of 26 years and the continuing option to provide Medicaid to age 21, under the Foster Care Independence Act (FCIA) of 1999 [P.L. 106-169], for those youth and young adults who are at least 18 years of age or older at the time of discharge from care and who were not in receipt of Medicaid at that time.

II. Background

Promoting physical and mental health is pivotal to supporting the safety, permanency and well-being of children, youth and young adults in foster care. Youth and young adults currently and formerly in foster care tend to have high rates of chronic health problems, experience higher rates of unplanned pregnancy than their peers not in foster care, and have high occurrences of substance abuse.¹ Additionally, youth and young adults who have experienced traumatic events face high rates of mental health challenges, including depression, behavioral problems, hypersensitivity, emotional difficulties, and post-traumatic stress disorder.² Research indicates that young adults formerly in foster care are twice as likely as their peers not in foster care to describe their health as fair or poor and nearly twice as likely to report that their health condition limits their daily activities.

As youth transition into adulthood, it is imperative that they maintain access to health and mental health services that promote healthy behaviors and effectively meet their needs. When youth and young adults are discharged from foster care without health insurance,

¹ Avery, R (2010) "An examination of theory and promising practice for achieving permanency for teens before they age out of foster care." *Children and Youth Services Review* 32, 399-408.

² Mastin, D., Metzger, S., and Golden, J. (2013). "Foster Care and Disconnected Youth: A Way Forward for New York." New York, NY: Children's Aid Society. http://www.childrensaidsociety.org/files/upload-docs/report_final_April_2.pdf

they are unable to continue with necessary care and treatment; this can significantly impact the youth's/young adult's ability to manage his/her mental health and wellness. Findings from the Chapin Hall Midwest Evaluation reveal that over 50 percent of young adults who participated in the study reported at least one visit to the emergency room, and one-fifth reported being hospitalized at least once.³ These are costly approaches to medical services for both the youth/young adult and the health care system.

To promote continuity of services for youth and young adults in the foster care system, the FCIA allowed for eligibility requirements to be broadened so that youth who were discharged from foster care at age 18 or older and were not in receipt of Medicaid at that time could be enrolled in Medicaid until the age of 21. On March 23, 2010, efforts to connect youth and young adults with affordable health care services were further expanded when President Obama signed into law the ACA which extends the eligibility for Medicaid to youth and young adults who: are under 26 years of age; were in foster care at age 18; were in receipt of Medicaid upon discharge from foster care at age 18 or older; and are not otherwise eligible for Medicaid. This provision of the ACA went into effect on January 1, 2014. This is addressed in state law in Section 366(1)(c)(9) of the Social Services Law (SSL).

III. Program Implications

The ACA extends the eligibility for Medicaid to certain youth who were formerly in foster care to age 26; however, not all youth who were formerly in foster care are eligible for this extension. Eligibility depends on the age and Medicaid enrollment status of the youth/young adult at the time of discharge.

Youth/Young Adults in Receipt of Medicaid When 18 Years of Age or Older at the Time of Discharge

Youth/young adults who were under the care and custody or custody and guardianship of the commissioner of an LDSS or the commissioner of the New York State Office of Children and Family Services (OCFS) on their 18th birthday **and** who were in receipt of Medicaid when discharged from foster care on or after their 18th birthday **and** who are not otherwise eligible for Medicaid are eligible for Medicaid until the age of 26, regardless of income or employment status.⁴ Pursuant to guidance from the New York State Department of Health (DOH), eligibility until age 26 means that eligibility continues through the end of the month in which the person turns age 26.

Youth who are currently in foster care and are eligible for Medicaid until the age of 26 will be automatically enrolled for Medicaid coverage and automatically renewed through the end of the month of their 26th birthdays, without regard to income or employment status.

