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The Coverage Learning Collaborative

Ensuring Continuity of Coverage for Foster Youth Aging Out of Foster Care and Young Adults Eligible for the Former Foster Care Group

September 9, 2019
2:00-3:30 PM (ET)

Agenda

Introduction

Why This Legislation Is Important: Overview of Former Foster Youth (FFY) Population

Eligibility and Enrollment Processes and Best Practices for FFY

Outreach to Foster Youth and FFY: Key Strategies

Next Steps for States

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Our Goals for Today

1 Provide states with an overview of changes made to the FFY eligibility group under Section 1002 of the Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act ("the SUPPORT Act").

2 Share best practices for ensuring streamlined access to Medicaid coverage and conducting outreach for youth eligible under the Former Foster Care Group.

In today's session, we will:

❑ Provide background on the FFY population and review common barriers to coverage.

❑ Review requirements and share best practices related to eligibility and enrollment for FFY.

❑ Share best practices for engaging FFY, conducting outreach, and raising awareness about their health care and coverage options.

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Project Approach

Literature Review

Literature review included:

- Demographic information for FFY
- Health and socioeconomic vulnerabilities commonly experienced by FFY
- Outreach and enrollment strategies for FFY and other vulnerable populations
- Cross-agency collaboration, particularly between state Medicaid and state child welfare agencies

Expert Interviews

State interviews included Medicaid agency and child welfare agency representatives.

California* Indiana* Utah* Wisconsin

Subject matter expert interviews included advocates, practitioners, and former foster youth.
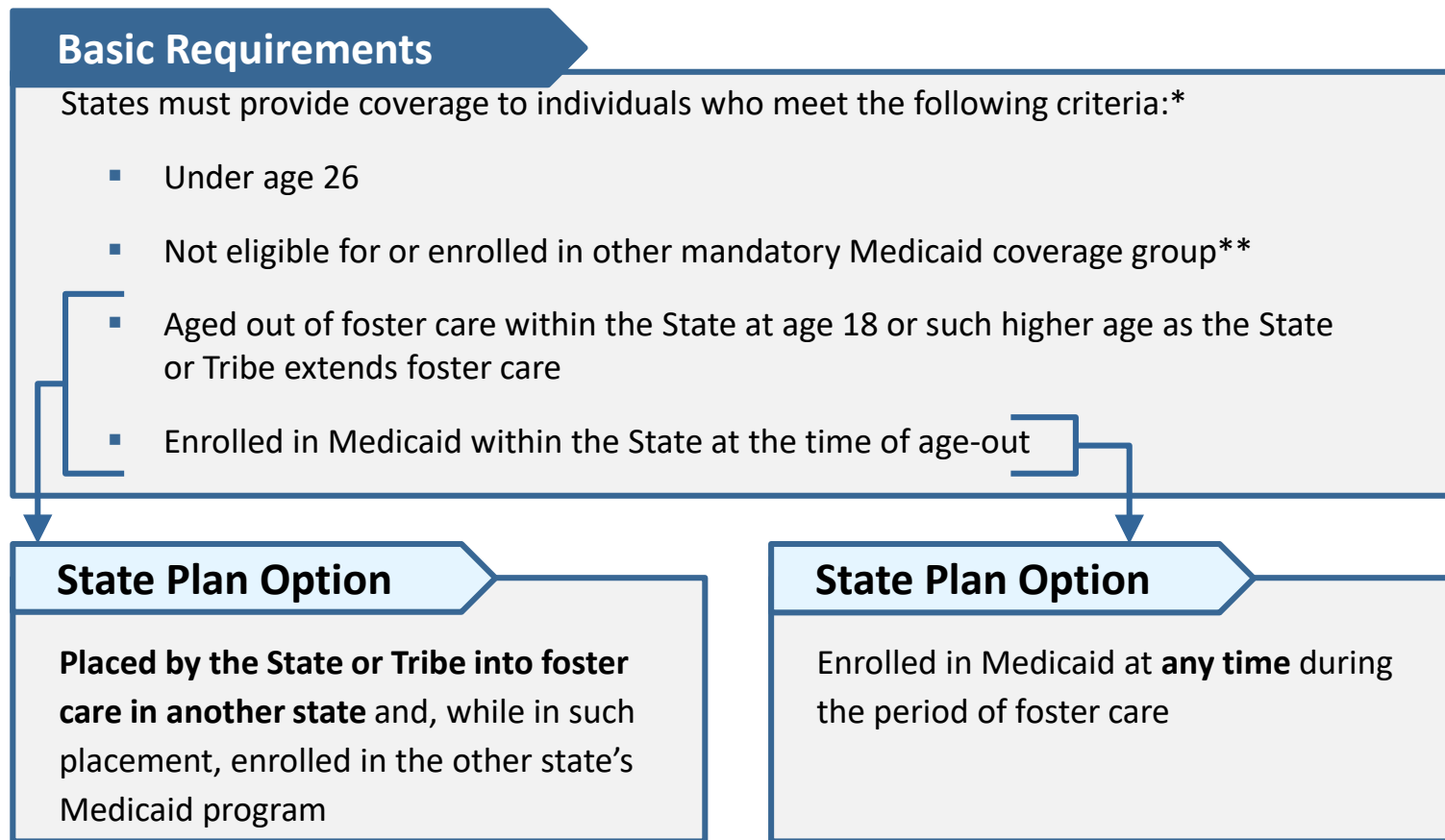
- Administration for Children and Families*
- Casey Family Programs
- FosterClub*
- GMMB
- Juvenile Law Center*
- Young Invincibles

Technical Expert Panel

Convened a technical expert panel of state representatives, subject matter experts, and former foster youth to consider and provide feedback on the strategies and approaches developed for this webinar.

