

## The Expanded Coverage for Former Foster Youth Act of 2023

U.S. Senator Bob Casey

The Affordable Care Act (ACA) extended Medicaid coverage to age 26 for all foster youth who were in foster care on their 18th birthday and were already enrolled in Medicaid. This provision of the law was intended to create parity between these individuals and young adults who can stay on their parent's health insurance until the age of 26 and is mandatory in every state. In 2018, the bipartisan SUPPORT for Patients and Communities Act amended this provision of the ACA so that, since January 1, 2023, Medicaid to 26 has been available to all former foster youth who moved to another state after aging out of the system. Previously, states could choose whether to cover youth who aged out elsewhere.

Despite the progress made through these provisions, former foster youth who enter a grandfamily or kinship caregiving arrangement remain excluded from Medicaid to 26 coverage. Some <u>25,000 children and youth</u> left foster care for legal guardianship in FY2021, and of those, further analysis finds that more than three-quarters (about 19,000) had been living with a relative before that exit to guardianship. The number of foster children and youth living in a relative foster home has steadily increased over the past two decades, with relative foster homes making up <u>35 percent</u> of all foster care placements in 2021.

For that reason, Senator Casey has introduced the Expanded Coverage for Former Foster Youth Act. This legislation will expand Medicaid to 26 coverage to ensure that a greater number of former foster youth are covered. Specifically, it:

- Eliminates the unnecessary loophole that these youth must be enrolled in Medicaid while they were in the system to qualify for Medicaid to 26;
- Expands eligibility for Medicaid to 26 coverage to former foster youth who were in the system, but left for a legal guardianship with a kinship caregiver;
- Expands eligibility for Medicaid to 26 to former foster youth who emancipate from foster care prior to turning 18; and
- Requires state Medicaid programs to work with state child welfare agencies to establish outreach and enrollment programs for this coverage. These outreach programs will be run in accordance with best practices established by HHS.