

Transition to Adulthood

Summer Issue, 2008

What is available after high school for your son or daughter who has a disability or a serious chronic health condition? What about insurance to pay for doctor visits and medicine when your child is no longer eligible for Children's Special Health Care Services or the family's private health insurance plan? Who will provide medical services to your child when he or she is too old for a pediatrician? What other services are available to help take care of your child? These are questions that families often ask themselves, their children's doctors, and other professionals that help them care for their children with special needs.

According to a recent national survey of Indiana families from the Data Resource Center on Child and Adolescent Health, Indiana's percentage of children and youth who have special healthcare needs is higher than the national average. Nineteen percent of Indiana children, ages 6 - 11, have

special healthcare needs, compared to sixteen percent nationwide. Twenty percent of Indiana children, ages 12 - 17, have special healthcare needs compared to a national average of seventeen percent.

One option is The Indiana Center for Youth and Adults with Conditions of Childhood (CYACC) (pronounced kayak) is located at the Indiana University Medical Center and helps youth, young adults and their families plan for transition to the adult world: a) from pediatric to adult health care, b) from school to employment and c) from home to independent living. The interdisciplinary staff of doctors, nurses, social worker and community agencies works with the youth, young adult and their families to identify their goals for the future and then access state, regional and community resources to reach those goals.

With funding from Maternal and Children's Special Health Care Services, CYACC has partnered with the Indiana University School of Medicine, Department of Pediatrics at Riley Hospital for Children and Wishard Health Services to provide a medical evaluation as well as care coordination for children, youth and young adults with disabilities and serious chronic illness.

This important new center also provides information and support to families about health issues, special education, insurance, independent living and transition to work issues. Physicians can refer patients, age 11 and older, to the center for a consultation, or families may contact CYACC staff directly.

For more information about CYACC, please contact Donna Gore Olsen, program manager, at 317-278-0061 or 1-866-551-0093, or by email CYACC@iupui.edu.

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Check for additional informational CSHCS mailings throughout the year.



CSHCS Staff Editors
Kimberly Minniear
Judi Johnson
Norma Boykin

The Express is filled with a digest of articles of interest to families who have children with special needs.

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From the Eligibility Unit

By Norma Boykin

The Annual Re-evaluation

The Children's Special Health Care Services (CSHCS) Eligibility Section has noticed there is some confusion regarding the annual re-evaluation process. We hope that this article will help clarify some of your questions.

To remain eligible for the CSHCS program, participants are required to be re-evaluated on an annual basis. This means that every year, from the date of the initial enrollment, you will be notified by mail that you must submit updated documentation to determine the participant's continued eligibility.

The re-evaluation packet contains a letter detailing that it is time to complete the annual re-evaluation and will supply due dates that will need to be followed. You will be asked to update your family's household and financial information and to have the Physician's Health Summary (PHS) updated by the participant's doctor. The re-evaluation packet is to be completed by the parent/guardian/participant and returned to the CSHCS office. The PHS is to be forwarded to or taken to the doctor and **completed by the doctor, (not the parent/guardian/participant)** then returned to the CSHCS office. Remember, it is your responsibility to follow-up with the doctor's office to ensure that the PHS is returned to the CSHCS office in a timely manner. Failure to receive either the re-evaluation packet and the PHS may result in termination of CSHCS services, (the participant's case will be closed) for failure to comply with the re-evaluation process.

Income information for all household members, either earned or unearned, will be requested. The preferred documentation is the latest federal tax form 1040 for all employed household members. If household members do not file federal income taxes, they can submit their last 3 consecutive check stubs. Other forms of income (e.g. child support, TANF, Social Security) can be documented with bank statements or letters and/or printouts from those agencies. Written documentation of current income (e.g., the last 3 consecutive check stubs or a written statement from your employer on the company's stationary), indicating your current salary should be included to explain any drastic income changes from the time your taxes were filed and current re-evaluation.

There may be some confusion in that many grandfathered participants (i.e., participants on the program prior to May 12, 1993) do not understand that they **must** also complete an annual re-evaluation form in order to remain eligible for the program. Although, submitting updated medical and financial documentation is optional for grandfathered participants, the other portions of the re-evaluation packet **must** be updated and returned to the CSHCS office. Failure to complete and return the re-evaluation packet to the CSHCS office may result in termination of CSHCS services, (the participant's case will be closed) for failure to comply with the re-evaluation process.

The Re-evaluation Coordinators in the Eligibility Unit will work with parents/guardians/participants during the re-evaluation process to ensure there is no interruption of services. In those cases where the family does not submit a completed reevaluation packet as required, the CSHCS program will send up to three reminder letters to the family to try and obtain the information required for the re-evaluation. Since our letters are system-generated (the date requesting the information is automatically inputted on the letters by our computer system) you should call our office if for any reason you have difficulty returning the re-evaluation information in a timely manner. The Re-evaluation Coordinators in the CSHCS Unit will also mail a "Missing Information Letter" if the re-evaluation information returned to our office is incomplete. Also, to help ensure that your re-evaluation is processed as quickly as possible, it is also very important to remember that when mailing or faxing your re-evaluation packet to our office, that you mail or fax it to the attention of your Re-evaluation Coordinator. Please also make sure the PHS is sent to the attention of the Re-evaluation Coordinator.

Remember, even though there is an annual re-evaluation; parents/guardians/participants are still responsible for informing the CSHCS program of any changes (e.g., name changes, marriage/divorce, birth of child, moved to new address) in their family's information as those changes occur during the year.