Youth and young adults who were formerly in foster care may be eligible for Medicaid through the end of the month of their 26th birthday provided the youth:

1. Is under the age of 26;

³ Courtney, M., Dworsky, A., Brown, A., Cary, C., Love, K., and Vorhies, V. (2011). "Midwest Evaluation of Adult Functioning of Former Foster Youth: Outcomes at Age 26. Chicago, IL: Chapin Hall at the University of Chicago. http://www.chapinhall.org/sites/default/files/Midwest%20Evaluation_Report_4_10_12.pdf

⁴ In WMS, this population of youth/young adults is identified as "Former Foster Care" (FFC). Refer to OCFS GIS #14-005, Former Foster Care and True Chafee System Instructions, issued on March 6, 2014 for additional information.

2. Was in foster care under the responsibility of the state (i.e., in the care and custody of the commissioner of an LDSS or the commissioner of OCFS, including being placed in a non-secure facility operated by a voluntary agency; being placed in a non-secure residential facility of 25 beds or less operated by OCFS; or being placed on after-care status with custody remaining with the commissioner of OCFS on or after the youth's/young adult's 18th birthday;
3. Was in receipt of Medicaid at the time of discharge;
4. Is not otherwise eligible for Medicaid. The person must be a United States citizen or national, Native American, or have satisfactory immigration status,⁵ and have residency in New York State.

Under Section 366(1)(c)(9) of the SSL, a youth/young adult whose Medicaid coverage has lapsed may reapply for Medicaid at any time after final discharge from foster care until the age of 26, and if eligible under the applicable statutes can receive Medicaid through the end of the month of his/her 26th birthday.

Youth/Young Adults Not in Receipt of Medicaid When 18 Years of Age or Older at the Time of Discharge

Pursuant to Section 366(1)(b)(5) of the SSL, youth/young adults who were in foster care on or after their 18th birthday but not in receipt of Medicaid at the time of discharge could be enrolled in Medicaid until age 21, regardless of income or employment status.⁶

Youth/young adults who may be eligible for Medicaid until age 21 will be automatically enrolled for Medicaid coverage and automatically renewed through the end of the month of their 21st birthday regardless of income or employment status, provided any such young adult:

1. Is under the age of 21;
2. Was in foster care under the responsibility of the state (i.e., in the care and custody of the commissioner of an LDSS or the commissioner of OCFS) on or after the youth's 18th birthday;
3. Was not in receipt of Medicaid at the time of discharge from foster care; and
4. Is otherwise eligible. The person must be a United States citizen or national, Native American, or have satisfactory immigration status⁷, and have residency in New York State.

Youth/Young Adults Placed on After-Care Status

A youth/young adult placed on after-care status (i.e., released to the community under the supervision of OCFS with custody remaining with the commissioner of OCFS) and is discharged on or after his/her 18th birthday is considered to be a youth/young adult formerly in foster care and may be eligible for Medicaid through the end of the month of

⁵ For more information on specific requirements related to satisfactory immigration status, refer to 04-OMM/ADM-7. https://www.health.ny.gov/health_care/medicaid/publications/docs/adm/04adm-7.pdf

⁶ In WMS, this population of youth/young adults is identified as "True Chafee Youth." Refer to OCFS GIS #14-005, Former Foster Care and True Chafee System Instructions, issued on March 6, 2014, for additional information.

⁷ For more information on specific requirements related to satisfactory immigration status, refer to 04-OMM/ADM-7. https://www.health.ny.gov/health_care/medicaid/publications/docs/adm/04adm-7.pdf

his/her 26th birthday. Refer to the section above, *Youth/Young Adults in Receipt of Medicaid When 18 Years of Age or Older at the Time of Discharge*, for additional information.

A youth/young adult who was in the care and custody of the commissioner of OCFS but not placed in after-care and was not in receipt of Medicaid at age 18 or at the time of discharge could be enrolled in Medicaid until age 21, regardless of income or employment status. Refer to the section above, *Youth/Young Adults Not in Receipt of Medicaid When 18 Years of Age or Older at the Time of Discharge*, for additional information.

