
WIC, Medicaid, Welfare: Understanding Government Assistance

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This talk is part of a series of Community Pediatrics presentations based on child advocacy. Good medicine is not practiced in a vacuum. In order to be an effective pediatrician, you need to understand the cultural and environmental context in which your patients live. This includes thinking about people's cultural background, home and community environment, educational opportunities, and economic realities – all with the goal of improving the overall health of children on a one-to-one, community, state, and national level.



Goals and Objectives: To develop a basic knowledge of government assistance programs

- Understand eligibility levels for programs
- Define entitlement program
- Where can families get help?



Philosophy: Why is this important?

- This talk is part of a series of Community Pediatrics presentations based on child advocacy. Good medicine is not practiced in a vacuum. In order to be an effective pediatrician (generalist or specialist), one needs to consider the cultural and environmental context in which their patients live. This includes thinking about people's cultural background, home and community environment, educational opportunities, and economic realities – all with the goal of improving the overall health of children on a one-to-one, community, state, and national level.

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Name 3 resources for a mother who is being harassed by her landlord.

Mom who is behind in her rent.

Mom who has peeling paint, etc or other violations.

www.lawhelp.org

What benefits is a mother w/ 2 children on welfare eligible for. Where can she get help: food stamps, etc. Now what she is illegal.

Program set up to get fathers to pay – while there have been some gains in child support, not a lot b/c almost all of the money paid by the fathers goes to the government not to the child – prior to 1996, there was a \$50 pass through that allowed the 1st \$50/ mo to go to the family – most states have eliminated this.

www.Urban.org

Many Families Turn to Food Pantries for Help

Author(s): [Sheila R. Zedlewski](#), [Sandi Nelson](#)

Other Availability: [PDF](#) | [Order Online](#) | [Printer-Friendly Version](#)

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No. 17 in Series, "Snapshots of America's Families III"

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In 2002, over 4 million nonelderly low-income families said they had used a food pantry at least once during the past 12 months. The majority of these families had children, and most included adults who had worked during the past year. Nearly half the families that turned to a food pantry also had some help from the federal Food Stamp program in the past year. The data indicate that emergency food assistance programs, run largely by private organizations, play an important role in supplementing earnings and government assistance for many families.

DATA AT A GLANCE IN 2002, OVER 4 MILLION NONELDERLY LOW-INCOME FAMILIES REPORTED USING A FOOD PANTRY IN THE PAST 12 MONTHS. WORKING PARENTS WITH CHILDREN MADE UP NEARLY HALF THE FAMILIES THAT TURNED TO FOOD PANTRIES. 46 PERCENT OF LOW-INCOME FAMILIES USING FOOD PANTRIES ALSO REPORTED RECEIVING FEDERAL FOOD STAMPS. **The Food Pantry Safety Net**

Food pantries distribute food for use in families' homes and are distinct from emergency kitchens (soup kitchens) that provide prepared food to eat at the site. Most of the food distributed by food pantries comes from local donations from private sources (individuals or food companies), but the federal government supplements these resources through The Emergency Food Assistance Program (TEFAP). Recently the government estimated that TEFAP provided about 12 percent of all food distributed at pantries and soup kitchens.¹ Food pantries rely heavily on volunteers, and the majority are affiliated with faith-based organizations.

The 2002 National Survey of America's Families (NSAF) asked families whether they had gotten



Government Assistance

- Welfare
- Food Stamps
- WIC
- Medicaid
- SCHIP
- SSI

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How do our families survive?

Expenses

■ Rent	\$600 (usu. for a rented room)
■ Food	\$350
■ Clothes, etc	\$120
■ Phone	\$30
■ Gas/Electric	\$50

■ Total Out: \$1150
(numbers calculated in 2002)

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Hetty's 4 main points (for the Welfare, Food Stamps, and WIC half of the presentation)

1. Our families are barely surviving economically.
 - they must depend on other, undocumented sources.
2. There are reasons why they may not answer our questions truthfully (ex: is the father involved in the child's life.)
3. Where so we interface with this system? (Ex: writing letters to exempt mothers from workfare.)
4. WIC is supplemental. (This may lead to FTT when families try to stretch the allotment.)

