

MA, CHIP & Waivers Segments

Introduction

1. What is CHIP and Who is Eligible?
2. Eligibility for MA
3. Meeting the SSI Criteria
4. Using MA to Pay for Healthcare Services
5. Using MA to Pay for Behavioral Health Services
6. Coordination with Special Education
7. Private Insurance Coordination
8. Waivers & Services for Transitioning Youth
9. How to Appeal a Denial

1

Introduction

Welcome to Medical Assistance, CHIP and Waivers for Children & Adolescents: *Using Public Insurance to Get Services & Supports You Need*



David Gates, Esq.
PA Health Law Project

Family to Family Health Information Center
a project of the PEAL Center

2

About the PEAL* Center

* Parent Education & Advocacy Leadership Center

- PEAL Center can help with:
 - Education questions & information on resources
 - Workshops and trainings in your area & webinars
 - Health care and community services
 - Newsletter, website & eblast calendar of events
 - Annual statewide conference
- **CONTACT US** - services are free
 - 412 281-4404 Pittsburgh Area
 - 866-950-1040 Toll Free
 - 412 281-4409 TTY
 - 412 281-2208 FAX
 - info@pealcenter.org

3

PA Health Law Project



- Free legal advice regarding:
 - Medical Assistance eligibility
 - Services under Medical Assistance & CHIP
 - Physical & Behavior health
 - Appeals
 - Home & Community Based Waivers
 - Consolidated & PFDS MR waiver
 - Adult Waivers
 - Self-directed/family directed services
- 1-800-274-3258 www.phlp.org

4

CHAPTER 1

What is CHIP and Who is Eligible?



David Gates, Esq.
PA Health Law Project

Family to Family Health Information Center
a project of the PEAL Center

5

What is CHIP & Who's Eligible

- Free or low cost health insurance for uninsured children w/o disabilities & not otherwise eligible for Medical Assistance
- Family has choice of insurance company
- Child must be resident of PA + US citizen or US National or lawfully residing in the US
- No income limit but income determines amount family must pay towards premium & copays. See chart next slide.
- Income of entire household considered.

6

CHIP- What it covers- cont.

- Substance abuse treatment
- Dental
- Eye exams & glasses
- What's NOT covered:
 - Medical supplies except for diabetes
 - BHRS (wraparound)

10

CHAPTER 2

Eligibility for Medical Assistance for Children & Adolescents



David Gates, Esq.
PA Health Law Project

Family to Family Health Information Center
a project of the PEAL Center

11

What is Medical Assistance

- Medical Assistance provides 2 types of coverage:
 - Medical (physical health & meds) + Behavioral health
- Available to children with significant disabilities regardless of parental income
- Coverage for wide range of medical & behavioral services beyond coverage of many insurance policies
- Medical Services include in-home nursing/home health aide; medical equipment & supplies (including diapers); certain nutritional supplements
- Behavioral health services include wraparound ("BHRS") Family Based Therapy, Residential Treatment Facilities, Partial Hospital Programs & therapeutic summer camps

12

Medical Assistance: Eligibility under 18

- Low family income- child w/o disabilities or serious medical problems
- SSI Program- Cash from SSA + MA. Child must meet SSA disability criteria + low family income & assets (parental income counted until age 18)
- PH 95 aka Loophole – child meets SSA disability criteria but parental income & assets of parents & child don't count, no cash payment
- Undocumented immigrant- emergency assistance only covers treatment for specific medical emergency & for limited time period

See SALMON "Issues
Regarding MA Eligibility..."

13

Medical Assistance: Financially Needy Families

- For families whose children do NOT have serious disabilities or serious medical conditions or cannot adequately document those disabilities or conditions
- Income of custodial parent(s) counts.
- Income limits vary depending on age of child
- Resources do not count for MA if family has at least 1 child under 21
- Parent(s) may also qualify but, except for pregnant women, income limits for them are lower

14

Medical Assistance Eligibility: 18 and over

- Parental income doesn't count, but
 - Income of 18+ year old counts
 - Income limit is federal poverty level but portions of some kinds of income are disregarded
- AND
- Has disability or medical condition that meets or equals Adult SSA disability criteria

15

CHAPTER 3

Medical Assistance for Children & Youth with Disabilities



David Gates, Esq.
PA Health Law Project

Family to Family Health Information Center
a project of the PEAL Center

16

Medical Assistance through SSI

- o Get monthly cash benefit + Medical Assistance
 - o Child under 18
 - o Child must meet SSA child disability or medical condition criteria
 - o Parent's & child's income & resources count
 - o Apply at Social Security Office
- See www.ssa.gov

17

Medical Assistance for Child w/ Disability: PH 95 "Loophole"

- For children ineligible for SSI due to parental income/assets
- Child's disability/medical condition meets or equals the SSA disability criteria for children
- Parental income & assets do not count
- Some income of child does count
- Child's Social Security benefits do not count
- Court ordered child support does not count
- Get MA only
- Apply at County Assistance Office or online (www.compass.state.pa.us)

See BLUE Healthcare Law Project
"Getting MA for a Child..."

