

Understanding Medicaid



Important Information

My Medicaid number (printed on Medicaid card):

My caseworker's name:

My caseworker's telephone number:

My county DFCS office (for reporting changes):

My county SSA office (if you receive SSI):

My doctor's name:

My doctor's telephone number:

My pharmacy:

My pharmacy's telephone number:

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What is Medicaid?

Medicaid is a medical assistance program that helps many people who can't afford medical care pay for some or all of their medical bills.

Good health is important to everyone. If you can't afford to pay for medical care right now, Medicaid can make it possible for you to get the care that you need to get healthy - and stay healthy.

If you have applied and are approved for Medicaid, you will receive a plastic Medicaid card in the mail. Show your Medicaid card to your doctor, dentist, pharmacist, or at the hospital or clinic when you go for medical services. Make sure they will accept Medicaid as payment for services.

If you have other insurance that may cover some or all of your medical care, tell your Medicaid provider about the other insurance. You **MUST** show your Medicare or other insurance card to your Medicaid provider.

After you have received your medical care, the Medicaid program will pay the doctor, clinic, or other provider for your care.

About this Handbook...

Sometimes, the Medicaid program and its rules may seem hard to understand. This handbook will help you understand how the Medicaid program works, and whether the program can help you and your family.

If you think you or your family members may be eligible for Medicaid, this handbook also will explain how to apply for Medicaid, and how to get medical services after you have been approved.

Although every state has a Medicaid program, each state's program is different. This handbook explains how Medicaid works in Georgia.



Look for this telephone symbol to find telephone numbers that will help you get more information about Medicaid. Write down the names and numbers of your caseworker, your doctor, and your pharmacy on the inside front cover of this handbook, so that you'll have them when you need them!



Look for this light bulb to find ideas and helpful hints about applying for Medicaid and using Medicaid services.

Who Is Eligible for Medicaid in Georgia?

Many groups of people are covered by Medicaid. Even within these groups, though, certain requirements must be met. These may include your age; whether you are pregnant, disabled, blind, or aged; your income and assets; and whether you are a U.S. citizen or a lawfully admitted immigrant.

When you apply for Medicaid, the requirements listed above will be taken into account before a decision is made.

Your child may be eligible for coverage if he or she is a U.S. citizen or a lawfully admitted immigrant, even if you are not. Eligibility for children is based on the child's status, not the parent's.

In general, you should apply for Medicaid if your income is low and you match one of the descriptions below:



You think you are pregnant

You are a child or teenager



You are age 65 or older

You are blind



You are disabled

You need nursing home care.

Please see the next page for more details.

Should You Apply for Medicaid?

When you apply for Medicaid, your application will be carefully reviewed by a trained staff member. In general, you should apply for Medicaid if you match the descriptions below:

Pregnant Women:



Apply for Medicaid if you think you are **pregnant**. You may be eligible whether or not you are married. If you are on Medicaid when your child is born, both you and your child will be covered. You may be covered for another 60 days after your child's birth. Your child may be covered for up to one year.

Children and Teenagers:

Apply for Medicaid if you are the parent or guardian of a **child who is 18 years old or younger** and your family's income is low, or if your child is sick enough to need nursing home care, but could stay home with good quality care at home. If you are a teenager living on your own, you may apply for Medicaid on your own behalf.



If you or someone in your family needs health care, you should apply for Medicaid even if you are not sure whether you qualify. Some income and resources do not count against you. For example, owning your home will not stop you from getting Medicaid.

Every group has its own income limits, which increase on a regular basis. For example, in 2005 the monthly income level for a pregnant woman with 1 child is \$2682 and \$3226 for a pregnant woman with 2 children. Apply and have a qualified caseworker evaluate your situation.



If you apply for Medicaid for your children and learn they are not eligible, ask about PeachCare for Kids or call 877-427-3224 (toll-free) for information. You can also apply For PeachCare online at www.peachcare.org. For example, in 2005 the monthly income level for very young children is \$3151 for a family of 3 and \$3791 for a family of 4.

