



# Medicaid Buy-In Program for Children with Disabilities

## Eligibility and Enrollment FAQ

---

### Children's Buy-In Eligibility Overview

The Medicaid Buy-In Program for Children with Disabilities (Children's Buy-In) is a Medical Assistance program that provides Medicaid benefits for children who are under age 19, have a qualifying disability and whose adjusted family income is at or below 300% of the Federal Poverty Level (FPL).

Eligible families receive Medicaid benefits for their qualifying child by paying a monthly premium on a sliding scale based on their adjusted income.

The Children's Buy-In does not have an enrollment limit or waitlist.

Click on one of the following categories to jump to that section of this document.

- [Disability Determination Information](#)
- [Income Guidelines and Premium Payment Information](#)
- [Benefit Information](#)
- [Application and Redetermination Information](#)
- [Children's Buy-In and Other Program Interaction/Transition](#)
- [Other Frequently Asked Questions](#)

### Disability Determination Information

#### 1. What is a qualifying disability for the Children's Buy-In?

In general, a child is considered to have a disability if:

- The child has a physical or mental impairment (or combination of impairments) that causes marked and severe functional limitations;
- The impairment(s) has lasted or is expected to last for at least 12 consecutive months, or to result in death; and
- The child is not working at a job and doing substantial work.

A qualifying disability for the Children's Buy-In is determined using the Social Security Administration (SSA) clinical standards. The childhood listings can be referenced through the following link to the SSA Web site:

[www.socialsecurity.gov/disability/professionals/bluebook/ChildhoodListings.htm](http://www.socialsecurity.gov/disability/professionals/bluebook/ChildhoodListings.htm)



**2. Who makes the disability determination for the Children's Buy-In?**

There are two ways a child can be determined to have a qualifying disability:

- Social Security Administration (SSA):
  - If the child has a current disability determination through the SSA, the child already has a disability determination that will be accepted for the Children's Buy-In program.
- State Disability Determination contractor:
  - If the child does not have a disability determination through SSA, a Medicaid Disability Application and Release Form should be submitted with the Medicaid application. Please see the [Application Information](#) section for links to the applications and information on how to apply.

**3. Are mental health conditions considered in determining whether or not the child has a qualifying disability?**

Yes, there are mental health conditions that qualify as disabilities. The childhood listings can be referenced through the following link to the SSA Web site:

[www.socialsecurity.gov/disability/professionals/bluebook/ChildhoodListings.htm](http://www.socialsecurity.gov/disability/professionals/bluebook/ChildhoodListings.htm)

**4. Is there a specific level of care requirement for eligibility? For example, does the child have to be at risk of being placed in a nursing facility, hospital or intermediate care facility to qualify for the Children's Buy-In?**

No. The Children's Buy-In does not have a level of care requirement.

Certain levels of care standards are required for eligibility for Medicaid waiver programs. Waiver programs provide additional benefits specific to the needs of those who qualify by meeting the special eligibility criteria. These additional benefits are not available through the Children's Buy-In. However, the child must have a qualifying disability as described in [Question 1](#).

To learn more about the Medicaid waiver programs, please visit the Department website here:

[HCPF: HCBS Waivers List](#)

**5. Do children on the waitlist for a Medicaid waiver qualify for the Children's Buy-In and can they receive benefits through the Children's Buy-In and remain on the waitlist for the waiver?**

Children on the waitlist may qualify for the Children's Buy-In if all of the eligibility criteria are met.

Children on the waitlist for the Children's Extensive Support (CES) or Children with Autism (CWA) waivers can remain on the waitlist and receive Medicaid benefits through the Children's Buy-In while awaiting waiver enrollment.

Children on the waitlist for the Children's Home and Community Based Services waiver (C-HCBS) **cannot** remain on the waitlist and also receive Medicaid benefits through the Children's Buy-In. Because of this regulation of the C-HCBS waiver, families will need to discuss this with their case managers to decide which program is most appropriate for their situation.

**6. Do children on the waitlist for a waiver need a disability determination?**

It is likely that children on a waiting list for a waiver will need a disability determination.