*Interviewed and participated in technical expert panel.

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Introduction

Current Eligibility Requirements and State Plan Options: Former Foster Care Group

Basic Requirements

States must provide coverage to individuals who meet the following criteria:*

- Under age 26

- Not eligible for or enrolled in other mandatory Medicaid coverage group**

- Aged out of foster care within the State at age 18 or such higher age as the State or Tribe extends foster care

- Enrolled in Medicaid within the State at the time of age-out

State Plan Option

Placed by the State or Tribe into foster care in another state and, while in such placement, enrolled in the other state's Medicaid program

State Plan Option

Enrolled in Medicaid at **any time** during the period of foster care

* There is no income test required for enrollment in the former foster care group
**Individuals eligible for both the former foster care group and the adult group should be enrolled in the former foster care group

States can apply for a Section 1115 demonstration to cover FFY who aged out of foster care in a different state.

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Overview of Section 1002 of the SUPPORT Act

Section 1002 ("Health Insurance for Former Foster Youth") of the SUPPORT Act, signed into law on October 24, 2018, amends Medicaid coverage requirements for the FFY eligibility category that provides youth who aged out of foster care with Medicaid eligibility up to age 26.

Sec. 1002: Health Insurance for Former Foster Youth

☑ States must provide Medicaid coverage to FFY who age out of foster care in any state.

☑ Youth are eligible for Medicaid under the FFY eligibility category so long as they are not eligible for and enrolled in Medicaid under another eligibility category. There is no income test for the FFY eligibility category.

☑ The new requirements take effect with respect to foster youth who attain 18 years of age on or after January 1, 2023.

Section 1002 of SUPPORT Act also required CMS to issue guidance on:
- Best practices for removing barriers and ensuring streamlined, timely access to Medicaid for FFY.
- Best practices for conducting outreach and raising awareness among FFY regarding Medicaid coverage options.
- Examples of states that have successfully extended Medicaid coverage to FFY.

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The SUPPORT Act Amends FFY Coverage

Section 1002 of the SUPPORT Act expands Medicaid eligibility to youth who aged out of foster care in another state and revises the eligibility hierarchy requirement.

	Current Policy	Policy in 2023
Out-of-State Coverage	States must provide Medicaid to FFY under age 26 who aged out of foster care in the same state, but they are not required to provide coverage to FFY who aged out in another state. States can apply for a Section 1115 demonstration to cover FFY who aged out of foster care in a different state. ▪ Ten states have taken up this option: CA, DE, KY, MA, NM, PA, SD, UT, VA, and WI.	States must cover FFY who received Medicaid at the time they aged out of foster care, regardless of the state the FFY lived in at the time of age-out. ▪ Changes are effective for youth who turn 18 on or after 1/1/23. ▪ Until then, states may continue to adopt this change through a Section 1115 demonstration.
Eligibility Hierarchy	Individuals cannot be eligible for another mandatory group.	Individuals who turn 18 on or after 1/1/23 can be eligible for, but not enrolled in, another mandatory group and still be enrolled in the FFY group.

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Why This Legislation Is Important: Overview of FFY Population

FFY Are a Small but High-Risk Population

In 2016, there were 437,465 youth in foster care and 20,532 youth who aged out of the foster care system across the country.

