

Maurita Johnson, Deputy Director
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Number: CW-IM-13-005
Issue date: 11/15/13

Topic: Medical Benefits

Subject: Former Foster Care Youth Medical Program replaces Chafee Medical

Applies to (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Health Services |
| <input type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental |
| <input checked="" type="checkbox"/> Children, Adults and Families | Disabilities Services (ODDS) |
| <input type="checkbox"/> County DD Program Managers | <input checked="" type="checkbox"/> Other (<i>please specify</i>): Tribes, ILP
Providers, Homeless & Runaway |

Message:

The Chafee Medical Program, providing medical coverage for former State of Oregon foster youth up to age 21, will sunset over the next year. No additional Chafee Medical Referrals will be accepted after December 31, 2013. The new Former Foster Care Youth (FFCY) Medical will replace Chafee Medical as of January 1, 2014 (or as youth on Chafee Medical come up for renewal). To qualify, the former foster youth must have received foster care medical when they turned age 18.

What this means for Child Welfare offices

The Child Welfare branch will need to determine the best practice for ensuring youth leaving foster care obtain a referral for the appropriate Medical Program.

- The [Chafee Medical Program Referral](#) form will continue to be available until December 31, 2013;
- For youth ages 18 to 20, the [Former Foster Care Youth Medical Referral](#) form may be used beginning December 1, for any youth exiting care during the month of December .
- For any youth who may have exited care at age 18 and are not yet age 21, AND did NOT complete the Chafee Medical Referral, have the youth contact the ILP Fiscal Assistant at 503-945-6619 for assistance.

- For young adults who have aged off Chafee Medical (turned age 21 or older, but are not yet 26), the [Former Foster Care Youth Medical Program Referral](#) form may be completed immediately for coverage effective January 1, 2014.
- The caseworker and youth will complete the medical referral form, ensuring the mailing address is an address that will accept mail on behalf of the young adult for up to 90 days from submission.
- E-mail the Referrals to: 5503, CaseTransfers (5503.casetransfers@dhsosha.state.or.us).

For Questions contact:

OHP Customer Service Line at 1-800-699-9075

If you have any questions about this information, contact:

Contact(s):	Valerie Rux or Rosemary Iavenditti		
Phone:	503-945-6654 or 503-945-5688	Fax:	503-945-6969
Email:	Valerie.rux@state.or.us or Rosemary.iavenditti@state.or.us		