An Application for Medical Assistance and a Medicaid Disability application may need to be submitted in order to determine eligibility for the Children's Buy-In. Families can work with their case manager or an eligibility technician to determine whether or not one or both of the applications is necessary.

Please see the [Application Information](#) section for links to the applications and information on how to apply.

**7. Do families have to apply for Social Security before applying for the Children's Buy-In?**

No. Applying for Supplemental Security Income (SSI) is not a requirement for eligibility for the Children's Buy-In.

## **Income Guidelines and Premium Payment Information**

**8. Is eligibility for Children's Buy-In based on a monthly or annual income?**

All Medicaid eligibility is based on monthly income.

**9. Since only the child receives the Medicaid benefits on the Children's Buy-In, is financial eligibility and premium amount based on family income or just the child's income?**

Children's Buy-In eligibility and premium payment amounts are based on adjusted household family income and the number of family members in the household.

**10. How is income adjusted to determine eligibility and premium amounts?**

To qualify financially for the Children's Buy-In, families must have an adjusted family income at or below 300% of the Federal Poverty Level (FPL). In general, the adjusted income is calculated by reducing the total income for the household family members by 33%. There are also other income adjustments that may be made at the time of application.

To **estimate** financial eligibility and monthly premium, use the following steps:

- a. *Family Size*:
  - i. Determine the number of family members in your household, including yourself.
- b. *Estimate of Monthly Income*:
  - i. Add the monthly income (before taxes) for all of the family members in your household (include income from a job and any other income, such as child support, alimony, etc.).
  - ii. Multiply the total monthly income amount by 0.6666 ( $\$ \times 0.6666 = \text{Estimate of Monthly Income}$ )
- c. Using your *Family Size* and *Estimate of Monthly Income*, refer to the [Income Chart and Premium Guide](#) below.



Income Chart and Premium Guide				
Family Size	Monthly Income After Income Adjustments			
1	0 – 1,305	1,306 – 1,815	1,816 – 2,453	2,454 – 2,943
2	0 – 1,766	1,767 – 2,456	2,457 – 3,319	3,320 – 3,983
3	0 – 2,227	2,228 – 3,098	3,099 – 4,186	4,187 – 5,023
4	0 – 2,688	2,689 – 3,739	3,740 – 5,053	5,054 – 6,063
5	0 – 3,149	3,150 – 4,380	4,381 – 5,919	5,920 – 7,103
6	0 – 3,610	3,611 – 5,022	5,023 – 6,786	6,787 – 8,143
7	0 – 4,071	4,072 – 5,663	5,664 – 7,653	7,654 – 9,183
8	0 – 4,532	4,533 – 6,304	6,305 – 8,519	8,520 – 10,223
Federal Poverty Level (FPL)	0% - 133%	134% - 185%	186% - 250%	251% - 300%
Monthly Premium	\$0	\$70	\$90	\$120

**NOTE:** This chart is based on 2015 FPL guidelines.

**11. Is there a different calculation for self-employment since the income may fluctuate?**

No, the calculation is not different. To estimate your financial eligibility and premium payment, follow the process described in the previous question/answer using the current month’s household family income including income earned through self-employment. If your family’s income changes, you should report the change to your case manager, eligibility technician or online through [Colorado.gov/PEAK](http://Colorado.gov/PEAK). The premium amount is based on monthly income.

**12. Are there disregards that are used in the income calculation?**

There may be disregards or income exemptions that may apply to income depending on what information is provided in an application. The system uses the applicable disregards in its calculation of a premium. One example of a disregard is an earned income of \$90 shall be disregarded from the gross wages of each individual who is employed.

**13. How is a change in income reported? How does income impact the premium amount?**

Changes to income and household composition should be reported to your case manager, eligibility technician or online through [Colorado.gov/PEAK](http://Colorado.gov/PEAK) within 10 days. Changes in income and household composition may change your monthly premium; premium amounts are calculated based on family household size and monthly income.

