



DIVISION OF MEDICAL SERVICES PROVIDER BULLETIN

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COVERAGE FOR FORMER FOSTER CARE YOUTH

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COVERAGE FOR FORMER FOSTER CARE YOUTH

The 2007 legislative session ended with the passage of Senate Bill 577, The Missouri Health Improvement Act of 2007. Among its many provisions, it extends healthcare coverage for former foster care youth.

Effective July 2, 2007, Senate Bill 577 extended healthcare coverage for all former foster care youth who were in the Children's Division legal custody on their 18th birthday, were released from jurisdiction, and have not yet reached their 21st birthday.

Coverage is automatically available to eligible youth age 18-21 years if they were a former foster care youth and were in the custody of the Children's Division on their 18th birthday and have not turned age 21. This means that they have medical and behavioral health care coverage. Former foster care youth should contact their local Children's Division office to request a MC+ card.

Former foster care youth have been assigned a Medical Eligibility (ME) code of 38 under which healthcare coverage will be provided. ME Code 38 recipients will be treated the same as state custody children (group 4). Similar to coverage youth received while in foster care, individuals under ME code 38 will be required to enroll into a Managed Care Health Plan for their physical healthcare, if they reside in a Managed Care Region, while their behavioral healthcare will be provided on a fee-for-service basis. All behavioral health services will be paid fee for service, even if the recipient is enrolled in a Managed Health Care Plan for medical coverage.

Behavioral healthcare for this population will not require a prior authorization at this time for most services. Family Therapy without the Patient Present, 90846 always requires PA, regardless of the recipient's ME code.

Provider Bulletins are available on the DMS Web site at <http://dss.mo.gov/dms/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

Missouri Medicaid News: Providers and other interested parties are urged to go to the DMS Web site at <http://dss.missouri.gov/dms/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official Missouri Medicaid communications via E-mail.

MC+ Managed Care: The information contained in this bulletin applies to coverage for:

- MC+ Fee-for-Service
- Medicaid Fee-for-Service
- Services not included in MC+ Managed Care

Questions regarding MC+ Managed Care benefits should be directed to the patient's MC+ Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the red MC+ card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One.

Provider Communications Hotline
573-751-2896

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