Aged, Blind, and Disabled People:

Apply if you are **aged** (65 years old or older), **blind**, or **disabled** and have low income and few resources (such as bank accounts, real property, or other items that can be sold for cash).

Apply if you are terminally ill and want to receive hospice services.

Apply if you are aged, blind, or disabled; live in a nursing home; and have low income and limited resources.

Apply if you are aged, blind, or disabled and need nursing home care, but can stay at home with special community care services.

Apply if you are eligible for Medicare and have low income and limited assets.

Some Other Situations:

Apply if you are leaving welfare and need health coverage.

Apply if you are a family with children under 18 and have very low or no income and few resources. (You do not have to be receiving a welfare check.)

Apply if you are a woman with breast or cervical cancer.

How to Apply for Medicaid

Anyone who applies for Medicaid can choose to apply in person (by going to the local Department of Family and Children Services, health department, or Social Security office), or by requesting forms to be mailed to you that you can fill out at home. There are several different ways to apply for Medicaid.

You can contact the Department of Family and Children Services (DFCS) in your county. The DFCS office will take your application or help you find other places to apply, such as schools, hospitals, or community centers near your home. The Right from the Start Medicaid (RSM) outreach project has workers available to take applications early in the morning, in the evenings, and on weekends. For more information, call 1-800-809-7276.

If you think you are **pregnant**, contact your county health department, primary health care center, or hospital. (Call the Georgia Division of Public Health at 404-657-2700 to find out where to apply in your county.) If you are pregnant and eligible, you can get a Medicaid certification form on the same day that you apply. You can get prenatal care for yourself and your baby immediately.

If you are **aged** (65 years old or older), **blind**, or **disabled**, apply for the SSI (Supplemental Security Income) program by contacting your local Social Security office. If you are approved for SSI, you will automatically receive Medicaid. You may also apply for Medicaid at the DFCS office, but you will not be able to apply for SSI there. (Call 1-800-772-1213 to find the closest Social Security office.)



Telephone Numbers and Web Sites:

To locate your county **DFCS** office, look in the blue pages of your telephone book for Family and Children Services

To locate a **county health department**, call: 404-657-2700 or look in the blue pages

To locate a **Social Security Administration** office near you, call: 1-800-772-1213

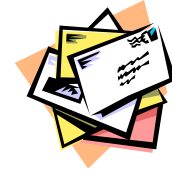
For questions about **Right from the Start Medicaid (RSM)**, call: 1-800-809-7276

For questions about your **Medicaid card**, call: 1-866-211-0950 (or 770-570-3373)

For questions about **Georgia Better Health Care (GBHC)**, call: 1-866-211-0950 (or 770-570-3373 in Atlanta)

To learn more about *Georgia Medicaid*, stop by your local library and log onto the Internet. The web site address is www.ghp.georgia.gov

What Documents are Needed to Apply for Medicaid?



When you apply for Medicaid, the application process will move along more quickly if you have information about yourself and your children handy. You may not need all of the items on this list, but these are the kinds of documents that will help:

- Your birth certificate or other proof of age (such as a census record, insurance policy, school transcript, etc.)
- Your social security number, if you have one
- Paycheck stubs, payroll records, or recent W-2 forms
- Letters or forms that show your income from Social Security, SSI, VA, retirement, pensions, unemployment, worker's compensation, child support, etc.
- Current health insurance policies, health insurance cards, or other health insurance information
- Life insurance policies
- Your 3 most recent bank statements or bank books
- Information about property you own (such as land, or stocks and bonds), or property you plan to buy or have transferred.

If you have any trouble finding this type of information, ask your caseworker for help.

What Happens After You Apply for Medicaid?

This section describes the process for DFCS. If you apply for SSI through the Social Security Administration (SSA), the process is somewhat different.

