

**NORTH DAKOTA DEPARTMENT OF HUMAN SERVICES
BISMARCK, NORTH DAKOTA
April 29, 2019**

PI 19-12

TO: County Social Services
Regional Supervisors
Division of Juvenile Services
Tribal Social Services
PATH-North Dakota
Lutheran Social Services
Youthworks

FROM: Kelsey Bless, Permanency Administrator

SUBJECT: **Foster Care and Medicaid**

PROGRAMS: Foster Care Maintenance 623-05-45-10
Foster Care Permanency 624-05-50-09 *NEW*

RETENTION: Until manualized

EFFECTIVE: **Immediately**

North Dakota Department of Human Services, Children & Family Services Division in collaboration with ND Medical Services has updated the resource handouts and provided additional policy as it relates to ND foster children aging out of ND foster care and the status of the child's eligibility until the age of 26.

In summary, a small population of ND foster children are placed out of state and if at the time of "aging out" of ND foster care, the foster child is receiving out of state Medicaid coverage; the foster child is ineligible for extended Medicaid to age 26. The department is aware of this small population of clients and will continue to plan to accommodate changes in the future. Unfortunately, the ACA state option cannot be updated until 2023. Until then, foster care case managers must relay up-to-date information to clients regarding the regulations to obtain and maintain Medicaid until the age of 26. A new section of policy was added to the 624-05 Foster Care Permanency manual for foster care case managers.

If you have questions, contact Kelsey Bless at kmbless@nd.gov or 701-328-3581.

Thank you.

~~Medical Services Payment~~ --- ND Medicaid – Eligible Foster Children Eligible for Title XIX 623-05-45-10

~~Medical Assistance~~Medicaid eligibility questions regarding ~~particular~~ foster children should be referred to the county of financial responsibility. If the child is eligible for Title IV-E benefits, this child becomes “categorically” Medicaid eligible. The eligibility worker will authorize ~~the~~ Medicaid coverage accordingly. If the child is not eligible for Title IV-E benefits, a Medicaid determination must be made according to policy set forth by ND ~~Medical Services~~Medicaid eligibility policy. See DN 1475 “Foster Children – Medicaid” for quick reference.

~~It is important to identify and utilize medical service providers who accept ND Medicaid. ND Medical Services policy states all medical procedures and services require prior approval in order for reimbursement to occur.~~ Foster care case managers and foster care providers must inform the medical provider of the foster child's Medicaid eligibility status. Foster children entering placement with a therapeutic/treatment foster care provider must have their Medicaid eligibility determined prior to referral. The treatment (rehabilitation) costs may be paid by Title XIX, or some other resource. Rehabilitation costs CANNOT BE PAID THROUGH FOSTER CARE.

Excess medical expenses billed to the financial county, not reimbursable by Medicaid or other insurance, are not a foster care expense and cannot be paid with foster care funding. It is important case management assist foster care providers in identifying and utilizing medical providers who accept ND Medicaid or who are willing to enroll as ND Medicaid providers.

Medicaid eligibility for young people aging out of ND foster care must meet the requirements of Medicaid eligibility policy in order to obtain and maintain Medicaid until the age of 26. See DN 1476 “Former Foster Youth – Medicaid” for quick reference.

Medicaid Coverage 624-05-50-09 **NEW**

Medicaid eligibility questions regarding foster children should be referred to the county of financial responsibility. If the child is eligible for Title IV-E benefits, this child becomes “categorically” Medicaid eligible. The eligibility worker will authorize Medicaid coverage accordingly. If the child is not eligible for Title IV-E benefits, a Medicaid determination must be made according to policy set forth by ND Medicaid policy. See DN 1475 “Foster Children – Medicaid” for quick reference.

Foster Care Case Managers must know:

1. For each new foster care entry, case managers must complete the SFN 641 TITLE IV-E/TITLE XIX APPLICATION - FOSTER CARE.
2. To inform the child’s foster care provider and medical provider of the foster child's Medicaid ID.
3. If seeking placement with a therapeutic/treatment foster care provider, a child’s Medicaid eligibility must be determined prior to referral.

4. Excess medical expenses billed to the financial county, not reimbursable by Medicaid or other insurance, are not a foster care expense and cannot be paid with foster care funding. It is important case management assist foster care providers in identifying and utilizing medical providers who accept ND Medicaid or who are willing to enroll as ND Medicaid providers.
5. Medicaid eligibility for young people aging out of ND foster care must meet the requirements of Medicaid eligibility policy in order to obtain and maintain Medicaid until the age of 26. See DN 1476 "Former Foster Youth – Medicaid" for quick reference. Most importantly, the child must
 - a. Age out of ND foster care and
 - b. Upon aging out, the child must be also receiving ND Medicaid.

Attachment: DN 1475 "Foster Children – Medicaid"
DN 1476 "Former Foster Youth – Medicaid"