

Government of the District of Columbia Department of Health Care Finance



TEFRA/Katie Beckett - DC MEDICAID Fact Sheet

TEFRA/Katie Beckett Overview

The Tax Equity and Fiscal Responsibility Act (TEFRA)/Katie Beckett eligibility group provides District of Columbia (DC) Medicaid coverage for children with life-threatening or long-term disabilities who live at home and would otherwise be ineligible for Medicaid due to their parent's income or financial resources. A child may be eligible for the TEFRA/Katie Beckett eligibility group if the child is not otherwise eligible for Medicaid and meets other eligibility requirements.

A child eligible for DC Medicaid under the TEFRA/Katie Beckett eligibility group, receives the same benefit package as a child eligible for DC Medicaid under other eligibility pathways.

ELIGIBILITY CRITERIA

In order to be eligible for DC Medicaid through the TEFRA/Katie Beckett eligibility group, a child shall meet the following non-financial and financial requirements:

- (a) Be age zero (0) through eighteen (18) years old;
- (b) Have individual income at or below three hundred percent (300%) of the Supplemental Security Income ("SSI") federal benefit rate;
- (c) Have individual resources equal to or less than \$2,600 after application of a disregard of all countable resources between \$2,600 and \$4,000;
- (d) Have a disability which can be expected to result in death or to last for at least twelve (12) months in accordance with Section 1614(a) of the Social Security Act;
- (e) Have a level of care (LOC) that is typically provided in one of the following settings:
 - (1) A hospital, as described in 42 C.F.R. § 440.10;
 - (2) An intermediate care facility, as described in 42 C.F.R. § 440. 150; or
 - (3) A nursing facility, as described in the "Health Care and Community Residence License Act of 1983, approved October 28, 1983 (D.C. Law 5-48; D.C. Official Code § 44-501);
- (f) Be able to safely live at home;
- (g) Not otherwise be eligible for Medicaid;
- (h) Have Medicaid costs of care received at home that do not exceed the cost DC Medicaid would pay if the child were in an institution;

- (i) Be a DC resident;
- (j) Be a US citizen or have other eligible immigration status; and
- (k) Have a valid Social Security Number.

Medicaid and Private Health Insurance

A child may have both DC Medicaid under the TEFRA/Katie Beckett eligibility group and private health insurance. In those instances, the applicant must notify the District in writing of the applicant's primary insurance, and the private insurance must be billed first before seeking reimbursement from Medicaid. Parents/guardians must contact the Third Party Liability (TPL) Department at (202) 698-2000 if private health insurance is added, discontinued, or changed.

Application Process

All DC Medicaid applications may be submitted, either online through DC Health Link at https://dchealthlink.com, by phone at 1-855-532-5465, by mail at DC Health Link, Department of Human Services, Case Records Management Unit, P.O. Box 91560, Washington, DC 20090, or in person at a DHS/ESA service center. Applications submitted online can be tracked electronically to facilitate processing and automatic transmission of the TEFRA/Katie Beckett Application Packet for individuals who are determined ineligible due to family income or resources being over the eligibility threshold. Below are the steps for submitting the DC Medicaid application and the TEFRA/Katie Beckett Application Packet.

TEFRA/KATIE BECKETT APPLICATION PROCESS AND REQUIRED DOCUMENTATION

Step 1: Log in to https:\\dchealthlink.com to complete an application for financial assistance to apply for Medicaid or complete the application process by phone, mail or in person if needed. Once an application is submitted:

- The applicant will be screened for MAGI Medicaid coverage and receive a decision within forty-five (45) calendar days.
- If the applicant meets all non-financial and financial requirements, the applicant will be determined eligible for MAGI Medicaid and will receive an approval notice.
- If applicant does not meet all non-financial and financial requirements, the Department will issue a notice to the applicant of their ineligibility for MAGI Medicaid and their opportunity to be evaluated for Medicaid through the TEFRA/Katie Beckett eligibility group.
- In cases where an applicant is denied for over income and there is a child with a disability in the household, a TEFRA/ Katie Beckett Application Packet will be mailed to the applicant.

