

The Katie Beckett Program

Wisconsin Medicaid coverage for children living at home who have:

- Developmental disabilities,
- Severe emotional disturbances, or
- Physical disabilities/chronic medical illnesses.

which create substantial limitations for the child in multiple daily activities.

Purpose of the Program

The Katie Beckett Program is a special eligibility process that allows certain children with long term disabilities, mental illness or complex medical needs, living at home with their families, to obtain a Wisconsin Forward Health Medicaid card. Children who are not eligible for other Medicaid programs because the income or assets of their parents are too high may be eligible for Medicaid through the Katie Beckett Program. A child may be eligible for this source of Medicaid even if they are currently covered under a private health insurance policy.

Eligibility Criteria

In order to be eligible for Wisconsin Medicaid through the Katie Beckett Program, a child must meet **ALL** of the following criteria:

1. Be under 19 years of age.
2. Be disabled by standards in the Social Security Act.
3. Be a United States citizen or have acceptable immigration status.
4. Be a Wisconsin resident.
5. Live at home with their family
6. Require a **Level of Care** at home that is typically provided in a hospital or nursing facility.

Link for - **Level of Care**.

<http://www.ejenrich.com/katiebeckett/levelofcare.pdf>

7. Be provided safe and appropriate care in the family home
8. Not have income in their name in excess of the current standards for a child living in an institution.
(**Effective 10/01/2009, children under the age of 19 are not subject to an asset test**).
9. Not incur a cost of care at home to the Wisconsin Medicaid Program that exceeds the cost Medicaid would pay if the child was in an institution.

Program Benefits

If the child meets the Katie Beckett Program eligibility criteria, which is determined through the application review process, then the child will receive a **Forward Health Medicaid card**. This card can be used to pay for medically necessary services and equipment allowed under the Wisconsin Medicaid Program. Information about how to use the card and covered services will be sent to the parents with the approval letter. This information is also available at the following website:

Link for - Wisconsin Forward Health Medicaid card

<http://www.ejenrich.com/katiebeckett/WisconsinForwardHealthMedicaid.pdf>

All rules and benefits for card covered services for the Wisconsin Medicaid Program apply to children who receive their card through the Katie Beckett Program. The Division of Health Care Access and Accountability administers the Medicaid Program and is responsible for ongoing assistance to families regarding coverage and benefit questions. The member services toll free number is – **1-800-362-3002**.

How to Apply

Parents contact the **Katie Beckett Consultant** located in the region where the family and child live. A separate map and directory are available which show the service area, agency, and contact information for each consultant. This information is also available in the links below.

Link for - Map of Wisconsin service areas

<http://ejenrich.com/katiebeckett/regionalmapofWisconsinConsultants.pdf>

Link for - List of consultants by county

<http://www.ejenrich.com/katiebeckett/Consultants88.pdf>

The Katie Beckett Consultant explains the program and assists the family in deciding whether or not the Katie Beckett Program is the best Medicaid option for their child. If a parent decides to apply, the consultant will send an application packet. A home visit is required in order for the consultant to meet the child, review the application materials, verify certain documentation and answer questions.

Eligibility determination for the Katie Beckett Program is a two part process. The Disability Determination Bureau first makes the disability determination using Social Security Act standards. After that decision, the Katie Beckett Program nurses from the Bureau of Children's Services assess all other eligibility criteria. A recertification of eligibility is required every year after the initial approval or whenever significant changes in the child's condition occur.

Please click the Links Below for forms and more Information

Form – F20540 Katie Beckett Program – Spanish

<http://ejenrich.com/katiebeckett/kbpspanish.pdf>

Form – F22015 Fact sheet for Katie Beckett Program – English

<http://ejenrich.com/katiebeckett/kbpfactsheetenglish.pdf>

Form – F22015 Fact sheet for Katie Beckett Program – Spanish

<http://ejenrich.com/katiebeckett/kbpfactsheetspanish.pdf>

Level of Care Information – English

<http://www.ejenrich.com/katiebeckett/levelofcare.pdf>

Forward Health Medicaid Card Information – English

<http://www.ejenrich.com/katiebeckett/WisconsinForwardHealthMedicaid.pdf>

Regional Map of Consultatant – English

<http://ejenrich.com/katiebeckett/regionalmapofWisconsinConsultants.pdf>

List of Consultants – English

<http://www.ejenrich.com/katiebeckett/Consultants88.pdf>

Form – F20582 Application for Katie Beckett Program – English

<http://ejenrich.com/katiebeckett/applicationkbpenglish.pdf>

Form – F20582 Application for Katie Beckett Program – Spanish

<http://ejenrich.com/katiebeckett/applicationkbpspanishsignaturepage.pdf>

Form – F20582 Instructions for Application – English

<http://www.ejenrich.com/katiebeckett/instructionsforapplicationenglish.pdf>

Form – F20582 Instructions for Application – Spanish

<http://www.ejenrich.com/katiebeckett/instructionsforapplicationspanish.pdf>

Form – F82009AA Confidential Information Release Authorization – English

<http://www.ejenrich.com/katiebeckett/confidentialreleaseauthorizationenglish.pdf>

Form – F82009AA Confidential Information Release Authorization – Spanish

<http://www.ejenrich.com/katiebeckett/confidentialreleaseauthorizationspanish.pdf>

Form – F21076 Informed Consent Long Term Support Functional Screen – English

<http://www.ejenrich.com/katiebeckett/informedconsentenglish.pdf>

Form – F21076 Informed Consent Long Term Support Functional Screen – Spanish

<http://www.ejenrich.com/katiebeckett/informedconsentspanish.pdf>

Form – F20582A Application for Long Term Support Programs – English

<http://www.ejenrich.com/katiebeckett/applongtermsupportprogramsenglish.pdf>

Form – F20582A Application for Long Term Support Programs – Spanish

<http://www.ejenrich.com/katiebeckett/longtermsupportprogramsspanish.pdf>

Form – F20582A Instructions for Long Term Support Application – English

<http://www.ejenrich.com/katiebeckett/instructionslongtermsupportappenglish.pdf>

Form – F20582A Instructions for Long Term Support Application – Spanish

<http://www.ejenrich.com/katiebeckett/instructionslongtermsupportappspanish.pdf>

Form – F20585 Recertification for Katie Beckett Program – English

<http://www.ejenrich.com/katiebeckett/recertificationKBPEnglish.pdf>

Form – F20585 Instuctions for Recertification for Katie Beckett Program – English

<http://www.ejenrich.com/katiebeckett/instuctionsannualrecertificationWisconsinmedicaidenglish.pdf>

Form – F20585 Recertification for Katie Beckett Program – Spanish

<http://www.ejenrich.com/katiebeckett/recertificationKBPspanish.pdf>

Form – F20585 Recertification for Katie Beckett Program – Spanish

<http://www.ejenrich.com/katiebeckett/recertificationKBPspanish.pdf>

Form – F20585C Recertification for Katie Beckett Program Short Form – English

<http://www.ejenrich.com/katiebeckett/recertificationshortformenglish.pdf>

Form – F20585C1 Instructions Recertification for KBP Short Form – English

<http://www.ejenrich.com/katiebeckett/instructionsshortformenglish.pdf>

Form – F2582AA Addendum for Recertification for Katie Beckett Program – English

<http://www.ejenrich.com/katiebeckett/addendumenglish.pdf>

Form – F2582AA Addendum for Recertification for Katie Beckett Program – Spanish

<http://www.ejenrich.com/katiebeckett/addendumspanish.pdf>

Source -

<https://www.dhs.wisconsin.gov/publications/p2/p20540.pdf>