
KATIE BECKETT



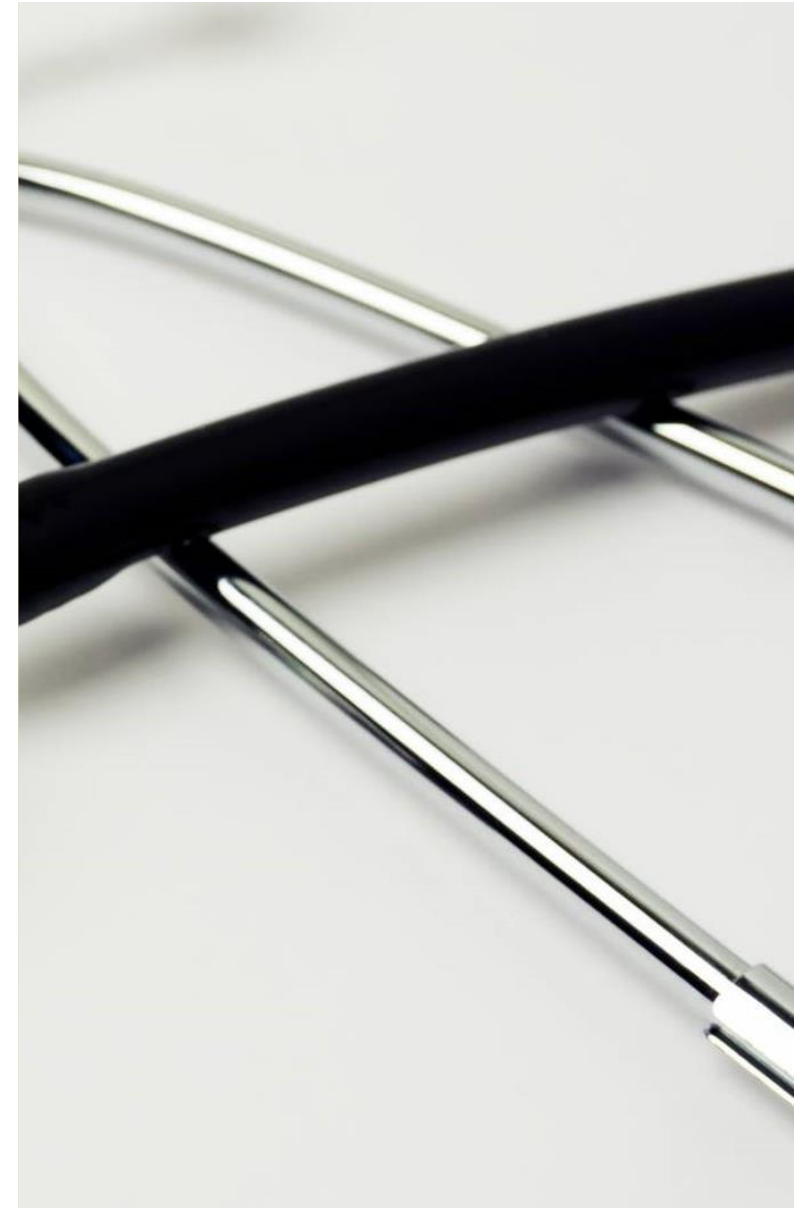
AGENDA

History

Purpose

Gateway to Medicaid (step by step)

Legacy





HISTORY OF KATIE BECKETT

- **Katie Beckett was born in 1978 in Iowa - healthy**
- **Katie at 5 months old caught a devastating viral infection that caused paralysis that required 24 h care**
- **Stayed institutional for over 3 years and while in the hospital was covered on Medicaid**
- **Improved and was able to return back to her middleclass home**
- **Katie's parents were faced with decision of 24 h care with expensive medical equipment and nursing staff without coverage from Medicaid**
- **Katie's parents advocated for Medicaid supports so their daughter could be in the least restrictive environment and home where she belonged**
- **Finally, In 1981 Ronald Reagan signed into law the Katie Beckett Waiver**
- **Katie Beckett saw how hard her parents advocated and committed to advocacy for life**
- **Katie Beckett passed away in 2012 and lived to age 34**

