



Office of Developmental Disabilities Services (ODDS) Medicaid Guide for Families of Children who Experience Intellectual or Developmental Disabilities (I/DD)

The State of Oregon has changed how Oregonians apply for Medicaid benefits. This new system is known as **OregONEligibility (ONE)**. This guide explains these changes and outlines the steps that a family can take to apply for Medicaid eligibility for the first time. If your family or child is already receiving Medicaid, please refer to the **ODDS Renewal Guide for Medicaid**.

Why is this important?

Although many people think of Medicaid in Oregon as accessing health benefits through the Oregon Health Plan (OHP), Oregon has also taken advantage of flexibility in designing its Medicaid programs to use its Medicaid dollars to fund other programs and services. In fact, many people are surprised to learn that most I/DD services are funded by Medicaid. In order to receive most I/DD services, the child must first be determined to be eligible for Medicaid. The ONE eligibility system will look at all the different ways that a child with I/DD might be eligible for Medicaid-funded services, ***even when the family's income is above income limits.***

FREQUENTLY ASKED QUESTIONS (FAQ):

What is the difference between Medicaid and developmental disabilities services?

Medicaid provides health coverage to millions of Americans, including eligible low-income adults, children, pregnant women, elderly adults and people with disabilities.

Oregon *DD Services*, known as Waiver and K Plan/Community First Choice, gives Oregon the right to use federal funds to increase community services for people experiencing intellectual and developmental disabilities who meet the eligibility requirements. These developmental disabilities services might include: service coordination to help you understand I/DD services, more chances for your child to be an active community member,

relief care, supporting in finding additional caregivers to help with daily care needs, training for the family to understand how to best support your child, and help to change the home to more easily care for your child there.

What if my child has not yet been determined eligible for DD services?

You may apply for Medicaid anytime, however, it is helpful to have your child's DD eligibility determined first. **Refer to the Tips for Parents, section A1, for instructions.**

How do I apply for Medicaid for my child?

Oregon's new OregONEligibility (ONE) program allows you to apply for Medicaid on-line, by phone, in person, or by filling out a paper application. It is important to fill out the Medicaid application correctly so that all the ways your child might be eligible are considered. **Refer to the Tips for Parents, section A2, for instructions.**

Our combined household income is over the limit for Medicaid eligibility. Can my child with a disability still receive Medicaid benefits?

Yes. Some children do not receive Medicaid based on their family's income but may qualify based on their disability. This is called presumptive Medicaid disability determination. If your child does not qualify based on family income, and you have indicated in the application that your child has a disability and is requesting services, the ONE system automatically refers your child to the Presumptive Medicaid Disability Determination Team (PMDDT) to determine eligibility.

The critical questions that require a 'YES' response in ONE are:

- 1. Does individual applying for health coverage on this application need help with activities of daily living (like bathing, dressing etc.) or live in a medical facility or nursing home?**
- 2. Does the individual want to request Medicaid Long Term Care services?**
- 3. Is anyone Blind/Disabled?**

What if my child is not eligible based on family income?

You will get a call from an ODHS Eligibility Worker to complete an intake for other Medicaid Programs and determine your next steps. This may include a referral to PMDDT (described above) to see if your child qualifies for Medicaid based on their disability. If you do not connect by phone, you will receive notification by mail. Be sure to respond to this request for more information. Without this follow-up interview, your application will be denied, and you will have to start over.

What if I believe my child will not be eligible for Medicaid based on our family's income? Do I still fill in the information for every person in my household on the application?

YES. All Medicaid applications must be filled out entirely for all members in your household to be processed correctly. Your child will only be referred to PMDDT if they do not qualify based on family income.

Who can help me fill out my Medicaid application?

Your county I/DD program, called Community Developmental Disabilities Program (CDDP), can assist you with applying for Medicaid. Depending on the local program, they may refer you to a community partner or a local Oregon Department of Human Services (ODHS) office who will help you with the application. In some areas, the CDDP staff may be able to help you directly.

If you are having problems with the ONE application, please call the ONE Customer Service Center at: 1-800-699-9075 from 7 a.m. to 6 p.m., Monday through Friday. **Please be aware that because ONE is a new program, hold times may be very long. Following the verbal prompts carefully will help you get to the right person in a shorter amount of time. See Tips for Parents, Section A1.*

Do I need to do anything while waiting for my child to be determined eligible for Medicaid? It is important that you keep all appointments with your service coordinator. If you miss or cancel an appointment, you should request that it is rescheduled right away. It is important that your child's eligibility for services is determined as soon as possible.

What happens once my child is determined eligible for Medicaid?

Once your child is determined eligible for Medicaid, you need to let your service coordinator know and then you will work with them to learn about services available to your child. This is called *choice advising*. You will be able to choose the services that best meet your child's needs. In addition to DD services, you should be advised of other Medicaid-funded programs that you might be able to access for your child.

What happens if my child is determined NOT eligible for Medicaid?

There are some limited resources available to children who do not qualify for Medicaid. Schedule a meeting with your services coordinator to discuss your options and plan your next steps.

If my child becomes eligible through PMDDT are there on-going requirements?

When a child becomes eligible through PMDDT you are required to have monthly services (usually case management service each month) in order to maintain eligibility for Medicaid. As a parent, it is important that you connect with your child's services coordinator each month and follow through with the expectations that the CDDP has for monitoring and planning for your child.

Will additional information be needed if my child is referred to PMDDT?

If your child is referred for a determination through PMDDT, you and your Service Coordinator will be notified in order to collect any additional information needed for the determination. In many cases the CDDP will be able to provide the needed documents (with your permission). A list of the kinds of documents that may be needed is listed in the *Tips for Parents, Section A4*.

What if my child already receives Medicaid? Do I need to reapply?