18

SSA Disability Criteria

- Meet Social Security disability criteria
 - Birth to 18: Social Security criteria for children- "Listing of Impairments"
 - Age 18+: Social Security criteria for adults
 - Criteria at <http://www.socialsecurity.gov/disability/professionals/bluebook/listing-impairments.htm>

19

SSA Disability Criteria birth to 18

- Childhood "listing of impairments" (under 18)
 - <http://www.ssa.gov/disability/professionals/bluebook/ChildhoodListings.htm>
- Functional limitations key- not just diagnosis
- Having an IEP not enough
- Standards vary depending on body system effected
 - MR & autism listed under 112-Mental Disorders

20

SSI Childhood Listing of Impairments

- Growth Impairment, 100.00
- Musculoskeletal System, 101.00
- Special Senses & Speech, 102.00
- Respiratory System, 103.00
- Cardiovascular System, 104.00
- Digestive System, 105.00
- Genitourinary system 106.00
- Hematological Disorder 107.00



21

SSI Childhood Listing of Impairments cont'd

- Skin Disorders, 108.00
- Endocrine System, 109.00
- Impairments that Affect Multiple Body Systems, 110.00
- Neurological, 111.00
- Mental Disorders, 112.00
- Malignant Neoplastic Disorders, 113.00
- Immune System Disorders, 114.00

<http://www.ssa.gov/disability/professionals/bluebook/ChildhoodListings.htm>



22

MA Disability Determination

- PH 95 Loophole – County Assistance Office can make “presumptive” disability determination so MA can be authorized while full disability determination is pending
- **You should appeal if MA or SSA says child not disabled**
 - Can't get MA under PH95 if SSI denied on lack of disability (denial based on parental income is ok)

23

Disability Determination

- Documentation by treating physician/psychologist critical
 - Should detail medical/behavioral conditions + how they affect child's functioning
 - Parent should assist doctor with content
- Tests, evals, hospital & school records also important

24

Behavioral Disability Standard

- Functional impairment is key
 - IEP not enough
 - Diagnosis not enough
- “Marked limitation” in at least 2 areas:
 - Cognitive/communicative functioning
 - Social Functioning
 - Personal functioning
 - Concentration, persistence & pace

25

CHAPTER 4

Using MA to Pay for Healthcare Services



David Gates, Esq.
PA Health Law Project

Family to Family Health Information Center
a project of the PEAL Center

26

Medical Assistance Services

- Physical
 - Hospital, physician, diagnostic tests, Rx, PT, OT, Speech, DME, medical supplies, “shift nursing”, home health aides, personal care services (may be family-directed)
- Behavioral Health
 - Inpatient psych, partial, outpatient, BHRS (wraparound), family based, RTF, therapeutic camps
- Services must be “medically necessary”

27

EPSDT

Early & Periodic Screening, Diagnosis & Treatment

- Pennsylvania Medical Assistance must cover all healthcare services for children birth to 21 that are allowed under federal Medicaid law for children on MA are required services. However, some of these services stop at age 21. Examples are:
 - In-home nursing & home health aides for more than 1 hour a day
 - BHRS (wraparound), family based therapy

28

Medical Necessity

- Determined by information provided by individual's family & prescribing doctor
- Standards- meeting any one of these 3 is sufficient:
 - 1) Service/benefit will, or reasonably expected to, prevent onset of illness, condition, disability
 - 2) Service/benefit will reduce or ameliorate physical, mental, **development effects** of illness, condition, injury or disability
 - 3) Service/benefit will assist individual to achieve or **maintain** maximum functional capacity in performing daily activities, taking into account both the functional capacity of the individual and those functional capacities that are appropriate for individuals of the same age.

29

Writing Letter of Medical Necessity

- Must come from prescribing doctor
- List diagnoses & how they impair function
- Parent should assist by providing details to doc on child's functional limitations
- How will treatment/device treat the condition or improve or maintain function?
- Will child be able to use the prescribed device/equipment?
- Why are less costly alternatives not appropriate?