**14. How are premiums paid?**

A premium will not be owed for the month of application approval or any prior months. Premiums are due the month after approval of the application. Monthly premium letters will be mailed on the 22<sup>nd</sup> of each month. The letters will specify the premium amount, due date and where to send the premium payment. Monthly premium payments are due by the 15<sup>th</sup> of each month. Failure to pay premiums within 60 days of the first missed payment will result in termination of benefits.

Our mission is to improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

[www.colorado.gov/hcpf](http://www.colorado.gov/hcpf)



**15. How are premiums calculated for families who have more than one child enrolled in the Children's Buy-In? Are premiums paid for each child?**

Premium amounts are determined using the same method as for families who have only one child enrolled in the Children's Buy-In. However, premium payment for the additional children in the family will be waived. This means that families who qualify will only pay one premium based on income and family household size, regardless of the number of children in the household who are enrolled in Children's Buy-In.

**Benefit Information****16. What are the Medicaid benefits the child receives through the Children's Buy-In?**

The Children's Buy-In provides access to regular Medicaid services, which may include but is not limited to offices visits, hospitalizations, x-rays, home health services, durable medical equipment (DME), prescription medications, and therapy (e.g. physical, speech, occupational). This includes the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit that provides comprehensive and preventive health care services for children and youth. Waiver services (including Applied Behavioral Analysis (ABA)) are not covered through the Children's Buy-In program.

For questions about Medicaid benefits, please call the Medicaid Customer Contact Center Monday through Friday, from 7:30 a.m. to 5:15 p.m. at 1-800-221-3943 / TDD 1-800-659-2656. Questions can also be [submitted online](#).

**17. Is home health care available under the Children's Buy-In?**

Home health services are provided through the Children's Buy-In program if the child qualifies. A home health agency can be contacted for an assessment to determine whether or not the child qualifies for home health services. Your doctor or case manager should be able to help you find a home health agency.

**18. Does the Children's Buy-In offer retroactive eligibility?**

Retroactive eligibility may be requested up to 90 days prior to the application date. If retroactive eligibility is not applicable, the effective date of eligibility will be the date of application.

**19. Does the Children's Buy-In offer continuous eligibility?**

Continuous eligibility will be available for children and youth on Children's Buy-In beginning October 1, 2015. Children and youth are not eligible for continuous eligibility if they have unpaid premiums over 60 days old. Unpaid premiums over 60 days old will cause the child to receive a Notice of Action advising of the termination from the Children's Buy-In, and appeal rights. If the case closes, it will be reviewed by the system to determine if the child is eligible for any other Medicaid program.

**Application and Redetermination Information****20. How does a family apply for the Children's Buy-In Program?**

Families can apply online, by paper application, by phone or at an eligibility site. Medicaid application and Medicaid Disability Application information is below.

Our mission is to improve health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.

[www.colorado.gov/hcpf](http://www.colorado.gov/hcpf)



## Medicaid Applications

Families should indicate that they are requesting Medical Assistance for Families in the appropriate check-box on the application. “Children’s Buy-In” is not printed on the application. Any of the following applications can be used to apply:

- **Online application – apply for medical assistance only or apply for medical/cash/food assistance**
  - [Colorado.gov/PEAK](http://Colorado.gov/PEAK)
  - Application is submitted online, and will indicate where application was sent for processing
- **Application for Medical Assistance – apply for medical assistance only**
  - [English Application for Medical Assistance](#)
  - [Spanish Application for Medical Assistance](#)
  - Submit to any eligibility site including a county department of human/social services, a Medical Assistance (MA) site or to any application assistance site
- **Application for Public Assistance – apply for medical, cash and food assistance**
  - [English Application for Public Assistance](#)
  - [Spanish Application for Public Assistance](#)
  - Submit to any eligibility site including a county department of human/social services, a Medical Assistance (MA) site or to any application assistance site

## Medicaid Disability Application

If the child does not already have a disability determination through SSA, please submit the following forms with the Medicaid application to an eligibility site.