NO. You do not need to reapply for Medicaid. Medicaid recipients are already required to periodically complete a renewal for Medicaid. This process is called Renewal in ONE. Your Medicaid renewal will be updated in ONE at that time.

What if my child already receives Supplemental Security Income (SSI)?

If your child has SSI, but has not been determined eligible for Medicaid, apply for Medicaid through the ONE system. When you indicate in the application that your child is receiving SSI, the ONE system will confirm that your child is eligible for the appropriate category of Medicaid. **Refer to the Tips for Parents, section A2, for instructions on how to apply for Medicaid.**

Tips for Parents when Applying for Medicaid through the New OregONEligibility

Be prepared. Before you apply for Medicaid, it is helpful to gather this personal information about every person in your household:

The ONE Medicaid application asks you to give some personal information to make sure you meet the requirements for the program. The Medicaid application will ask for:

- ✓ Information about vehicles you own, homes you own and other resources like checking account(s), savings account(s), stocks, bonds, money in a safe deposit box, sales contracts, estate funds, retirement funds, time certificate of deposit, personal/incidental funds, securities, trust and annuity accounts and trust funds. This may or may not apply to you
- ✓ Birth date(s) for members of household
- ✓ Information about health coverage available at work. Policy numbers and plan names (s) for any current health insurance
- ✓ Social security numbers(s), when available or if you have one
- ✓ Immigration document(s), when available or if you have them
- ✓ Email address(es), if you have them
- ✓ Employer and income information
- ✓ Any deductions including self-employment deductions
- ✓ Award letters if receiving any sort of social security income and if you have them available
- ✓ How you plan to file taxes, e.g. single, married-jointly, married-separately, qualifying widow(er), or head of household
- ✓ A list of your tax dependents
- ✓ A list of educator expenses, student loan interest paid, and tax-deductible IRA contributions.

A1. To apply for DD eligibility, please go to this link to find an application for DD services: <https://www.oregon.gov/dhs/seniors-disabilities/DD/Pages/index.aspx> or contact the Community Developmental Disabilities Program (CDDP) in your area for an application. Go [here](#) for a list. Fill out the application and email, mail, or drop it off at your local CDDP. This process can take time. We encourage you to get started as soon as possible. **Your services coordinator will schedule an appointment to determine your child’s eligibility for services and complete the ONA (Oregon Needs Assessment). It is important that you keep any appointments with your services coordinator so these requirements can be completed as soon as possible. Once the ONA is completed, your services coordinator needs to submit a form to begin services. If your child was referred for a PMDDT determination, this will also need to be completed before Medicaid can be opened for your child. If you have any questions about this process, please ask your services coordinator.**





A2. Oregonians may apply for Medicaid several ways:

- **Online:** Use the ONE Applicant Portal at <https://one.oregon.gov/>; the online help guide is here: [Oregon Health Plan Quick Start Guide](#)
- **Paper application:** Complete the Form 7210 + Appendix A
- **In person:** Visit any ODHS office; find office locations [here](#). Work with an OHA Community Partner OHP Application Assister; find Assister’s here: <https://healthcare.oregon.gov/Pages/find-help.aspx>
- **By phone:** Call the ONE Customer Service Center at: 1-800-699-9075 from 7am to 6pm, Monday through Friday.

Before you call:

Please be aware that because ONE is a new program, hold times may be long. Following the verbal prompts carefully will help you get to the right person in a shorter amount of time. When you call the ONE Customer Service Center, you will hear a greeting message asking you to choose your preferred language: English, Spanish, Russian, Vietnamese and a prompt for “other languages” is offered. **Next, you will select the reason you are calling. It is important that you keep your contact information updated in ONE. Please always make sure when you are talking to a representative that they have the most current address and phone number for you.**

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A3. What you need to know about disability related questions on the Medicaid application(s):

We want you to be aware of some important questions that you may come across and understand what you are being asked about your child's disability:

Disability Question: Is a member of your household blind or permanently disabled? A **YES** answer to this question will prompt you to answer disability related questions to a specific person in your household.

Long-Term Care Services Question: Does anyone in your household need long-term care services? If your child requires support of *some kind* due to their disability, the answer is **YES**. It does NOT mean you are asking for long-term care in a placement outside of the home such as a group home.

Activities of Daily Living (ADL) Question: Does anyone need help with things like walking, using the bathroom, bathing or dressing? This question is asking about more than the physical ability of completing these tasks. For example, if your child requires a visual schedule, verbal prompting or behavior supports, the answer is **YES**. Or, for example, if your child is physically able to dress

themselves but may not know to wear a coat outside when it's snowing, the answer is **YES**.

A4. If you have a meeting with PMDDT, it will be helpful to have this information ready:

The criteria that PMDDT looks at is different than DD eligibility. They look at the diagnosis and the extent to which the child is meeting developmental milestones. PMDDT requires **two** years of medical, mental health, and educational records to make a medical determination as to whether the child meets the Social Security Administration (SSA) disability criteria for eligibility.

- ✓ List of qualifying diagnoses
- ✓ All records from the DD file that were used in the DD eligibility determination.
- ✓ The most recent IEP and any testing/exams by the school or ESD.
- ✓ It's important to use the correct ODHS Release of Information (ROI) DHS form MSC 3010 to share information with every provider that the child has seen in the **last 2 years** (with the exception of dental). You will need one for SSA, and one for the current or most recent school. ROI for SSA is required even if the child is not receiving any SSI benefits.

Finally, please remember, at any time during this process, you may be contacted by an ODHS eligibility worker requesting additional information. More than one attempt will be made to contact you by phone and by mail. ODHS has specific rules about completing your application in a timely way. If you do not respond to requests for more information in the time allowed, they are required to deny your application. That means you will have to start this process over again from the beginning.