IV. Required Action

A. Transition Planning

During the transition planning process, the LDSS must determine if the youth/young adult is eligible for Medicaid until age 21 or age 26. If the youth/young adult was in receipt of Medicaid when 18 years of age or older at the time of discharge, he/she may be eligible to receive Medicaid until the age of 26, if the youth/young adult meets the criteria of Section 366(1)(c)(9) of the SSL, as discussed above. If the youth/young adult was not in receipt of Medicaid when 18 years of age or older at the time of discharge, he/she may be eligible to receive Medicaid until the age of 21, as discussed above. Child welfare staff should consult with the appropriate Medicaid staff within the LDSS to determine the appropriate Medicaid eligibility for youth/young adults who will be leaving foster care.

Once the appropriate eligibility for Medicaid is determined, the youth/young adult is to be provided with a letter explaining the youth/young adult's Medicaid eligibility and what the youth/young adult must do to maintain that eligibility. Letters for this purpose (as further described below) are attached to this ADM. In the event of an unplanned final discharge, the appropriate letter must be sent by the LDSS to the youth's/young adult's discharge address.

Agencies must determine the appropriate version of the Medicaid letter to send to each youth.

- There are different versions of the letter based on whether the youth/young adult is eligible for Medicaid until the age of 21 or 26.
- For each of those versions (age 21 or age 26), there are New York City (NYC) versions and Upstate (LDSS) versions of the letter.
 - Youth/young adults discharged to an address in New York City must be given the appropriate New York City version of the Medicaid letter. Youth discharged to an address in any district outside of New York City must be given the appropriate Upstate (LDSS) version of the Medicaid letter.
- All versions of the letters are available in Spanish.

The agency must reproduce the appropriate letter on its agency letterhead, with the content of the letter unchanged.

Each type of Medicaid letter includes a detachable section that must list an LDSS or, for NYC, Human Resources Administration (HRA) contact person for the youth/young adult in the event that the youth/young adult needs assistance in obtaining Medicaid services. The identified contact person must be responsible for assisting the youth in obtaining the

required documents and Medicaid services. The contact information must include a name, telephone number, address, and email address.

OCFS regulations at 18 NYCRR 430.12(j) require that whenever a youth will remain in foster care on or after the youth's 18th birthday, the agency with case management, case planning or casework responsibility for the youth must begin developing a transition plan with the youth 180 days prior to the youth's 18th birthday or, where the youth is consenting to remain in foster care after his or her 18th birthday, 180 days prior to the youth's/young adult's scheduled discharge date. The transition planning must include specific options on health insurance, housing, education, local opportunities for mentors, continuing support services, and work force supports and employment services (see also the policy *Transition Planning with Youth for a Successful Discharge*, scheduled to be released in September 2015⁸).

It is recommended that a youth/young adult be informed before being discharged that whenever he or she has a change in address, the youth/young adult should notify the Medicaid unit within LDSS or HRA in order to receive any information and updates pertaining to his/her insurance and to prevent fraud.

In advance of any discharge, and as part of transition planning requirements, the case manager/planner/caseworker responsible for the youth/young adult must notify the Medicaid worker of the youth's/young adult's discharge address, and obtain the following documents, as applicable to the youth/young adult, if not already available:

- **Proof of Citizenship.** Certified copy of Birth Certificate (must have a raised seal) may be obtained via the Bureau of Vital Statistics. The forms and instructions are available at http://www.health.ny.gov/vital_records/.
- **Immigration Status.** Status can be obtained from Form I-485 Application to Register Permanent Residence or Adjust Status. The form is available on the U.S. Citizen and Immigration Services website: <http://www.uscis.gov/files/form/i-485.pdf>.
- **Social Security Number or Proof Applied for a Social Security Number.** Although the youth may remember his/her Social Security number, it is preferable to have a Social Security Card. A card can be obtained by using Form SS-5 Application for a Social Security Card, which is available on the Social Security Administration website. The form and instructions are available at: <http://www.ssa.gov/forms/ss-5.pdf>.

Eligible youth/young adults who are expecting a child or are parenting must be informed that they should contact the Medicaid unit within LDSS/HRA to obtain Medicaid benefits for their unborn or minor child(ren).

