



12 Months of Continuous Medicaid Coverage

Foster Care Medicaid (FSTMA) describes all types of Medicaid provided by the Department of Children and Families (DCF). It is sometimes referred to as Title XIX Medicaid or “straight MA.” Children and youth who receive Foster Care Medicaid include those placed in out-of-home care through a court order and those who have an active Adoption Assistance or Subsidized Guardianship Agreement.

The Consolidated Appropriations Act, 2023, requires states to provide 12 months of continuous coverage for most children under age 19 in Medicaid and CHIP, effective January 1, 2024. This applies to FSTMA recipients.

Effective January 2024, children up to age 19 will receive continuous FSTMA coverage for the duration of their existing 12-month enrollment period, even if they leave care or their agreement terminates.

This means that all children under the age of 19 will receive at least 3 and up to 12 months of additional FSTMA coverage after discharge from out-of-home care or termination of an agreement. Their FSTMA coverage will remain active until whichever comes later:

- The end of their current 12-month enrollment period
- Three months after their placement or agreement ends

Children who are 19 or older will continue to receive the 3-month grace period but are not eligible for the additional coverage of up to 12 months.

The only exceptions to this rule are if the child dies, moves out of state, or if the family voluntarily requests disenrollment.

Identifying Foster Care Medicaid End Date

ForwardHealth will send an advance notice of termination of FSTMA coverage 60 to 90 days ahead of the actual coverage end date to the last address on file for the child. Because that address is not always accurate/current and to give families more notice whenever possible, it is best practice for child welfare professionals to inform families of the FSTMA end date as soon as the child leaves out-of-home care or when their Adoption Assistance or Subsidized Guardianship Agreement is terminated.

After the child’s placement is closed or their agreement is terminated and it is approved by a supervisor within eWisACWIS, the Medicaid Eligibility Determination tab is automatically updated with the newly calculated end date. To find this date:

1. Open the Medicaid Eligibility Determination tab.
2. Under the Medicaid History section, find the most recently created (top) row (action titled cancel) and click the “Edit” hyperlink on the far right.
3. The new end date for FSTMA coverage is listed as the “Certification To” date. It will be a date 3 to 12 months in the future.

Certification From:	<input type="text"/>	Certification To:	<input type="text"/>
MCI ID:	<input type="text"/>	<input type="checkbox"/> Temporary Number	
Cancel Date:	<input type="text"/>		

Please share this date with the family and encourage them to save the information somewhere in case the notice from ForwardHealth fails to arrive.

For more information about continuous coverage, visit dhs.wi.gov/medicaid/children.htm.

The Department of Children and Families is an equal opportunity employer and service provider. If you have a disability and need to access services, receive information in an alternate format, or need information translated to another language, please call the Division of Safety & Permanence at 608-266-8787. Individuals who are deaf, hard of hearing, deaf-blind or speech disabled can use the free Wisconsin Relay Service (WRS) – 711 to contact the department.