30

Physical- Health Choices HMOs

- Must enroll in HMO if in counties below-even if child has other insurance- unless child is in HIPP (where state pays for private insurance)

Adams	Bucks	Delaware	Lawrence	Perry
Allegheny	Butler	Fayette	Lebanon	Philadelphia
Armstrong	Chester	Greene	Lehigh	Washington
Beaver	Cumberland	Indiana	Montgomery	Westmoreland
Berks	Dauphin	Lancaster	Northampton	York

- HMO covers physical health services
- Covers Rx as long as drug on formulary
- Must use network providers (unless exception)

31

Physical: Access Plus- Fee for Service

- For persons not in previous counties
- Select participating Primary Care Practice
- Obtain referral from PCP for specialty care and tests
- Can go to any provider that accepts MA

32

Family directed personal care

- For families having problems getting home health aides to fill authorized hours
- Family can request authorization to recruit & hire their own aides (including adult siblings) rather than go through home health agency
- Salary can be higher because of lower admin costs
- Request through Special Needs Units
- Call PHLP @ 800-274-3258 for assistance

33

CHAPTER 5

Using MA to Pay for Behavioral Health Services



David Gates, Esq.
PA Health Law Project

Family to Family Health Information Center
a project of the PEAL Center

34

Behavioral Health

- Administered through Behavioral Health Managed Care Organizations
 - CBH (Phila only); CBHNP; CCBH; Magellan or Value
- For adults & kids, covers:
 - Inpatient psychiatric hospitalization
 - Partial hospitalization
 - Outpatient counseling
 - Psychiatric med reviews
 - casemanagement

35

Behavioral Health (cont.)

- For under 21, also covers:
 - BHRS ("wraparound")
 - TSS, Mobile Therapy & BSC
 - RTF (Residential Treatment Facility)
 - CRR Host Home (therapy + host home)
 - STAP (therapeutic summer camps)
 - Transportation through MATP
 - Family based (including FSS- respite)
 - Local specialty programs as approved by Behavioral Health Managed Care Organization

36

Behavioral Health (cont.)

- Limited Family Support Services & respite through County Base Service Units
- Local programs through Reinvestment \$
 - Determined by the counties with state approval
 - May include
 - Afterschool programs
 - Specialized programs for autism

37

Behavioral Health (cont.)

- Accessing services- under 21
 - Psych eval or addendum
 - Treatment plan
 - Interagency Service Planning Team meeting
 - Packet submitted by provider to BHMCO
 - Written authorization/denial by BHMCO
 - New psych eval & ISPT meeting required every 4 months for BHRS except for kids with autism/pdd diagnosis for whom psychologist can request 12 months.

38

CHAPTER 6

Coordination with Special Education



David Gates, Esq.
PA Health Law Project

Family to Family Health Information Center
a project of the PEAL Center

39

Early Intervention

- Medical Assistance funding used to supplement regular Early Intervention funding through the “Early Intervention Waiver”
- Applies to children birth to 3 in Early Intervention with 50% developmental delay in 1 area or 33% in two or more areas
- Services determined by child’s IFSP- no extra services from waiver

40

Coordination with Special Education: School Based Access Program

- Medical Assistance funding used to provide additional funding to school districts for Special Ed services
- School district decides whether it will participate.
- Student’s services determined by IEP- no entitlement to additional services from Program but school district may be more willing to offer services for which they will receive additional funds under the Program

41

School Based Access Program cont.

- School district or IU can bill certain services on student’s IEP to MA through Program contractor (Leader Services) and receives partial reimbursement (the federal match to Medical Assistance)
- Services billed to MA through Program do not affect or limit coverage by regular MA for services outside of school

42

CHAPTER 7

Private Insurance Coordination



David Gates, Esq.
PA Health Law Project

Family to Family Health Information Center
a project of the PEAL Center

43

Private Insurance & MA

- Medical Assistance is secondary coverage if child has other coverage
- If private insurance covers prescribed service, must use provider that accepts that private insurance because MA cannot pay provider unless they also accept the private insurance
- If provider also accepts MA (or MA-HMO), cannot bill family for copays or deductibles imposed under the private insurance

44

Coordination with Health Insurance Premium Payment Program "HIPP"

- MA may pay premium to add child to parent's policy- Called "HIPP"
- If sent HIPP questionnaire, must fill it out or else could lose MA
- If chosen for HIPP, parent effectively gets pay raise as premium for child's coverage no longer deducted from pay check.
- If chosen, child is disenrolled from HMO but keeps "fee for service" MA
- Call 1-800-644-7730 for more info

45

Autism & Insurance (Act 62)

- Certain insurance policies cover autism services including BHRS
 - Not including "self insured" policies
 - Not including out of state policies
 - Not including policies covering less than 51 employees
- If Act 62 applies, family must use provider that accepts child's private insurance
- Insurance might not accept MA authorizations
- ABA covered- including many wraparound programs

See PINK "Autism Insurance...."