⁸ 09-OCFS-ADM-16, *Transition Plan Requirements for Youth 18 and Older Aging Out of Foster Care*, will be cancelled and replaced with the policy *Transition Planning With Youth for a Successful Discharge*. The new policy complies with the mandates set forth by the Preventing Sex Trafficking and Strengthening Families Act of 2014 and will be available no later than September 29, 2015.

B. Contacting Young Adults Under the Age of 26 Who Were Discharged from Foster Care

LDSSs and VAs should seek out young adults formerly in foster care who meet the qualifications stated above to inform them of their eligibility for Medicaid and assist in enrollment. LDSSs' and VAs' efforts to contact such young adults may include sending a letter indicating eligibility to the young adult's last known address, using social media and peer groups to share information with young adults about the extension of Medicaid to age 26 for young adults who may meet the statutory criteria for eligibility, and providing foster care youth ambassadors and Youth In Progress (YIP) leaders with resources and tools pertaining to potential Medicaid eligibility to age 21 or 26 for youth/young adults formerly in foster care to share with other youth and young adults.⁹

C. Issuance of Medicaid Letter to Youth/Young Adults in Receipt of Medicaid When 18 Years of Age or Older at the Time of Discharge

Youth released from Close to Home non-secure placement and OCFS Medicaid-eligible settings may be eligible for Medicaid until the age of 26. For the purposes of this ADM, this includes a youth placed in (1) any non-secure residential facility operated by a VA or (2) an OCFS-operated non-secure facility of 25 beds or less, or a youth in an aftercare status. For youth in the custody of ACS in a Close to Home non-secure facility, provision of the appropriate Medicaid letter shall be done as discussed above under Section A "Transition Planning." For youth in the custody of OCFS, the youth's OCFS case manager/planner/caseworker must provide the youth with the appropriate Medicaid letter, as indicated above, upon final discharge. The contact person identified in the letter shall be from the LDSS/HRA to which the youth is returning. The youth's OCFS case manager/planner/caseworker must also take all required actions as set forth in this section, including obtaining any of the listed documents related to eligibility for Medicaid that are not available, and informing the youth about the importance of keeping his/her address current with the LDSS/HRA.

For youth in the custody of OCFS:

- Upstate
The OCFS Bureau of Financial Operations Title IV-E Unit will notify the LDSS-designated contact person when an eligible youth/young adult is no longer in the custody of the commissioner of OCFS. The LDSS must provide the name and contact information of the staff person who must be notified to the OCFS Bureau of Financial Operations Title IV-E Unit. The LDSS is also charged with keeping this information current with OCFS.
- New York City – Youth Discharged from OCFS Facilities
The OCFS Bureau of Financial Operations Title IV-E Unit will notify the HRA-designated contact person when a youth/young adult is no longer in the custody of OCFS. HRA must provide the name and contact information of the staff person

⁹ The Schuyler Center for Analysis and Advocacy developed the "Everything You Need to Know" toolkit to share information pertaining to Medicaid access for youth and young adults under the age of 26 and the "Get Covered" brochure, which includes a step-by-step guide for enrollment. These resources are available at <http://www.scaany.org/policy-areas/health/medicaid-to-26/>.

who must be notified to the OCFS Bureau of Financial Operations Title IV-E Unit. HRA is also charged with keeping this information current with OCFS.

- New York City – Youth Discharged from VAs

The OCFS Bureau of Financial Operations Title IV-E Unit will notify the ACS-designated contact when a youth/young adult is no longer in the custody of the commissioner of OCFS. Where the youth is eligible for Medicaid until age 26 as discussed above, Medicaid must be authorized until the end of the month in which a youth/young adult turns 26, so long as he/she continues to live in New York State.

D. Issuance of Medicaid Letter to Youth/Young Adults Not in Receipt of Medicaid When 18 Years of Age or Older at the Time of Discharge

Youth who were in foster care or in the custody of the commissioner of OCFS on or after their 18th birthday but who were not in receipt of Medicaid at the time of discharge may be eligible to receive Medicaid up to the age of 21, as discussed above. For the purposes of this ADM, this includes youth placed in Close to Home limited-secure facilities and Non-Title IV-E residential facilities such as OCFS-operated limited secure and secure facilities, detention facilities, and OCFS-operated non-secure facilities of more than 25 beds.

