

# Transition Age Youth Resource: Accessing Medi-Cal Benefits for Former Foster Youth

## What is Medi-Cal and who gets it?

Medi-Cal, California's Medicaid program, is a public insurance health care program that provides health care and mental health care services for low-income individuals and families who meet defined eligibility requirements. All children and youth in foster care are entitled to Medi-Cal/Denti-Cal with no share of cost and no income or resource limits. Young adults who were in foster care at age 18 or older may be eligible for) Medi-Cal Program for Former Foster Youth (FFY) until age 26 regardless of income eligibility.

## Are all former foster youth eligible for the FFY Program? What if I am not eligible for the FFY Program?

Youth who were reunified or adopted before they turned 18 are not eligible for the FFY program but may be eligible for Medi-Cal for another reason (i.e., income eligibility).

## What benefits does Medi-Cal offer?

**Medi-Cal provides a range of health benefits, including the following ten "essential health benefits" required by the Affordable Care Act for all health plans:**

- Outpatient (ambulatory) services
- Emergency services
- Hospitalization
- Maternity and newborn care
- Mental health and substance use disorder services, including behavioral health treatment

- Prescription drugs
- Physical and occupational therapy (rehabilitative and habilitative services)
- Laboratory services
- Preventive and wellness services, chronic disease management
- Vision (routine eye exam and glasses every 24 months)
- Children's services, including oral and vision care

**The Medi-Cal Dental Program provides free or low-cost dental services to children and adults who receive Medi-Cal. Services covered by Medi-Cal Dental include:**

- Diagnostic and preventive dental hygiene (e.g., exams, x-rays, and teeth cleanings, molar sealants)
- Orthodontics for children who qualify
- Tooth extractions
- Sedation for dental services
- Fillings and crowns
- Root canal treatments (anterior/posterior)
- Scaling and root planning
- Complete and partial dentures, and relines

## Why do I need health care coverage?

Adults are required to have health insurance coverage as part of the Affordable Care Act (ACA) (it is called the "individual mandate") and Medi-Cal meets that requirement. Also, even if you are healthy, sometimes you may not predict a serious illness or accidental injury, so it is better to be protected than risk ending up needing health care and not having insurance to cover the expenses.

## How do I know if I'm eligible for Medi-Cal?

Youth residing in California who were in foster care on their 18th birthday are eligible for Medi-Cal coverage up to the age of 26 regardless of income. California provides this coverage to youth whether they were in foster care in California or any other state or tribe. Former foster youth will not have to provide information about their income in order to qualify.

Your children may qualify for Medi-Cal coverage based on other reasons (for example, based on your income or due to a disability). If you are applying for coverage for your children, you should answer income questions in order to determine if your children qualify for coverage based on your family's income.

Once the county knows your age and you indicate that you were in foster care at age 18, the county will enroll you in Medi-Cal and then verify your foster care status.

### **I am in foster care now. Do I need to reapply for Medi-Cal when I leave foster care?**

If you leave foster care at the age of 18 or older, you do not need to reapply for Medi-Cal. You will be automatically moved into the Medi-Cal program for former foster youth when you leave care and will stay covered until age 26. You can continue to use the same Medi-Cal card (called a Benefits Identification Card or BIC) that you had while in foster care. If you have lost or cannot find your card, you can ask the county to give you a new one. To confirm you will have continued coverage when you leave foster care, contact your Medi-Cal worker or county social service office. Ask if you are in the Medi-Cal program for former foster youth. Former foster youth should be assigned the '4M' aid code. If you are not in the Medi-Cal program for former foster youth, you can ask the county to move you into this program.

For more county-specific information, see [coveredtil26\\_countycontactlist.pdf](#) or email [cwshealth@dss.ca.gov](mailto:cwshealth@dss.ca.gov) to ask for the list of county child welfare contacts.

### **Do I need a new Medi-Cal card after I leave foster care?**

After you leave foster care, you can still use the same Medi-Cal card (called a Benefits Identification Card or BIC) you had while in foster care. If you can't find your card, you can ask your Medi-Cal eligibility worker for a new one.

### **How do I apply for Medi-Cal coverage if I am not eligible for Former Foster Youth Medi-Cal?**

You can apply for Medi-Cal coverage any time of the year. Youth who are not already enrolled can apply through the county social services department using a simplified one-page Medi-Cal application called an MC 250A. The MC 250A can be found at: [www.dhcs.ca.gov/formsandpubs/forms/Forms/MCED/MC\\_Forms/MC250A\\_Eng.pdf](http://www.dhcs.ca.gov/formsandpubs/forms/Forms/MCED/MC_Forms/MC250A_Eng.pdf)

#### **Option 1: Apply Online Through Covered California**

- You can sign up online at [www.coveredca.com](http://www.coveredca.com).
- The online application includes a question about whether you were in foster care at age 18 or older. If you answer "yes" to this question, you should immediately be enrolled in the Medi-Cal program for former foster youth.