Number of Youth That Aged Out of Foster Care in 2016

Legend:
- 13 to 246
- 247 to 569
- 570 to 1,210
- 1,211 to 4,013
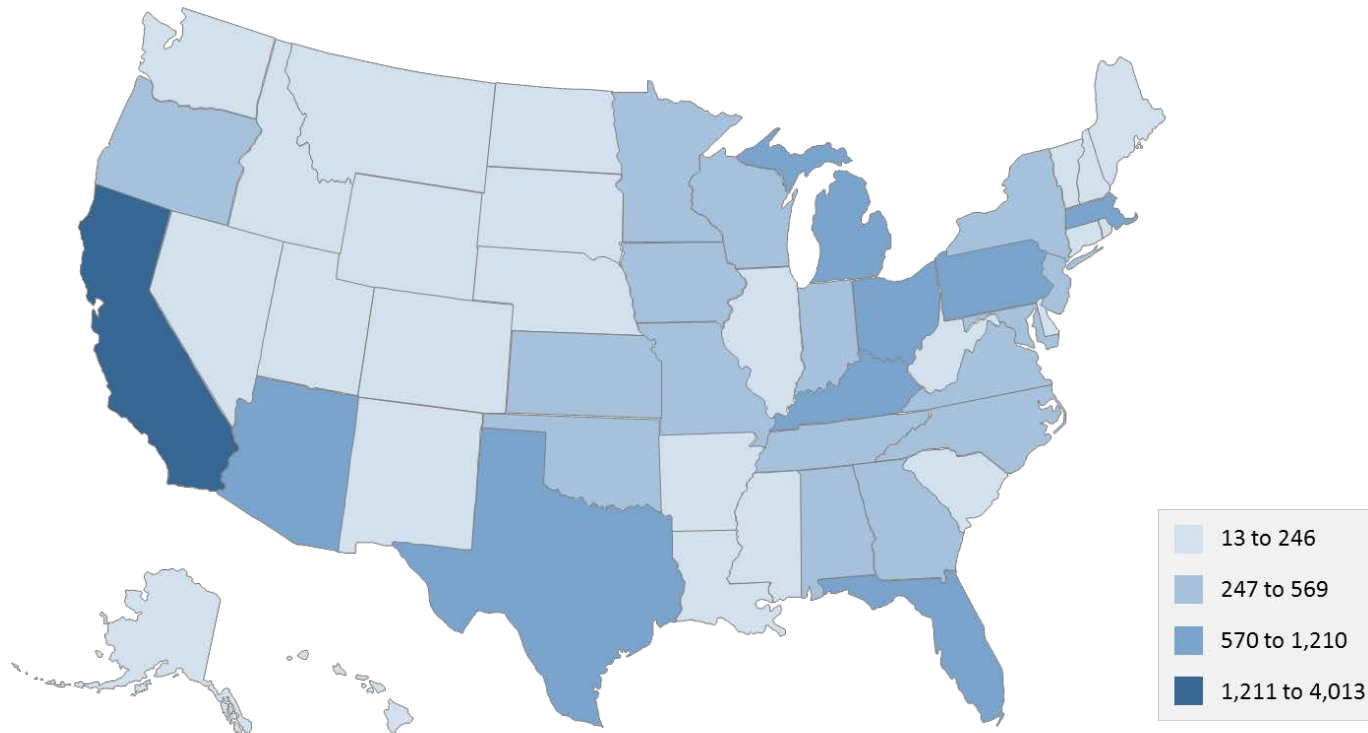
Source: The Annie E. Casey Foundation, KIDS COUNT Data Center; datacenter.kidscount.org.

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FFY Are at Higher Risk of Socioeconomic Crises That Compound Their Significant Health Needs

Physical and Behavioral Health Needs Among FFY

- ❑ Foster youth frequently experience adverse childhood experiences – such as abuse, neglect, domestic violence, and parental substance abuse – that increase the risk of serious health problems later in life, including:
  - ▪ Severe obesity, diabetes, heart disease, cancer, stroke, chronic obstructive pulmonary disease (COPD), and broken bones.
- ❑ FFY are twice as likely to experience PTSD compared with Iraq combat veterans.
- ❑ FFY are twice as likely to experience depression compared with the general population.
- ❑ FFY are more likely to suffer from anxiety and attempt suicide.

Insurance Status Among Foster Youth and FFY

- ❑ Medicaid coverage rates among one cohort surveyed in 2014 and 2016 (after the creation of the FFY group):
  - ▪ 19-year-olds in foster care: 89%
  - ▪ 19-year-olds no longer in foster care: 69%

Homelessness Among FFY
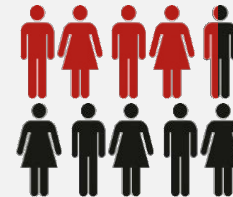
43% of FFY report experiencing homelessness—often multiple times—by age 21.

Foster youth and FFY have a higher risk of multiple chronic health conditions, beyond what is associated with socioeconomic instability.

Sources: https://www.acf.hhs.gov/sites/default/files/cb/nytd_data_brief_6.pdf;
https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/about.html; https://www.chapinhall.org/wp-content/uploads/Midwest-Eval-Outcomes-at-Age-26.pdf; https://www.acf.hhs.gov/sites/default/files/cb/afcarsreport25.pdf; https://www.acf.hhs.gov/sites/default/files/cb/nytd_data_brief_5.pdf;
https://www.communitycatalyst.org/resources/publications/document/Foster-Youth-final-1.pdf?1401306962; https://www.ncbi.nlm.nih.gov/pubmed/26474668;
http://pediatrics.aappublications.org/content/pediatrics/134/6/1067.full.pdf; https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4617302/

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Featured Speaker: Laticia Aossey From FosterClub

FosterClub's mission is "to lead the efforts of young people in and from foster care to become connected, educated, inspired and represented so they can realize their personal potential and contribute to a better life for their peers."

About Laticia

- Spent 19 years in the Iowa foster care system, where she had 18 different placements and attended 14 different schools.

- Graduated from high school early and received her bachelor's degree in social work from Northern Iowa University.

- Is involved with advocating for and supporting other FFY, especially on the topic of access to health care for youth who move out of the state in which they received foster care.

