Medically Dependent Children Program (MDCP)

Note: This service may not be available right away. Your name may be placed on an interest list. You will be contacted when services are available.

MDCP provides services to support families caring for children and young adults who are medically dependent and to encourage de-institutionalization of children in nursing facilities.

Services

- **Respite:** Direct care to an individual to provide a caregiver temporary relief from caregiving activities when the caregiver would usually perform such activities.
- **Adjunct support services**: Specific direct care needed by a person to participate in child care, post-secondary education or independent living during the time the caregiver is at work, attending job training or attending school.
- **Adaptive aids**: A device that is needed to treat, rehabilitate, prevent or compensate for a condition that results in a disability or a loss of function and helps a person perform the activities of daily living or control the environment. Adaptive aids are limited to $4,000 per eligibility period.
- **Minor home modifications**: A physical change to an individual's residence that is needed to prevent institutionalization or to support the most integrated setting for a person to remain in the community. Minor home modifications are limited to $7,500 during the individual's lifetime and include:
    - Bathroom modifications
    - Doorway widening
    - Ramps
- **Transition Assistance Services:** Services that pay for non-recurring, set-up expenses for essential items and services that allow people to transition from a nursing home to the community.
- **Financial Management Services:** Services that assist an individual or family with managing funds associated with self-directing respite and adjunct support services through the Consumer Directed Services option.

Financial eligibility requirements

Financial eligibility for applicants not already receiving Medicaid coverage is determined by the Texas Health and Human Services Commission. For more information, please visit their website. http://www.hhsc.state.tx.us/medicaid/med_info.html

Other eligibility requirements

- Be under age 21.
- Meet the medical necessity criteria for nursing facility care.
- Meet disability criteria for Social Security or Medicaid benefits.

Availability

This service is available statewide, but it may not be available right away. Your name may be placed on an interest list. You will be contacted when services are available.

How to apply for services

ⓘ Call 1-877-438-5658 to have the child's or young adult's name placed on the MDCP interest list.

HELPFUL NUMBERS

Contact	Phone	Fax	Area Covered
Suzanne Adams	(325) 659-7915	(325) 659-7679	Abilene/San Angelo Area
Becky Cena	(915) 775-4489	(915) 775-4415	Amarillo/El Paso Area
Leigh Bland	(512) 416-5298	n/a	Austin Area
Rebecca McCullough	(713) 967-7554	(713) 967-7660	Beaumont/Houston Area
Anita Brown	(817) 321-8084	(817) 321-8064	Fort Worth Area
Donna Martinez	(713) 967-7552	(713) 967-7660	Houston Area
Kim Loken	(713) 967-7553	(713) 967-7660	Houston Area
Violeta Flores	(956) 973-1218	(956) 973-1296	Lower South Texas
Francisco Velez	(210) 337-3423	(210) 304-3951	San Antonio Area
Shaun Smith	(713) 967-7523	(713) 967-7660	San Antonio Area
Cynthia Stewart	(210) 337-3401	(210) 304-3951	San Antonio Area
Mary Scott	(903) 533-4405	(903) 533-4422	Tyler/Lufkin Area
Mary Spicher	(903) 533-4429	(903) 533-4422	Tyler/Lufkin Area
Angie Anderson	(254) 750-9634	(254) 750-9637	Waco Area
Mendy Alread	(940) 720-8204	(940) 720-8292	Wichita Falls Area

MDCP

701 West 51st Street

Austin, Texas 78751-2312; MC W-521

Phone (toll-free)**:** (877) 438-5658 (Also is the number for the waiting list)

Fax: (512) 438-3549

Comprehensive Care Program (CCP)

The Comprehensive Care Program (CCP) is Texas' name for the expanded portion of Texas Health Steps. CCP covers services for children birth through 20 years old that are not usually allowed or are more limited under Medicaid for the adult population. CCP is a result of a Congressional mandate that took effect in 1990.

Federal changes made in the Omnibus Reconciliation Act of 1989 (OBRA 89) expanded Medicaid services and Texas Health Steps in particular. Under OBRA 89, children 20 years old and younger are eligible for any medically necessary and appropriate health care service that is covered by Medicaid, regardless of the limitations of the state's Medicaid Program. Texas Health Steps-CCP services include benefits which were not available to children before OBRA 89, such as:

- Treatment in freestanding psychiatric hospitals
- Developmental speech therapy
- Developmental occupational therapy
- Augmentative Communication Devices/Systems
- Private Duty Nursing

For more information about CCP and private-duty nursing, visit the Health and Human Services Commission web site-http://www.hhsc.state.tx.us/index.shtml. It explains the services provided by Medicaid, Medicaid Managed Care, and the Children's Health Insurance Program (CHIP), as well as how to access those programs and services.

