

**County of San Diego, Health and Human Services Agency (HHSA)
Medi-Cal Program Guide Letter**

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Update to the Former Foster Care Children (FFCC) Medi-Cal Program	810	1 of 2

Issue Date:

5/13/2015

Effective Date:

Upon Receipt

Purpose:

To provide guidance for handling Former Foster Care Children (FFCC) in the Mandatory Coverage Group (MCG) and Optional Coverage Group (OCG).

Background:

Former Foster Care youths in the Mandatory Coverage Group (MCG) who age out of foster care system at age 18 or older are eligible to receive Medi-Cal up to age 26 and are aided under aid code 4M. Former foster care youths in the Optional Coverage Group (OCG) who age out of foster care at age 18 and were not receiving Medi-Cal/Medicaid are eligible to receive Medi-Cal up to age 21 and are aided under aid code 4M until aid code 4U is available.

Policy:

FFCC in the MCG or OCG, who are under the responsibility of any state or tribe on their 18th birthday, are eligible to the FFCC program and are **not** be discontinued for failure to provide verifications or for loss-of-contact at redetermination.

Summary of Changes:

[MPG 05.15.10](#)

- Reformatted section using new template and removed obsolete and unnecessary information
- Consolidated MPG 05.15.10 and 05.15.11
- Updated eligibility requirements
- Updated renewal processing procedures
- Added Medi-Cal Processing Guide 05.15.10 for internal staff use

Changes to the MPG are noted with highlighted text within the Article/Section.

Impacts:

Automation:

Current CalWIN functionality does not support the continuation of FFCC Medi-Cal benefits to age 21 or 26. Staff must continue to override eligibility results to assign the 4M aid code for MCG and OCG former foster care youths at application and redetermination.

Forms and Document Capture:

No impact.

Program/s Affected:

No other programs affected.

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Quality Control (QC):

QC will cite the appropriate error on any case that does not comply with the requirements outlined in this material.

References:

[MEDIL 14-05](#)

[ACWDL 14-18](#)

[ACWDL 14-41](#)

Sunset Date:

This policy will be reviewed for continuance by 5/31/2018.

Approval for Release:



Rick Wanne, Director
Eligibility Operations

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Background:

The Former Foster Care Children (FFCC) program allows Medi-Cal benefits to be extended for all former Foster Care youths in the following groups:

- Mandatory Coverage Group (MCG)
- Optional Coverage Group (OCG)

The MCG group includes youths who were receiving Medi-Cal while in Foster Care under the responsibility of the State or tribe on their 18th birthday. The OCG group includes youths who were not receiving Medi-Cal benefits while in Foster Care under the responsibility of the State or tribe on their 18th birthday.

FFCC in the MCG or OCG who meet the requirements defined in [05.15.10A](#) below will have benefits extended as follows:

Group	Age
MCG	Benefits will be extended up to age 26
OCG	Benefits will be extended up to age 21

Policy:

05.15.10A Eligibility Requirements

There is no income or resource test for this program regardless of the youth's living situation or with whom they reside. Continuation of FFCC Medi-Cal benefits **must** be allowed regardless of any change in circumstance if the youth:

- is a California resident;
- was discontinued from Foster Care due to aging out per timeframes outlined above; and
- was in aid codes 40, 42, 43, 45, 46, 49, 4C, 4H, 4L, 4N, 5K on their 18th birthday.

Note: MCG and OCG Foster Care youths are eligible to the FFCC Medi-Cal program as long as they were under the responsibility of any state or tribe at age 18 or later. They do **not** have to be receiving Foster Care payments or be enrolled in a Foster Care aid code.

05.15.10B Reasonable Opportunity Period

Prior Former Care status can be initially verified at application via self-attestation. Give the applicant youth a 30 day reasonable opportunity period (ROP). During this period, verify prior Foster Care status from the county or State where the individual aged out of Foster Care (Refer to [Desk Aid 75](#)).

The following link should be used as a starting point when verifying prior out-of-state Foster Care placement: [National Resource Center for Youth Development](#).

If unable to obtain the information and after the 30 days ROP, have the applicant complete the Request for Household and Tax Information (RFHTI) form and request income information to determine eligibility to a MAGI group or other non-MAGI Medi-Cal program until Foster Care status is verified.

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05.15.10C FFCC Ineligibles

The following youths are **not** eligible for the FFCC Medi-Cal program:

- Children who were in Foster Care at 100% county expense (aid codes 82 and 83)
- Undocumented alien children (there are no restricted benefits available under this program)
- Incarcerated children
- Children placed in group homes or treatment foster family agencies (FFAs)
- Minors emancipated and/or discontinued from Foster Care prior to their 18th birthday

05.15.10D Order of Evaluation

The FFCC Medi-Cal program is first in the order of evaluation. The FFCC eligible youth may choose to either:

- participate in the FFCC Medi-Cal program; or
- not participate in the FFCC Medi-Cal program and be included in the MFBU of another family member, if eligible to that program.