ALL CALCULATIONS MADE BASED ON FAMILY OF 3: MOM AND HER TWO YOUNG CHILDREN.

(Child care expenses are in addition and not included in this calculation.)

How do our families survive?

Income (not working)

■ TANF	\$577
■ Food stamps	\$345
■ EITC*	0
■ WIC	~\$50

■ **Total in** **\$972**

■ **Total out** **\$1150**

*EITC=Earned Income Tax Credit

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Welfare has undergone some significant changes in the past 4 years. The majority of our families have received welfare at one time or another. With the goal of understanding the economic realities of these families, we will provide a basic review of welfare as it exists now.

-Food stamps may be about \$60 more per month now, increased in October 2000.

Q: Does it help to work?

A: Yes.

■ Income (not working)		■ Income (working 20 hrs/wk)	
■ Wages	\$0	■ Wages	\$446
■ TANF	\$577	■ TANF	\$395
■ Food stamps	\$345	■ Food stamps	\$337
■ EITC	\$0	■ EITC	\$223
■ WIC	~\$50	■ WIC	~\$50
Total In	\$972	Total In	\$1451
Total Out	\$1150	Total Out	\$1150

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1. These numbers are per the 1999 State TANF Income calculator found at http://newfederalism.urban.org/InCalc_Dev
2. These numbers are as per the calculator at selfsufficiency@wceca.org

userid: guest

password: access02

They can updated or confirmed by signing on. Last updated: 10/02.

And, SSI can help a lot...

■Expenses	\$1150
■Income	
■Not working	\$972
■Working 20 hrs/wk	\$1451
■Working 40 hrs/wk	\$1824
■Not working + SSI	\$1375
(SSI replaces TANF assistance for that person, total \$517 in 1999)	

**Transportation, child care and the child tax credit are not considered here but probably should be.*

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These numbers are calculated on \$517 extra per person (dollar amount is from 1999 may be different now) (there is also a little more that the state adds on – not included in this calculation). The SSI income replaces the TANF assistance for that person.

**Transportation, child care and the child tax credit are not considered here but probably should be.



How do they survive?

- Food pantries and other private source of aid,
- Undocumented help from the father, other family and friends,
- Other sources...



Welfare Reform

- The Personal Responsibility and Work Opportunity Reconciliation Act of 1996, signed into law 8/22/96 by Bill Clinton.
- With this law, The Temporary Assistance to Needy Families (TANF) program was created and replaced AFDC (Assistance for Families with Dependent Children).
- And, Federal entitlement to cash assistance ended.

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-In August 22, 1996 President Clinton signed in to law “The Personal Responsibility and Work Opportunity Reconciliation Act of 1996.”

-The Temporary Assistance to Needy Families (TANF) program was created, and replaced AFDC.

Federal entitlement to cash assistance ends.

Q: What is an entitlement?

A: There are about 400 of them, with social security being the largest, (Medicaid is also one). An entitlement is like a basic right. The federal government says you have a right to this no matter what state you live in. Federal entitlement programs make payments directly to recipients who meet eligibility criteria set by law. With the movement of aid from federal control to block grants, federal entitlement ends. Entitlement programs are not subject to budgetary constraints.

-The states may use TANF funding in any manner “reasonably calculated to accomplish the purposes of TANF.”



Q: What is an Entitlement?

A: There are about 400 of them, with Social Security being the largest, (Medicaid is also one). An entitlement is like a basic right. The federal government says you have a right to this no matter what state you live in. Notably, these programs are not subject to budgetary constraints. Federal entitlement programs make payments directly to recipients who meet eligibility criteria set by law. With the movement of aid from federal control to state block grants, federal entitlement ends.



TANF Goals:


- to provide assistance to needy families so that children can be cared for in their own homes;
- to reduce dependency by promoting job preparation, work and marriage;
- to prevent out-of-wedlock pregnancies;
- to encourage the formation and maintenance of two-parent families.

*The states may use TANF funding in any manner “reasonably calculated to accomplish the purposes of TANF.”

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These are basically the same as the stated goals for the NYC program.




Family Assistance = Cash to eligible families that include a minor child living with a parent or caretaker relative

- Originally, Welfare was designed to take care of single mother households, because women were not expected to work. As a result, women had to deny the presence of a man in the home to get assistance. In the current system, everyone is expected to work, so that, theoretically, there is no barrier to two-parent households.