The youth's OCFS case manager/planner/caseworker must provide the youth with the appropriate Medicaid letter, as indicated above, upon final discharge. The contact person identified in the letter shall be from the LDSS/HRA to which the youth is returning. The youth's OCFS case manager/planner/caseworker must also take all required actions as set forth in this section, including obtaining any of the listed documents related to eligibility for Medicaid that are not available, and informing the youth about the importance of keeping his/her address current with the LDSS/HRA.

- Upstate

The OCFS Bureau of Financial Operations Title IV-E Unit will notify the LDSS-designated contact person when an eligible youth/young adult is no longer in the custody of the commissioner of OCFS. The LDSS must provide the name and contact information of the staff person who must be notified to the OCFS Bureau of Financial Operations Title IV-E Unit. The LDSS is also charged with keeping this information current with OCFS.

- New York City – Youth Discharged from OCFS Facilities

The OCFS Bureau of Financial Operations Title IV-E Unit will notify the HRA-designated contact person when a youth/young adult is no longer in the custody of OCFS. HRA must provide the name and contact information of the staff person who must be notified to the OCFS Bureau of Financial Operations Title IV-E Unit. HRA is also charged with keeping this information current with OCFS.

- New York City – Youth Discharged from VAs

The OCFS Bureau of Financial Operations Title IV-E Unit will notify the ACS-designated contact when a youth/young adult is no longer in the custody of the commissioner of OCFS. Where the youth is eligible for Medicaid until age 21 as discussed above, Medicaid must be authorized until the end of the month in which

a youth/young adult turns 21, so long as he/she continues to live in New York State.

E. Out of State Youth/Young Adults Formerly in Foster Care Who Are Eligible for Medicaid until Age 26

Current New York State residents who were in foster care in another state may be eligible for Medicaid until the age of 26. The youth/young adult must provide verification that he/she meets the eligibility criteria, as stated above, in order to be considered eligible for Medicaid through the end of the month of their 26th birthday.

The applicant must fill out the 4220 paper application and either have their status as a youth formerly in foster care verified by the LDSS/HRA **or** provide proof from the state from which they were discharged. The applicant must submit one of the following documents to serve as proof he or she was formerly in foster care in another state:

- Statement from the state or county agency verifying that the individual was in their custody at age 18.
- Statement from the agency responsible for placement verifying that the individual was in the custody of the state or county at age 18.
- A copy of a court order verifying that the individual was in the custody of the state or county at age 18.
- A copy of a foster care transition plan that includes the individual’s foster care and Medicaid status.

New York State residents who were in foster care in another state at age 18 or older and **not** in receipt of Medicaid when discharged are not eligible in New York for Medicaid to the age of 21.

V. System Implications

Systems are in place for the Health Exchange to refer youth/young adult to the appropriate local district for eligibility status verification and Medicaid eligibility determination. Please refer to <https://nystateofhealth.ny.gov/> for additional information.

The special population field in WMS will identify youth using the following indicators¹⁰.

Upstate	Downstate
“C” = Youth/Young Adult in receipt of Medicaid upon final discharge (eligible for Medicaid up to the age of 26)	“7” or “1” = Youth/Young Adult in receipt of Medicaid upon final discharge (eligible for Medicaid up to the age of 26)
“T” = Youth not in receipt of Medicaid upon final discharge (eligible for Medicaid up to the age of 21)	“T” = Youth not in receipt of Medicaid upon final discharge (eligible for Medicaid up to the age of 21 years)

¹⁰ Refer to GIS #14-005, *Former Foster Care and True Chafee System Instructions*, issued on March 4, 2014, for additional guidance.

VI. Effective Date

The ACA was effective on January 1, 2014, and this ADM is effective immediately.

Thomas R. Brooks

Issued By:

Name: Thomas R. Brooks

Title: Deputy Commissioner

Division/Office: Strategic Planning and Policy Development