

MEDICAL AND MENTAL HEALTH CARE FOR FOSTER YOUTH

Physical (including immunizations), dental, vision, behavioral health, prescription drugs, and long term services and supports for children in foster care are covered by Superior HealthPlan Network, contracted by HHSC to administer the STAR Health program.

Eligibility:

- All children in DFPS conservatorship and young adults in extended foster care or those young adults who have returned to extended foster care, up to age 22. [Tex. Fam. Code § 264.101\(a-1\)](#); [Tex. Fam. Code § 264.101\(a-2\)](#)
- All youth who turned 18 in foster care and received healthcare through Medicaid (STAR Health or other), but who did not return to extended foster care, are covered under STAR Health under the Affordable Care Act up to Age 21, and STAR or STAR+PLUS Medicaid up to age 26. [Affordable Care Act PL 111-148](#)
 - Former foster care children who are under the age of 21, but who are not eligible for the FFCC program because the youth did not receive Medicaid at the time he/she aged out of care, receive coverage through the Medicaid for Transitioning Youth (MTFCY) program if they do not have other healthcare coverage and meet program rules for income.

Information Required in DFPS Permanency Review Hearing Court Reports:

- Nature of any emergency medical care provided to child and circumstances necessitating care, include injury or acute illness of child.
- All medical and mental health treatment child is receiving and child's progress with treatment (this includes ANY physical, dental, vision, mental health issues, and long-term services and supports).
- Any medication prescribed for child, condition, diagnosis, and symptoms for which medication was prescribed, and child's progress with medication.
- For child receiving psychotropic medication:
 - Any psychosocial therapies, behavior strategies, or other nonpharmacological interventions provided to child; and
 - The child has seen or is seeing his/her prescribing physician, physician assistant or advanced practice nurse every 90 days.
- Degree to which child or foster care provider complied or failed to comply with any plan of medical treatment for child.
- Any adverse reaction to, or side effects of, any medical treatment provided to child.
- Any specific medical condition of child diagnosed or for which tests are being conducted to make diagnosis.
- Any activity child should avoid or engage in that might impact effectiveness of treatment, including physical activities, other medications, and diet.
- Other info required by DFPS or rule of court. [Tex. Fam. Code § 266.007](#)

Additional Requirements that Courts Should Monitor:

- Child has been provided the opportunity to comment on the medical care being provided. [Tex. Fam. Code § 266.007](#)
- DFPS has provided any parent who retains rights notice of initial prescriptions or changes in dosage. [Tex. Fam. Code § 264.018](#)

- Each AAL and GAL has reviewed the medical care. [Tex. Fam. Code § 107.002 \(b-1\)](#); [Tex. Fam. Code § 107.003\(b\)\(1\)](#)
- Each AAL and GAL has elicited from client his/her view on the medical care being provided. [Tex. Fam. Code § 107.003\(b\)\(2\)](#); [Tex. Fam. Code § 107.003\(b\)\(2\)](#)
- AAL has advised youth 16 and older of the right to request medical consent designation from the court. [Tex. Fam. Code § 107.003\(b\)\(3\)](#)
- Child received initial comprehensive, preventive Texas Health Steps medical checkup within 30 days of entering conservatorship
- Child received medical 3-Day medical examination by the end of the third business day after the child is removed from the child's home. [Tex. Fam. Code § 264.1076](#)
- Child received a Texas Child and Adolescent Needs and Strengths (CANS) 2.0 behavioral health assessment within 30 days of entering conservatorship if aged 3-17 years.