

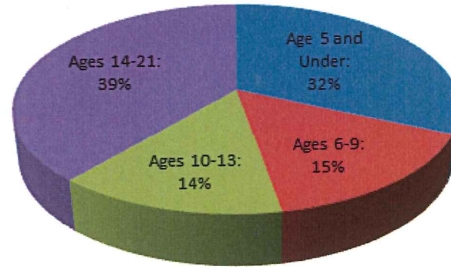
At present there are approximately **21,590 children and youth in foster care in New York State** (including JDs and PINS in private agency placement), and roughly **30,000 children and youth pass through the system each year**. Since the 1990s, the number of children and youth in foster care has been reduced by two-thirds, from a high of 65,000.

Who are foster children?

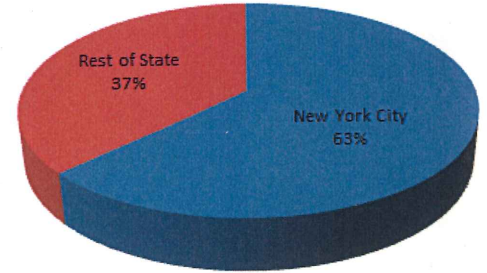
Foster children have been removed from their families with the approval of a Family Court judge and placed in the legal custody of a local social services commissioner. The vast majority have been abused or seriously neglected. Some foster children have been placed in care as "persons in need of supervision" (i.e., PINS) or as juvenile delinquents (JDs), many of whom have a history of child abuse and neglect as well. Others are in care because their parents have relinquished custody.

The majority of children and youth in foster care are under the age of 5 or over the age of 14. The majority of foster children and youth originate from NYC.

Children & Youth in Foster Care: By Age

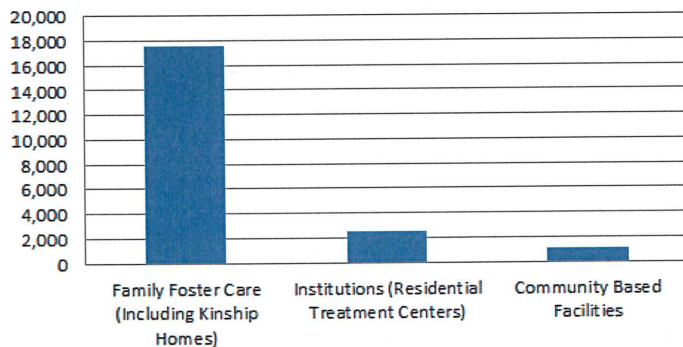


Children & Youth in Foster Care: By Location



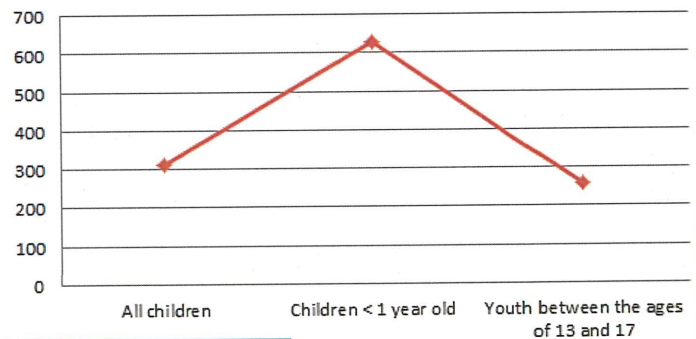
17,000 children and youth in foster care are placed in family foster care (including kinship homes).

Children & Youth in Foster Care: By Placement



All foster children and youth are in care for close to one year. Length of stay in New York City is longer than in the rest of the State, with a median duration of 334 days versus 290 days.

Median Length of Stay in Foster Care (In Days)



50% of foster care children and youth have more than 1 placement in their lifetime.

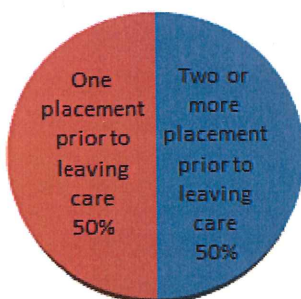
Children and youth enter foster care with a host of problems that impact their health and require specialized treatments. The impact of the trauma these children and youth have experienced is profound.

Reasons for Exit From Foster Care

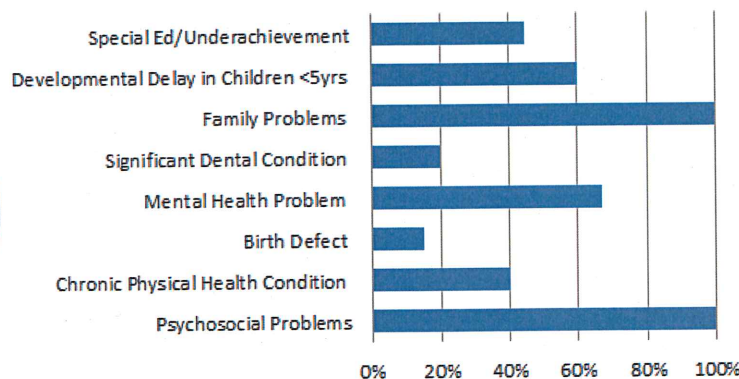
When children leave foster care, about 60% are reunified with their parents or other relatives. Reunification rates are highest for older children and lowest for the youngest children. Overall, about 10% of children are adopted following their first placement in out-of-home care.

Foster Care Re-Entry Among children who are either reunited with parents or are discharged to the care of relatives, the re-entry rate is 22%. Among young teenagers, there is a 1 in 3 chance that reunification with family will be followed by a return to foster care. About 1/3 of all children who re-enter care do so within 90 days of discharge.