KATIE BECKETT IS A MEDICAID SUPPLEMENTAL COVERAGE

**It is a bridge to
Medicaid for
Institutional
Level of Care
while living at
home**





HOW TO APPLY

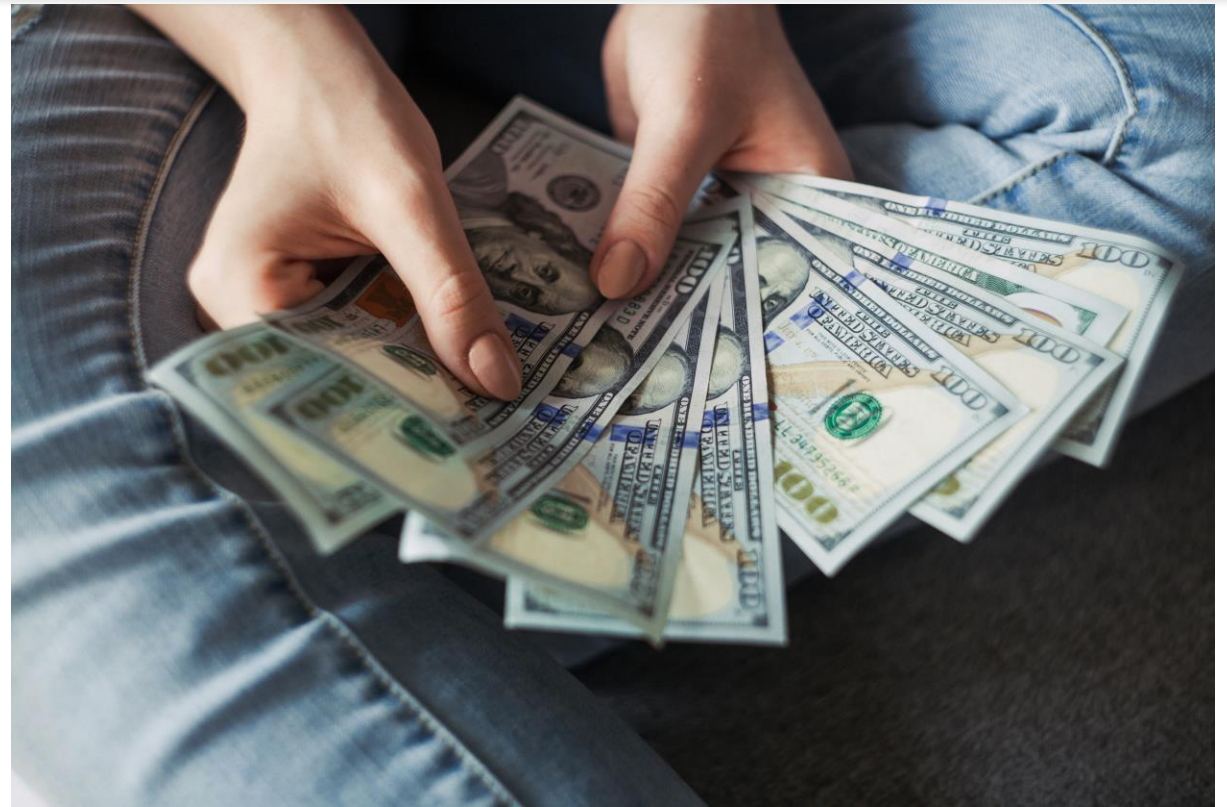
STEP 1: DHS-2 APPLICATION

STEP 2: SUBMIT & DATE STAMP (ELIGIBILITY TO BE DETERMINED)

STEP 3: MAGI DENIAL NOTICE MAILED OUT TO YOU ALONG WITH PGQ & AP 72.1 (MUST BE COMPLETED WITHIN TWO WEEKS)

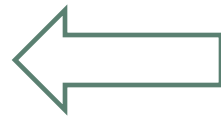
MAGI MEDICAID

MODIFIED ADJUSTED GROSS INCOME



MAGI MEDICAID

1. IF THE CHILD IS APPROVED FOR MAGI YOU WILL RECEIVE A BENEFITS DETERMINATION NOTICE
2. THE KATIE BECKETT OFFICE WILL ALSO NOTIFY PARENTS OF THE CHILD IF THEY ARE APPROVED
3. FOR MORE INFORMATION

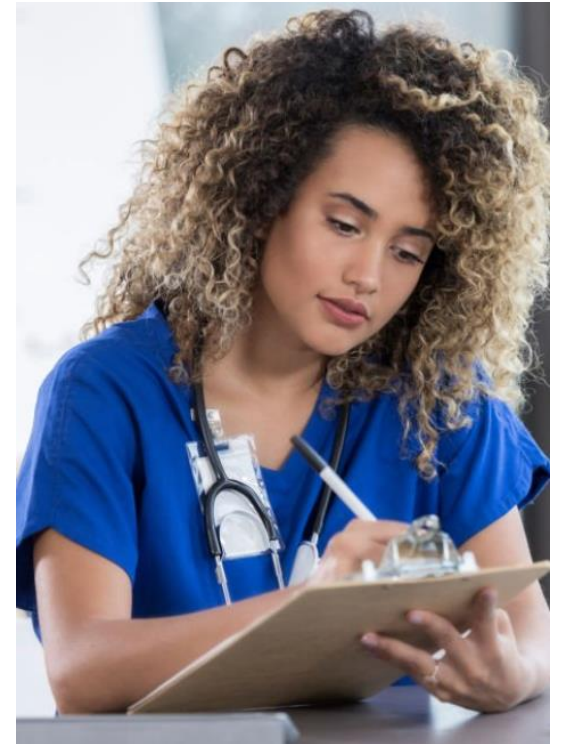


ELIGIBILITY

STEP 4: KATIE BECKETT DETERMINATION IS MADE AFTER PGQ & AP 72.1 ARE RECEIVED & REVIEWED BY A NURSE

REVIEW PERIOD

- IF MORE INFORMATION IS NEEDED A LETTER WILL BE SENT OUTLINING REQUIRED DOCUMENTS (TWO-WEEK TURNAROUND)





LEVEL OF CARE DETERMINATION

- **STEP 5: FULL REVIEW OF THE KB APPLICATION WILL OCCUR AFTER ALL DOCUMENTATION IS RECEIVED**
- **LEVEL OF CARE WILL BE DETERMINED – (TIME CAN VARY DEPENDING ON DIFFERENT FACTORS)**

STEP 6



- **ONCE LOC IS DETERMINED**
- **THE KB UNIT WILL CALL PARENT TO ADVISED A LETTER OF APPROVAL IS BE SENT**
- **ONE WEEK**
- **3 TO 4 WEEKS FOR MEDICAID CARD**

WHEN THE MEDICAID CARD IS RECEIVED IN THE MAIL



- 1. NOTIFY YOUR PRIVATE INSURANCE CARRIER TO UPDATE YOUR MEDICAID**
- 2. THIS IS CALLED COB - COORDINATION OF BENEFITS**
- 3. UPDATE PROVIDERS AND BE SURE TO ASK IF ACCEPTED**



“ADVOCACY IS IN MY BLOOD AND IN MY SOUL” - KATIE BECKETT



QUESTIONS