How to apply for services

ⓘ ***Call your home health provider and request a referral for CCP. Requires a physician's order for specific services.***

Personal Care Services (PCS)

What is the Personal Care Services (PCS) Benefit?

Personal care services is a Medicaid benefit that provides assistance with activities of daily living (ADLs), instrumental activities of daily living (IADLs), and health-related functions to help clients with physical, cognitive, or behavioral functional limitations related to a disability, physical or mental illness, or chronic condition.

Clients can receive services from both a 1915(c) waiver and Personal Care Services, so long as those services are non duplicative.

Examples of Activities of Daily Living (ADLs)

- Bathing
- Dressing
- Feeding
- Grooming
- Mobility
- Toileting/Toileting hygiene
- Transfers/Nonambulatory movements

Examples of Instrumental Activities of Daily Living (IADLs)

- Housekeeping
- Laundry
- Meal preparation

Examples of Health-Related Functions

- Assistance with use of adaptive or assistive devices.
- Assistance with use of durable medical equipment (DME).

PCS Does Not Include:

- ADLs, IADLs, or health-related functions that a typically developing child of the same chronological age could not safely and independently perform without adult supervision.
- Services that provide direct intervention when the client has the physical, cognitive, and behavioral abilities to perform the ADL, IADL, or health-related function.
- Duplication of Medicaid services.
- Nursing care.
- Respite care or child care.

Who can receive the Personal Care Services Benefit?

The PCS benefit is available to Texas Medicaid clients who:

- Are birth through 20 years of age.
- Are enrolled with Texas Medicaid as Texas Health Steps clients.
- Have physical, cognitive, or behavioral limitations related to a disability, or chronic health condition that inhibits the client’s ability to accomplish ADLs, IADLs, or health-related functions.

Department of State Health Services (DSHS) and the PCS Assessment

- After a referral for PCS is received, DSHS regional case managers will conduct PCS Functional Assessments in the client's home with the client and parent/guardian present to determine eligibility.
- DSHS case managers will screen clients for other Medicaid services and benefits and refer clients for these services and benefits as the comprehensive case management assessment indicates.

Referral of Clients for the PCS Benefit

Texas Medicaid and Healthcare Partnership (TMHP) PCS Client Line:

- ***Contact the toll-free PCS Client Line at 1-888-276-0702.***
- Client Line is available 7 a.m. to 7 p.m., Central Time.
- TMHP will refer clients to DSHS.

Locally, We Welcome You To Call:

Lori Ferguson
325-659-7853

Community Living Assistance and Support Services (CLASS) Program

Note: This service may not be available right away. Your name may be placed on an interest list. You will be contacted when services are available.

CLASS provides home- and community-based services to people with related conditions as a cost-effective alternative to placement in an intermediate care facility for persons with mental retardation or a related condition (ICF-MR/RC). A related condition is a disability, other than mental retardation, that originated before age 22 and that affects the ability to function in daily life.

Services

- Adaptive aids and medical supplies
- Case management
- Consumer Directed Services
- Habilitation
- Minor home modifications
- Nursing services
- Occupational therapy
- Physical therapy
- Psychological and behavioral support services
- Respite care
- Specialized therapies
- Speech pathology

Financial eligibility requirements

Financial eligibility for applicants not already receiving Medicaid coverage is determined by the Texas Health and Human Services Commission. For more information, please visit their website. http://www.hhsc.state.tx.us/medicaid/med_info.html

Other eligibility requirements

- There is no age limit; however, the onset of the disability must have been before age 22.
- Have a DADS-approved initial individual service plan that does not exceed the program's cost ceiling.
- Meet ICF/MR level of care criteria.
- Have a demonstrated need for ongoing habilitation services.
- Have chosen the CLASS program over an ICF/MR program.

How to apply for services

Call toll-free to 1-877-438-5658 to have a person placed on the interest list. Please be prepared to provide Social Security and Medicaid numbers, type of disability, age of the onset of the disability, date of birth, address and telephone number of the person to be placed on the interest list.

Availability

This service is available statewide, but it may not be available right away. Your name may be placed on an interest list. You will be contacted when services are available.

CLASS – San Angelo 223-9393

In-Home and Family Support Program

This program provides direct grant benefits to people who have physical disabilities and or their families to help them purchase services that enable them live in the community. Eligible people choose and purchase services that help them to remain in their own homes.

Services

- Attendant care, home health services, home health aide services, homemaker services, chore services that provide assistance with training, routine body functions, dressing, preparing and consuming food, and ambulating.
- Counseling and training programs that help provide proper care of an individual with a disability.
- Medical, surgical, therapeutic, diagnostic and other health services related to a person's disability.
- Other disability related services prior-approved by DADS.
- Pre-approved transportation and room and board cost incurred by person with physical disability or his family during evaluation or treatment.
- Purchase or lease of special equipment or architectural modifications of a home to facilitate the care, treatment therapy or general living conditions of a person with a disability.
- Respite care
- Transportation services

Financial eligibility requirements

Financial eligibility is determined by the Texas Department of Aging and Disability Services.