Once you complete an application for Medicaid, a Medicaid caseworker will interview you and review your application. The caseworker will make sure that all of the needed information has been provided.

If you have medical bills from the past 3 months that you were not able to pay, let your caseworker know about them when you apply. If you are eligible for Medicaid, it is possible that some of these bills may be paid by Medicaid, even if you were not enrolled in the program at that time.



You will find out whether or not you are eligible for Medicaid within 45 days after you apply. You will receive a letter in the mail telling you whether or not you are eligible. (If you are disabled and your disability has to be determined, the process may take up to 60 days.)

If you are eligible for Medicaid, you will receive a plastic **Medicaid card**. Because we will be mailing information to you about your Medicaid coverage, it is very important that you let your DFCS caseworker (or the Social Security Administration, if you receive SSI) know your new address when you move. (More details about the card are provided on page 14.)

It's a good idea to carry your Medicaid card with you at all times, in your purse or wallet, so you will have it with you when you need to show it to a doctor or pharmacist to receive services.

Since your personal situation may change - for example, if you get a different job or if your family size changes - the Medicaid program will review your situation from time to time to make sure that you are still eligible.

If your situation changes, you must call your DFCS caseworker or the Social Security Administration (SSA) office as soon as you know about any changes.

When you apply for SSI or Medicaid, let DFCS know about any medical bills from the last 3 months. It's possible that Medicaid may help pay for some of them.



How Does Medicaid Work?

Once you are eligible for Medicaid, there are two different ways that you can receive medical services. You may participate in Georgia Better Health Care (GBHC) or receive services from any provider who accepts Medicaid payments. Each of these is described below.

Georgia Better Health Care (GBHC)

Most people who are eligible for Medicaid will be enrolled in the Georgia Better Health Care (GBHC) program. You may choose your GBHC doctor. If you do not choose one, GBHC will match you and your children with a doctor in your community. (You and your children may have different GBHC doctors.) Your GBHC doctor, also known as your primary care physician (PCP), will provide your health care, keep your medical records up-to-date, send you to a specialist when necessary, and refer you to the hospital when needed.

If you are enrolled in GBHC, the name, address and phone number of your GBHC provider will be printed on the front of your card. If you want to change your GBHC provider, call the Customer Interaction Center at 1-866-211-0950 (or 770-570-3373 in metro Atlanta) and talk to a representative.

Not everyone may participate in GBHC. Nursing home patients, some pregnant women, and recipients who will be eligible for Medicaid for only a short time may not participate. Medicaid members who also have Medicare or other health insurance do not participate in GBHC.

Other Medical Care Providers Who Accept Medicaid

If you do not belong to GBHC, you will not be assigned to a doctor or organization for your health care.

When you need a check-up or any medical care that is covered by the program, you can present your Medicaid card to any doctor, dentist, pharmacist, or clinic that accepts Medicaid. After you have received your medical care, the Medicaid program will pay the doctor or clinic directly.

Medical Care Providers Who Do Not Accept Medicaid

If you receive services from a medical care provider who does not accept Medicaid, then Medicaid will not pay for the services.

About Co-Payments

Depending on your Medicaid category, you may have to make a small **co-payment** when you receive your medical care, but Medicaid will pay most or all of the bill. You cannot be denied service because you are not able to pay the co-payment. However, your provider may bill you for the co-payment amount.

Doctors, hospitals or other health care providers enrolled in the Medicaid program must accept Medicaid as payment in full, except for co-payment amounts.



Healthy Ideas

- Before you visit the doctor, dentist, or pharmacist, write down your questions so that you won't forget to ask them. Or, take a friend or relative along to help.
- If your doctor or dentist writes you a prescription for medicine to make you feel better, fill the prescription and follow your doctor's instructions, even if you start feeling better right away. Ask your doctor or pharmacist if you have any questions about taking your medicine.
- For your safety, make sure your doctor is aware of all medications that you are currently taking.
- If you can't make it to an appointment with your doctor or dentist, call to cancel or reschedule the appointment as soon as you know you can't make it, so someone else can be seen at that time.

