#### **Public Programs / Financial Resources**

Medicaid or NC Health Choice

Your county Division of Social Services (DSS) caseworker will help determine if your child is eligible for NC Medicaid or Health Choice.

You can also apply here: <a href="https://epass.nc.gov/">https://epass.nc.gov/</a>

Henderson County Department of Social Services ------828-697-5500 Buncombe County Health & Human Services ------828-250-5500 Polk County Department of Social Services ------------828-894-2100

Supplemental
Security
Income (SSI)
Benefits

Children under age 18 can get SSI if they meet Social Security's definition of disability for children and there are limited income and resources in the household.

When your child turns 18, Social Security will review their eligibility for continued SSI benefits based on disability rules for adults, including non-medical eligibility rules (income, resources, residency, citizenship, etc.). They will generally contact you within a year of turning age 18 for an age-18 redetermination.

Call Department of Social Security -----1-800-772-1213

Food and Nutrition Assistance (EBT) There are three ways to apply for **Food and Nutrition Service**s.

- 1. Apply online with ePASS
- 2. Apply in person at your local Department of Social Services (if you are disabled you may call for a phone interview)
- 3. Fill out a paper application and mail or drop it off at your county DSS.

Need further assistance?

Call:

Blue Ridge First in Families ------336-955-7140 Offers support and related expenses or referrals that are not always covered through public assistance programs.

United Way NC 211 ----- dial 2 1-1 or 1-888-892-1162 to obtain free and confidential information on health and human services and resources within their community

## What You Should Know Before You Apply for Social Security Disability Benefits



We sent you this disability starter kit because you requested an appointment to file for disability benefits. The enclosed letter has the date, time, and location of your appointment.

The following are answers to questions most people ask about when applying for disability benefits. Knowing the answers to these questions will help you understand the process.

#### \* What can I expect during the appointment?

A Social Security representative will interview you and complete an application for disability benefits and an Adult Disability Report. The interview will take place either in your local Social Security office or by telephone. It will take at least 1 hour.

#### \* What can I do to speed up the process?

You can cut your interview time in half by starting the process online. You can complete online, BOTH the **application for benefits** and the **disability report** by going to:

www.socialsecurity.gov/applyfordisability.

You still need to **keep your scheduled appointment** with the local Social Security office, so a representative can review your information.

If you cannot do business with us online, you can complete the enclosed Medical and Job Worksheet and have it ready for your appointment.

You can also speed things up by bringing to your office appointment the information listed on the enclosed checklist. If you have an appointment by telephone, the representative may ask you to provide any required checklist items.

#### \* How does Social Security decide if I am disabled?

By law, Social Security has a very strict definition of disability. To be found disabled:

- You must be unable to do any substantial work because of your medical condition(s); and
- Your medical condition(s) must have lasted, or be expected to last, at least 1 year, or be expected to result in your death.

## \* My doctor says I am disabled. Is that enough to qualify me for disability benefits?

No. You cannot get disability benefits solely because your doctor says you are disabled.

(over)

## \* I am getting disability payments from my job or another agency. Can I automatically get Social Security disability benefits?

No. Social Security disability laws are different from most other programs. For example, Social Security does not pay benefits for partial disability.

#### \* How long does it take to make a decision?

Generally, it takes about 3 to 5 months to get a decision. However, the exact time depends on how long it takes to get your medical records and any other evidence needed to make a decision.

#### \* How does Social Security make the decision?

We send your application to a state agency that makes disability decisions. The state has medical and vocational experts who will contact your doctors and other places where you received treatment to get your medical records.

The state agency may send you forms to complete or ask you to have an examination or medical test. If the state does request an examination, **make sure you keep the appointment.** You will not have to pay for any examination or test you are sent for, by the state agency.

### \* If Social Security decides that I am disabled, what types of benefits can I receive?

Social Security pays disability benefits under two programs:

- Social Security Disability Insurance (SSDI) for insured workers, their disabled surviving spouses, and children (disabled before age 22) of disabled, retired, or deceased workers.
- Supplemental Security Income (SSI) for people with little or no income and resources.

#### \* Will my personal information be kept safe?

Yes. Social Security protects the privacy of each individual we serve. As a Federal agency, we are required by the Privacy Act of 1974 (5 U.S.C. 522a) to protect the information we get from you.

## \* What if I am more comfortable speaking in a language other than English?

You are encouraged to bring a friend or relative to translate for you. We provide free interpreter services to help you conduct your Social Security business. However, we need advanced notice to make arrangements with the translator.

