



ECHO IDAHO: **Autism**

A Deep Dive into the Katie Beckett Program

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Julie Wittman, PhD, MEd, BCBA

I am not employed by the Department of Health and Welfare, I am an Independent DD Provider (for Behavior Intervention, Family Education, and Behavior Modification)

None of the planners or presenters for this educational activity have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

Learning Objectives

- Katie Beckett Medicaid Overview
- DHW's DD Program
- DD Supports
- DD Intervention
- Optum Behavior Modification

Who Was Katie Beckett??

- 3 y.o. hospitalized from infancy to receive ventilator assistance after a viral encephalitis infection left her partially paralyzed in a way that affected her ability to breathe.
- Parents were told she had to stay in a hospital or institution for her to receive Medicaid, if she went home, her parents were responsible for cost of care.
- Katie Beckett waivers allow Medicaid to cover medical services for children in the home, regardless of the parents' income, in cases where home-based treatment will cost less than or the same as treatment in a hospital
- The Regan Administration seized the story as a way to deregulate and reduce the costs of Medicaid.



Katie Beckett Medicaid

- [DHW Katie Beckett Website](#)
- Katie Beckett (KB) is a Medicaid program for children living at home with long-term disabilities or complex medical needs, who may be eligible for Medicaid services even if their [family income is above Medicaid federal poverty guidelines](#).
- If a child on KB makes around \$2,400 gross before taxes it can affect eligibility (inheritance, GoFundMe)
- Child must qualify based on income and diagnostic criteria

Katie Beckett Diagnostic Criteria

- Child must have a **developmental disability** or **complex medical needs/physical disability**
- **Both require documentation from PCP**
- Developmental disabilities are defined as
 - DD Diagnosis (ASD, ID, CP, Seizure Disorder, DS)
 - At least three substantial functional limitations, meeting Intermediate Care Facility (ICF/IID) level of care (***This level of care is much higher than just having a developmental disability***)
 - Significant delays and/or maladaptive behavior that would indicate that the child qualifies to live in an Intermediate Care Facility for the Individuals with an Intellectual Disability (ICF/ID).
 - Need for lifelong or extended duration services

Katie Beckett Diagnostic Criteria

- Complex medical needs or physical disability are defined by:
 - A chronic condition
 - Child has a disability which meets SSI criteria
 - Child requires level of care provided in a medical institution
 - Child's physician has completed an evaluation identifying services necessary to maintain child at home
 - It is safe and appropriate to provide care in the home

Katie Beckett Process

- Family should gather copies of all medical and diagnostic documentation prior to applying
 - (neurology, oncology, physical disabilities, surgeries, etc.)
- Two-pronged eligibility: financial and diagnostic
 - First step, financial, is applying through Self-Reliance
 - Family should indicate their child has a disability during application
 - Second step is level of care through Liberty Healthcare.
 - Determined with Vineland or nurse review
 - Families have 10 days to return the KB application

Katie Beckett Medicaid

- Timelines and responsiveness are critical
- Keeping demographic info updated is critical
- Medicaid can be backdated 90 days if requested from initiation of application
- Family is charged a premium based on income, but can opt out
- Some services still require copays, which are not optional (usually SLP/OT/PT)
- Annual financial redetermination and 3-year diagnostic redetermination required

Katie Beckett Medicaid

- KB Medicaid acts as secondary insurer for families with other insurance. Families not required to keep other insurer.
- KB Medicaid covers almost all services that other types of Medicaid cover with some exclusions:
 - Residential Treatment (even through EPSDT)
 - [Preventative Health Assistance/Weight Management Benefit](#)

DHW Children's DD Program

- DD Program doesn't provide direct services. Direct services are provided by Developmental Disabilities Agencies (DDAs) and Independent Providers.
- DD Program can provide Case Management (CM) to coordinate community services and make referrals to and monitor needed supports and services.
- We can support families in applying for DD services. Case Management can be provided prior to eligibility for DD services if a family needs to apply for Katie Beckett, needs language assistance, or is in the Infant Toddler Program.

Referral to DD Program

- Families can be referred by faxing a referral with notes from PCP to any of the hubs
- For other providers, the DD referral form can be sent
- Families can apply directly through the [website](#)

Children's DD Services

- [DHW Children's DD Services Website](#)
- All Children's DD services require Medicaid
- Large menu of services available depending on age and diagnosis
- Waitlists are in place for most services in most areas
- For initial families with a DD diagnosis and Medicaid we recommend applying for DD services through the online application and having a CM support the family in accessing their best fit

DD Supports

- Child, birth to 18, must have a DD diagnosis
 - ASD, CP, Seizure Disorder, Down Syndrome, Intellectual Disability or closely related disorder
- Family must apply with documentation of disability
- Liberty Healthcare will determine eligibility
 - Family Medical Social Interview, Vineland
- Application process is currently about 60-90 days
- Intake questions can go to (208) 334-6500 or toll free at 1-877-333-9681

DD Supports

- Supports are not able to teach new skills but provide support in the home and community to practice skills or provide caregiver respite
- Children who qualify for DD supports are assigned a Case Manager
- Annual eligibility with Liberty required

DD Supports

- If a child qualifies, they are given a budget of \$4,900 to \$14,900 to use for DD services and are assigned a CM
- Families can choose to access the Traditional or Family Directed Services Pathway

Traditional Services

- Family accesses services through a DDA or Independent Provider
- Services include Family Education, Respite and Community Based Supports

Family Directed Services

- Family can select their own goods, services and supports
- Respite and/or Supports
- More flexibility and responsibility

DD Intervention

- Available to children birth through month of 21st birthday.
- Eligibility based on functional and/or behavioral need
- Services are provided through an Independent Provider or DDA
- Services include Habilitative Skill Building, Behavior Intervention, Crisis Intervention and Interdisciplinary Services

DD Intervention

- Supports budget is not required, but can be helpful for new families to determine their best fit of services
- If a child is only accessing intervention, case management is optional
- Authorizations are approved through the Department's contractor Telligen

Magellan Behavior Modification

- Separate from the DD Program
- Considered a behavioral health service, not a DD service
- Providers are enrolled in and approved through Magellan
- Applied Behavior Analysis Model (BCBA, BCaBA, RBT)
- Child can potentially receive both Behavior Modification and access DD services

Resources

- [Budget Route Options](#) (pdf)
- [Medicaid Services for Children \(visual aide\)](#) (pdf)
- [DD Referral Form](#) (pdf)
- [Enhancement Services Flyer](#) (pdf)
- Idaho Department of Health and Welfare
 - [Katie Beckett Program](#) (website)
 - [Health Coverage Assistance Program Income Limits](#) (website)
 - [Children's Developmental Disabilities](#) (website)
 - [Apply for Children's Developmental Disabilities Services](#) (website)