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Common Barriers to Medicaid Coverage Among FFY

FFY can be a hard-to-reach population, the effects of which can be compounded by state systems/operations that do not always ensure continuity of coverage for youth leaving foster care or facilitate streamlined re-enrollment later.

Barriers Rooted in State Systems/Processes

- Medicaid data/IT systems often don't coordinate with other state agency systems, including child welfare agencies.

- Poor policy awareness among child welfare and Medicaid eligibility workers.

- Limited coordination among states makes it difficult to verify FFY status for youth who aged out in another state.

- State marketing and outreach mediums may not reach FFY.

Barriers Commonly Experienced by Foster Youth and FFY

- Health care is not a top priority for many youth, but for foster youth, they may also be facing a lack of stable housing and unemployment.

- Lack of awareness about coverage options.

- FFY may be distrustful of institutions and bureaucracies and will avoid engaging "the system."

- Lack of health literacy and a lack of a supportive adult to assist them with managing their health care and/or coverage options.

- Many FFY move frequently, and states may not have up-to-date contact information.

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Eligibility and Enrollment Processes and Best Practices for FFY

Enrollment Pathways for the FFY Group

Enrolling Youth Aging Out of Foster Care Into the FFY Group

State Medicaid Agency (SMA) Anticipates Foster Youth's Age-Out (or is notified by Child Welfare (CW) agency)

→

CW Agency Helps Youth Complete Redetermination Paperwork

→

SMA Processes Redetermination and Moves Youth to FFY or Other Group

Enrolling FFY Into the FFY Group After They've Aged Out

SMA Receives and Processes New Application

→

SMA Determines Eligibility for FFY Group

SMA Conducts Annual Renewal

→

SMA Redetermines Eligibility at Age 26

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SMA Anticipates Foster Youth's Age-Out (or Is Notified by CW)

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SMA Receives and Processes New Application

SMA Determines Eligibility for FFY Group

SMA Anticipates Foster Youth's Age-Out

Relevant Requirements

- If the agency has information about anticipated changes in a beneficiary's circumstances that may affect eligibility, it must redetermine eligibility at the appropriate time based on such changes.

42 CFR § 435.916(d)(2)

Operational Expectations

- Identify youth aging out of foster care approximately 90 days prior to age-out (e.g., monitor data on those approaching age-out, coordinate with CW agency to be notified of upcoming transitions).

- Use available information and develop a form to facilitate the redetermination.

  - A new application should not be required.

  - Consider pre-populating the form with available information. Ensure forms collect only information needed to complete the redetermination.

  - Provide form and other information about Medicaid to CW agency to help the foster youth complete the form and the redetermination process.

Start redetermination during the 90-day transition planning period to ensure forms and other paperwork reach the youth (if needed) and state is able to obtain new signature prior to youth aging out.

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Accessing Information in Anticipation of Age-Out

Timely and accurate transfers of robust information between the SMA and CW agency help ensure youth aging out of foster care maintain Medicaid coverage.

Automate information transfer to the fullest extent possible.

- Leverage modernized eligibility and enrollment systems to automatically exchange data between systems.
- Link state Medicaid data systems to the Comprehensive Child Welfare Information System (CCWIS).

For manual information transfers, develop forms for child welfare caseworkers to populate and return to Medicaid workers to ensure manual information transfers are complete, timely and efficient.

- Caseworkers may bring forms to transition planning meetings to populate with youth.
- Establish information sharing policies/processes to receive complete and accurate information from the CW agency about the youth aging out of foster care. Information shared by CW agency may include: name, DOB, SSN, and up-to-date contact information.

System-Driven Information Transfer

Automated data exchange between CW agency and SMA systems → Redetermination automatically triggered **or** Worker initiates redetermination
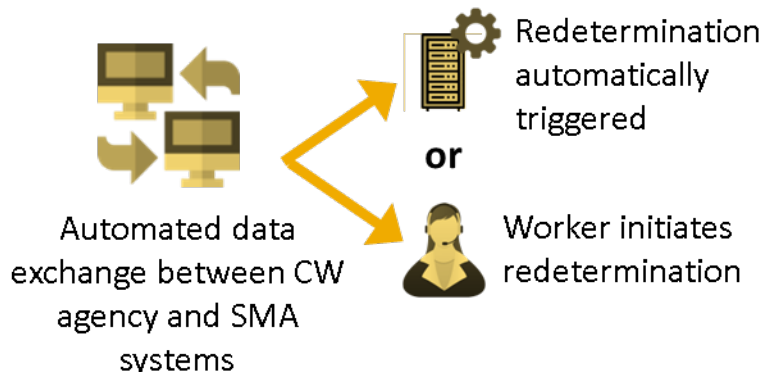
Worker-Initiated Information Transfer

SMA E/E system flags a beneficiary approaching age-out → SMA worker verifies with CW agency that beneficiary is aging out → Worker initiates redetermination