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In the past Welfare was formed to take care of single mother households, because women were not expected to work. Thus, women had to deny the presence of a man in the home to get assistance. In the current system, everyone is expected to work, so that, theoretically, there is no barrier to two-parent households.



Conditions of Family Assistance (Under TANF)

1. Lifetime limit of 60 months
2. Work Activities requirement (Work activities must start within 1 month of check receipt)
 - Education
 - ESL
 - Job search
 - Work (non-subsidized or Work Experience Program)

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A. Work activities must start within 1 month

B. Child support requirements

1. Provide documentation as to who the father is.
2. Be a witness at paternity hearings
3. Provide information as to whereabouts of the father or attest to lack of knowledge under penalty of perjury.

C. School requirement - No more than 4 unexcused absences per academic quarter grades 1-6.



Conditions of Family Assistance (Under TANF)

3. Must comply with Child Support Services:
 1. Provide documentation as to who the father is.
 2. Be a witness at paternity hearings
 3. Provide information as to whereabouts of the father or attest to lack of knowledge under penalty of perjury.
4. School attendance requirement:

No more than 4 unexcused absences per academic quarter grades 1-6.



Some Work Requirement Exemptions

- Caring for a child younger than 12 months
 - No more than 12 months of a caretaker's life may be exempted for child care
 - No more than 3 months for any one child
 - Social service official may extend to 12 months
- Not job ready
- Fleeing domestic violence
- Dependant <16 years
- Dependant <19 and in school (unmarried teens must be in school)

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This is not an exhaustive list

More exemptions: Dependant <16 years

Dependant <19 and in school

*unmarried teens must go back to school



Work Requirement Exemption (con't)

- Ill or incapacitated person or person caring for an ill or incapacitated person.– *this is why will fill out those forms for the parents of chronically ill children.*

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There is also an asset test: can't have more than \$3,000 in assets (there is a vehicle exemption (4,650)).



NYC's Version: "NYC WAY" 3/98

- Welfare offices Converted into "Job Centers"
 - Core components:
 - Work experience program (WEP) (NYC has the largest work experience program in the nation)
 - Eligibility verification review
 - Finger printing
 - Substance abuse program (if found to have a problem must complete a treatment program)
 - SSI eligibility review done at application
 - Intensive case control (to monitor that participants move through the required activities and stages)
- **Can be cut off for 3-6 months if thought to be non-compliant with NYC WAY.

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Information from

***May need to delete this slide due to time constraints. May be unnecessary detail

-WEP: NYC boasts the largest work experience program in the nation

-Eligibility Verification review: Office visit, home visit, data match against data warehouse to determine identify, resource and income.

-Fingerprinting to prevent fraud

-substance abuse – if found to have a problem are required to complete a treatment program.

-Intensive case control: to monitor that participants move through the required activities and stages. *Can be cut off for 3-6 months if thought to be non-compliant with NYC WAY.

*Can be cut off for 3-6 months if thought to be non-compliant with NYC WAY.



Who Qualifies for Family Assistance?

- Income of $\leq 185\%$ of federal poverty level

- \$2,182 per month for a family of 3

= \$26,178 per year

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Gross income test: Example: for a family of 8 the yearly sum is about \$28,000. If you make for than that for your family of eight, you are not eligible for any assistance.

-food stamps are not counted as income

-A portion of subsidized housing is counted as income

-Minimum monthly TANF benefit is \$10.



Food Stamps

(A depression era program. Can get coupons or electronic benefits with a plastic card.)

■ Average monthly allotment

- \$73 per person

■ Uses

- Food or food products
- Seeds or food-producing plants

■ Exemptions

- Alcohol and tobacco
- Food to be eaten in the store
- Vitamins and medicines
- Pet foods
- Any non-food items

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- A depression era program
- Can get coupons or electronic benefits with a plastic card.
- restaurants can accept food stamps for homeless, elderly or disabled.



Food Stamps

- Who is eligible?
 - U.S citizens
 - Many child and elderly legal immigrants
 - $\leq 130\%$ federal poverty limit

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How is each household's food stamp allotment determined?