About Your Medicaid Card

After you are approved as a Medicaid member you will receive a plastic identification card in the mail. One card will be mailed to each enrolled member in the family.

Your card will look like a credit card and is designed to fit in your wallet, making it easy to carry with you at all times. You will need to show your member identification card before receiving medical care. You should keep it with you at all times in case of an emergency.

The card will have your name and your member identification number printed on the front.

Your Medical Care Provider

If you are enrolled in Georgia Better Health Care (GBHC), your GBHC provider's name, address and phone numbers will be printed on the front of card. If you change GBHC providers or are assigned a provider after your card is issued, you will receive a sticker with the name of your provider. You should put this sticker on the front of your Medicaid card right away.



How Your Provider Will Use the Card

Your provider will use your card to get information from the Medicaid system. This information is very important in making sure that Medicaid will pay for the services you need.

Some of the things your provider can see by accessing the Medicaid system:

- If you are eligible for services,
- If you have to pay a co-payment for services,
- If there are any limits on the services you can receive.

Questions

If you have questions about your card or how to use it, call the Customer Interaction Center at 1-866-211-0950 or 770-570-3373.

For out-of-state prior approval call 800-766-4456 (Toll Free)	
Customer Service: 770-570-3373 (Local) or 866-211-0950 (Toll Free) TDD: 866-211-0951 (Toll Free)	
Payor: ACS, Inc. Member: Box 3000 Provider: Box 5000 Prior Authorization: Box 7000 McRae, GA 31055	TO ALL PROVIDERS: Possession of this card is not a guarantee of coverage. If unable to use swipe card function, please verify eligibility at 404-298-1228 (Local) or 800-766-4456 (Toll Free).
Payor: ESI, Inc. Rx BIN: 008958 Rx PCN: A4 Rx GRP: 0MEA	Mail Drug Claims To: ESI-GDCH Paper Claims PO Box 360963 Bloomington, MN 55432 RX Provider Help Line 877-850-9340



Make Your Medicaid Card Work for You!

Keep your card in your purse or wallet so that you'll have it with you when you visit your doctor, dentist, or pharmacy.

Your Medicaid card is only for you. It is against the law for anyone else to use your card.

If your eligibility for Medicaid stops, do not throw your member identification card away. You may become eligible again in the future and may be able to use the same card to receive services.

Always show your card before receiving medical services.

Always get your card back after your visit is completed or your prescription is filled.

Need a Ride?



Georgia Medicaid has agreements with several companies to arrange non-emergency transportation to and from Medicaid health care services. Each company covers different regions of the state. Call the company for your area for help with transportation. If possible, call at least 3 days before your appointment.

Here are the numbers to call:

North Georgia: 1-800-807-5030

Atlanta: 770-693-8401

Central Georgia: 1-888-224-7981

East Georgia: 1-888-224-7988

Southwest Georgia: 1-888-224-7985



What Does Medicaid Cover (Pay For)?

It's always a good idea to ask your doctor or pharmacist whether the specific service or item you need is covered by Medicaid. There are some limits to these services, and some may require you or your doctor to get permission first. (This is called **prior approval**.) Generally, though, Medicaid covers the following services:

- Doctors' and nurses' office visits (when you visit a doctor or nurse for check-ups, lab tests, exams, or treatment)
- Prescription drugs
- Inpatient hospital services (room and board, drugs, lab tests, and other services when you have to stay in the hospital)
- Outpatient hospital services (services you receive in a hospital, even though you do not stay in the hospital overnight)
- Nursing facilities (nursing homes)
- Emergency ambulance services
- Preventive dental care, fillings, and oral surgery for children
- Emergency dental care for adults
- Non-emergency transportation (to get to and from medical appointments)

- Medical equipment and supplies prescribed by a doctor for use in your home (such as wheelchairs, crutches, or walkers)
- Exams, immunizations (shots), and treatments for children (see box, below)
- Family planning services (such as exams, drugs, treatment, and counseling)
- Home health services ordered by a doctor and received in your home (such as part-time nursing, physical therapy, or home health aides)
- Hospice care services provided by a Medicaid hospice provider
- Vision care for children (limited services for adults)
- Hearing services for children



Check Out "Health Check!"

