



Buy-In Webinar Q & A's

Q: Why is the income in last screen 400.00 and not $100 \times 4.3 = 430.00$?

A: We created a simple example for the sake of discussion that assumes there are 4 weeks in a month and the dogwalker was paid \$100 for each of 4 weeks.

Q: I have a client that babysits his grandson and gets paid. Is this countable?

A: We have not defined any limits on employment for the Buy-In. This can be considered employment.

Q: Is client statement acceptable for earned income?

A: Just like any program, we accept client statement. If there is something questionable or a discrepancy with a CDLE record, paystubs can be requested. A ledger is acceptable for self-employment

Q: Can you define job attached? Would H&R block tax preparation be job attached or seasonal income

A: Job attached is based on an employer declaring an individual is job attached and the intent is for the worker to return to their job. If the employer does not view the individual as attached to his job and will not write a letter to that effect, then the individual cannot be considered job attached. Job attachment often happens when someone is on sick or administrative leave and are intending to return to their job however some employers that have seasonal workers, are also willing to still say that the individual can return to their job and they consider them job attached.



Q: I thought that 16 and 17 years olds could also be eligible if all criteria is met?

A: A youth that is 16 or 17 will always be considered for the Children with Disabilities Buy-In unless they are working. If they are working, they will be considered for the Working Adults with Disabilities Buy-In. There are differences between the two programs in the determination of income. Please refer to the Webinar to understand that detail.

Q: I thought the Unearned Income disregard moved to a general disregard so in the event there is not unearned income it would be applied to the earned income?

A: It is true that if there is not unearned income, that disregard is also applied to earned income. This is news since March 2017 and is called the \$20 general income disregard.

Q: Do they have to have income each month if it is a non-traditional job like walking a dog?

A: There does not need to income each month but the individual needs to consider themselves as working. If they lose their job, as with all changes, they have 10 days to report that change.

Q: What is a minimum limited disability determination?

A: The limited disability determination is discussed in detail in the Expanding Foundations: Long Term Care Training. All SSA determinations will be full disability. The state contractor will specify full or limited. Full Disability meets the SSA disability criteria and is eligible to receive a cash benefit from SSA. The limited Disability meets the SSA disability criteria without consideration of substantial gainful activity. Either determination meet the disability criteria for the Working Adults with Disabilities Buy-In.



Q: If a person loses their SSDI, will that make them disqualified for WAWD?

A: This depends on the reason a person loses their SSDI. If the diary date for the SSA disability determination is still open, we accept that determination to meet the WAWD disability criteria. If that determination is expired, the individual can have the state vendor do a determination. If SSA says that a person no longer has a disability (except due to losing that determination for substantial gainful employment), we must accept Social Security's decision.

Q: So, a self-employed person would not be a job attached?

A: Job attached is more for someone that has an employer rather than self-employed.

Q: If a person loses their SSDI, will that make them disqualified for WAWD?

A: This depends on the reason a person loses their SSDI. If the diary date for the SSA disability determination is still open, we accept that determination to meet the WAWD disability criteria. If that determination is expired, the individual can have the state vendor do a determination. If SSA says that a person no longer has a disability (except due to losing that determination for substantial gainful employment), we must accept Social Security's decision.

Q: if person is in community corrections and disabled can they qualify for WAWD if they are working?

A: A person in Community Corrections (not work release) can qualify for WAWD if they are working. Please refer to 8.100.3.G.1.B.i.5

Q: Is the SCI waiver limited to the Denver metro area?

A: The Spinal Cord Injury Waiver is only available in Adams County, Arapahoe County, Denver County, Douglas County and Jefferson County



Q: Regarding previous question/comment. General Disregard is in policy 8.100.5.H.4 which says the first \$20 of unearned, if available, will be disregarded. If the unearned is less or does not exist it will be applied to the earned income before deducting the \$65 and a half?

A: It is true that if there is not unearned income, that disregard is also applied to earned income. This is news since March 2017 and is called the \$20 general income disregard.

Q: If a person becomes too ill to work, how long can they keep the buy in program before they are no longer eligible?

A: If a person can no longer work and is not job attached (as identified by their employer), they have 10 days to report their changes like all other members on Medicaid.

Q: For job attached is there is a time limit they can be considered job attached? Also, if a client is working with a staffing agency and not in a current job assignment, would that be considered job attached?

A: There is not a specific time frame that a person can be considered job attached. Having said that, if the situation is questionable, and the person is not able to be found job attached through an employer, they are subject to fraud investigation.

Q: What if there someone outside the Denver metro area who has a spinal injury?

A: Please refer this question to Lindsay Westlund, Lindsay.Westlund@state.co.us She is the Waiver administrator.

