

□ For more information contact the Traditional Member Hotline: **800-457-4584**; Hoosier Care Connect Helpline: **844-284-1797**; Or your local Division of Family Resources

# Medicaid Disability

Medicaid Disability is a Medicaid aid category designed to serve individuals who are living with a disability. In general, to qualify for Medicaid under this category, individuals must meet three qualification criteria: income limits, resource limits, and the Social Security Administration's definition of disability. As of June 1, 2014, Indiana will automatically enroll individuals that the Social Security Administration (SSA) determines eligible for Supplemental Security Income (SSI) into the Indiana Medicaid program and will accept all SSA determinations of disability.

Indiana has a few programs that serve its Medicaid members with disabilities: Hoosier Care Connect, Traditional Medicaid, and MED Works.

## Hoosier Care Connect

Hoosier Care Connect is a system of coordinated care for eligible members with asthma, diabetes, congestive heart failure or coronary heart disease, hypertension, chronic kidney disease, severe mental illness, serious emotional disturbance, depression, a combination of diabetes and hypertension, or a combination of any of the above conditions. Hoosier Care Connect participants have the option to participate in disease management programs that the Care Management Organizations (CMOs) provide for their chronic condition and receive additional services such as preventative and pregnancy care, home and hospital care, vision and dental care, and transportation.

## Traditional Medicaid

Traditional Medicaid, sometimes called Fee-for-Service (FFS) or Medicaid Disability, is a healthcare program that offers medical care such as doctor visits, prescription drugs, dental and vision care, family planning, mental health care, surgeries and hospitalizations to eligible individuals. Home and Community Based Services (HCBS) waiver members are usually enrolled in traditional Medicaid.

## MED Works

MED Works is Indiana's Medicaid program for working people with disabilities. To be eligible for MED Works, one must be aged 16-64 years, meet income and asset guidelines, have a disability, and be working. Eligible members may incur a monthly premium.

## Who Qualifies for Medicaid Disability?

### Disability criteria and definition

The SSA determines whether applicants meet their definition of disabled. The SSA has a strict definition of disability for children:

- The child must have a physical or mental condition(s) that very seriously limits his or her activities; and
- The condition(s) must have lasted, or be expected to last, at least 1 year or result in death.

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### Resource Limits

Individuals who qualify for Medicaid Disability may have a limited amount of resources. It is important to note that certain items (for example, the person's home, one car that is used for medical reasons and some retirement savings) are exempt from the determination of countable resources. The resource limits are:

| Medicaid Disability                         | M.E.D Works |
|---------------------------------------------|-------------|
| \$2000 for an unmarried person              | \$2,000     |
| \$3000 for a married couple living together | \$3,000     |

\*MED Works members may hold approved accounts with additional assets

### Income Limits

Monthly income is used along with resources and disability determination to evaluate eligibility. Monthly income limits vary based on an individual's circumstances.

### How do I apply?

Individuals may apply for Medicaid based on disability in two different ways. Applications to the Social Security Administration for Supplemental Security Income are treated as applications for Medicaid under 1634 status. Individuals that are found eligible for SSI will automatically receive Medicaid Disability. Note that SSA determinations may take longer than the 90 days required for Medicaid eligibility determinations.

All members may also apply to Indiana Medicaid to ensure they receive a timely eligibility determination. Members that are not eligible for SSI must apply to Indiana Medicaid to have their eligibility determined.

Application for Medicaid is completed through the Division of Family Resources (DFR). Applications may be completed at the county office, by mail, or online.

### Apply in Person

To find a county office close to where you live, click on the link below. The state's website has a chart to assist in locating the office in your county.

<http://www.in.gov/fssa/dfr/2999.htm>

### Mail in Application

You can complete an application and mail it in. If you have access to a printer, click this link: <https://www.in.gov/medicaid/> When the form is complete, you must mail the application to the DFR office in your county. To find the mailing address in your county, click here: <http://www.in.gov/fssa/dfr/2999.htm>

### Apply Online

If you have access to the internet on your computer, click the link below. Follow the directions to complete and submit the form. <https://www.in.gov/medicaid/>

Programs and systems change often. It is important to ensure that you are using the most current information. This fact sheet was updated September 2020. Please check [http://fvindiana.org/fact\\_sheets](http://fvindiana.org/fact_sheets) for the most recent edition.

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