Medicaid pays for most medical services that children need. The Georgia program that provides check-ups and immunizations for children under 21 is called "Health Check". Ask your doctor about it!

Some other services covered by Medicaid include:

- Case management
- Diagnostic, screening, and preventive services
- Laboratory services
- Medicare cost sharing
- Mental health clinic services
- Mental Retardation (MR) Waiver services
- Community Care services
- Independent Care Waiver services
- Nurse midwife and nurse practitioner services
- Nurse visits in the home after delivery of the baby
- Orthotics and prosthetics (artificial limbs and replacement devices)
- Podiatry services
- Psychological services (for people under the age of 21)
- Therapy services (physical, occupational, and speech)
- Rural Health Clinic and Federally Qualified Health Center services
- Childbirth education classes
- Birthing center services
- Dialysis and services for end-stage renal (kidney) disease
- Durable medical equipment.

What's Not Covered?

Some services are not covered by Medicaid. These include: private duty nursing, services given by a relative or member of your household, cosmetic surgery, disposables (such as adult diapers, cotton, or bandages), experimental items, and chiropractic services -- among others. If you're not sure, ask your provider!



If you are not sure whether a service is covered or not, ask your medical care provider (listed on your Medicaid card) or call the Customer Interaction Center (CIC) at 770-570-3373 or 1-866-211-0950 (toll free).

Your Rights and Responsibilities

Once you are eligible for Medicaid, you are guaranteed certain rights, but you also have some responsibilities that go with those rights. Be aware of your rights and responsibilities:

Your Rights

You have the right to apply for any assistance program of your choice.

You have the right to timely and adequate notice. You must receive notice in writing before Medicaid takes any action to end your Medicaid eligibility.

You have the right to a fair hearing if you disagree with a decision regarding your Medicaid eligibility or if you feel that Medicaid has not served your medical needs properly. To request a hearing, contact your county DFCS office quickly -- as soon as possible after you have received a notice about eligibility or services.

You have a right to fair treatment. Medicaid cannot deny you eligibility or benefits based on your race, age, sex, handicap, national origin, or political or religious beliefs. To report eligibility or provider discrimination, call 1-800-533-0686.

Your Responsibilities

You are responsible for providing true and complete information about your circumstances, including your income, the size of your family, your current address, and other information that helps Medicaid decide whether or not you continue to be eligible for Medicaid services.

You are responsible for reporting changes in your circumstances. If your income, resources, living arrangements, family size, or other circumstances change, they could affect your eligibility. It is your responsibility to let your caseworker or the Social Security Administration (SSA) know about these changes within 10 days of the change.

If you receive payments from any other type of insurance or health-related payments, you must give the State of Georgia the rights to these payments. These might include private health insurance, Medicare, CHAMPUS, or car, home, or dental insurance. Be sure to report any of these sources of insurance to your caseworker when you apply for Medicaid. You also need to report whether you receive any money from an injury received in an accident.

Questions and Answers about the Georgia Medicaid Program

What if I lose my card?

If you lose your Medicaid card, call the Customer Interaction Center (CIC) to get a new one. You can reach a representative at 770-570-3373 or 1-866-211-0950 (toll free), Monday through Friday, from 8:00 a.m. until 7:00 p.m.

What if I need services while I'm away from Georgia?