46

CHAPTER 8

Waivers & Services for transitioning youth



David Gates, Esq.
PA Health Law Project

Family to Family Health Information Center
a project of the PEAL Center

47

MA Transitions

0-3	3 years up to 18 years	18 to 21 yrs	21 & over
EI Dev. Delay	Child Soc Security Disability Standard	Adult Soc Security Disability Standard	
Loophole MA or SSI for child		SSI in own name	
"EPSDT" Services (includes nursing & wraparound) birth to 21			Adult MA Services only

48

Waivers- overview

- Waivers are special programs that fund home & community based support services for persons with various disabilities to enable them to remain in the community
- Waivers become primary source of support services when youths turn 21 and are no longer eligible for MA EPSDT services or school services
- Different waivers depending on type of disability- Intellectual disability, autism, physical, brain injury
- Ability to get on a Waiver is dependent on sufficient open "slots"- long waiting lists for MR waivers

49

Autism Waiver

- Autism Waiver for people 21 and over
 - Covers habilitation, respite, community inclusion & transition, behavioral & family counseling, employment services, AT +
 - 1-866-539-7689 to apply. Slots available
- Under 21 with autism spectrum disorders get non-educational services primarily through Behavioral Health wraparound (BHRS) & OT & speech through physical health coverage- including possible private insurance coverage under Act 62

50

Intellectual Disability (MR) Services

- Birth-3 Early Intervention- services thru MH/MR contractors. Eligibility based on developmental delay- Only MR program where MR diagnosis not required.
- Documentation of MR (<70 IQ + significant limits in adaptive functioning) before age 22 required for all other MR services.
- Except for EI, MR services not "Entitlements". Long waiting lists. Apply at county MH/MRs.
- FSS/FDSS- provides small amounts of funding for some supports like respite, camps, special equipment or therapies not covered by MA.

51

MR Waivers

- P/FDS- services capped at \$26,000 a year. No residential services.
- Consolidated- no cost cap. May include residential- group home or "life sharing".
- Both cover habilitation, respite, home & van mods, employment programs, transportation+
- Slots given out based on urgency of need- determined by PUNS. 3 categories.

See GOLDENROD "Prioritization of Urgency of Need..."

52

Physical disability waivers

- Independence- Age 18+ w/ physical limitations that meet nursing home level of care. Wide range of services
- Attendant care- Age 18+ w/ physical limitations that meet nursing home level of care but services limited to attendant care. Must be "mentally alert"
- Act 150- like Attendant Care Waiver but for people whose income or assets exceed waiver limits. Not a "waiver" (no federal funds)

53

Physical disability waivers- cont.

- CommCare- Age 21 & up w/ traumatic brain injury. Wide range of services
- OBRA- Age 18 & up w/ developmental disability (occurring before age 22) other than mental retardation. No new applications being taken.
- Michael Dallas- for children & adults who are vent dependent. Will be eliminated July 2010. Persons in this waiver will be transferred to Independence

54

Appeals

- Can appeal denial, termination or reduction of Medical Assistance or CHIP eligibility or services
- Can appeal denial, termination, reduction of waiver services- only after you have a slot
- Appeal within 10 days from termination or reduction of current services continues those services pending appeal outcome.
- Denial/termination/reduction Notice provides info on how to appeal.

58

Types of Appeals

- From denial of MA eligibility- "Fair hearing" before DPW Administrative Law Judge
- From denial/termination/reduction of MA services by HMO or Behavioral Health MCO- Choice of:
 - grievance before HMO/ Behavioral Health MCO; or
 - "fair hearing" before DPW Administrative Law Judge
- If you lose at grievance, choice of:
 - "external review" by independent clinical reviewer; or
 - "fair hearing" before DPW Administrative Law Judge
- From termination/reduction of waiver services- "Fair hearing" before DPW Administrative Law Judge

59

Appeal tips

- Mail appeals by certified mail to have proof of when appeal was filed
- Try to get prescriber/evaluator and other professionals familiar w/ service at issue to testify at fair hearing or grievance. They can testify by phone.
- Pull together all relevant paperwork (evals, letters of medical necessity, notices) & send to ALJ or grievance committee
- Call PHLP @ 800-274-3258 for free advice

60
