



Medicaid for Children

Fourth of a four part series on Indiana's Medicaid Waiver Program

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Your child has been targeted for one of the DD waivers which include the Family Support Waiver (FSW) and the Community Integration and Habilitation Waiver (CIHW). Before waiver services can start, your child needs to have active Medicaid because the Medicaid helps pay for the waiver services.

Medicaid is public health insurance. It is administered through the Division of Family Resources (DFR). Since Medicaid is needed for your child to receive waiver services, your child will have Medicaid as a health insurance once eligibility is determined. If your family has a private health insurance policy, Medicaid will serve as a secondary health insurance. It covers many of the same things as your private insurance policy including medical, dental, vision, and therapies. Medicaid is likely to cover durable medical equipment such as incontinent supplies that your private insurance may not.

Financial Eligibility

If your family is already receiving Medicaid services, the Medicaid case worker will ensure that your child's Medicaid is compatible with the waiver. There are many types of Medicaid and not all of them can be used to help pay for waiver services. If your child has a type of Medicaid that does not work with the waiver, a new Medicaid application may be needed. If your child is receiving Medicaid services through a managed care entity, your child will be automatically disenrolled from managed care. A child cannot be in Medicaid managed care and receive waiver services.

If your family is within the income guidelines for Medicaid, but you have never applied, your income and resources will be used to determine your child's eligibility for Medicaid. Your Medicaid case worker will review the income guidelines with you. It typically takes 30-45 days to process the Medicaid application.

If your family is over the income guidelines for Medicaid, there are *Special Waiver Rules* that allow parental income not to be counted beginning with the month that your child was approved for the waiver. Your child still needs to meet the financial eligibility which means having income of less than \$2163 per month and resources of under \$2000. Resources include checking, savings, CDs, stocks, or bonds in your child's name or ownership of a life insurance policy. In order for the Special Waiver Rules to be applied, your child needs to be found eligible for Medicaid for the Disabled. Essentially, your child's disability needs to be significant enough that he would qualify for Social Security Disability benefits. It typically takes up to 90 days to process a Medicaid for the Disabled application.

Application

You can file an application for Medicaid online at www.ifcem.com, at a local Division of Family Resource office, or by calling 1-800-403-0864. If you receive Case Management services from IPMG, the Medicaid Manager will assist you with filing the application. The application asks questions about household membership, income, and resources. If you are uncertain how to answer some questions, it is okay to leave them blank. Only the yellow asterisk questions have to be answered. You do, however, want to make sure that you designate that your child has a disability and that your child has been approved for the waiver by answering those questions within the application.

Interview

Once the application is completed, a Division of Family Resource case worker will contact you by phone or mail to schedule an interview. The interview can be completed in person at the local DFR office or over the phone. You will want to have income, resource, and disability related information available for the interview.

If you are over income for Medicaid, parental income needs to be verbally reported so that the Medicaid case worker can determine that they need to process the application for Medicaid for the Disabled. The Special Waiver Rules state that if you request Medicaid for the Disabled to coincide with the Waiver start date, you are not required to provide any information regarding parental income and resources. The waiver start date is the approval date of your first waiver budget submitted by your Waiver Case Manager.

For Medicaid for the Disabled, the Medicaid case worker will also ask you questions about your child's disability. The case worker will ask you questions about the disability, the impact that it has on your child, and how it is treated. The case worker will ask you to sign medical releases for your child's doctors. Although the case worker will request records, you would want to turn in the disability related documents that you have which may include the Level of Care Screening completed by the BDDS Service Coordinator, IEP, and/or school psychological evaluation.

Documentation

Following the interview, you will receive a list of documents that need to be turned in to the Division of Family Resources. Documents that are typically requested include a copy of your child's birth certificate, a copy of the front and back of your private insurance card, and a copy of your child's picture ID if available, as well as documentation of any income or resources in your child's name. Every time you turn in documentation to the Division of Family Resources for Medicaid, you will want to call them at 1-800-403-0864 three to four days after it was submitted to ensure that it was received.

Disability Determination

Once the disability related records are received, your child's Medicaid file will be given to the Medical Review Team (MRT). MRT reviews the file to ensure that the documentation of disability in place

meets the state's guidelines for disability. If MRT does not find sufficient records, they may request additional records and/or testing. MRT is essentially the last step in the process.

Medicaid Notification

Once eligibility is determined, you will receive written notice from the Division of Family Resources. If denied, a new application will need to be submitted or the decision appealed. If approved, you should receive your child's Medicaid within a couple of weeks of the eligibility notice. Once Medicaid is active, your child's waiver services can start.

Resources:

[Indiana Family and Social Services](#)

[DDRS Waiver Manual](#)

[IPMG Handbook for Individuals Served](#)

[IPMG Handbook for Individuals Served \(Spanish\)](#)

[IPMG Medicaid Waiver FAQs](#)