#### \* Where can I get more information?

You can visit our website at *www.socialsecurity.gov*, ask the interviewer during your appointment, or call us toll-free at **1-800-772-1213** (for the deaf or hard of hearing, call TTY 1-800-325-0778).

#### **Prescription Assistance Programs**

Many people have trouble affording their prescription medications, but there are assistance programs available.



#### Reduced rate on prescription medications

- The FamilyWize Program is a pharmacy savings program that uses a prescription savings card to lower prices of prescription medicines. Cards are distributed for free by NC 2-1-1, participating United Ways, community and faith-based organizations, county agencies, doctors, businesses, and some pharmacies. Cards are also available online. There is no income limit, age requirement, eligibility, or registration needed. Everyone is approved for the savings card. You can print your savings card, search for pharmacies in your area, and review discount prices online.
- <u>The Community Assistance Program</u> is a pharmacy savings program that uses a prescription savings card to lower prices of prescription medicines. There is no income limit, age requirement, eligibility, or registration needed. Everyone is approved for the savings card. You can print your savings card and search for pharmacies in your area online.
- The RxCut® Plus Program is a pharmacy savings program that uses a
  prescription savings card to lower prices of prescription medicines. There is no
  income limit, age requirement, eligibility, or registration needed. Everyone is
  approved for the savings card. You can print your savings card, search for
  pharmacies in your area, and download special coupons online.
- The NC Drug Card Program is a pharmacy savings program that uses a
  prescription savings card to lower prices of prescription medicines. There is no
  income limit, age requirement, eligibility, or registration needed. Everyone is
  approved for the savings card. You can print your savings card and search for
  pharmacies in your area online.
- The NeedyMeds Drug Discount Program is a pharmacy savings program that
  uses a prescription savings card to lower prices of prescription medicines. There
  is no income limit, age requirement, eligibility, or registration needed. Everyone
  is approved for the savings card. You can print your savings card and search for
  pharmacies in your area online.
- <u>The Together Rx Access® Card Program</u> is a pharmacy savings program that uses a prescription savings card to lower prices of prescription medicines. To be eligible, you cannot have Medicare or any other prescription drug coverage and

- must meet income requirements. You can see if you are eligible and sign up for the program online.
- The Patient Advocate Foundation gives financial assistance for prescription medications. Assistance is only given for expenses related to certain diseases and people who have a physician-confirmed diagnosis. See the full list of diseases here. Patient must be currently insured and have income that is at or below 300% of the Federal Poverty Level. Call 866-512-3861 for more information.
- Many retailers participate in the \$4 Generic Drug Program. Though many do not charge exactly \$4 for their generic drugs (most range from \$4 \$15), it is a common name for this type of program. These generic programs make it possible for people who are struggling to pay for their needed medications. The NC Division of Medical Assistance keeps a list of the most common medications and some retailers who offer low-cost generics. Find your prescription and retailer here. Please note that this list does NOT have all retailers who offer discount generic prescriptions. Call your pharmacy for more information and to see if they offer this program.
- <u>The Partnership for Prescription Assistance</u> helps people who are uninsured or underinsured access the medicines they need through the program that is right for them – free of charge. Many patients will get their medications for free or almost free.

#### Free prescription medications

- <u>The Medication Assistance Program</u> provides free prescription drugs to patients
  who cannot afford them. This service is offered through community clinics and
  community and faith-based organizations. The program matches patients with
  free medications available through pharmaceutical manufacturers.
- <u>Free Pharmacy Program</u> gives free prescription medication to individuals who
  are low-income, uninsured, and fall at or below 200% of the <u>Federal Poverty</u>
  <u>Level</u>. This program can help people get *lifesaving* prescription medication to
  treat common diseases, such as heart disease, diabetes and asthma. Different
  agencies oversee the program in different counties.
- Mobile Free Pharmacy Program provides low-income adults and children with free over-the-counter medicine, such as aspirin, children's cough syrup, allergy medicine, and vitamins. The pharmacy store is in Charlotte on a full-time basis, but the mobile pharmacy travels throughout the state.



# Community Alternatives Program Referral Process

#### A Medicaid Home- and Community-Based Service

The Community Alternatives Program (CAP) is a Medicaid Home- and Community-Based Services (HCBS) Waiver authorized under section 1915(c) of the Social Security Act and complies with 42 CFR § 440.180, Home- and Community-Based Waiver services. The Consumer Direction Lite program is a flexible service option created under Appendix K of the CAP waivers to mitigate risk to waiver participants by assuring necessary personal care service are available to meet assessed needs during the public health emergency.

