

FINANCIAL ISSUES

What is the family responsibility for payment for services?

Parents are expected to be responsible for treatment costs of their child(ren).

Parents categorically eligible for Medicaid can get medically necessary covered Medicaid services without charge for their child/ren.

Departments of Social Services with custody of a child can arrange for Medicaid, which will pay for medically necessary treatment and medications.

Under HB1116, parents with higher incomes can get Medicaid for children who are at risk of out of home placement and need RTC placement for treating the child's mental illness if the diagnosis is covered by Medicaid and the placement is medically necessary.

For family members of adult children, the family is not responsible for payment for any treatment, emergency or on-going. When an adult develops a mental illness and is incapable of making important decisions for him/herself, the family often assumes the responsibility to pursue options and seek the best possible treatment for that individual. If the illness is likely to need treatment for a long time and medical insurance is not available, the family should help make application for Medicaid and other public benefits. Rules of eligibility are complicated.

Mental Health Centers, hospitals and other mental health service providers will require proof of insurance coverage, Medicaid card, Medicare card, or other guarantee of payment before giving treatment, except in an emergency. Individuals with low income and no insurance may be eligible for reduced fees. Proof of income is required.

GETTING PUBLIC BENEFITS

If a person is so severely disabled that he/she is unable to work, he/she may be eligible for financial assistance. The most common federal programs for financial assistance are:

1. SSI - Social Security Income (for people who have never worked)
2. SSDI - Social Security Disability Income (for people who became ill after working enough qualifying work periods.)
3. OTHER SOCIAL SECURITY - Children of disabled, retired or deceased parents may be eligible for benefits.

For information and to make an application contact the local Social Security Office.

If the first application is denied, the applicant may go through an appeal process. While waiting for a decision about qualifying for benefits, funding and assistance is available through the County Departments of Social Services. Emergency resources for food and shelter may be given. For ongoing assistance through food stamps and food banks, apply at Departments of Social Services,

Social Security and Representative Payees:

If the individual is unable to manage his/her Social Security funds, a representative payee may be designated. This may be a parent, other family member, or an agency like the local mental health center.

NOTE: Any form of financial assistance should be checked out to see how it may affect SSI or SSDI. For example, if the individual lives with the family, Social Security or Social Services may reduce the benefits due to the contribution of the family toward basic support. The Social Security Office prints booklets on benefits and limitations. Also check with the Legal Center for People with Disabilities, 1-800-288-1376, your attorney or bank about discretionary trusts, or the book Alternatives by Mark Russell.

INSURANCE

Those who are eligible for SSI may qualify for MEDICAID. Contact the Department of Social Services Office.

Check out all the ways of becoming eligible for Medicaid. Medically necessary mental health services and medications are a benefit of Medicaid. North Range is a Medicaid provider of mental health services.

Those eligible for SSDI may qualify for MEDICARE. Contact your local Social Security Office.

Medicare does not include medications as a benefit, and requires co-pay for mental health services.

FAMILY INSURANCE AND INDIVIDUAL INSURANCE

If medical insurance is available, it is important to prolong coverage as long as possible.

The benefits for treatment of a mental illness that medical insurance provides depends on whether the insurance policy or health plan is regulated by the State of Colorado (i.e., HMO) or by a self-insured organization. Check with your employer to find out what type of plan you have.

Colorado law requires that certain diagnoses be covered in the same manner as other medical conditions. Co-pays, inpatient days, treatment and medications benefits can't be different than for other medical conditions. Those diagnoses are:

- schizophrenia
- bipolar disorder
- clinical depression
- schizo-affective disorder
- panic disorder
- obsessive compulsive disorder

You should report violations of the law to the Colorado Division of Insurance 303-894-7499.

GUARDIANSHIP OR CONSERVATORSHIP

If a person is not competent to handle his/her own affairs, legal responsibility for financial and business transactions may be assigned to another person by a civil court. If you need more information or assistance, legal aid services are available in most communities for people on limited incomes or call the Colorado Guardianship Alliance for more information 303-423-2898.

DISCRETIONARY TRUST FUNDS

Families concerned about long range financial issues should obtain competent legal advice. Leaving an estate in a will could cause the loss of other benefits. A person on SSI or SSDI, for example, cannot receive substantial gifts or have substantial assets. Financial support beyond subsistence needs can be arranged through a Discretionary or Special Needs Trust Fund, but there are rigid rules. Check with a bank, an attorney or The Colorado Fund for People with Disabilities 303-761-4900 about a special needs trust.