The Affordable Care Act and Former Foster Youth: Questions and Answers

What is the Affordable Care Act (ACA)?
The Patient Protection and Affordable Care Act, also known as the Affordable Care Act or ACA, is the federal health care reform law that President Obama signed on March 23, 2010. This law has provisions to expand coverage, control health care costs and improve health care delivery.

What does it mean?
Beginning in 2014, most Americans will be required to maintain a minimum level of health insurance coverage or pay a tax.

What if someone does not currently have health insurance?
Under the ACA, insurance companies cannot deny insurance to an individual or charge an individual more because of pre-existing conditions.

What is a Federally Facilitated Marketplace?
To facilitate the purchase and sale of qualified health coverage to individuals, the ACA created a Federally Facilitated Marketplace (FFM). States were given the option to run a state-based marketplace or allow the federal government to operate one in their state. Pennsylvania has elected to utilize the FFM, which is supposed to be fully operational by January 1, 2014.

Who is eligible for the former foster care category?
Youth who were in Pennsylvania’s or another state’s foster care system AND were enrolled in Medical Assistance at any time on or after their 18th birthday will be eligible for Medical Assistance coverage until age 26.

How does someone apply for health insurance coverage?
Individuals may apply through COMPASS, Pennsylvania’s online application for health and human services programs, or the FFM.

What about youth who are currently in foster care and are 18 or older?
While still in care, foster youth will continue to receive health care benefits. When current foster youth leave care at age 18 or older, they will be automatically enrolled in the former foster care category once the paperwork verifying the date they left foster care (CY60) is received by the County Assistance Office (CAO) from the County Children and Youth Agency (CCYA). The CY60 will have the permanent address where the former foster youth will be residing. There will be no break in coverage and this process will require no further action from the youth at that time.

What information is needed to complete the application?
Individuals who are not yet age 26 and were in foster care and enrolled in Medical Assistance at any time on or after their 18th birthday will need to complete a full health care application and provide all required documentation, including verification of income, in order to have eligibility determined for health care coverage. Individuals must fully answer the questions on the health care application related to former foster status to ensure they are considered for eligibility under the former foster care category.

This Q&A was produced by the Pennsylvania Department of Public Welfare/Office of Children, Youth and Families. For more information contact Amy Grippi at agrippi@pa.gov.
Why do they require income information?
Coverage under the former foster care category does not require an income or resource test, but income information is used to determine eligibility for other health care categories that are considered before placing an individual in the former foster care category.

What if someone lives in PA now but was in foster care in another state?
Pennsylvania has elected to cover former foster care youth from other states who meet the eligibility requirements. They will need to provide verification of prior placement in foster care, when they left care and if they were receiving medical assistance. Some ways to verify this are prior court orders and/or letters from an official agency.

Who can help a former foster youth get the required documentation?
If a former foster youth needs assistance in obtaining verification of prior placement in foster care and receipt of medical assistance, they should contact the Child Welfare Agency responsible for them while they were in foster care. The CCYA where they currently reside can also be a resource to assist in obtaining the required documentation. It is the applicant's responsibility to obtain this verification, but if the applicant is unable to, the CAO will assist.

When does the health care coverage start?
Coverage under the former foster care category of the ACA becomes effective January 1, 2014. If someone is eligible for any other category, Medical Assistance would start immediately.

What kind of coverage is provided under the former foster care category?
Youth who are between 18 and 21 years of age who receive Medical Assistance under the former foster care category will be eligible for the full range of benefits available to all children under the Medical Assistance program. Individuals age 21 and older who receive Medical Assistance under the former foster care category will qualify for the most comprehensive level of benefits currently offered to adults enrolled in the Medical Assistance program.

Are there copayments?
There are copayments associated with some services for individuals of any age in the former foster care category.

What if someone who is receiving benefits moves to another residence?
If an individual receiving benefits moves to another residence, it is important that they contact their local County Assistance Office (CAO) to update their information. Mail from a CAO cannot be forwarded to a new address and will be returned to the CAO. This could cause coverage and/or benefits to be discontinued if requested documentation or responses are not received.

Is this a one-time application or does one have to re-apply to continue receiving benefits?
All individuals enrolled in the former foster care category will be subject to an annual renewal process used to verify ongoing eligibility. When an individual is due for renewal, the CAO will send a renewal form in the mail that must be completed, signed and submitted to the CAO with required verification, including income and resource information. The renewal form can be completed online using COMPASS in place of completing the paper renewal form provided by the CAO. Failure to complete the renewal form may cause coverage and/or benefits to be discontinued.

Is there someplace online where more information is available?
Information is available now on www.healthcare.gov, the federal information source for those seeking insurance through the FFM. Pennsylvania's information source is located at www.dpw.state.pa.us where there

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is a large ACA information icon. The COMPASS homepage www.compass.state.pa.us will have a hyperlink available that will navigate users to the FFM to “Learn More about the Health Insurance Marketplace.”

**What if someone does not have internet access?**
Individuals without internet access may call the federal hotline at 1-800-318-2596. Individuals may also call the PA Consumer Services Center at 1-866-550-4355 to apply or ask questions.