Placement Stability



Select Problems at Entry into Foster Care



Move to Managed Care

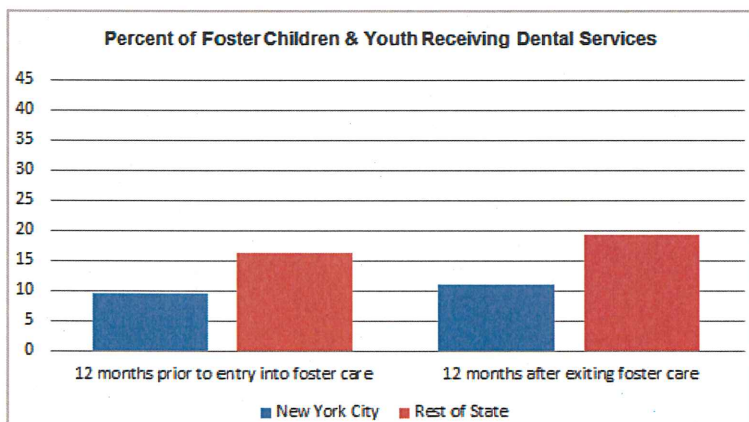
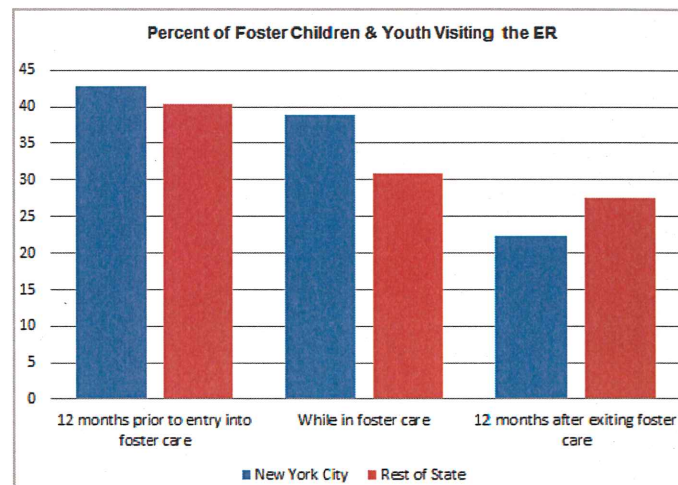
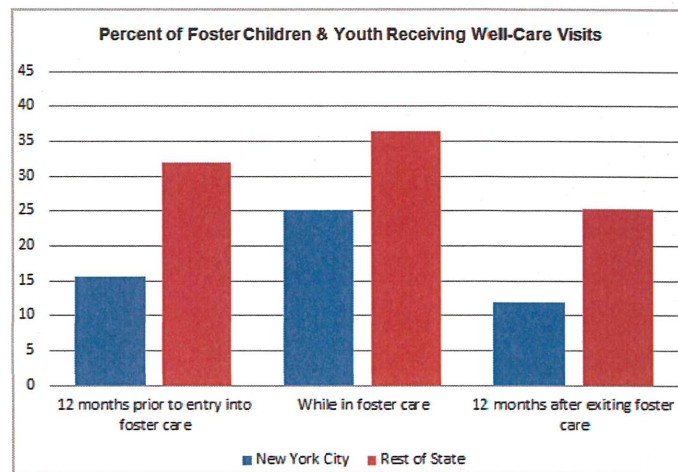
In 2011, the New York State's Medicaid Redesign Team (MRT) concluded that all children and adolescents in foster care should be enrolled in Medicaid managed care. In the fall of 2012, the New York State Health Foundation awarded a grant to the Council of Family and Child Caring Agencies (COFCCA) to convene key stakeholders to develop recommendations for integrating foster children and youth into managed care (see recommendations below). The final report, **Raising the Bar for Health and Mental Health Services for**

Children in Foster Care: Developing a Model for Managed Care

can be found on the COFCCA website at: <http://www.cofcca.org/current-newstrending-now/1384>.

Service Utilization Patterns and Expenditures

The report also contains an analysis of an extensive, multi-year dataset provided by the State that gave a comprehensive profile of a cohort of children and youth in the foster care system, as well as historical Medicaid health care utilization and expenditure patterns before, during, and after this cohort was in foster care. The graphs on this page demonstrate findings of the comprehensive review of this dataset.



Taking these service utilization patterns into consideration, the transition of children and youth in foster care into managed care must encompass a robust effort to address the underlying problems that currently drive high utilization and costs and poor health and mental health outcomes. Merely enrolling these children and youth into a managed care plan will not, in and of itself, generate the results that the State and its policymakers seek.

Recommendations

Transition foster care children into managed care plans ● Provide intensive medical and behavioral health care management ● Implement quality performance standards designed to enhance the coordination and integration of care ● Develop a specialized network of health care providers to address foster children's unique needs ● Encourage the adoption of IT systems that ensure health care information is readily available to the health care providers and child welfare agencies. Child welfare agencies, in particular, must be sufficiently prepared to participate in the transition ● Ensure that managed care organizations employ staff and understand the unique needs of children in foster care, meet the needs of the foster care system, and ensure that children's needs are met quickly.

The Council of Family and Child Caring Agencies (COFCCA) is the principal representative for nearly all the not-for-profit organizations providing foster care, adoption, family preservation, juvenile justice and special education services in New York State. COFCCA is comprised of over 100 member organizations, ranging in size from small community based programs to the nation's largest multi-services agencies — all of which share the mission of serving children and families. COFCCA works with its members and government to ensure quality services for our most vulnerable children — children who have suffered abuse and abandonment and children at-risk.