- [English Disability Application or Spanish Disability Application](#)
- [Release Form](#) - allows the State Disability Determination contractor to request your medical information which is required as a part of the disability determination process
- Submit to eligibility site with Medicaid application. If submitting separately, Medicaid Disability Application should be sent to the same eligibility site where the Medicaid application is being processed.

Find an eligibility site:

- [County departments of human/social services](#)
- [Certified Application Assistance Sites \(CAAS\), Presumptive Eligibility \(PE\) Sites, Medical Assistance \(MA\) and other eligibility sites](#)

Paper Applications can also be sent upon request through the Medicaid Customer Contact Center Monday through Friday, from 7:30 a.m. to 5:15 p.m. at 1-800-221-3943 / TDD 1-800-659-2656. Requests can also be [submitted online](#).

## 21. How should the application be filled out?

Any of the applications in the previous question can be used.





- Indicate that you are requesting health coverage and whether the child has any condition or need for care that would identify a disability, such as answering the question about a medical or developmental condition, and the question about needing help with self-care activities.
- Include all of the family members in the household on the application
- Note: If you are using the paper *Application for Medical Assistance*, you do not need to fill out the pages requesting Resource information (currently Worksheet D)
- If the child with a disability does not have a disability determination through the SSA, submit the application with the Medicaid Disability Application and Release Form as described in the previous question

**22. Should assets/resources be reported on the application?**

The Children's Buy-In program does not take assets/resources into account to determine eligibility, so they do not need to be reported.

**23. How will the eligibility system know which program to put my child on?**

When the Medicaid application is being processed, the eligibility system is designed to scan several different program groups based on the information provided in the application. Making sure you complete the question about a medical or developmental condition, and the question about needing help with self-care activities will help expedite the eligibility process to determine which program group might best suit your family's needs.

**24. How long will it take for the application to get processed?**

The processing timeline for applications that do not need a disability determination can take up to 45 days. The processing timeline for applications that require a disability determination can take up to 90 days. The effective date of eligibility will be the first day of the month of application, unless 90 day retroactive coverage is requested.

**25. How does the redetermination process work?**

Like other Medicaid programs, eligibility for the Children's Buy-In program is re-determined once per year, or when a change in circumstance is reported (e.g., changes in income or family composition). A packet will be mailed 60 days prior to the annual redetermination date. If there are no changes to report, then the child will be automatically re-enrolled. If changes are reported at that time, eligibility for the Children's Buy-In and other programs will be determined based on the new information. Changes can be reported to your case manager, eligibility technician or online through [Colorado.gov/PEAK](http://Colorado.gov/PEAK).

**26. Does disability need to be re-determined every year?**

Disability is re-determined by Social Security once the diary date of disability passes, which is generally either 3, 5 or 7 years after the original determination. The diary date is located on the Social Security award letter.

**27. Can applicants appeal an eligibility determination that deemed the applicant ineligible for medical assistance?**

Anyone who is denied Medicaid eligibility for any reason has a right to appeal and should talk to their case manager or eligibility site to exercise this right. An individual's appeal rights are listed in each Notice of Action or letter sent to you about your benefits.



## Children's Buy-In and Other Program Interaction/Transition

### **28. If a child is receiving medical assistance through Child Health Plan *Plus* (CHP+) can they switch to Children's Buy-In?**

If a child is already enrolled in CHP+ and the family would like to be determined for Children's Buy-In eligibility, they will need to work with an eligibility technician and submit a Medicaid Disability Application to the eligibility site.

### **29. If a child loses SSI Medicaid due to being over-income, how can he/she transition to the Children's Buy-In?**

The child would first need to go off of SSI (for example, due to being over income) before an eligibility determination for other Medicaid programs like the Children's Buy-In could be done. However, during that process, there is potential for a gap in coverage. To ensure that the transition is as seamless as possible, you should work with your case manager or eligibility technician to indicate that their income is expected to increase. A case manager or eligibility technician can help advise you what is needed based on your situation – such as whether or not a new application is needed, if your child needs a new disability determination, or if there are verifications that need to be provided to do the eligibility determination, etc.