-Based on the Thrifty Food Plan (TFP), a low-cost model diet plan. The TFP is based on National Academy of Sciences' Recommended Dietary Allowances, and on food choices of low-income households.

-An individual household's food stamp allotment is equal to the maximum allotment for that household's size, less 30% of the household's net income.

-able bodied adults must meet certain work requirements.

- Who is eligible? (more detail)
 - Many child and elderly legal immigrants
 - Resource limits (\$2-3,000)
 - Gross monthly income $\leq 130\%$ federal poverty limit (\$1,533/month for a family of three)
 - All household members must have a social security number or apply for one
 - U.S citizens

Emergency Food Programs (for anyone in need of food):

1-(800) 486-4792 or (212) 533-6100



How is each household's food stamp allotment determined?

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- An individual household's food stamp allotment is equal to the maximum allotment for that household's size, less 30% of the household's net income.
- Able bodied adults must meet certain work requirements.



WIC

- Federal grants to states to provide
 - Supplemental foods
 - Health care referrals
 - Nutrition education
- Works through vouchers for use in stores

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WIC

■ Eligibility

- Low-income ($\leq 180\%$ FPL)
 - Pregnant women
 - Postpartum women
 - Infants and children to age 5 years "found to be at nutritional risk"
- Automatic eligibility with Medicaid
- Illegal immigrants can get WIC

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Definition of "Nutritional Risk": e) conditions that predispose persons to inadequate nutritional patterns. Including but not limited to homelessness, migrancy.


CPMC WIC Offices:

VC4 Area 1	(212) 305-7149
608 W 165 th St.	(212)928-0386
630 W. 170 th St.	(212)928-0184
68 Nagle Ave.	(212)304-3642
170 W. 233 rd St.	(718)796-1657



WIC

- **Formula Allotment:** The equivalent of 403 fluid ounces per month: about 12 cans of concentrated formula.
- **Get essential foods:** milk, eggs, cheese, etc.



More NY Assistance Programs

- Safety Net Assistance
- Emergency Assistance to Families
- Home Energy Assistance Program
- Child Care Subsidies
- Housing Services
- Refugee and Immigration Services
- Discount Telephone Service

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A. Safety Net Assistance-

- for single adults
- childless couples
- children living apart from any adult relative
- families of persons abusing drugs or alcohol
- families of persons refusing drug/alcohol screening, assessment or treatment
- *persons who have exceeded the 60-month limit on assistance
- aliens who are eligible for public assistance, but who are not eligible for federal reimbursement. Individuals can receive Safety Net Assistance in cash for a maximum of two years in a lifetime. After that, if eligibility continues, it will be provided in non-cash form.
- Unless mentally or physically unable, Safety Net recipients must engage in work activities.

B. Emergency Assistance to Families

C. Home Energy Assistance Program (HEAP)

- Provides grants for low-income individuals or families to help pay heating bills, or to provide funds for residential weatherization and other energy-related home repairs. Is available to renters and homeowners to meet emergency and non-emergency needs. Benefits targeted especially to households containing elderly, disabled or children under 8 years of age. Between \$40-\$350/yr. \$315 on average. Call: 212-442-HEAP

Child Care

- Transitional Child Care
 - Partial reimbursement of child care costs for up to one year.
- Low Cost Child Care:
 - Group or family day care available through another NYC agency. The cost is based on income and family size.

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Transitional Child Care from HRA – get this for up to one year after case is closed. If:

- working and not on public assistance
- you were getting PA for at least 3 of the 6 months before your case was closed.
- Children younger than 13 years
- If children 13-19 and unable to care for themselves, need a letter from the doctor.
- income parameters. Ex: family of three must make less than \$2,387.00/month.

Subsidized (low cost child care) – through Agency for Child Development (ACD)

Fee depends on income and family size.

To apply call ADC @ 1-(718) FOR KIDS.

or pick up an application at an ADC borough office:

Manhattan (212) 835-7715/7718

Bronx
(718) 401-2034/2035

When the parent calls they are scheduled for an interview and told what documents to bring. If the person is eligible and a vacancy exists,a



SSI

- Supplemental Security Income
- Enacted 1972 to care for elderly or disabled Americans with limited resources
- 1997 - 965,000 people receiving SSI

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SSI is Supplemental Security Income.

