Benefits of Waiver Medicaid

Now that you* have a Waiver, you have access to long term care services offered through the Waiver. These services include things like an attendant to work with you at home or in your community and respite care. If you have a CCC Plus Waiver, you’ll have either a service facilitator or agency helping you put these services in place. If you have one of the DD Waivers, you’ll have a more robust menu of service options and a case manager to help you put these services in place. (For more on the basics of Waivers, visit https://thearcofnova.org/programs-services/library/#waivers)

Because of your Waiver, you’ll also have access to a series of benefits through Medicaid. Anyone with a Waiver receives Medicaid because Medicaid is the payer for Waiver services. In Virginia, once you’ve been told you are receiving a Waiver, you will also be given a letter you can take to your county’s Department of Social Services that explains that you’re eligible for “Long Term Care” Medicaid. This means that only the income and assets of the person with a disability (not the whole family) will be considered in awarding Medicaid. Asset limits are $2000 (no limit under age 18) unless held in a Special Needs Trust or ABLE Account, and for 2021 the income limit is $2382/month.

Below are some of the benefits of having Medicaid that you can now access that may supplement your Waiver services:

1. **EPSDT (Early Periodic Screening Diagnosis and Treatment)**- This program is available to all children under age 21 years old who have Medicaid. It can fund any medically necessary service for which you have a Medicaid provider. Commonly requested services are ABA/behavior therapy, assistive technology, hearing aids, nursing, formula and nutritional supplements. Your doctor will need to write statement of necessity. To learn more, visit https://momsinmotion.net/waivers/epsdt/

2. **Health Insurance**- Medicaid is a health insurance provider, so you now have health insurance if you did not before. If you already had health insurance, you can keep it and Medicaid will act as secondary health insurance. Medicaid is always the payer of last resort, meaning all other options will be billed first. You can also choose to eliminate your primary insurance to say on co-pays and exclusively use Medicaid. Before doing so, check to see if the doctors and other specialists you see accept Medicaid. If not, you may want to keep your primary insurance rather than changing doctors.

   In some cases, a special program called HIPP (Health Insurance Premium Payment) will cover the cost of maintaining primary insurance for children under 19 if their parents receive insurance through work. You can learn more about HIPP here: https://www.coverva.org/en/hipp

3. **Care Coordinator**- Most Medicaid users are assigned to a Managed Care Plan that will have additional benefits, including a care coordinator to help you navigate services.

4. **Prescription Coverage**- You may find that even if your doctor does not accept Medicaid, they may be otherwise enrolled with Medicaid and you can use Medicaid at the pharmacy to reduce or eliminate your co-payment.

5. **Incontinence, Diabetic, and Wound Supplies**- If your doctor has prescribed incontinence supplies, diabetes management items, or wound supplies, you’re likely eligible to receive these items for free through Medicaid. Contact Home Care Delivered (https://www.hcd.com/ or call 800-867-4412) to get started.

6. **Logisticare Transport**- Medicaid covers the cost of non-emergency medical transit. That means door to door transportation from your home to a Medicaid provider. This can be used when you travel to/from the doctor, therapist, day or job program, or any service billing Medicaid for your visit. Logisticare can also reimburse you for these trips. To use Logisticare or to get reimbursed, call at least 5 business days before your scheduled trip. 866-386-8331 is the contact phone number.

*These benefits are all only available to the individual with a disability who received the Waiver