Q: There is not an unearned disregard given for CBwD

A: The calculation for CBwD is different than WAwD. There may be disregards or income exemptions that may apply to income depending on what information is provided in an application. One example of a disregard is an earned income of \$90 shall be disregarded from the gross wages of everyone who is employed. There is not an unearned disregard for CBwD.



Q: CBwD follows the same household comp rules as MAGI, correct?

A: Yes, CBwD follows the same household composition rules as MAGI.

Q: Does continuous eligibility factor in when premiums are not paid?

A: Not paying premiums is a disqualifying factor for continuous eligibility.

Q: When applying on PEAK, do we need to request these programs or is there triggers in the application that will automatically look to see if a person is eligible for these programs?

A: It is important for people to complete the questions related to disability, submit a disability application if necessary and complete the employment and income questions. The system will review applicants for the most robust Medicaid program for which they qualify.

Q: If a child is 19 and turns 20 during the continuous eligibility period do they get the 12 months guaranteed coverage?

A: This question is answered in the Continuous Eligibility FAQs as follows :
Can a child receive continuous eligibility coverage for less than 12 months? Yes. A child may have less than 12 months of continuous eligibility if the child is disqualified for one of the reasons listed above, turns 19, chooses to withdraw from continuous eligibility, or if there is new or corrected information that impacts the eligibility during the 14 day "no-fault period." Also, in certain situations, a child's renewal date may be changed to be the same as the renewal date for the rest of the household, or the same as the renewal date for a nother program, such as food assistance.

Q: What is the phone number to make the payment?

A: We do not accept premiums over the phone. We will be updating our FAQs with that information.



Q: Clients can call (800)359-1991 for Denver Health to pay premiums?

A: We do not accept premiums over the phone. We will be updating our FAQs with that information.

Q: Is this document still valid?

[https://www.colorado.gov/pacific/sites/default/files/HCPF%202012%20Medicaid%20Buy-in%20Program%20for%20Working%20Adults%20with%20Disabilities%20\(WAWd\)%20Manual_1.pdf](https://www.colorado.gov/pacific/sites/default/files/HCPF%202012%20Medicaid%20Buy-in%20Program%20for%20Working%20Adults%20with%20Disabilities%20(WAWd)%20Manual_1.pdf)

A: It is still the foundation of the program however there have been some systemic changes since it was developed. We will be revising this but do not have a timeline established yet. If you have specific questions, please submit those to the Medicaid Eligibility Inbox.

Q: Did the age change from 16 years old to 18 years old?

A: A youth that is 16 or 17 will always be considered for the Children with Disabilities Buy-In unless they are working. If they are working, they will be considered for the Working Adults with Disabilities Buy-In. There are differences between the two programs in the determination of income. Please refer to the Webinar to understand that detail.

Q: Can you explain what a minimum limited disability determination is and how it differs from the full determination?

A: The limited disability determination is discussed in detail in the Expanding Foundations: Long Term Care Training. All SSA determinations will be full disability. The state contractor will specify full or limited. Full Disability meets the SSA disability criteria and is eligible to receive a cash benefit from SSA. The limited Disability meets the SSA disability criteria without consideration of substantial gainful activity. Either determination meet the disability criteria for the Working Adults with Disabilities Buy-In.



Q: Can you explain what a minimum limited disability determination is and how it differs from the full determination?

A: The limited disability determination is discussed in detail in the Expanding Foundations: Long Term Care Training. All SSA determinations will be full disability. The state contractor will specify full or limited. Full Disability meets the SSA disability criteria and is eligible to receive a cash benefit from SSA. The limited Disability meets the SSA disability criteria without consideration of substantial gainful activity. Either determination meet the disability criteria for the Working Adults with Disabilities Buy-In.

Q: Can you confirm, customers who qualify for WAwD with additional LTC services are determined under the WAwD income guidelines rather than regular HCBS income guidelines, correct?

A: That is correct. WAWD has different income guidelines and there is no consideration of assets. When a functional assessment finds an individually additionally eligible for EBD, CMHS, BI or SCI, there are not additional or different income or asset guidelines applied beyond the initial ones for WAWD.

Q: Can a person have this as a secondary insurance?

A: Yes, a person may have other commercial insurance and Health First Buy-In Medicaid. As always, Medicaid is the payor of last resort.

Q: Is there a place where we can access a full list of the LTC waivers that can be added onto WAWD?

A: The list of LTC Waivers that can be added onto WAWD are EBD, CMHS, BI and SLS. We are expecting to add SLS on December 1, 2017.

Q: Who approves the limited?

A: Our vendor for disability determination is currently ARG aka Arbor Group. This is the only entity approving limited disability. As always, if a Social Security determination comes in later that is different, we must honor that determination.



