

**HOME CARE FOR CERTAIN DISABLED CHILDREN COST SHARING
(KATIE BECKETT)
FREQUENTLY ASKED QUESTIONS**

Questions	Answers
<p>1. What is cost-sharing?</p>	<p>Cost-sharing is out-of-pocket costs for health care coverage. The three common types of cost sharing are deductibles, co-pays, and premiums. The cost-sharing being implemented is a monthly premium.</p>
<p>2. Why is cost-sharing being implemented?</p>	<p>The 2009 Idaho legislature, directed the department to establish cost-sharing based on ability to pay for families whose children are eligible for Home Care for Certain Disabled Children (commonly known as the Katie Beckett Program).</p> <p>Idaho Medicaid strives to make sure families with similar resources are treated the same. Families with children covered under CHIP, Workers with Disabilities, and the elderly and physically disabled currently contribute to the cost of their care through premiums and participant contributions.</p>
<p>3. When will my cost-sharing begin?</p>	<p>We will notify you by mail regarding the effective date of these rules. Given the public comments received, we are currently re-assessing the effective date.</p>
<p>4. How does the process work?</p>	<p>You will be contacted approximately two months prior to the effective date of the first premium due. You will be asked to furnish income and size of household information.</p>
<p>5. How much will I have to pay?</p>	<p>The amount you will need to pay will depend on your family income and size (number of family members living in the household). Premiums are based on a sliding fee scale and will take into account any premium contribution made by a parent for private coverage on behalf of a child with a disability.</p> <p><i>For families that received a letter:</i> Please look at the back of the letter you received to get an idea of where your family falls in the income guidelines.</p>

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<p>6. Whose income is counted?</p>	<p>The financially responsible parent(s)' gross income is counted.</p>												
<p>7. What is the sliding fee schedule?</p>	<p>Rules are subject to change, however the following reflects current proposed rules.</p> <table border="1" data-bbox="716 362 1887 654"> <thead> <tr> <th>Family Income</th> <th>Monthly Premium Amount*</th> </tr> </thead> <tbody> <tr> <td>Less or equal to 150% FPG</td> <td>\$0</td> </tr> <tr> <td>More than 150% FPG through 185% FPG</td> <td>\$15</td> </tr> <tr> <td>More than 185% FPG through 300% FPG</td> <td>3.0% of family income</td> </tr> <tr> <td>More than 300% FPG</td> <td>4.5% of family income</td> </tr> </tbody> </table> <p style="text-align: center;">FPG= Federal Poverty Guidelines</p> <p>The premium will be reduced by an amount that reflects the premium contribution made by the parent for private coverage on behalf of a child with a disability.</p>	Family Income	Monthly Premium Amount*	Less or equal to 150% FPG	\$0	More than 150% FPG through 185% FPG	\$15	More than 185% FPG through 300% FPG	3.0% of family income	More than 300% FPG	4.5% of family income		
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<p>8. How does the sliding fee scale work?</p>	<p>The following example is based on a family of three with no private coverage for the child with a disability.</p> <table border="1" data-bbox="682 967 1854 1360"> <thead> <tr> <th>Poverty Level</th> <th>Family Income Per Month</th> <th>Monthly Premium Amount</th> </tr> </thead> <tbody> <tr> <td>More than 150% FPG through 185% FPG</td> <td>\$2,289 to \$2,823</td> <td>\$15 Per Child</td> </tr> <tr> <td>More than 185% FPG through 300% FPG</td> <td>\$2,824 to \$4,578</td> <td>\$84.68 to \$137.33 Per Family (3%)</td> </tr> <tr> <td>More than 300% FPG</td> <td>\$4,579 to \$10,681</td> <td>\$205.98 and higher Per Family (4.5%)</td> </tr> </tbody> </table>	Poverty Level	Family Income Per Month	Monthly Premium Amount	More than 150% FPG through 185% FPG	\$2,289 to \$2,823	\$15 Per Child	More than 185% FPG through 300% FPG	\$2,824 to \$4,578	\$84.68 to \$137.33 Per Family (3%)	More than 300% FPG	\$4,579 to \$10,681	\$205.98 and higher Per Family (4.5%)
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<p>9. How will I know how much I have to pay?</p>	<p>You will be sent a monthly statement for the amount of the premium.</p>												