Step 2: Once an applicant receives a TEFRA/Katie Beckett Application Packet, the applicant can submit the TEFRA/Katie Beckett Application Form to the Economic Security Administration (ESA) in one of the following ways:

1. Fax the completed application to (202)724-8963.

Send by postal mail to:
 DC Economic Security Administration
 Attn: Medicaid Branch
 645 H St. NE

Washington, DC 20002

- 3. Submit by email by calling the ESA help desk for assistance at 202-698-4220
- 4. Submit in person at an ESA Service Center. Look for the nearest service center at https://dhs.dc.gov/service/find-service-center-near-you or call 202-724-5506.

Step 3: An applicant must submit the following completed Level of Care (LOC) Determination documents to the Division of Children's Health Services (DCHS) at the Department of Health Care Finance (DHCF) via email at HealthCheck@dc.gov:

- Pediatric Level of Care Determination Form;
- TEFRA/Katie Beckett Care Plan Form; and
- Supporting documents, such as the Letter of Medical Necessity, the Individualized Education Program / Individualized Family Service Plan, therapy assessments, including diagnostic reports.

Step 4: The District will make an eligibility determination within sixty (60) calendar days of receipt of the completed TEFRA/Katie Beckett Application Packet.

Annual Renewal Process

A renewal for Medicaid is a review of current eligibility factors to determine whether to continue, change, or discontinue Medicaid. Federal rules require that an individual's eligibility for Medicaid be renewed at least every 12 months. Parents/guardians must submit the Medicaid renewal form on an annual basis, to determine if the child continues to meet eligibility requirements for TEFRA/Katie Beckett. ESA will mail a renewal form to the child's parents/guardians ninety (90) calendar days before the end of the certification period, and DHCF will mail the TEFRA/Katie Beckett LOC and Care Plan forms. The renewal form must be submitted back to ESA sixty (60) calendar days prior to the renewal date, and the medical forms must be submitted back to DHCF. Once documents are received, ESA will review documents, if the child continues to meet financial, non-financial and medical requirements for the TEFRA/Katie Beckett eligibility group, Medicaid coverage will continue for the next 12 months.

Providers/Primary Care Physicians must be enrolled in DC Medicaid

The provider/primary care physician completing the level of care forms noted in TEFRA/KATIE BECKETT APPLICATION PROCESS, Step 3 above, must be a DC Medicaid provider. Once a child is deemed Medicaid eligible under the TEFRA/Katie Beckett eligibility group, he or she can receive services by a DC Medicaid provider. If the child is already receiving services from a provider, and the child wants to continue seeing that provider, then that provider must be enrolled in DC Medicaid to ensure Medicaid reimbursement. For more information on how to enroll in DC Medicaid, providers can visit the DHCFPROVIDER Enrollment website at https://www.dcpdms.com. Providers may also contact DC Provider Data Management System via phone at 844-218-9700 or email at dcprovider.registration@maximus.com to enroll and become a DC Medicaid provider.

Where to Get More Information

For questions regarding the status of your Medicaid application, please call DC Health Link's customer service center at (855)532-5465. If you have additional questions about DC Medicaid coverage through TEFRA/Katie Beckett, please review the "Medicaid and TEFRA/Katie Beckett: Frequently Asked Questions" document on the DHCF website or contact DHCF or DHS at the contact information below.

For more information contact:

Department of Health Care Finance Division of Children's Health Services Attn: TEFRA/Katie Beckett Coverage Group 441 4th Street, N.W, 9th Floor Washington, DC 20001 (202) 442-5957

Email address: HealthCheck@dc.gov

Department of Human Services Economic Security Administration Attn: Rebecca Shields 645 H Street, NE Washington, DC 20002 (202) 698-4220