FOSTERING CONNECTIONS::AFFORDABLE CARE ACT

MAXIMUM AGES - ELIGIBILITY

Question: Both the Fostering Connections to Success Act of 2008 (Fostering Connections) and the Patient Protection and Affordable Care Act of 2010 (the ACA) extend Medicaid receipt to eligible youth beyond age 18. What are the differences between the two laws with respect to Medicaid eligibility for youth over age 18?

Overview of how the laws differ (See side-by-side comparison on second page)

Fostering Connections
- Is a child welfare law
- Adds optional extension eligibility criteria to existing, title IV-E law *
- Gives states the option to extend title IV-E eligibility to ages 19, 20 or 21 to youth who meet certain educational or work requirements.
- Expands Medicaid receipt as Medicaid is mandatory for all title IV-E recipients in all states.
- Affects all three, title IV-E populations: foster care, adoption assistance and guardianship assistance.**
  * States retain the ability to determine that a youth has a mental or physical handicap that warrants continued assistance past age 18.
  ** Although the criteria used to extend eligibility past age 18 may vary among the IV-E populations, the age to which eligibility is extended must be uniform for all IV-E populations.

Affordable Care Act
- Is a medical assistance law
- Created a new, mandatory category of Medicaid eligibility to age 26 for eligible youth who aged out of state or federal foster care and who live in the foster care state
- Expands Medicaid eligibility as Medicaid is now mandatory in the former foster care state for all youth who aged out of the state’s foster care while Medicaid eligible.*
- Gives states the option to extend Medicaid eligibility to age 26 to former foster youth who live outside their foster care state.
- Affects only title IV-E and state-funded former foster youth.
  * States must provide Medicaid to the age of 26 to their own former foster youth who meet the federal criteria and reside in the state. States can elect to provide Medicaid to the age of 26 to other states’ former foster youth who reside in the state.
A CLOSER LOOK AT BOTH LAWS

Fostering Connections

Fostering Connections gives states the option to adopt a broader definition of ‘child’ beyond age 18 in its title IV-E program allowing states to provide title IV-E payments to eligible youth up to age 21. Under this option states can continue to support youth over 18 who are engaged in educational or employment activities or are unable to participate in such an activity to the ages of 19, 20 or 21. Extending eligibility past 18 for any title IV-E category requires extension to the same age for all title IV-E categories.

NOTE: The criteria used to extend eligibility may differ by title IV-E populations.

Title IV-E adoption/guardianship assistance States can expand coverage for youth eligible for title IV-E adoption or guardianship assistance to include youth adopted or placed with a guardian over age 16 who were: a) completing secondary education or an equivalency program; or b) enrolled in a post-secondary institution or vocational education; or c) participating in a program/activity that promotes, or removes barriers to, employment; or d) employed for at least 80 hours per month; or e) incapable of participating in an education or employment activity due to a medical condition.

NOTE: The age to which eligibility is extended must be uniform for all IV-E populations.

How did Fostering Connections affect Medicaid receipt?

If an agreement state, under Fostering Connections, opts to extend title IV-E adoption or guardianship assistance to age 19, 20, or 21 and a youth over age 18 meets the criteria, then all states are obligated to provide Medicaid to the age specified in the title IV-E agreement. Any youth, who holds a current, title IV-E adoption or guardianship assistance agreement is mandatory Medicaid eligible in the state in which they live.

The Affordable Care Act (ACA)

The Affordable Care Act (ACA) created a new, mandatory Medicaid eligibility category specifically for former foster youth. Youth who age out of a state’s foster care system who were Medicaid eligible at that time are Medicaid eligible in the former foster state to the age of 26. The ACA allows young adults to stay on their parent’s health insurance to the age of 26 and this provision for former foster youth is meant to provide health insurance coverage for youth who cannot receive coverage through a parent. The ACA solely applies to the foster care population.

How did the ACA affect Medicaid receipt?

The former foster care state must provide Medicaid to all resident, eligible, former foster youth to the age of 26. All other states have the option of providing Medicaid to resident, former foster youth who aged out from another state’s foster system and meet the criteria.

NOTE: This is a mandatory category of Medicaid eligibility, but is mandatory only for the former, foster care state.

2 http://www.Law.Cornell.Edu/uscode/text/42/673 in addition, states retain the ability to determine that a youth has a mental or physical handicap which warrants continued assistance to age 21.

AAICAMA encourages you share this publication with all interested persons. We invite suggestions, comments and advice.
## Quick Reference

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<td>Medical Assistance (title XIX, Medicaid)</td>
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<td>Mandatory/Optional</td>
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<td>Populations affected</td>
<td>All title IV-E populations: foster care, adoption and guardianship assistance.</td>
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