

Georgia's TEFRA/Katie Beckett Program Application Cheat Sheet

Georgia's TEFRA/Katie Beckett Program provides Medicaid to children under the age of 18 with disabilities. TEFRA/Katie Beckett waives the income/financial eligibility of the family and allows the child to apply based on their individual assets and focuses on the degree to which the child's disability impacts their daily life.

Step 1:

Before you begin the TEFRA/Katie Beckett Application process it needs to be determined that your child does *not* qualify for SSI/Medicaid.

There are several ways to obtain an SSI denial

- a. You can call the Katie Beckett Centralized office at 678-248-7449 and be prepared to share information about your family's income and assets, based on that information they will make a determination if you should apply for SSI or if you can apply for KB
- b. Or you can call the Social Security Administration toll free at (800) 772-1213, and share information about your family's income and assets. If your income significantly exceeds the financial eligibility for Medicaid, ask them to send you a letter that states "due to income limits your child will note qualify for SSI". Typically, it takes 7-10 business days to receive the letter. This letter will need to be sent along with the rest of the TEFRA/Katie Beckett application.
- c. Or you can show proof for SSI ineligibility by submitting proof of income/assets with your application (such as paycheck stubs, tax returns, etc.).

Step 2:

The TEFRA/Katie Beckett application packet consists of several forms. Forms are also available from the Centralized Katie Beckett Team by calling 678-248-7449 or visiting their office at 2211 Beaver Ruin Road, Suite 150, Norcross, GA 30071

Your packet should include the following forms:

- 1. Pediatric DMA 6(A)- Physician's Recommendation For Pediatric Care
- 2. DMA 706-TEFRA/Katie Beckett Medical Necessity/Level of Care Statement
- 3. DMA 704- TEFRA/Katie Beckett Cost-Effectiveness Form
- 4. DMA 285-Georgia Department of Community Health-Third Party Liability Health Insurance Information Questionnaire
- 5. Form 94-Medicaid Application
- 6. Form 5460 –Notice of Privacy Practices. Georgia Department of Human Resources
- 7. DMA 124- Application for Health Insurance Premium Payment Program (HIPP)

Note: You must have all 7 forms in order to have a complete packet. Also, an order from your Doctor for medically necessary therapies.

*The Medicaid Application Form 94 has been updated and now includes Citizenship and Voter registration information, but the included Sample filled out forms have these two (citizenship & Voter Registration forms) as separate.

Step 3:

Collect records and evaluations that can be used to show your child's disabilities and/or special healthcare needs. Some examples are:

- (a) Medical reports from specialists on diagnoses and recommended treatments.
- (b) Medical records showing recent hospitalizations (hospital discharge summary within the past year) and illnesses.
- (c) Diagnostic evaluations from school and/or private psychologists, therapists, and early intervention staff. *NOTE: Evaluations must be current within the last 3 years*.
- (d) Child's *current* Individualized Education Program (IEP) or Individualized Family Support Plan (IFSP).
- (e) List of your child's *current* prescription medications.
- (f) Signed copies of both school and private therapy notes (at least the last 90 days) and should include the credentials of the provider.
- (g) Signed copies of nursing notes for the last 90 days.

General Tips for Completing the Forms

- Do *not* date the forms until they are all completed. (*Once dated the forms are only valid for 90 days, so wait until you are ready to submit forms before dating.*)
- You can fill out the forms and ask your doctor to sign them.
- Attachments should be signed and dated by your doctor or written on the doctor's letterhead.

Tips for Completing the DMA 6 (A) Physicians Recommendation Form

- Box # 7. In the caretaker's opinion would the child require institutionalization if the child did not receive community services? This question should be answered "Yes" if your child's disability would result in institutionalization if not for parent/family support and the TEFRA/Katie Beckett Program.
- Box #12. History: List of major milestones/setbacks your child has experienced. (See Sample Attachment)
- Box #18. Level of Care Recommended: Refer to "Level of Care Explanation" to ensure you have checked the one that best fits your child. Most children will fall under the ICF/ID (Intermediate Care Facility/Intellectual Disability).
- Section C: Add boxes to fit your child, as needed. (For example: 30 Bowel Child may require toileting assistance.) (NOTE: Attach all documentation to support and explain any additional care your child requires)
- **Box #37** To meet an institutional level of care in ICF/ID setting the doctor should recommend high tech.

Box #39 – Other Therapy Visits: Your doctor should recommend that your child receive therapy 5 days per week if placed in ICF/ID setting. (NOTE: See DCH response to the 5 days per week therapy

Tips for Completing Form 706 TEFRA/Katie Beckett Medical Necessity/Level of Care

- Under "Current Needs", mark with an "X", to indicate there is no need in that area.
- "Therapy" refers to the therapy sessions your child is *currently* receiving. You should submit at least 90 days of notes for each therapy.

<u>Step 4</u>

Now that you have collected all the documents and required signatures, you will need to:

- Make a cover letter listing all your documents. (See sample cover letter)
- Make a copy of the entire completed packet. (*This will make it a lot easier when you submit for renewals and if the packet gets "lost" you will not have to start from scratch.*)
- Mail your packet to the Centralized Office. (NOTE: It is recommended that you send by Certified Mail and keep the Certified Mailing Number as part of your records.) or,
- Hand deliver to the Centralized Office location and ask for them to stamp both your extra copy and the copy you give them with the date it was received. Call the office before going to ensure there is someone there, as they change the protocols due to COVID. There is a drop box outside their office.

Step 5:

The Katie Beckett office will call you for a telephone interview after they receive the packet. They will give you an opportunity to fix anything prior to giving you a technical denial. After this interview, they will then send the file for medical review.

Step 5:

If your child is denied TEFRA/Katie Beckett, you will receive a notice of denial of admission into the program along with the reason for denial. Should the denial be based on the level of care assessment or disability assessment, the notice will provide information about your right to an administrative review. All requests for administrative reviews must be requested within 30 days.

A technical denial may be issued if forms are missing, incomplete or filled out incorrectly. Requested information must then be submitted within 30 days to avoid a final denial.