# Medicaid Eligibility Guide for Katie Beckett Program



The Katie Beckett Program is a special eligibility category that allows certain children who are residents of Mississippi with long-term disabilities and complex medical needs, living at home with their families in lieu of an institutional facility, to qualify for Medicaid.

## **Eligibility Requirements**

Children who may not be eligible for other Medicaid programs because the income or assets of their parent(s) are too high may be eligible for Medicaid through the Katie Beckett Program if the child meets <u>all</u> of the following criteria:

- 1. The child is under age 19 and determined to be disabled using Social Security disability rules.
- 2. The child requires a level of care at home that is typically provided in a hospital or nursing facility or intermediate care facility for individuals with intellectual or developmental disabilities.
- 3. The child can be provided safe and appropriate care in the family home.
- 4. The child does not have income or assets in his or her name in excess of the current standards for an individual in long term care.
- 5. The child does not incur a cost to the Medicaid Program that exceeds the cost Medicaid would pay if the child were in an institutional setting.

This program is in compliance with federal regulations: 42 CFR §§435.225, 409.31-409.34, 440.10, 440.150, and 483.440.

## Information Likely to Support the Application

- Documentation of a history/physical exam completed within the last 12 months including the frequency, duration, and cause of inpatient hospitalizations and emergency room visits.
- Medical records from any treating provider (physician, therapist, etc.) with examples of observed tasks that
  demonstrate or support the existing level of functioning as it relates to the child's need for assistance with age
  appropriate activities of daily living and the need for care in an institution.
- Parents may provide examples of a child's routine schedule, which documents the type of intensive care
  required to actually care for the child's daily needs. Please include any specialized parent training in the past
  12 months specifically related to the care of the child's medical condition, i.e., training in CPR, glucose
  monitoring, suctioning, behavior modification, etc.

### **General Information**

- Qualification is not based on a diagnosis or disability alone, but the child's medically documented institutional level of care needs from the preceding 12-months.
- The level of care can be reassessed every one to three years based on the current needs of the child.
- Benefits cannot be provided to a child whose need is shared by all children of the same age. Consideration is
  given to the child's age and the usual expected developmental level of functioning for his/her particular age
  group.
- A parent or authorized representative may reapply at any time if the child's medical condition changes significantly.

### **Summary of Institutional Level of Care**

**Hospital** – This level of care is appropriate for children who require services 24 hours per day and those services would ordinarily be furnished in an appropriately licensed institution, for the care of patients with disorders other than mental illness. These services must be furnished safely and effectively in the home setting, just as in an inpatient hospital setting.

Intermediate Care Facility for Individuals with Intellectual/
Developmental Disabilities – This level of care is appropriate for children who have received a psychological assessment or developmental evaluation from a medical professional, and the child meets certain factors related to an intellectual or developmental disability.

**Nursing Facility** – This level of care is appropriate for children who do not require hospital care but do require, on a regular basis, licensed nursing services, rehabilitation services, or other health-related services needed due to the child's mental or physical condition that is ordinarily provided in an institution. These services must be furnished safely and effectively in the home setting, just as in a nursing facility.

**How to Apply –** Complete the Medicaid application form for aged, blind and disabled individuals. An application can be submitted online through the Medicaid common web portal at <a href="www.access.ms.gov">www.access.ms.gov</a>. This application form is also available on the Medicaid website at <a href="www.medicaid.ms.gov">www.medicaid.ms.gov</a> or may be obtained by calling or visiting your local Medicaid Regional Office. The Medicaid office will provide the parent with all necessary forms that must be completed during the application process.

- The Medicaid Regional Office will determine if the child is eligible on all non-financial and financial eligibility factors.
- The child's medical information is first sent to the Disability
  Determination Service (DDS) for a disability decision using Social
  Security disability rules. If the child is determined to be disabled,
  the process continues;
- The next step is the institutional level of care review process. Information that specifically addresses the nature and extent of the child's condition will be reviewed with respect to functional abilities and overall medical, developmental and/or behavioral presentation. The needs of the family in caring for the child at home and in the community are also considered. The need for an institutional level of care must be approved by medical review staff in order for the child to qualify for Medicaid.
- The Medicaid Regional Office will send the parent a notice with the agency's decision. If denied, the decision can be appealed through a state level hearing process.

If you have questions about Medicaid eligibility or want to apply, call (toll free) 1-800-421-2408 or contact your nearest Medicaid Regional Office in:

Wicalould Proglottic	ai 011100 iii.
Brandon	601-825-0477
Brookhaven	601-835-2020
Clarksdale	662-627-1493
Cleveland	662-843-7753
Columbia	601-731-2271
Columbus	662-329-2190
Corinth	662-286-8091
Greenville	662-332-9370
Greenwood	662-455-1053
Grenada	662-226-4406
Gulfport	228-863-3328
Hattiesburg	601-264-5386
Hinds County	601-978-2399
Kosciusko	662-289-4477
Laurel	601-425-3175
Madison County	601-576-3350
McComb	601-249-2071
Meridian	601-483-9944
Natchez	601-445-4971
New Albany	662-534-0441
Newton	601-635-5205
Oxford	662-371-1365
Pascagoula	228-762-9591
Philadelphia	601-656-3131
Picayune	601-798-0831
Senatobia	662-562-0147
Starkville	662-323-3688
Tupelo	662-844-5304
Vicksburg	601-638-6137
Yazoo City	662-746-2309

The Division of Medicaid complies with all state and federal policies which prohibit discrimination on the basis of race, age, sex, national origin, handicap or disability as defined through the Americans with Disabilities Act of 1990, the Rehabilitation Act of 1973 and the Civil Rights Act of 1964.