- If you are only applying for health care for yourself, the online application will not ask you for income and tax information once you answer “yes” to the question.

Note: that if you apply online through Covered California, you will need to give more information about yourself than you need to give if you apply through the county using the MC 250A form

## **Option 2: Apply Through the County**

Most counties have a specific office, phone number, or staff to help you enroll in the Medi-Cal program for former foster youth.

You can apply through your county’s social services office in person or online. [Here](#) is a directory to find contact information for your specific county office. Bring the completed MC250A form when you go to sign up or ask for it when you go to your Medi-Cal office.

Here are a few tips about signing up through your county Medi-Cal office:

- Be sure to tell county staff you are a former foster youth.
- Be sure to tell county staff if you were in foster care in another state so that the county will know which state to contact to verify that you were in foster care at 18 or older.
- Remember, you DO NOT have to provide income information or proof that you were in foster care at age 18 or older.

## **I’m not sure if I was in foster care at age 18 or older. How do I find out?**

You can call the Office of the Foster Care Ombudsperson at 1-877-846-1602 or email [fosteryouthhelp@dss.ca.gov](mailto:fosteryouthhelp@dss.ca.gov) to find out if you were in foster care at age 18 or older. The Office of the Foster Care Ombudsman can also give you written verification of your time in foster care.

- **Fee-for-Service Medi-Cal:** Fee-for-service in healthcare is a payment model where providers are reimbursed for each service they deliver. Fee-for-service Medi-Cal means Medi-Cal pays doctors and other care professionals by the service provided. You may be seen by any doctor who accepts Medi-Cal. Youth with an open foster care case, a foster care case closed with Kin-GAP (Kinship Guardianship Assistance Payment Program), and youth who have been adopted from foster care are entitled to fee-for-service Medi-Cal, unless you or your

caregiver chooses a managed care plan. When you first sign up for Medi-Cal, you will get your benefits through fee-for-service Medi-Cal until you are enrolled in a managed care health plan. Before you get medical or dental services, ask if the provider accepts Medi-Cal fee-for-service payments. The provider has a right to refuse to take Medi-Cal patients. If you do not tell the provider that you have Medi-Cal, you may have to pay for the medical or dental service yourself.

- **Managed Care Medi-Cal:** Medi-Cal managed care plan is a group of doctors, clinics, specialists, pharmacies, and hospitals Medi-Cal members can enroll in specific to their county of residence. The county will contract with health insurance plans to provide Medi-Cal coverage. For example, in Los Angeles County, Medi-Cal members can enroll in Anthem Blue Cross or Blue Shield of California Promise Health Plan to receive health insurance under their Medi-Cal plan. Managed care Medi-Cal members must only go to doctors enrolled in their medical plan. When choosing a Medi-Cal managed care plan, Medi-Cal members must choose one primary care provider who refers patients to see other specialists when needed. Click [here](#) to learn how to enroll in a Medi-Cal managed care plan.

## Do my children automatically qualify for Medi-Cal coverage because I am a former foster youth?

If you have an infant under a year old, your infant is in the same case as you until another Medi-Cal case is established when they turn one year old. Once a Medi-Cal eligibility worker is notified of an eligible infant, they will send a "Newborn Referral" (MC 330) form. The returned MC 330 must be forwarded to your District Office, and once approved your infant will receive coverage under your Medi-Cal plan.

Once the child has turned one year old, another Medi-Cal case must be established. Your child/children do not automatically qualify for Medi-Cal coverage because you are enrolled in the FFY Medi-Cal program.

Your children may qualify for Medi-Cal coverage based on other reasons (for example, based on your income or due to a disability). If you are applying for coverage for your children, you should answer income questions in order to determine if your children qualify for coverage based on your family's income.

## How to Ask for Help Accessing Medi-Cal Benefits

Here are some tips on what to say or do if a county worker doesn't know about the Medi-Cal for FFY program or if you think the worker is giving you wrong information:

- Former foster youth should be enrolled in the Former Foster Care Child (FFCC) coverage group.
- Former foster youth should be assigned the "4M" aid code.
- Former foster youth do NOT have to provide income information. This is because former foster youth get Medi-Cal no matter how much money they make.
- Former foster youth do NOT have to fill out the full Medi-Cal application. Former foster youth can apply using the one-page MC 250A form.
- You DO NOT have to provide proof that you were in foster care at age 18. The county will verify that you were in foster care at age 18 or older.

Contact the Alliance for Children's Rights if you have problems signing up for Medi-Cal for FFY.

Resources: [In Need of Medi-Cal Benefits? Need to Reinstate Your Medi-Cal? | Transitional Age Youth \(tayconnected.com\)](#)