

DEEMING WAIVER INFORMATION

Below is an introduction to the process of applying for the Deeming Waiver (Katie Beckett Medicaid).

BREIF HISTORY

The Deeming Waiver is a type of Medicaid that helps to cover the costs of medical treatment and therapeutic services for children with physical or developmental disabilities. Before the Deeming Waiver, the government would subsidize care for a disabled child ONLY if the child was placed in a state institution. In 1981, the parents of Katie Beckett fought to get financial assistance while caring for their child at home. Now, the Deeming Waiver is helpful to families who make “too much ” to receive financially based Medicaid, but who need expensive services for their special needs children.

HOW TO APPLY FOR THE DEEMING WAIVER

Because you first must prove that you do not qualify the Supplemental Security Income (SSI) Disability - Medicaid program which is based on your family’s income. The first step is to apply for SSI through your nearest Social Security Office. You may call them at 1-800-772-1213 to begin the application. If your child receives SSI, and, thus, Medicaid, you are finished at this point, as Medicaid (which provides the same benefits as the Deeming Waiver). If your child does not receive SSI and Medicaid through this program, SSI will send you a denial letter. This denial letter becomes a part of your Deeming Waiver Application. Make sure you do not lose it!

Next, you will gather all of the items listed in the “checklist section” below. Note: Your child’s regular Medical Doctor (Primary Care Physician or PCP) must sign the DMA-6 form and the Physician Referral Form.

The DMA 6 form can be downloaded from the state website:

http://dch.georgia.gov/vgn/images/portal/cit_1210/22/32/31946819DMA-6A_Form.pdf

The “care plan” needs to be filled out and can be downloaded from the following website:

http://dch.georgia.gov/vgn/images/portal/cit_1210/42/23/31944895Care_Plan.pdf It is basically self explanatory.

Call your county’s office of Department of Family and Children’s Services to find out if you can apply by mail, or if they would prefer for you to have an appointment with a caseworker. When you gather all the checklist items, take them to the DFCS office with the completed Deeming Waiver application. If your child is approved for the Waiver, it will be retroactive for 3 months from the date the office initially received the completed application materials.

LIMITATIONS OF THE DEEMING WAIVER

If your child is approved for the Deeming Waiver, and your child has commercial insurance in addition, you **MUST GO TO A DOCTOR WHO ACCEPTS YOUR PRIMARY INSURANCE**. Medicaid will **NOT** reimburse any provider who is not first paid by your commercial insurer. When scheduling a doctor’s appointment or therapy services, always inform the facility of both your **PRIMARY** insurance and the Medicaid **SECONDARY** insurance.

CHECKLIST

- Child’s social security number
- SSI rejection letter
- Child’s birth certificate
- Proof of income (check stubs, tax return)
- Completed Social History (see attached instructions following this section)
- Bank account number and safety deposit box numbers, as well as any material assets including cars, house, boats, etc.
- A Psychoeducational evaluation, recent within the last year, which was completed by a Ph.D. ****If your child is 3 years or older, this was probably done through the school system**
- A speech-language evaluation completed by an ASHA certified speech-pathologist within the last 6 months.
- If your child is in early intervention, include the current Individual Family Service Plan (IFSP)
- If your child is receiving special education services, include the Individualized Education Plan (IEP)
- DMA-6 Medical form completed and signed by your child’s pediatrician.
- Care Plan, also signed by the physician

HOW TO WRITE A SOCIAL HISTORY

This information can be written out simply, it's not a "writing project", just a way for them to have the information all in one place.

DEMOGRAPHIC INFORMATION

- Name:
- Birth date:
- Social Security Number:
- Address:
- Telephone Number:
- Parents:

PRESENTING PROBLEMS

- Description of the disability
- Why the child needs the Katie Beckett Waiver (the services that your child receives that are not currently covered by your insurance etc.)

FAMILY INFORMATION

- Dad- Name, age, education, occupation, health
- Mom- Name, age, education, occupation, health
- Siblings- Name, age, grade in school, health
- Who lives in the home.
- Home- type (apartment, mobile home, house)
- Location (in town, in the country, in a subdivision)
- Size (number of bedrooms, acres of land)

BIRTH AND EARLY DEVELOPMENT

- Pregnancy- prenatal care, any problems, full term or premature
 - Delivery- C-Section or vaginal, breech etc. Birth hospital; physician; baby's birth weight; length of hospital stay following birth.
 - When child's problems were first detected
- Developmental delays
Problems in feeding, movement, sleeping, health

MEDICAL INFORMATION

- Allergies
- Immunizations
- Physicians who see the Children's Healthcare of Atlanta
- Health problems
- Medications
- Hospitalizations
- Surgeries
- Other Medical Treatments (CT Scan, Lab Work, EKG, EEG)
- Vision
- Hearing
- Adaptive Equipment used

TRAINING/EDUCATION

- School Program- Teacher, classroom, Special Education Goals, Support Services (OT, PT, Speech, Adaptive PE)
- Early Intervention services (if received)

- Therapies received (Physical, Occupational, or Speech Therapy, Special Instruction, Aquatherapy, Hippotherapy)
- How often they are given. Where they are given.
- Therapists names.

CURRENT FUNCTIONING

- Self Help (eating, bathing, dressing, toileting, grooming)
- Language/Speech (understanding what is said....number of words in vocabulary, use of 2-3 word phrases or full sentences)
- Motor Skills (using hands, sitting, walking, climbing, etc.)
- Social Skills (recognizing people, sociable, playing with others, doesn't like to separate from mom etc.)
- Cognitive (learning, how they learn best...ability to learn new things, etc.)

Note: Many of these skills may be described in terms of the child's "age level". For example, you may see something like "...is talking at a 18-24 month level" which will tell you, regardless of the child's birth age, that the child's speech is at the level of a child in the 18-24 month range.

Describe whether child is dependent, needs assistance, or is independent in different areas. Be sure to compare how the child is doing in relation to other children their age...The child may have made lots of progress, but still may be behind others. It is important to note how much assistance is needed and whether it is a verbal reminder, or physically assisting the child.

SUMMARY

Child; age; disability/diagnosis or areas of delay; importance of medical care and therapy in promoting development.

SELF-HELP WEBINAR

A Guide to Deeming Waiver Application Process:

http://p2pga.org/index.php?option=com_content&view=article&id=145&catid=66

LIVE ASSISTANCE COMPLETING FORMS NEEDED

Atlanta Speech Therapy can provide the contact information for live assistance of someone in your area.

Email info@atlspeechtherapy.com.