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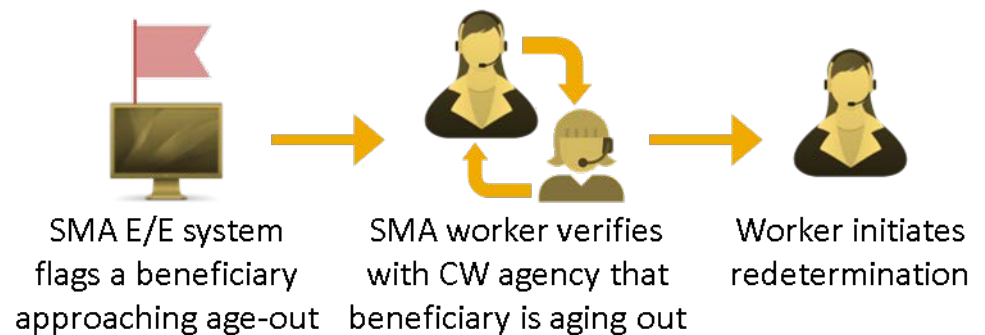
Spotlight on Indiana: Facilitating Transitions at FFY Age-Out

Indiana's CW agency has a Medicaid enrollment unit that facilitates the transition of foster youth to the FFY group at age-out.

CW agency generates monthly reports out of the child welfare information system (MaGIK) identifying foster youth who turned age 18 in that month.

CW Medicaid enrollment unit reviews the list to ensure youth are in the correct Medicaid eligibility group as they age out.

Youth who were in foster care on their 18th birthday are marked as "foster youth" in the Medicaid eligibility system so that they can be moved to FFY coverage at 19.

For youth who may be eligible as FFY, CW unit sends transmittal to SMA so they may take appropriate actions on the case.

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Child Welfare Agency Helps Youth Complete Redetermination Paperwork

CW Agency Helps Youth Complete Redetermination Paperwork

CW Agency Role

- CW caseworker assists youth to complete the redetermination form during 90-day transition process before youth ages out of foster care.

- CW agency provides youth aging out with documentation that proves youth was previously in foster care.

Best Practices for SMA

- Leverage CW transition planning process for form completion.

- Provide a streamlined pre-populated form to CW agency and encourage caseworkers to share form during transition planning meetings.

- Include information about Medicaid on foster youth transition planning checklists used by child welfare caseworkers.

- Share Medicaid enrollment information via CW agency/caseworker:

  Provider directories

  Benefit information

  Helpline numbers

  Instructions about using an online portal

  Importance of – and mechanisms to – report changes in address to avoid losing coverage

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Enrolling Youth Aging Out of Foster Care Into the FFY Group

State Medicaid Agency (SMA) Anticipates Foster Youth's Age-Out (or is notified by Child Welfare (CW) agency)
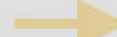
CW Agency Helps Youth Complete Redetermination Paperwork

SMA Processes Redetermination and Moves Youth to FFY or Other Group

SMA Conducts Annual Renewal

SMA Redetermines Eligibility At Age 26

Enrolling FFY Into the FFY Group After They've Aged Out

SMA Receives and Processes New Application

SMA Determines Eligibility for FFY Group

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Processing the Redetermination

Relevant Requirements

- States must make a redetermination of eligibility without requiring information from the individual if able to do so based on reliable information contained in the individual's account or other more current information available to the state.

- States may request only information from the beneficiary that is needed to renew eligibility.

- States must consider youth for eligibility under another mandatory group, such as parent/caretaker relative or pregnant women group before making a determination of eligibility under FFY group.

42 CFR § 435.916(a)(2)
42 CFR § 435.916(e)
42 CFR § 435.150(b)(2)

Operational Expectations

- Complete redetermination without requiring a new application, based on information available to the agency and provided by the young person on the form.

- Determine eligibility consistent with eligibility hierarchy (see next slide for more detail).

- Issue the new Medicaid card to the youth (through caseworker, if needed).

- Send determination notice to address on file.

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Eligibility Hierarchy: Current and Future State

Current Rules

❑ Individuals can be enrolled in the FFY group only if they are not eligible for or enrolled in any other mandatory group.

  ▪ Before enrolling an individual in the FFY group, states must check eligibility for other mandatory coverage groups (e.g., child, parent and other caretaker relative, pregnant women).

42 CFR § 435.150(b)(2)

Rules Beginning in 2023

❑ States will no longer need to confirm eligibility in another group before enrolling youth in the FFY group.

  ▪ If the FFY is not already enrolled in another eligibility group, they will be eligible for the FFY group if they meet eligibility criteria for the group, <u>regardless of whether they could be eligible for coverage under another mandatory category</u>.

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SMA Conducts Annual Renewal

Enrolling Youth Aging Out of Foster Care Into the FFY Group

State Medicaid Agency (SMA) Anticipates Foster Youth's Age-Out (or is notified by Child Welfare (CW) agency)

CW Agency Helps Youth Complete Redetermination Paperwork

SMA Processes Redetermination and Moves Youth to FFY or Other Group

SMA Conducts Annual Renewal

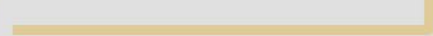SMA Redetermines Eligibility At Age 26

Enrolling FFY Into the FFY Group After They've Aged Out

SMA Receives and Processes New Application

SMA Determines Eligibility for FFY Group

SMA Conducts Annual Renewal

Relevant Requirements

- Redeterminations of eligibility must be completed at least once every 12 months.