05.15.10E Application

The following application forms are acceptable but are not required for the FFCC Medi-Cal program:

- MC 250A
- MC 210 (through December 31, 2015)
- Single Streamlined Application
- SAWS 2 Plus
- Online applications (MyBCW, Covered CA)

If the applicant youth submits the Single Streamlined Application, it is considered complete for FFCC when:

- pages 2-3 are filled out;
- applicable FC questions on page 4 are completed; and
- page 17 is signed and dated.

Important Note: The applicant youth is **not** required to complete an application or provide any additional information beyond the information requested on the MC 250A. Income, resources, and tax household information is **not** required for the FFCC Medi-Cal program.

If the application is returned incomplete, allow the 10-10 timeline as outlined in [MPG 04.13.02](#).

05.15.10F Retroactive Eligibility

A former Foster Care applicant/recipient may request retroactive Medi-Cal coverage by completing the MC 210A. Retroactive benefits may be issued retroactively back to the youth's 18th birthday or the month after Foster Care benefits terminated, whichever is later. If retroactive FFCC Medi-Cal benefits are not requested at application, the request must be made within one year of the month for which retroactive coverage is requested.

05.15.10G Aid Code

4M is the aid code for the FFCC Medi-Cal program. Former Foster Care youths aided under this aid code may voluntarily enroll in a Medi-Cal Managed Care Plan.

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Note: The OCG are aided under aid code 4M until aid code 4U is available.

05.15.10H MFBU Composition

Individuals in the FFCC aid code are in an MFBU by themselves. The former FC youth's case must be in his/her name. They are treated as "Other Public Assistance" individuals in the MFBU of family members that they live with.

Examples:

If...	Then...
a FFCC youth returns to live with parents who are already Medi-Cal eligible,	the parents will continue in their existing aid code/case name and the FFCC youth will continue in the 4M aid code with a case in his/her name.
the FFCC youth has a child,	the child will be evaluated for Medi-Cal based upon program eligibility rules applicable to the child.
other family members apply for CalWORKs,	the FFCC youth will not be affected since the other family members and their eligibility will be determined based on existing program rules. The FFCC youth remains in aid code 4M in a budget unit of one, as long as he/she continues to meet the criteria and wishes to maintain Medi-Cal coverage.

05.15.10I Redetermination prior to attaining age 21 or age 26

An annual redetermination must be completed to confirm the recipient's:

- current address to verify California residency; and
- desire to continue Medi-Cal coverage.

A redetermination must be initiated prior to the youth reaching the age of 21 (OCG) or age 26 (MCG) to determine if the youth is eligible to any other Medi-Cal program using available information. If required information is not available, the youth must complete the RFTHI form to determine eligibility to a MAGI group or other Non-MAGI Medi-Cal program (Refer to [MPG SN 13-09 Addendum L](#) for information on redeterminations).

05.15.10J Discontinuance

A Foster Care youth may **not** be discontinued for failure to provide verifications or for loss-of-contact. Discontinue FFCC Medi-Cal benefits if the recipient:

- reaches the maximum age for the FFCC Medi-Cal program;
- has been confirmed as deceased;
- requests their benefits be discontinued; or
- is no longer a California resident*.

*Loss of residence must be **confirmed** either by:

- Returned mail showing an out-of-state address
- Notification from the FFCC recipient
- DHCS investigation results or other evidence confirming an out-of-state address

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05.15.10K Inter County Transfer (ICT)

ICT rules apply to FFCC Medi-Cal cases. Refer to MPG [Article 3 Section 2](#) for ICT procedures. However, since the verification rules are different for the FFCC Medi-Cal program, the forms included in the ICT packet must only be limited to those forms needed based on specific information in the case file.

05.15.10L Outreach

Independent Living Skills (ILS) social workers/staff will perform outreach to FFCC prior to discontinuance of Foster Care benefits. This is done in order to make the FFCC youth aware of the following:

- Former Foster Care youths in the MCG are entitled to Medi-Cal benefits until the age of 26
- Former Foster Care youths in the OCG are entitled to Medi-Cal benefits until the age of 21
- Responsibility to report a change of address to their worker
- Responsibility to complete the annual redetermination

Procedure:

Refer to [Processing Guide 05.15.10](#) for procedures regarding the FFCC program evaluation and annual redetermination process.

References:

[ACWDL 00-41](#)

[ACWDL 00-61](#)

[ACWDL 01-60](#)

[ACWDL 14-18](#)

[MEDIL 13-07](#)

[MEDIL I 14-05](#)

MPG Letter 479

MPG Letter 555

[MPG Letter 686](#)

[MPG Letter 799](#)

[MPG Letter 804](#)

Release Date:

5/13/2015

Sunset Date:

This policy will be reviewed for continuance by 5/31/2018.

