Ensuring access to health care for all children in foster care

Issues:

- Most children in foster and kinship care qualify for Medical Assistance, Minnesota’s Medicaid program. But requirements for applying for and renewing coverage can lead to gaps or loss of coverage. These barriers cause some children with physical and mental health needs to go without immediate access to health care.
- Right now, fewer than half the children in foster care are enrolled automatically in Medical Assistance – only those who receive Title IV-E federal funding. While almost all of Minnesota’s foster care children are served by Medical Assistance, only 44 percent\(^1\) of children in foster care and 31 percent of children in kinship care qualify for Title IV-E funding and are enrolled automatically.
- The number of children eligible for Title IV-E funding will continue to decrease over time because eligibility is tied to outdated income limits established in 1986.

Proposal:

- Governor Tim Walz proposes automatic enrollment in Medical Assistance for all children in foster care and kinship care, whether or not they receive Title IV-E benefits.

Benefits:

- Establishes automatic Medicaid eligibility for children in foster care and kinship care, removing barriers to health care, helping to reduce disparities and improving equity.
- Removes the paperwork of applying for or renewing coverage for foster care and kinship care families.
- Removes administrative burden for county workers, saving time and associated costs.
- Aligns eligibility requirements for foster care and kinship care and can be implemented quickly. Within a year, all children receiving state-funded Northstar Foster Care or Kinship Care will be enrolled in Medical Assistance.

\(^1\) Minnesota Department of Human Services, Fiscal Reporting and Accounting, Title IV-E Ratios – Child Count Details, 07/25/2018

www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=Fiscal_Reporting#titleiv

mn.gov/dhs
**Fiscal impact:**

- $363,000 in FY 2020-21
- $1.76 million in FY 2022-23

**Related information:**

- Revised Governor’s Budget Recommendations for FY 2020-21:

*DHS Communications: March 2019*