- States must redetermine eligibility without requiring information from the individual if able to do so based on information in the individual's account or other more current information available to the agency.

- The renewal form must be made available and information may be provided through any of the modes for submission of applications.

42 CFR § 435.916(b)
42 CFR § 435.916(a)(2)(ii)
42 CFR § 435.916(a)(3)

Operational Expectations

- Start with an attempt to complete an *ex parte* renewal based on available information.
    - Send notice of continued eligibility if renewal is possible.
    - Send renewal form if additional information is required.

- Because there is no income test for FFY category, beneficiaries remain eligible for Medicaid as long as they remain residents of the state.

- Prior to 2023, when beneficiaries may be eligible in another group, states can assume no changes at renewal if there is not information indicating pregnancy, change in parent status, etc.
    - Renewal notice should include reminder to report address changes or another change in circumstance.

- If additional information is needed, ensure renewal form is available and may be submitted through the modalities used at application (online, phone, mail, in person).

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Enrolling Youth Aging Out of Foster Care Into the FFY Group

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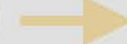
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SMA Redetermines Eligibility At Age 26

Relevant Requirements

42 CFR § 435.916(d)(2)
42 CFR § 435.916(f)
42 CFR § 435.1200(e)(1)
42 CFR § 435.917

- If the agency has information about an anticipated change in a beneficiary's circumstances that may affect eligibility, it must redetermine eligibility at the appropriate time based on such changes.

- The state must consider all bases of eligibility prior to making a determination of ineligibility.

- Beneficiaries determined to be Medicaid ineligible must be assessed for eligibility for and have their electronic account transferred to other insurance affordability programs.

- Beneficiaries must be provided with timely and adequate written notice of any decision affecting their eligibility.

Operational Expectations

- Because eligibility for the FFY group ends at age 26, states must anticipate the change in circumstance and conduct a redetermination of eligibility.

- Eligibility must be assessed on all bases prior to making a determination of ineligibility.

- Ineligible beneficiaries must also be assessed for potential eligibility for and have their account transferred to the Exchange prior to sending a termination notice.

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Assisting FFY Who Remain Medicaid Eligible at Age 26

Because youth enrolled in the FFY group are not subject to an income test, nearly all remain eligible at renewal and should seldom be required to provide additional information or documentation. Informing FFY who transition to other Medicaid groups at age 26 about income and other requirements of eligibility is critical in ensuring that they are able to remain enrolled if eligible.

Provide additional information to educate FFY about Medicaid renewal requirements that will be more relevant after age 26:

- ✓ Potential need to return documentation at renewal.

- ✓ Income requirements.

- ✓ Requirements to report any change in circumstances, including income.

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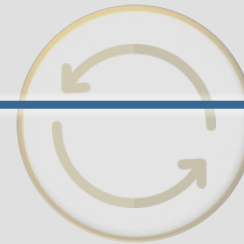MAC
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FFY who remain in the state in which they age out of foster care should remain continuously enrolled in Medicaid through their transition out of foster care and at least up to age 26.

When a break in coverage occurs or when moving to a new state, youth may need to reapply. The following strategies highlight ways to streamline the re-enrollment process (both for new applications and for verification of FFY status, if applicable).

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Enrolling Youth Aging Out of Foster Care Into the FFY Group

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SMA Receives and Processes a New Application

Relevant Requirements

- The application must be the single streamlined or approved alternative application for all insurance affordability programs.
- The application must be accepted online, by telephone, by mail, or in person.
- States may only require an applicant to provide the information necessary to make an eligibility determination.
- The agency must provide assistance to any individual seeking help with the application or renewal process.

42 CFR § 435.907
42 CFR § 435.908

CMS' 2013 Guidance on State Alternative Applications

Operational Expectations

- Applications should only request needed information.
  - Applications do not need to request income information for FFY who are neither pregnant nor a parent.
  - For young adults who turn 18 after 2023, applications with no other household members only need to request FFY status and demographic information (because of the change in eligibility hierarchy).
- Applications must be dynamic.
  - Online applications should tailor questions based on the applicant's circumstances, responses to previous questions, and potential eligibility for specific programs.
  - Paper applications should direct applicants to skip questions that are not relevant.
- States may establish a separate, simplified application for FFY that solicits only information necessary to determine eligibility.

Source: Guidance on State Alternative Applications

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Best Practices for Processing New Applications for FFY

> Applications and processes that facilitate enrollment for all populations are particularly valuable for FFY, who may need additional assistance to apply for and understand their coverage options.

Conduct Real-Time Verification

- Embed real-time verification in the application and ping previous case files to verify FFY status.