Q: Multiple household members can be determined and approved for WAwD on the same CBMS case, correct? For instance, husband and wife.

A: If multiple members of a household, including spouses, meet the disability, employment and income criteria for Buy-In, they can each be approved because they will each be considered a household of one.

Q: For a youth between 16-19 who are working- is there a minimum or maximum number of hours they have to hit to qualify?

A: A youth that is 16 or 17 will always be considered for the Children with Disabilities Buy-In unless they are working. If they are working, they will be considered for the Working Adults with Disabilities Buy-In. There are differences between the two programs in the determination of income. Please refer to the Webinar to understand that detail. As with the adult population on WAwD, there are no minimum or maximum number of hours that are required at this time.

Q: Did you say the CWBD child's income is only looked at for one person? Then why would it look at the entire HH income?

A: We stated that after disregards, the individual's income is considered for WAwD but the family's income is considered for CBWD.

Q: So MBU is not used for this category? Example: Parents, child and Uncle living in the same house would Uncle's income count?

A: If the Uncle is an independent tax filer and does not file with the parents and child, he would not have his income count.

Q: Is there a tutorial or desk aid we could provide customers to assist them in setting up recurring payments through PEAK?

A: Nothing like that exists but if you go to the PEAK home page and go to the Learn more button to the FAQ section there are guides:
<https://coloradopeak.secure.force.com/KAFAQ?Language=EN>



Q: If client has PEAK account and is getting Email or Text notification do they get the premium letters that way?

A: Email and text notifications only let someone know that they have a new notice available in their PEAK Mail Center. The Buy-In premium letters are a system generated letter so it would appear in their PEAK Mail Center. The important distinction is that the letters don't arrive via email or text, rather that is just the notice to log into the mail center to see the new letter.

Q: Does the premium letter go off on the batch cut-off date or the NOA date?

A: While premium letters are batched produced currently on the 22nd of the month, however if you look at the premium letter that are different dates for different purposes. The batch production does not impact those dates. Once a premium letter is produced, changes in income cannot change the premium amount until the next premium letter.

Q: How many payments can a client miss before it discontinues?

A: Payments must be received no later than 60 days at 11:59 p.m. from the due date shown on the premium letter. In most cases this means that two payments missed and a member will be terminated.

Q: So, if CFHC holds the case, are they responsible for doing the RRR and making changes? We have clients that turn papers in at the county.

A: When a customer turns in their documents to a county office, the county office is responsible of forwarding the documents to a county office, the county office is responsible of forwarding the documents to us if they are unable to work them. Counties will either fax or email verifications. The verifications can be sent via email to countypartners@c4hco.com. When it comes to EDMS and a county is notified of a document being uploaded, some counties will send us an email with the cases that have new documents uploaded. Such emails could be sent to myself and Q Barnes, the MA Site Manager. I will list our email addresses below.



Q: Can you talk about the MA Buy-In Begin Date in Case Individual? How/When will it be used?

A:

MA Buy-In: This field will be enabled only if “MA” is open on the case. (This will be disabled if MA is Pending or Discontinued) and client was active on MA Buy In previously.

Begin Date Field: This field will be Disabled if the client is active on MA Buy-In. Date entered cannot be prior to latest Buy-In End Date. Future Date will not be allowed.

Q: Looking at the FPLs and Premiums- how can someone be between 0 and 138% and qualify for the buy-in program rather than just MAGI Medicaid?

A: We don't often see this occur. But one way is that the individual also has Medicare. One cannot be on MAGI with Medicare.

Q: I have a client that was approved for Medicare, received a discontinue notice for 11/01/2017 for WAWD. She stated her payments were current. Would Medicare trip her off the WAWD? She is 45 years old.

A: A member may have Medicare and be on the Buy-In. This is not a reason for termination. If this situation has presented and you cannot determine if something else has caused the termination, please submit a HDT.

Q: Back to the minimum limited disability -- would clients still need to provide the same level of information required for the full determination?

A: Yes, the full determination packet should be completed.

Q: I think I have some old notes which show the Child premiums slightly different than the adult - is that still true or is it universal?

A: The child premiums are different than the adult. This information has been added to the PPT presentation and is updated annually on FAQs when the FPL changes.



Q: Where will this presentation be available?

A: <https://www.colorado.gov/hcpf/training-topics-reference-documents-and-guides>
In the Buy-In folder

Q: Back to the minimum limited disability -- would clients still need to provide the same level of information required for the full determination?

A: The child premiums are different than the adult. This information has been added to the PPT presentation and is updated annually on FAQs when the FPL changes.

Q: So, I understand that adult clients do no longer need to be getting paid at least \$1. Correct?

A: There has never been a minimum amount to be earned. This continues to be policy.