#### WHO IS ELIGIBLE FOR CAP SERVICES?

Children from zero to 20 years of age who are medically fragile and have a reasonable indication of need for home- and community-based services to maintain their community placement are eligible for the Community Alternatives Program for Children (CAP/C).

Individuals 18 years of age and older who are physically disabled, meet a defined level of care and have a reasonable indication of need for home- and community-based services to maintain their community placement are eligible for the Community Alternatives Program for Disabled Adults (CAP/DA).

#### **HOW TO MAKE A REFERRAL**

Do one of the following:

- Contact a case management entity in your community.
- Discuss your interest in receiving CAP services with your doctor or a hospital representative.
- Contact the Social Worker at your nursing facility.
- Contact NC Medicaid Contact Center at 1888-245-0179 to request a referral.

#### HOW DOES THE REFERRAL PROCESS WORKS?

- A referral must be submitted with your name, date of birth and full street address.
- A Disclosure Letter is mailed to the address included in the referral within two business days of the referral's approval.
- Three forms are included with the disclosure letter that must be returned to NC Medicaid for review of eligibility for CAP services. These three forms are:
  - a. Service Request Consent form
  - b. Selection of Case Management form
  - c. Physician's Worksheet Instructions are in the disclosure letter on how to return the three required forms.
- When the signed and dated consent form is received, the review of your medical condition begins in order to access medical fragility, if you applied for CAP/C or assessment of a defined level of care, if you applied for CAP/DA.
- If medical fragility or a defined level of care is determined, the selected case management entity will be notified to conduct a comprehensive assessment.
- The timeline to receive CAP services, if all requirements are met, can be up to 105 days.

#### **Health Care Coverage**

Children and youth with special health care needs (CYSHCN) require health care coverage that is universal and continuous, adequate, and affordable. However, there are major gaps in the current system of health care coverage and financing that cause significant problems for CYSHCN in accessing care and financial hardship for their families.

Young adults may remain on their parents' health insurance plans until age 26 when there is family coverage. In North Carolina, disabled dependent should be able to stay on their parents' plan beyond age 26. Be sure to discuss this with your insurance provider well before your child's 26<sup>th</sup> birthday to ensure eligibility.

#### North Carolina General Statutes § 58-51-25.

Policy coverage to continue as to children with an intellectual or physical disability; or dependent students on medically necessary leave of absence..... attainment of the limiting age shall not operate or terminate the coverage of the child while the child is and continues to be (i) incapable of self-sustaining employment by reason of an intellectual or physical disability; and (ii) chiefly dependent upon the policyholder or subscriber for support and maintenance. The proof of such incapacity and dependency shall be furnished to the insurer, hospital service plan corporation, or medical service plan corporation by the policyholder or subscriber within 31 days of the child's attainment of the limiting age and subsequently as may be required by the insurer or corporation, but not more frequently than annually after the child's attainment of the limiting age.

#### **Additional Health Care Coverage Resources:**

Polk County Department of Social Services ------ 828-894-2100

#### www.Health Care.gov

https://www.healthcare.gov/people-with-disabilities/more-information/

If you have a special health care need, you have a number of options for health coverage in the Health Insurance Marketplace. Here, you can browse various health care plans available under the Affordable Care Act.

#### **Health Savings Accounts**

You may be able to set aside pre-tax dollars into an HSA through your employer. This account can be used for health-care expenses such as co-pays, and you may also be able to deduct health-care expenses on your taxes. Please see your employer regarding HSA. The IRS has information on medical tax deductions.

#### **Innovations Waiver and Registry of Unmet Needs**

The **N.C. Innovations Waiver** allows individuals with intellectual/ developmental disabilities to receive services and supports in their own community. This helps people live as independently as possible, rather than in an institution like a developmental center. Innovations is a home and community-based service.

Innovations is designed to promote independence, choice, community integration and the ability to realize life goals. It includes services that:

- Support you to live where you choose
- Support you to spend your day in a way that you choose
- Provide education on how to be more integrated into your community
- Teach and support you to live more independently and manage your own services, if you choose

Innovations supports daily activities such as bathing, eating, working, developing friendships, and living an active lifestyle within you. The program includes some non-medical services, like respite and home modification. These are not available under traditional Medicaid and may help keep people out of institutional settings.

The **Registry of Unmet Needs** is a first-come, first-serve list maintained by Vaya to keep track of people waiting for intellectual/developmental disability services in western North Carolina.

We strongly encourage parents of children who have an intellectual/developmental disability and may need Innovations Waiver services in the future to call us to add your child to the registry now. To learn more about Innovations or the Registry of Unmet Needs, call Vaya's Access to Care Line at **1-800-849-6127**.