Create Consumer Assistance Tools

- For online applications, include "help text" that explains why information about foster care is being requested.
- For paper applications, include "skip" instructions and include explanatory call-out boxes to explain importance of foster care-related questions.
- Develop consumer assistance tools that can be accessed while application is being populated, such as a "chat" function or easily accessible FAQs.
- Develop and encourage use of mobile-friendly applications.
- Train application assisters so they understand unique needs and eligibility criteria for FFY group.
- Ensure call center scripts include accurate information about FFY coverage.

State Spotlight

Colorado's online multi-benefit application includes a live chat function so applicants can seek assistance while populating their responses.

> For more information and best practices for improving consumers' application experience, see the "Medicaid & CHIP MAGI Application Processing: Ensuring Timely and Accurate Eligibility Determinations" presentation from the Coverage Learning Collaborative.

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SMA Determines Eligibility for FFY Group

Enrolling Youth Aging Out of Foster Care Into the FFY Group

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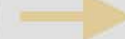
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SMA Determines Eligibility for FFY Group

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SMA Determines Eligibility for FFY Group

Relevant Requirements

- States must determine eligibility promptly, within applicable timeliness standards.
- States may collect only such additional information that may be needed to determine Medicaid eligibility.

42 CFR § 435.911
42 CFR § 435.912

Operational Expectations

- Information needed to determine eligibility for FFY can be gathered from Medicaid records and through collaboration with the CW agency.

  o For youth who aged out in-state, verify FFY status against the state's Medicaid records.

  o For youth who aged out in a different state, reach out to the other state's Medicaid agency or CW agency to verify FFY status.

State Spotlight

The Utah Medicaid agency has a specialized eligibility unit that is responsible for calling other states to verify FFY status. The State maintains a list of contacts in other states and relies on telephone contact/verification.

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Best Practices for Verifying Eligibility for FFY

Verifying FFY Status for Individuals Who Aged Out In-State

- Add a foster youth "tag" to case files for individuals eligible for Medicaid as foster youth so that their FFY status remains attached to their case file in perpetuity.

- Verify FFY status through an automated or worker-facilitated information exchange with the CW agency.

Verifying FFY Status for Individuals Who Aged Out In a Different State

- Designate a group of eligibility workers to handle all out-of-state FFY verifications. These workers can develop contacts and a rapport with their counterparts in other states to facilitate verifications.

- Establish and maintain a list of Medicaid or CW agency contacts in other states to contact for verification purposes. Relevant federal data protections at 42 CFR Part 431, Subpart F apply.

Facilitating Streamlined Verification for FFY Seeking Coverage After Age-Out

- Incorporate, as part of the transition process, education about the importance of retaining documentation that can be used for verification purposes later.

- Establish online/telephone tools that make it easy for FFY to request and receive documentation from CW agency that can be used for verification, if documentation is lost or otherwise unavailable.

- Establish rules about what is allowable documentation for verification purposes to make it easier for FFY to provide needed documentation.

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Spotlight on Indiana:
Facilitating Enrollment and Renewal after Age-Out

- CW agency's Medicaid enrollment unit has access to and can edit discrete parts of Medicaid beneficiaries' case files that are relevant to child welfare, including marking beneficiaries as "foster youth."

- The "foster youth" system flag facilitates renewals as well as new applications at later points, if applicable.

- FFY who apply for Medicaid after they age out (but before age 26), are recognized by the state's eligibility system and income questions are automatically suppressed.

- A Medicaid policy team must review and approve terminations for all circumstances other than voluntary withdrawal from Medicaid, incarceration, death, confirmed out-of-state residency, or new case number.

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Maintaining Communication During Enrollment

While the strategies to maintain contact with FFY are the same as other beneficiary groups, strategies that facilitate communication will be especially important for FFY, given the transient nature of the population.

- Educate FFY about their responsibility to update their address any time they move.

- Develop simple tools and processes that make it easy for FFY to report a change of address online and by phone, mail, and in person.

- Encourage the use of online consumer accounts so FFY can receive electronic notices and maintain contact with the Medicaid agency.

- Employ other efforts to locate the youth when mail is returned, prior to terminating coverage.

  - Check with other state agencies for more recent contact information.
  - Attempt electronic contact if the person has an online account.
  - Attempt phone contact.

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Outreach to Foster Youth and FFY: Key Strategies

Goals of Outreach

Increase awareness and knowledge of Medicaid coverage among foster youth (before they age out of foster care).

Improve awareness and knowledge of Medicaid coverage for FFY among key contacts for foster youth (e.g., CW caseworkers, foster parents) and FFY (e.g., Medicaid eligibility workers, community organizations).

Assist foster youth with Medicaid enrollment and educate them about how to stay enrolled up to age 26 and beyond.

Reach FFY who are eligible for, but not enrolled in, Medicaid.

The following slides provide strategies for achieving these goals.

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Convey Key Messages Clearly

**Keep messages short, simple, and targeted to the intended audience.
Avoid the minutiae of policy details.**

Best Practices for Messaging to Foster Youth and FFY

- Use the voice of a young person.
  - Engage youth advocates, particularly youth advocates with experience in foster care, to craft the message.
- Develop accessible materials that don't look like government documents.
  - Use images and video when possible.
- Make key messages first and most prominent, use clear and simple wording, avoid jargon.
- Focus on access to services of interest to young people (e.g., behavioral health services, family planning).
  - But also be clear that a wide range of services is available.