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10. Will I have to send in proof of my income, like a pay stub?	You may be asked to provide proof of your income as part of the renewal process. You can send a copy of a pay stub when you turn in your renewal paperwork if you like.
11. What if I am self-employed?	If you are self-employed, we will use information from your tax return or business records to determine your premium amount.
12. It can take several months to make an eligibility determination for new applications. Will I have to pay premiums while I am waiting to find out if my child is eligible?	No, the first premium will not be due until after the determination is made. You do not have to pay premiums while the application is processed.
13. Am I still required to pay the premium if my child does not use Medicaid that month?	Yes, you are responsible for paying the premium every month even if Medicaid is not used.
14. What if I do not provide proof of income? How will my cost-share be determined?	Medicaid will use the amount you report on the application or re-determination form if there are no discrepancies with the income that is reported and the interfaces we use. If there is a discrepancy and proof of income is not provided, we will have to assess the premiums in line with the maximum amounts allowed.
15. What happens if I cannot pay?	You should contact us. If there has been a change in your circumstances - your income has gone down - we can see if you qualify for a lower premium or no premium at all.
16. Will my child lose his/her Medicaid if I do not pay?	No. Your child's Medicaid will not end due to delinquent premium payments.

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17. What does happen if I do not pay?	The Department can pursue collection procedures to collect delinquent premiums if necessary.
18. Can I drop my child's Medicaid and reapply when I really need it?	That decision is up to you. Your child's Medicaid coverage benefits your child and family by ensuring that your child receives medically necessary services and supplies that private insurance does not cover. It also reduces your out-of-pocket costs by covering your co-pays and the deductible for private health insurance.
19. Can I drop my private health insurance that covers my child and just use Medicaid?	When you applied for Medicaid for your child, you agreed to enroll in a cost effective group health insurance plan if it was available to you, as required by IDAPA Rule 16.03.05.707.01.
20. What if I can't afford both my private insurance and the Medicaid premium for my child's coverage?	If you need help paying for private insurance, you may want to consider applying for the Health Insurance Premium Payment (HIPP) program to see if Medicaid can help with the cost of those premiums. You can call (866) 458-7657 (toll-free) to have an application sent to you.
21. How can I find out how much Medicaid services cost for my child?	You can file a Public Records Request through the Department's Administrative Procedures website or email a request to: PublicRecordsRequest@dhw.idaho.gov . Make sure to include the timeframe you would like to review, your child's name and Medicaid ID number (on his/her card) and your contact information.
22. Is there a process to submit comments regarding the cost sharing?	<p>The public comment period has been extended to Friday, August 21, 2009. The Administrative Bulletin containing the rules to implement cost sharing was published on July 1, 2009, and can be accessed via the internet through the State of Idaho, Department of Administration Web site at http://adm.idaho.gov/adminrules. In written communications, please reference dockets 16-0318-0901 (Medicaid Cost-Sharing) and 16-0305-0902 (Aid to the Aged, Blind and Disabled (AABD) Eligibility). There will be an additional public hearing held:</p> <p style="text-align: center;">Monday - August 17, 2009 - 6:00 pm PDT State Office Building Third Floor Conference Room 1118 "F" St., Lewiston, ID</p>

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23. Who reviews the public comments?	DHW management and policy staff review the transcriptions from the public hearings and all written comments. The public comments are taken very seriously. DHW management and policy staff will do their best to produce a cost-sharing requirement that most Idahoans will agree is fair and reasonable.
24. Has this already become a law?	Current proposed rules may be amended once the written comment period closes. While it is unknown at this point exactly what those changes will be, we anticipate adding language that makes adjustments for those families with private insurance. The percentages may also be re-evaluated.