Other eligibility requirements

- Be age 4 or older.
- Have a physical disability which substantially limits the person's ability to function independently.
- Co-payment schedule begins at 105 percent of the state median income for household size.

Availability

Services are available statewide in every county; however, there are long interest lists in all areas.

How to apply for services

Contact your local DADS office: Tom Green County · 325-659-7906

West Texas Rehabilitation Center Parent Case Management

Our Goal

The goal of the Parent Case Management Program is to help parents of children with special health care needs to identify and secure equipment, medications and medical/social services their child needs and, further, to help those parents learn skills essential to meeting the unique demands of parenting a special needs child.

Funded by the Texas Department of State Health Services, the program provides comprehensive case management services from the child's birth until age 21. There is no charge for services and anyone can refer a family to the program. Phone numbers are (325) 223-6350 in San Angelo and (325) 793-3500 in Abilene.

Why Choose Us?

Our staff includes a licensed social worker and several "parent trainers" (case managers) who have more than 75 years of practical experience to share because each is the parent of a special needs child. Thus, not only do they have professional experience working with other social service agencies and medical programs, they are uniquely able to train and support client parents because they have personally had to secure information and seek services for their own child.



The program offers individualized training and support which is responsive to the unique needs/circumstances of each family served.

Parent-to-parent support and peer support are provided to parents, the special needs child and to siblings in the family who do not have special health care needs.

Case Management
for Children and Pregnant Women (CPW)



Case Management for Children and Pregnant Women (CPW) provides services to children with a health condition/health risk, birth through 20 years of age and to high-risk pregnant women of all ages, in order to encourage the use of cost-effective health and health-related care. Together, the case manager and family shall assess the medical, social, educational and other medically necessary service needs of the eligible recipient.

To **request case management services**, please call the Texas Health Steps Outeach and Informing Hotline at **1-877-847-8377** (1-877-847-THSteps) Monday to Friday, 8 a.m. to 8 p.m., Central Time.

Department of State Health Services
Case Management for Children and Pregnant Women (CPW)-MC 1938
P. O. Box 149347 / Austin, Texas 78714-9347
1100 West 49th Street / Austin, Texas 78756-3199
Phone 512-458-7111 extension 2168
Fax 512-458-7334
Toll Free 1-800-252-8023 extension 2168
TDD 1-800-735-2989
dagny.schmidt@dshs.state.tx.us

Medicaid Buy-In for Children

Medicaid Buy-In for Children can help pay medical bills for children with disabilities. This program helps families who need health insurance, but make too much money to get traditional Medicaid. Families "buy in" to Medicaid by making a monthly payment (premium).

To be in this program a child must:

- Be age 18 or younger.
- Meet the same rules for a disability that are used to get Supplemental Security Income (SSI).
- Live in Texas.
- Be a U.S. citizen or legal resident.
- Not be married.

Medicaid health-care services for children

This program pays for many health-care services for children. Here are some examples:

- Doctor and clinic visits.
- Hospital visits.
- Emergency care.
- Medicine.
- Glasses.
- Dentist visits.
- Mental health care.
- Care in a nursing home or other place of care.
- Care in your home.
- Speech therapy (helps you learn how to speak again or speak better).
- Occupational therapy (helps you learn how to do everyday activities like getting around your home, getting in a car, and getting dressed).
- Physical therapy (helps you learn how to move around better or become stronger).
- Regular checkups and help with Medicaid services (case management).

If you have other health insurance

If you have health insurance from your work, Medicaid might pay for services your insurance doesn't cover. Medicaid will pay only for services you get from a Medicaid doctor.

If your work offers health insurance and your employer pays half or more of the annual cost: You must sign up and keep that insurance. If you don't, your child can't be in the Medicaid Buy-In for Children program.

Monthly payments (premium)

Most families make monthly payments to be in the Medicaid Buy-In for Children program.
The monthly payment is based on:

- The amount of money your family gets from jobs and other sources (income).
- The number of people in your family.

- If you get insurance through work.
- If you are in the HIPP program.

Cost-share

Some families have to pay part of the cost for their child's doctor visits, hospital stays, medicine, therapy, and other health services. These costs are usually for the monthly buy-in payments, co-pays, and deductibles. There is a limit to the amount of costs a family has to pay every 12 months. When the family meets the limit, Medicaid will pay all costs for the rest of that 12 month term.

How to apply:

- Fill out the English Application.
- Call 2-1-1 and ask to have a Medicaid Buy-In for Children application mailed to you.
- Go to an HHSC benefits office. Call 2-1-1 to find one near you.