

## What is Medicaid?

Medicaid is a health insurance program provided by the state and federal government. Medicaid is not the same as Medicare, which is a health insurance program provided by the Social Security Administration. (Medicaid eligibility is based on need. Medicare recipients are entitled to coverage no matter how much income and wealth they have.) Medicaid is run by each county's Division of Family and Children, formerly known as the "Welfare Department". All the county offices are supervised by the Indiana Family and Social Services Administration.

## Can I get Medicaid?

There are several ways that you can become eligible for Medicaid:

- ◆ All families receiving TANF benefits are automatically eligible for Medicaid.
- ◆ Many low-income children and pregnant women may be eligible for Medicaid.
- ◆ Low-income persons over age 65 may be eligible for Medicaid.
- ◆ Low-income persons, who are blind or disabled, may be eligible for Medicaid.

- ◆ Moderate-income persons, who are over 65, blind, or disabled, may be eligible for Medicaid if their medical expenses are greater than the difference between their income and the Medicaid guideline.

## Do I make too much money to get Medicaid?

**Resources** – you can only have a limited amount of resources and get Medicaid. The current limit is \$1,500 for a single person and \$2,250 for a married couple. Resources include things like land, money, bank accounts, insurance policies, and some vehicles. Resources don't include the house you live in, furniture, one vehicle, and clothing. If you are a nursing home resident, your spouse may keep more assets.

**Income** – In 2005, the Medicaid income guideline for one person is \$579 per month. For a married couple, the limit is \$869 per month. Certain additional children or persons in the household add \$290 each to the income limit. Under the spend-down rule, if you can show each month that you spend all your extra income on medical bills or health insurance premiums, you may still be eligible for Medicaid.

Certain low-income Medicare recipients may qualify for one of the limited Medicaid programs. This coverage includes payment of all or part of the Medicare Part B premiums, and may

include payment of Medicare deductibles and co-payments. To learn more, ask your caseworker if you qualify for QMB, SLMB, Q11 or Q12.

## Can I give or transfer my resources to someone else so I can get Medicaid?

Medicaid puts penalties on you if you give away resources. If you give away resources or sell them for less than their value, you may lose Medicaid coverage for nursing home care and for some in-home services.

## How often does Medicaid look at my resources?

Medicaid looks at your income and resources on the first day of every month, in order to see if you can get Medicaid for that month. If you don't meet the resource limits on the first day of the month, you usually can't get Medicaid for that whole month. However, if you don't meet the resource limits on any other day of the month, there should be no effect on your Medicaid benefits.

## What does Medicaid cover?

Different Medicaid programs provide different levels of coverage. Medicaid for the aged, blind, or disabled provides comprehensive coverage including physician services, hospitalization, prescription medications, transportation,

therapy, and nursing home care. Your doctor or hospital should be able to tell you whether a service is covered, as long as you let them know what type of Medicaid you have.

### **If I got Medicaid in another state, will I automatically get Medicaid in Indiana?**

No. Indiana's rules for Medicaid disability are stricter than the rules of most other states and the rules that Social Security Administration uses. So, even if you were getting Medicaid in another state or are getting social security for your disability, you still may not be able to get Medicaid in Indiana. You will have to show that your disability will last at least four years. Indiana will make its own decision about whether you are disabled.

### **What happens if I apply for Medicaid and my application is denied?**

You have the right to appeal if your application for Medicaid is denied, or if you do not receive a decision in 90 days (45 days for persons over 65). You have 30 days from the mailing date of the notice to appeal in writing. The county office should assist you with your appeal. However, you may send your request for a fair hearing directly to Hearings and Appeals, 402 W. Washington St., Room W 392, Indianapolis, IN 46204. Write that you want to appeal the denial of

Medicaid, and include your name and address. Keep a dated copy of your request. Once your request is received, a hearing will be scheduled, usually at the county office. For help with your hearing, contact Indiana Legal Services or the representative of your choice as soon as your application for Medicaid is denied.

For more information, see Indiana's website at [www.in.gov/fssa/servicedisabl/mcicaid/index.html](http://www.in.gov/fssa/servicedisabl/mcicaid/index.html)

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| <b>Bloomington:</b><br>(812) 339-7668<br>1-800-822-4774 | <b>Hammond:</b><br>(219) 853-2360                        |
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# **Medicaid for the Blind, Aged and Disabled in Indiana**

Prepared by:

**Indiana Legal Services, Inc.**

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Information Available on the web  
[www.indianajustice.org](http://www.indianajustice.org)