Desk Aid 75

Applicants who self-attest to having been in Foster Care at age 18 will be enrolled in the FFCC Medi-Cal program with a 30 day Reasonable Opportunity Period (ROP). Workers can verify Foster Care in the following ways:

Placement was in San Diego County
<ul style="list-style-type: none"> • Clear MEDS and CalWIN to verify the Foster Care aid code or determine if the applicant was a dependent of the state on their 18th birthday • If unable to verify via MEDS/CALWIN, contact your designated Foster Care Liaison at your FRC • If the Foster Care Liaison is unable to obtain the information, contact the Foster Care Inquiry line at (858) 514-6644 and provide the following information: <ul style="list-style-type: none"> ○ Applicant’s Name, DOB, and SSN ○ Your contact information
Placement was in another county
Contact the county of origin to verify Foster Care case/status (Foster Care contact list)
Placement was out-of-state
Access the National Resource Center for Youth Development to obtain contact information for the particular state.
NOTE: Applicants can contact the Foster Care Ombudsman at (877) 846-1602 to obtain information about their Foster Care case/status.
Unable to verify placement within 30-day ROP
Have the applicant complete the Request for Household and Tax Information (RFHTI) and request income information to determine eligibility in another MAGI group or other Non-MAGI Medi-Cal program until Foster Care status is verified.

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<ul style="list-style-type: none"> • Active Foster Care Case • Discontinued Foster Care • Redetermination

Purpose:

To provide procedural instructions to eligibility workers regarding the Former Foster Care Children (FFCC) Medi-Cal program evaluation and annual redetermination process.

Background:

- Former Foster Care youths in the Mandatory Coverage Group (MCG) or Optional Coverage Group (OCP) must be re-evaluated on their 18th birthday to determine if they will continue on the Foster Care aid code or be evaluated for the FFCC Medi-Cal program
- An annual redetermination must be processed to determine ongoing eligibility to the FFCC Medi-Cal program

Policy:

Refer to [MPG 05.15.10](#) for the FFCC Medi-Cal program policy.

Worker Action:

A. Active Foster Care Case

Active Foster Care recipients must be re-evaluated on their 18th birthday as follows:

If the Foster Care recipient is...	Then the Foster Care recipient must...
enrolled in high school or in a qualifying vocational program,	continue on the Foster Care aid code.
not enrolled in high school or in a qualifying vocational program,	be evaluated for the FFCC Medi-Cal program.

Foster Care youths approaching age 18 must receive the following forms:

- OCC 14-21 (provides information regarding the FFCC program)
- CSF 37 (school attendance verification)

B. Discontinued Foster Care Case

When a Foster Care case discontinues:

Step	Action
1	Confirm the Foster Care youth meets the FFCC Medi-Cal program criteria outlined in MPG 05.15.10 .
2	Approve FFCC Medi-Cal benefits, if appropriate.
3	Narrate case actions.

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C. Redetermination

At redetermination, complete an *ex parte* review and contact the recipient by phone or mail as follows:

Step	Action						
1	Contact the recipient by phone. <table border="1" style="width: 100%; margin-top: 10px;"> <thead> <tr> <th>If contact is...</th> <th>Then...</th> </tr> </thead> <tbody> <tr> <td>successful,</td> <td> <ul style="list-style-type: none"> • Confirm residency and recipient's desire to remain on Medi-Cal; • Process the redetermination; and • Narrate case actions. </td> </tr> <tr> <td>unsuccessful,</td> <td>Go to Step 2.</td> </tr> </tbody> </table>	If contact is...	Then...	successful,	<ul style="list-style-type: none"> • Confirm residency and recipient's desire to remain on Medi-Cal; • Process the redetermination; and • Narrate case actions. 	unsuccessful,	Go to Step 2.
If contact is...	Then...						
successful,	<ul style="list-style-type: none"> • Confirm residency and recipient's desire to remain on Medi-Cal; • Process the redetermination; and • Narrate case actions. 						
unsuccessful,	Go to Step 2.						
2	Mail the MC 250A to the recipient. <table border="1" style="width: 100%; margin-top: 10px;"> <thead> <tr> <th>If the MC 250A is...</th> <th>Then...</th> </tr> </thead> <tbody> <tr> <td>submitted,</td> <td> <ul style="list-style-type: none"> • process the redetermination; and • narrate case actions. </td> </tr> <tr> <td>not submitted,</td> <td> <ul style="list-style-type: none"> • do not discontinue the case; • recertify the case to continue MC benefits; and • narrate case actions. </td> </tr> </tbody> </table> <p>Note: Completion of the MC 250A or any other application form is not required at redetermination. However, if the recipient chooses to receive the MC 250A and the form is returned by the post office as "Undeliverable", the FFCC recipient will not be discontinued due to a loss-of-contact.</p>	If the MC 250A is...	Then...	submitted,	<ul style="list-style-type: none"> • process the redetermination; and • narrate case actions. 	not submitted,	<ul style="list-style-type: none"> • do not discontinue the case; • recertify the case to continue MC benefits; and • narrate case actions.
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5/13/2015