It was enacted in 1972 to care for elderly or disabled Americans with limited resources. Children are eligible for SSI through the disability route. It is a monthly added income to help supplement the families available resources.

In 1997, there were **965,000 people** in the US receiving SSI. With the change in the definition of disability in children under the welfare reform act of 1996, **~135,000 children are estimated to loose their SSI benefits.**

The majority of SSI funds come from a general revenue fund of the US Treasury, but is run by the Social Security trust funds (i.e. **Federal government dollars**).

Children receive \$512 federal money and a NYS supplement per month if they are eligible for the full SSI benefit.



Who is Eligible?

- Low-income people \geq 65 years of age
- Low-income people who are blind or disabled (includes children)
- Does not include most immigrants
- Asset limitations

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Eligibility is based on age, disability status and income. Low income elderly (>65 years of age), or people with blindness or disability are eligible.

For children, **income eligibility is based on %FPL and how many workers in the family.** For a family of three with **2 workers** in the family, a child will receive the **full benefit up to 140% FPL**, and receive a **reduced amount between 140% and 185% FPL**. For a family of three with **one worker** in the family, a child will receive **full benefit up to 120% FPL** and receive a **reduced amount between 120% and 160% FPL**.

In addition, an applicant must be either an American citizen, or in a specific category of documented immigrant.

There are income and asset limitations that are factored into the income calculator. **A person can not have more than \$2000 in assets per person, and \$3000 per married couple.** The cost of a home and usually a car can be excluded from the asset calculator.



Definition of Disability in Children (SSI)

- Changed under welfare reform of 1996
- Must have a medically-proven physical and/or mental condition resulting in marked and severe functional limitations
- Must be expected to last ≥ 12 months or result in death

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The definition of disability in children, which was previously the same as adults, changed under the welfare reform act of 1996. **It is estimated that because of the change about 135, 000 children will probably loose their SSI benefit.**

The new definition of disability in children is as follows:

A child is considered disabled if they have a **medically-proven physical and/or mental condition** resulting in **marked and severe functional limitations** that is expected to **last more than 12 months or result in death.**



How Do You Get SSI?

- Social Security office has specific guidelines listed in a book.
- Paperwork sent to the Disabilities Determination Service for decision
- Must bring information about child's medical and day-to-day care to the appointment
- SSI Sends us a form and we send it directly back to them.

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Q: How do you get SSI?

A: The Social Security Office has very **specific guidelines-- a list of signs, symptoms or lab lab findings for >100 physical and mental problems**. If the child's problem is not specifically one of the 100 listed diseases, their signs and symptoms are matched to the ones in the book and assessment is done in this fashion.

The paperwork is sent to the **Disabilities Determination Service** for a decision. Each case is reviewed by a disabilities evaluation specialist and a physician. If they feel that there is not enough data to make a decision, they may ask that the child be taken for a special evaluation appointment, which is paid for by the Social Security Office.

The **parent must bring information about the child's medical and day-to-day care to the application appointment**. As much information as available concerning the child's physicians, other health professionals, teachers, counselors, therapists and social workers. The evaluation is a comprehensive one.

For **information on SSI** call the Social Security national hotline at **1-800-772-1213** (M-F 7am-7pm).

The **Washington Heights Social Security Office** number is **212-923-**



SSI - Time to Benefits

- Review process can take up to 4 months
- Provision for presumed disability (payments begin immediately)
 - HIV infection
 - Blindness
 - Deafness (in some cases)
 - CP (in some cases)
 - Down's syndrome
 - Muscular dystrophy
 - Significant mental deficiency
 - DM (with foot amputation)
 - Amputation of 2 limbs or the leg at the hip

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The **review process for SSI benefits can up to 4 months**, and the parents are told this at the initial application appointment. There are certain illnesses that are considered **presumed disabilities, and therefore SSI payments begin immediately**. This is something that we should be aware of as advocates for our patients.



Continuing Disability Review

- Reviewing disability
 - If improvement is expected -- case review q6-18 months
 - If improvement is possible but not predicted -- case review q3 years
 - If improvement is not expected -- case review q5 - 7 years
- Must present evidence of compliance with medical treatment

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SSI benefit review is dependent on the child's condition.