Critical Messages for Foster Youth and FFY

- Enrolling in health coverage can help FFY meet their life goals.
- The application process is simple and application assistance is available.
- Keep contact information up-to-date to ensure continuity of Medicaid coverage.

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Begin Outreach to Foster Youth Early With Repeated Points of Contact

Educate youth about their coverage options and navigating the health care system before they age out of foster care.

- Start speaking to foster youth about health coverage as early as age 14, when states are required to begin adding transition planning services to the youth's case plan.
  - Multiple touchpoints prior to age-out will help normalize and socialize the concept of health coverage and promote health literacy.

- Distribute information to and support partners who interact frequently with foster youth and FFY.

- Use various modes to communicate with foster youth (e.g., FFY dedicated webpage, renewal materials/notices, brochures/pamphlets, electronic communications, social media, public transit ads).

> Medicaid agencies can partner with organizations that use social media and mobile apps to reach FFY and other vulnerable youth to amplify information about Medicaid coverage options.

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Educate and Train Caseworkers

Ensure accurate and complete policy awareness among both Medicaid and child welfare workers.

○ No messaging or outreach strategy will counteract the deterrent effect of providing inaccurate Medicaid eligibility information to FFY.

○ Youth who are turned away may not reengage with the Medicaid agency or reapply for coverage.

Best Practices for Educating CW Caseworkers

- Collaborate with CW agency to ensure caseworkers have full awareness about Medicaid coverage options and enrollment process.
- Ensure information about Medicaid eligibility and enrollment in the FFY group is part of foster care casework training.

Best Practices for Training SMA Workers

- Provide policy training to Medicaid/Exchange call center staff and application assisters.
- Supplement policy training with scripts and other informational materials.
- Designate a single state contact to assist FFY with application and enrollment.

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Engage Partners and Trusted Messengers

Think broadly about the types of individuals and organizations to engage as partners to reach youth who have aged out of foster care about the availability of coverage.

Potential partners include organizations that serve young adults and already have a relationship with them, and possibly have established trust and rapport with them. Such organizations include:

- High schools, colleges, and universities
- Shelters and transitional housing programs
- Job programs
- NGO social service & advocacy organizations

- Libraries
- SNAP and TANF agencies and partners
- Some health care providers, particularly those in the community where FFY live and mental health/substance use providers

Trusted messengers can effectively engage FFY and are more likely to encounter them in settings where they are comfortable asking for help. Examples include:

- Faith community leaders
- Teachers and on-campus staff

- Supportive adults (former caseworkers, foster or birth parents)
- Independent Living Coordinators

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Work With Partners and Trusted Messengers

Trusted messengers can effectively engage FFY and are more likely to encounter youth in settings where they are more comfortable asking for help.

○ Offer training to partner organizations about eligibility policy, how to apply, and enrollment practices.

○ Provide partner agencies with outreach tools, such as:

- Talking points and training materials.

- Fliers and posters with key information about FFY coverage.

- Palm cards featuring key information that FFY can take and reference later.

Peer-to-Peer Messaging

- FFY tend to be most receptive to messaging that comes from someone with similar experiences.

- Peers can both amplify and validate messaging about the availability and importance of coverage.

- States can work with peer-led organizations to test their messaging and train peer advocates in policy and messaging to reach their fellow FFY.

- Peer messaging should not supplant other outreach strategies that traditionally require state investment.
- States should also plan to compensate peer advocates for their work.

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Next Steps for States

Next Steps: Implementing the SUPPORT Act

States can begin budgeting and planning for:

- Systems upgrades, including upgrades that support automated data exchange with the CW agency.
- Verification processes that support continuity of coverage for foster youth aging out of foster care and FFY who move between states.
- New outreach materials that can be deployed to explain that Medicaid-enrolled youth who age out of foster care can be eligible for the FFY Medicaid group in any state. Develop materials for:
  - Medicaid and child welfare workers.
  - Foster youth and FFY.
  - Individuals who work with or otherwise frequently come into contact with foster youth and FFY.

Additional CMS guidance on state approaches for engaging FFY is forthcoming.

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Thank you!

Let us know if you have any updates to your contact information or would like more information on Coverage LC meetings.

Contact: **MACLC@mathematica-mpr.com**

Appendix

State Participants

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*Indicates participation in both interview and Technical Expert Panel.

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Subject Matter Experts, Practitioners, and FFY Participants

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Casey Family Programs	▪ **JooYeun Chang**, former Director of Public Policy
FosterClub	▪ **Christina Andino,** FosterClub Young Leader ▪ **Laticia Aossey***, FosterClub Young Leader ▪ **Celeste Bodner***, Founder and Executive Director ▪ **Nora Karena**, Chief Operating Officer ▪ **Cody Rivera**, FosterClub Young Leader ▪ **Shannon Symonds**, Outreach Manager
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*Indicates participation in both interview and Technical Expert Panel.

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