Medicaid Applications for People with Long Term Care Medicaid

If your loved one has a developmental disability and receives a Medicaid Waiver, you will need to fill out the application for Virginia Medicaid. You will need to complete a similar renewal application each year from then on to show continued Medicaid eligibility.

Tips for Completing the Application

1. **There is only one application.** One of the most important things to understand is that the application for people applying for whole family Medicaid based on income is the same as the application you will use, so some of the questions may seem odd or may not apply neatly to your situation.

2. **The person getting the Waiver is the applicant.** The form is set up for whole families to apply, but if you’re applying for a child or adult who is applying on the basis of receiving a Medicaid Waiver, put their name as the head of household/applicant (sometimes called Person One). If you are completing the form for a minor, or you’re the legal guardian, you will sign the application. Adults without guardians will sign themselves, even if you helped complete the application.

3. **Fill in everything.** Whole family income and assets, information about other health plans, Special Needs Trusts/ABLE Accounts, and information about other household members should be completed and submitted with all requested supporting documentation. However, application for Medicaid associated with Waivers go to a special set of Medicaid staff called “Long Term Care Eligibility Workers” who know to disregard this information. However, if you do not provide the information requested, the eligibility worker may get back to you and request it again which can result in delays processing the application.

4. **You can ask for help.** If you already have Medicaid and you’re filling out a renewal application, you can always contact your existing Long Term Care Eligibility Worker for assistance. If you have one of the DD Waivers, you can ask your Support Coordinator for help and to answer questions. The Arc of Northern Virginia is also happy to answer your questions. You can contact us anytime at [www.thearcofnova.org/answers](http://www.thearcofnova.org/answers) No matter who helps you, ensure you complete the application yourself and sign it. You are responsible for the information submitted and want to ensure no errors are committed that could jeopardize long term Medicaid eligibility.

5. **Keep a copy.** Though lost application are rare, it is a good idea to keep a copy of the application you completed, along with the requested documents, and a note about when and where you submitted it.

6. **Processing time for new applications is 45 calendar days.** Note the day you submitted the application and what day you would expect a reply. You should get word within 45 days that the application is approved, denied (with reason for denial and appeal rights), or if there are questions about the application. Keep your Support Coordinator up to date so they can assist with tracking the dates and can follow up with the Long Term Care Eligibility Worker as needed.

7. **Section D is for Long Term Care.** The only part of the application aimed specifically at people receiving Waivers and other long term supports is Appendix D. Ensure you complete it entirely and enclose a copy of your Waiver award letter (if you are just receiving a Waiver) or statement about the Waiver the person receives and their case managers if this is a renewal.

8. **Denied applications must be done from scratch.** If your initial application is denied, you must start over with a new application entirely. Previously submitted application are stamped and cannot be edited and resubmitted.