If the child has a **condition that is expected to improve**, there is a **case review every 6- 18 months**. If **improvement is uncertain**, **review is every 3 years**. And if **no improvement is anticipated**, **review is every 5-7 years**. The payee (typically the parent) is expected to **present evidence that the child is receiving treatment considered medically necessary** for their condition, and if they can not, the income may be taken from them and assigned to another payee.



Who is Uninsured?

- >44 million Americans
- 11 million, or 1 in 7 children
- 7.4 million of these children are eligible for governmental insurance coverage

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The trends over the last 10-15 years has been one of **decreasing employment-based insurance coverage** and increasing uninsured and Medicaid-insured people.

Q: Who are the uninsured?

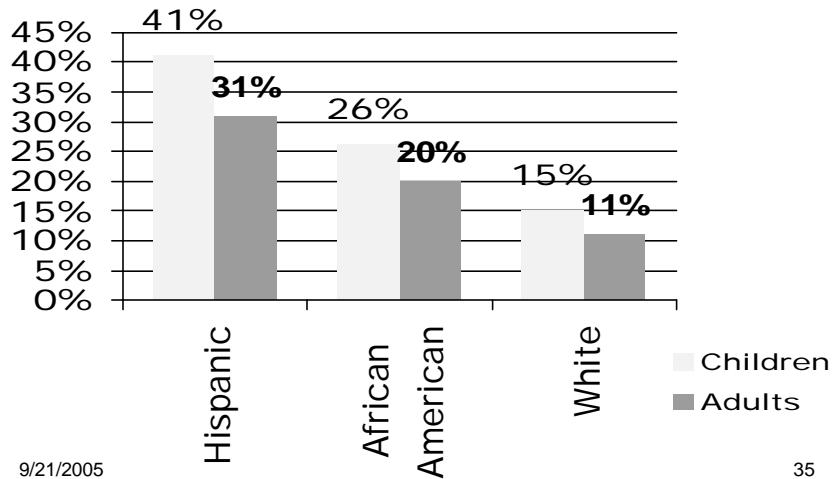
A: Currently, in the US, there are **>44 million uninsured people**.

Of the 44 million, **11 million are children**.

***14% of American children** are uninsured.

It is estimated that **7.4 million are eligible for some sort of governmental insurance coverage**-- either Medicaid or SCHIP.

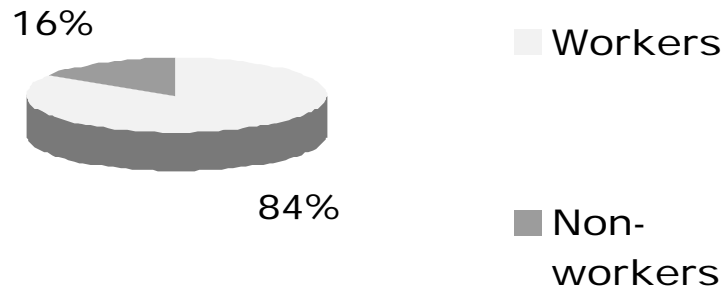
Characteristics of the Uninsured- Race



When looking at the composition of the uninsured, you can see that Hispanics make up a large percentage of the uninsured.

Of the 11 million uninsured children, **3.4 million are Latino, 80% are citizens themselves, and 64% have at least one parent who is a non-citizen.**

Characteristics of the Uninsured - Work Status



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When looking at the work status, you can see that **the majority of the uninsured are in working families**. 55% of these people have one full-time worker in the house, 19% have two full-time workers. **Only 16% of the uninsured are in non-working families.**



Characteristics of the Uninsured in New York

- 90% of the uninsured live in working households
- 16% of the children are uninsured
- 33% of New York's uninsured are not citizens

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The uninsured in New York parallel the national profile.

There are **672,000** uninsured people in NYS. **90% of uninsured New Yorkers live in working house-holds.** 33% of the uninsured of New York are Hispanic.

16% of New York State's children are uninsured. 62% live in two-parent families, only 5% receive welfare.

Special in New York is the large percent of the **uninsured who are not citizens- 33%.**



What is Medicaid?