The CSHCS
Eligibility Unit
can be reached at
1 (800) 475-1355,
option 2



For Your Information (FYI)

ASK (formerly IPIN)

About Special Kids (formerly the Indiana Parent Information Network) has adopted its new name to more accurately reflect the fact that they are the place for families and professionals in Indiana to go to “ASK” questions about children with special needs and to access information and resources about a variety of topics such as health insurance, special education, community resources and medical home information.

ASK is the connection to family support in the State of Indiana! They are a parent led and staffed organization that looks forward to helping you! Please save their web address under your “Favorites” tab on your computer so that you can easily access them and explore the website further to find out how they can help you. www.aboutspecialkids.org/

United Healthcare

The United Healthcare Children's Foundation is offering support to meet the needs of children across the United

States with assistance grants for medical services not fully covered by health insurance.

Parents and caretakers across the country will be eligible to apply for grants of up to \$5,000 for healthcare services that will help improve their children's health and quality of life. Examples of the types of medical services covered by UHCCF grants include speech therapy, physical therapy, and psychotherapy sessions; medical equipment such as wheelchairs, braces, hearing aids, and eyeglasses; and orthodontia and dental treatments

Any child 16 years old or younger living in any United Healthcare region of the United States (all 50 states) and in need of financial assistance for healthcare services will be considered eligible for a grant. Families must meet economic guidelines, reside in the U.S., and be covered by a health insurance plan and limits for the requested service are either exceeded, or no coverage is available and/or the co-payments are a serious financial burden on the family. Consideration will be given, but not be limited to, criteria such as the potential of the intervention to significantly enhance either the

clinical condition or the quality of life for the child, the financial status of the family and the severity of the child's illness.

Financial need of the child's family should be documented through information provided on the application and by submission of a copy of the most recently filed tax return. Generally, awards will be granted to individuals in families whose adjusted gross income per individual does not exceed \$20,000. If you have 4 people in your family AGI cap would be \$80,000. Other financial resources to meet the health care need are not available.

The amount awarded to an individual within a 12-month period is limited to either \$5,000 or 85% of the fund balance, whichever amount is less. Awards to any one individual are limited to a lifetime maximum of \$7,500. An application must be submitted prior to the child's 17th birthday.

United Healthcare Children's Foundation offers Medical Assistance Grants. To apply visit: <http://www.uhccf.org/>



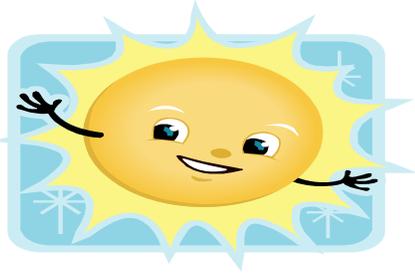
Frequently Asked Questions

Q: My provider is not a CSHCS provider. How can he/she join?

A: The CSHCS program can only reimburse service providers that are enrolled as a CSHCS provider. A provider can become a CSHCS provider by contacting our Provider Relations (PR) Unit, 1(800) 475-1355, option 3 and requesting a Provider Agreement Packet.

The PR Unit will be able to answer all questions once CSHCS has received the completed packet, and all the necessary documentation has been recorded with the State of Indiana. Then the Prior Authorization/Care Coordination Unit can link your child to the provider or write necessary prior authorizations to cover appropriate services or equipment.

The parent, participant or guardian always has the option and/or choice to seek medical care from any provider; however, the financial burden will reside with the family. Be advised that CSHCS is unable to pay a non-CSHCS provider.



RESOURCES ON THE WEB

hipinfo@fssa.in.gov - Provides health insurance for uninsured adults between 18-64 whose household income is between 22-200% of the federal poverty level who are not eligible for Medicaid.

www.in211.org - To get information about housing, counseling, food, support groups, health care, legal aid, employment and much more.

www.nationalmssociety.org - Learn the facts about MS: what it is, who gets it and why, what symptoms it can cause, and how it's diagnosed and treated.



From the PA Unit

By Gloria Webster-French

Have you been to the pharmacy and had problems getting a prescription because CSHCS believed you had a primary insurance which you no longer have? Maybe your child was terminated from CSHCS and you didn't know it, because your re-evaluation papers were returned to us due to a change of address. These and other unfortunate things have happened when participants and/or parents didn't

let us know about changes in insurance, address or phone numbers. Help us to serve you better by keeping us informed of any and all changes such as these as soon as possible. Feel free to call us with updates and questions. The nurses in the Prior Authorization/Care Coordination Unit are always happy to help you.

The CSHCS PA/CS Unit can be reached at 1 (800) 475-1355, option 3

Spotlight on Disease

Multiple Sclerosis or MS as it is more commonly known, is a disease that affects the central nervous system. MS can cause problems with muscle control and strength, vision, balance, feeling, and thinking. How MS occurs is unknown, but it is thought to have a genetic connection. MS is considered an autoimmune disease. The body's immune system attacks normal tissues.

Some of the symptoms of MS are muscle problems such as feeling weak and stiff or your limbs may feel heavy. Your vision may be blurred or hazy. A sudden loss of vision and eye pain is a fairly common first symptom. Sensory (a pins and needles sensation or numbness) and balance problems are key symptoms.

Diagnosing MS is not always easy

as the symptoms could be from other causes. It is usually not diagnosed until there has been at least two attacks. The doctor will usually ask many questions, do an exam and order tests. The most often used test to confirm MS is an MRI.

MS is treated with medicines, some of which may have strong side effects. Treatment can also include physical, speech and occupational therapies.

Dealing with the physical and emotional demands of MS is not easy. If you feel overwhelmed, talk to your doctor. Also, finding a support group where you can talk to others with MS could be very beneficial.

Information for the above article obtained from www.body.aol.com/conditions/multiple-sclerosis.

Did You Know ? The canning capital of Indiana is Austin. The Morgan Packing Company was started in 1899.