

**DRAFT**  
**BadgerCare Plus Youths Exiting Out-of-Home Care**  
**Policy and Process**

September 19, 2007

**BACKGROUND**

Under the “Foster Care Independence Act of 1999”, States were given the option to provide Medicaid benefits to youths who were in a State’s foster care program on their 18<sup>th</sup> birthday. These health care benefits are intended to help these youths who usually do not have any family support and typically have greater health care needs than other young persons. Under the BadgerCare Plus (BC+) initiative, the State intends to provide health care benefits to foster care youths when their foster care coverage ends and continue that coverage until they turn 21.

For purposes of determining who qualifies for this health care benefit, “foster care” includes both federally funded (Title IV-E) and state funded foster care. In addition, there are two pilot programs operating in Wisconsin under authority of foster care waivers. Youths in these programs, called Subsidized Guardianships and Court-Ordered Kinship Care, are also considered to be in the foster care program. However, youths in the Adoption Assistance program or in a Tribal Child Welfare program are not considered to be under the State’s foster care program.

As currently drafted in the state’s budget bill, effective January 1, 2008, eligibility for BC+ will be available for youths who meet a few basic requirements of the BC+ program and who turn 18 on or after January 1, 2008. Coverage will begin when their Medicaid benefits under the foster care/kinship care programs end.

**POLICY**

Health care benefits through the BadgerCare Plus Youths Exiting Out-of-Home Care (YEOHC) program is available to a youth exiting out of foster care, subsidized guardianship or court-ordered Kinship Care if all of the following conditions are met:

- The youth was receiving foster care (either IV-E or non-IV-E), subsidized guardianship or court ordered Kinship Care on the date that the youth turned 18.
- The youth turned 18 on or after January 1, 2008 and is under age 21.
- The youth is no longer receiving a Foster Care benefit.
- The youth meets the following BC+ eligibility criteria:
  - Provides a Social Security Number or cooperates in applying for one.
  - Is a U.S. Citizen, or National, or is a qualifying alien.
  - Provides verification of U.S. citizenship and identity or qualifying alien status if the youth is also a parent of a child receiving BC+, s/he must cooperate with child support enforcement agencies, unless pregnant, in obtaining medical support liability.
  - Cooperates with providing third party liability information
  - Physically resides in Wisconsin and intends to reside in the state

- Is not an inmate

**NOTE:** There will be no income or resource test for these youths while they are eligible for this benefit. In addition, they will not be subject to the BC+ insurance access policy and they will not be required to pay any premiums.

The BadgerCare Plus Youth benefits are available for youths placed in foster care, subsidized guardianship, court ordered Kinship Care or group homes by public or private Child Welfare (CW) agencies as long as a local county Child Welfare agency has responsibility for the child. It also includes youths placed in child caring institutions (CCIs), an institution for mental disease and other medical institutions by a child welfare agency on their 18<sup>th</sup> birthday. As long as foster care, subsidized guardianship or court-ordered kinship care benefits were paid for the youth for the month of the youth's 18<sup>th</sup> birthday, it does not matter what the youth's living arrangements were at that time. In addition, youths who were in a foster care program in another State on their 18<sup>th</sup> birthday qualify for BC+.

## **PROCESS**

### ***Application***

#### CW Agency

When a CW youth is 17 years old, CW agencies typically work with the youth to help prepare him or her for adulthood. During this time, for instance, the CW agency determines how long the child will remain eligible for foster or kinship care benefits. Some will lose their benefits when they turn 18. Others will not lose their benefits until they graduate from high school. A few foster children continue to receive benefits until they turn 19. Besides losing the foster benefits, the CW agencies need to terminate the Medicaid benefits provided for foster children. Current procedures directed by the Division of Child and Family Services (DCFS)<sup>1</sup> require the CW agencies to refer the youths to the local Income Maintenance (IM) agencies when they are preparing to close the foster care case. The IM agencies are to determine whether the youths would be eligible for Medicaid or BadgerCare. Only after the IM agencies have made that determination is the CW agency permitted to terminate the foster care Medicaid benefits.

Within 30 days from the date the foster care case is expected to close, the CW agency should assist the youth in filing an application for BC+ online using Wisconsin ACCESS. For court ordered Kinship Care cases where an 18 year old youth is intending to remain with the relative, a separate ACCESS application for the youth is not necessary. The Kinship Care relative should request BC+ for the Youth and him or herself. In addition to assisting the youth, the CW agency is to send a written communication to the IM agency providing the following information about the youth:

- Identifying information (Name, DOB, SSN)
- Whether documentation of citizenship and identity of the youth was verified by the CW agency.
  - Type of documentation
  - Birth record information: date of birth, place of birth, certificate number
  - Immigration record information: Alien Registration Number, Date of Entry

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<sup>1</sup> DCFS INFO MEMO 2006 – 03, February 8, 2006

- Current Address, or if known, where the child will be living when FC ends
- Statement identifying the youth's placement arrangement on his or her 18<sup>th</sup> birthday
  - IV-E Foster Care
  - Non-IV-E Foster Care
  - Court-ordered Kinship Care (with identifying information about the KC relative)
  - Subsidized Guardianship
- Date when the child welfare case is to close
- Date when the ACCESS application was filed and the ACCESS tracking number
- Contact information including the CW agency contact name and telephone number

If the youth has not has his or her citizenship documentation verified, the CW should assist the youth in obtaining birth certificates and/or identification documents.

### IM Agency

When the CW agency sends information concerning youths exiting out of home care, the IM agency needs to take the following actions:

- Assign an IM worker to the ACCESS case and pass the additional CW information on to the worker. If the youth was living with a Kinship Care relative who has an open case in CARES, the information must be shared with that relative's IM worker.
- Indicate in CARES that this is a youth exiting out of home care.
- Enter in CARES the date when the child welfare case is to end.
- If citizenship documentation has not been verified, send a request to the youth for the documentation. Do not delay the eligibility determination while waiting for the documentation. Assist the youth if needed, to obtain the documentation. Eligibility may be continued as long as the youth is making a good faith effort to obtain the documentation.

**NOTE:** The KC relative's IM worker should change the youth's BC+ eligibility under the relatives' case when their Kinship Care case ends. If no other children under age 19 are in the home when the youth is turning 19, send the youth an application form to complete to set up their own case or have the youth submit an ACCESS application.

### ***Changes in Circumstances***

The only change in circumstances that may affect eligibility for a youth is moving out of state or becoming an inmate. In addition, to insure that the youth is enrolled in the appropriate managed care organization, the IM agency should have the current address on file. For these reasons, youths are still required to report any change in address.

### ***Reviews***

IM agencies are required to redetermine eligibility at least every 12 months for youths.

### ***Benefits***

YEOHC's eligible for BC+ will receive BC+ Standard Plan benefits provided primarily through Managed Care organizations. These benefits will be funded under the Medicaid (Title 19) program.