## Other Frequently Asked Questions

### **30. What is the Health Insurance Buy-In (HIBI)? Is HIBI available through the Children's Buy-In?**

HIBI is a Medicaid program that pays a portion of the client's commercial health insurance premiums when it would be cost-effective for Medicaid to do so. HIBI is not currently available to Children's Medicaid Buy-In enrollees.

### **31. Should families keep private health insurance? What are the benefits?**

While the decision to keep a child enrolled in private insurance is a personal decision that must be weighed carefully by each family, there are several advantages to retaining commercial coverage that should not be overlooked. Access and availability to health care providers would be two such factors.

It should be noted that Medicaid works as a wraparound to private coverage for Medicaid-covered services. Medicaid is billed after the private plan is billed, and for Medicaid-covered services, the client is only responsible for the Medicaid cost-sharing amount. Furthermore, children under the age of 18 do not have copayments for Medicaid-covered services. For example, if the primary insurance coverage has copayments or other cost-sharing amounts due for durable medical equipment (DME) or limits therapy services; Medicaid will cover those medically necessary services. Also, the family will not owe copayments for the services.

You should always present your private insurance card and your Medicaid card so that health care providers or pharmacies can properly bill the claims.





**32. How does someone know they can opt out of Children's Buy In? Will they be notified via mail or on their notice?**

The existing Approval Notice of Action for Buy-In programs will include the following language in the Additional Information section:

“You have been enrolled in the Medicaid Buy-In program that may require monthly premiums. You may choose to no longer be enrolled in the program by calling your eligibility worker or logging on to the PEAK website at [www.Colorado.gov/PEAK](http://www.Colorado.gov/PEAK).”

A question will be added in [Colorado.gov/PEAK](http://Colorado.gov/PEAK) “Report My Changes/RRR” that can be used by a client entering their application in PEAK, going through redetermination on PEAK or if they choose at any time to no longer be part of the Buy-In program:

“You are enrolled in the Medicaid Buy-In program that may require monthly premiums. You have the option to disenroll from this program by clicking here” (checkbox).

**33. Who will process the request to opt out of the Children's Buy In?**

The request to opt out can be processed either by an eligibility worker at the County or by the client through [Colorado.gov/PEAK](http://Colorado.gov/PEAK).

**34. Will current clients be given the ability to opt out? If so, when and how?**

Current clients will be given the ability to opt out through PEAK or their eligibility worker at any time as described in [Question 32](#)

**35. Is opting out a life change event allows an individual to shop for insurance on Connect for Health Colorado?**

Opting out is a choice and therefore is not considered a life change event to allow shopping for insurance on [Connect for Health Colorado](#).

**36. What if someone wants to opt out later, can they opt out at any time?**

A client can opt out at any time by contacting their eligibility worker or through [Colorado.gov/PEAK](http://Colorado.gov/PEAK).

**37. Can an individual opt in at any time? If they want to opt in, do they need to reapply?**

An individual must apply and meet the criteria for the Buy-in program; there is not an opt-in option. If the individual's circumstances change, they can report this change through [Colorado.gov/PEAK](http://Colorado.gov/PEAK) or to their eligibility worker to determine if they meet Buy-In criteria.

**38. Will opt out cases close a case? Does that mean someone needs to reapply if they want to be reevaluated for the Buy-in after opting out?**

If a person opts out, their case will be reviewed by the system to see if they fit any other Medical Assistance criteria. If they do not meet any other Medical Assistance, they will receive a Notice of Action advising them of their case closure and appeal rights. If they decide they want to be considered for Buy-In again, they will need to reapply.



**39. What outreach is being done to current clients and the stakeholder community about the ability to opt out of the Buy-in program?**

The stakeholder community has been advised through the public rule making process. Updates will occur to the FAQs and Program Information available on the Department Web site.

This a working document and will be updated periodically. Submit suggestions to [Beverly.Hirse Korn@state.co.us](mailto:Beverly.Hirse Korn@state.co.us)