- Enacted 1965
- A Federal-State entitlement program for low-income Americans
- Makes Federal matching funds available to states to provide health care to eligible individuals

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The **US spends \$100- 160 billion year on Medicaid.** It covers 20% of American children with Medicaid, it pays for 39% of all deliveries with Medicaid, 47% of all nursing home care, and 38% of all long-term care.

Q: So, what is Medicaid?

A: It is a **Federal-State entitlement program** enacted in 1965 with Medicare which makes matching funds available to states to provide health care to eligible low-income Americans.

Each state is given different amounts of money from the federal government, depending on the wealth of the state. Because New York is a wealthy state, we receive **50% matching funds from the federal government.** Therefore, 50% of the funds for the program comes from the federal government and 50% of the funds are from the state. Less wealthy states can receive up to 80% matching federal funds.



Who is Eligible for Medicaid?

- **3 groups** of low-income Americans:
 - The Elderly
 - The Disabled
 - Parents and Children (until 19th birthday)
- American citizens or legal immigrants
- State income requirements
- Pregnant women are the only group that qualify for Medicaid, regardless of their immigration status.

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Q: Who is eligible for Medicaid?

A: In order to receive Medicaid, you must be in one of the following three categories: the elderly, the disabled, or parents and children.

The **elderly**-----> 4 million people >65 years of age covered by Medicaid in 1997

-10% of the Medicaid recipients

The **disabled**----->6.8 million people covered in 1997

-17% of Medicaid recipients

Parents and children----->-**21 million children**

-**52%** of all of the Medicaid recipients

----->**8.6 million parents**

-**21%** of all recipients.

Included in the parent category are **pregnant woman, who are covered regardless of their immigrant status.**

For people in the above categories to qualify for Medicaid, they must also meet other requirements.

They must meet the **income requirements** (which differ from state to state), and they must be either an **American citizen, or specific legal immigrants.**

Only legal immigrants who have been in the US before August 22, 1996 or been in the US legally for >5 years. All other legal immigrants and undocumented immigrants qualify only for emergency care.

Therefore, a childless, non-disabled person who otherwise meets the income and citizenship status requirements is not eligible for Medicaid.

Medicaid Eligibility - NY State

- Eligibility for Medicaid is different based on age/status
 - Infants and Pregnant women-- <185% FPL (\$2,182 per month for a family of 3 = \$26,178 per year)
 - parents-- <84% FPL

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As previously mentioned, Medicaid is different state-to-state. Eligibility requirements vary.

In **New York State**, the income eligibility requirements are based on age. As you see, the **people at most high risk are more likely to be covered**. So children below the age of 1 year and pregnant women are covered to up to 185% of the federal poverty level. As children age, there are lower levels for Medicaid eligibility. And you can see that for parents to qualify for Medicaid, they have to be below the poverty level. As mentioned previously, ***pregnant women are the only group that qualify for Medicaid, regardless of their immigration status.***

1 to 5 years age-- <133% FPL

6 to 19 years age-- <100% FPL

(A second phase of Medicaid expansion will be increasing the 6- 18 year old coverage to 133% of FPL.)

In order to calculate a family's income for Medicaid qualification, there are income deductions that families can take. They can deduct \$90 per worker in the household, and \$175- 200 per child for childcare, and then



How do you get Medicaid?

- Go to Medicaid office or Community Based Organization (CBO)
- Information needed:
 - proof of immigration status
 - proof of address
 - proof of rent
 - social security card
 - proof of income
- Retroactive for 3 months

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New York has been very successful making the Medicaid application process easier through its program called “**facilitated enrollment.**” With facilitated enrollment, people can apply to Medicaid at the Medicaid office or a community-based organization. By having the option, many more people are able to enroll. **Advantages** include **longer hours** for those who work, people **speaking the applicants language** to help complete paperwork, and an **organization trusted** by the community therefore decreasing the applicant’s fear of the process. Currently in NY, there are **223 CBOs contracted as facilitated enrollers** in the community.

For the completion of the paperwork, the applicant must submit some paperwork including **proof of identity, NYS residence, and income.** Once your Medicaid is approved, it is retroactive for 3 months.