If you need medical services while you're in another state, the doctor or hospital treating you must call the Provider Customer Interaction Center at 1-800-766-4456 (toll free) to get **prior approval** before providing services. (If you are in an emergency situation and are taken to a hospital emergency room, you do not have to get prior approval.)

What if I move to a new address in Georgia?

If you move, let your caseworker at DFCS know your new address, so that you can continue to receive important information about your Medicaid benefits. If you receive SSI, contact the Social Security Administration (SSA) to report your new address.

How do I change my GBHC provider?

Call 1-866-211-0905 (or 770-570-3373 in Atlanta) for information on changing your GBHC primary care provider.

What if I'm not eligible for Medicaid?

Children under 19 who are not eligible for Medicaid may be eligible for PeachCare for Kids. PeachCare for Kids has most of the same benefits as Medicaid. Call 1-877-GA-PEACH (1-877-427-3224) for more information.

The Georgia Partnership for Caring Foundation (GPCF) serves all Georgians in need regardless of age or citizenship status. GPCF refers individuals who qualify to participating voluntary providers. For more information, call 1-800-982-GPCF.

What if I get a bill from a health care provider?

If you get a bill from a doctor, hospital, or other provider you think Medicaid should have paid, call 1-866-211-0950 (or 770-570-3373) or write to the Member Inquiry Unit, GHP, P.O. Box 3000, McRae, GA 31055 and ask for a "Fullard" review. The CIC will investigate to see whether Medicaid should have paid the bill. It will send you a letter of the findings.

What if my Medicaid is cut off or if it is not meeting my medical needs properly?

If you get a notice saying your Medicaid is being cut off or that a service will not be covered and you think it is a mistake, ask for a fair hearing right away. It is important to ask for the hearing within 10 days from the date on the notice if you want to keep on getting services while you appeal. Call or write your DFCS office to ask for the hearing. If you call DFCS, follow up in writing within 15 days.

You can ask for a fair hearing if something goes wrong with your Medicaid, even if you did not get a notice about it. At the fair hearing, an independent person will take information from you and from Medicaid and make a decision about your case.

When can I go to the Emergency Room (ER)?

Medicaid tries to make sure that you have a doctor of your own through Georgia Better Health Care (GBHC). Part of the reason is to keep you from having to use the hospital emergency room when it is not necessary. Your own GBHC doctor can keep your medical record up-to-date and make sure you get complete care. The doctor has someone available to talk to you at night and on weekends or holidays.

If you or your child becomes sick or injured, most of the time it is best to try to reach the doctor by telephone for advice. However, if you really believe the situation is an emergency and you have to get care immediately, go to the emergency room right away.



How to Get More Information about Medicaid

Contact the **Department of Family and Children Services (DFCS)** office in your county to apply for Medicaid, to check on your application, or to change any information about yourself and your family. To contact DFCS, look in your local phone book under "Family and Children Services" (usually in the blue county government pages).

To locate the **Right from the Start Medicaid (RSM)** office nearest you, call **1-800-809-7276**.

To contact the **county health department** to apply for Medicaid for pregnant women, look in your local phone book under "Health" or "Public Health" (in the blue county government pages) or call **404-657-2700**.

To contact the **Social Security office** in your area to apply for SSI or to report any changes in your address or circumstances, call **1-800-772-1213**.

If you do not have your card with you and a medical provider or pharmacist needs to **verify that you are eligible for Medicaid**, ask him or her to call the Customer Interaction Center (CIC) at **770-570-3373** or **1-866-211-0950**. The CIC will tell the provider whether or not you are eligible for the services.

If you are eligible for Medicaid but **have not received your Medicaid card**, call the Customer Interaction Center to order a new one. The telephone numbers are **404-298-1228** or **1-800-766-4456** (Monday - Friday, 8:00 a.m. to 4:30 p.m.). If you need to get medical services right away, you can request an emergency card at the Family and Children Services office in your county.