The current application in New York state, initiated in August 2000, is **combined to include Medicaid, SCHIP, and WIC.**

For parents to find out where there application is in the process, they may call **1-718-291-1900.** The phone number for **Allianza Dominicana for enrollment referral 212-740-1960.**



NY Medicaid Choice

- Mandatory HMO enrollment for almost all NYC Medicaid enrollees. (Some chronic illness exemptions)
- Many different HMO's: our practices take CPP, Affinity, NYPHP
- Heavy competition between HMO's.
- Many HMO's will sign people up without telling them they will no longer be able to see their PMD.
- After 3 months in an HMO, switching plans requires an MD letter of necessity.
- HMO's require authorization and referrals for many services.

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How do you stay insured with Medicaid in NY?

- Renew every 12 months
- then, 12 months of continuous eligibility
- Can keep Medicaid for 1 additional year after eligibility ceases

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Once you have Medicaid, how do you keep it?

In NY, Medicaid is **renewed every 12 months with a face-to-face interview**. This interview (through facilitated enrollment) can take place either at the Medicaid office or at the CBO.

In addition, Medicaid was changed to **12 months of continuous eligibility** in NY for improved coverage. With continuous eligibility, the beneficiary continues to receive Medicaid for a complete 12-month period even if their income changes during that time. So a person who began receiving Medicaid in January 2000, will continue to have benefits until January 2001 regardless of any change in income status during this time period.

In addition, a person enrolled in Medicaid whose eligibility status then changes can **keep their Medicaid coverage for an additional year**. This was done to ease families through the transition from welfare to work.



What is SCHIP?

- State Children's Health Insurance Program
- In NY = Child Health Plus
- Child Health Plus is administered by the same many HMO's that administer Medicaid.

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SCHIP is the State Children's Health Insurance Plan. It was enacted as Title XXI of the Social Security Act as part of the Balanced Budget Act of 1997.

It is a federal program of **\$40 billion in state-block grants to be used over 10 years to expand medical coverage for uninsured children.** It is the largest federal health care expansion since the 1965 enactment of Medicaid and Medicare.

In New York, **SCHIP is called Child Health Plus.** Child Health Plus is a program that began here in New York in 1991 as a solely state-funded program for health care expansion, and was actually one of the models for the federal SCHIP program. Unlike Medicaid, **Child Health Plus is solely a managed care program** here in New York.



SCHIP in New York State - Eligibility

- Children of any age who do not qualify for Medicaid or other health insurance
- Undocumented immigrant children can get SCHIP in NY State

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Q: Who qualifies for SCHIP in New York?

A: **Any child in who does not qualify for Medicaid or have any other form of health insurance can receive Child Health Plus (SCHIP).** In New York, unlike most other states, **this includes undocumented immigrant children.** The state has allocated state-only funds for insuring this group as federal funds can not cover them.

Because SCHIP began as Child Health Plus here in New York (a solely state funded program) there were a number of children who were enrolled into CHP who were actually eligible for Medicaid. Now that federal dollars are being spent on CHP (the federal government requires that all children eligible for Medicaid be in that program not SCHIP), these **135,000 children are being transferred from SCHIP to Medicaid.** There is a big concern that this transition will not be “seamless.”

Starting in mid 2001, adults will be able to qualify for a state-funded extension of SCHIP called **Family Care.** Adults between the ages of 19-65 will be eligible for Family Care if they meet income requirements-- **100% FPL for any adult and up to 150% FPL for any parent.** Unfortunately, at this time, **undocumented immigrants are not eligible for Family Care,** but lobbying is underway to change this.

The phone number for information concerning **Family Care= 1-877-YES-4FHP** and the phone number for **referral to children health insurance (and much more)= 1-877-KIDS-NOW.**



SCHIP eligibility

- Income requirements - Children
 - up to 160% FPL= free coverage
 - up to 250% FPL= pay modest monthly premium

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Income requirements for SCHIP are staged.

-If a family income is **<160% FPL**, SCHIP coverage for the children is **free**.

-Between **160- 222% of the FPL**, a family must pay **\$9/month per child for a maximum of \$27/month per family** for SCHIP coverage.

-Between **222% and 250% FPL**, the family must pay **\$15/month per child to a maximum of \$45/month per family**.

-Above **250% FPL**, **each child's coverage costs \$110/month** with no maximum per family. Although this sounds high, it is still cheaper than the individual rate of \$300/month per child in the private insurance arena.