

Indiana

Children's Special Health Care Services (CSHCS)

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ELIGIBILITY CRITERIA

AGE:

Birth to 21 years of age.

RESIDENCY:

An individual must be and remain a resident of Indiana, but no length of residency requirement applies. U.S. citizenship is not required, except those persons in the U.S. on visas or under circumstances that limit eligibility to receive public funds are not eligible for the program.

Residency may be verified by at least one of the following drivers license, federal income tax returns, rent or utility payment receipts, utility records, or voter's registration.

MEDICAL ELIGIBILITY CRITERIA:

A child is potentially medically eligible for CSHCS if (1) the child has a physical condition that has lasted or is expected to last at least two years if not treated and the physical condition necessitates more health care services than is usually required for a child of that age; (2) the physical condition also produces or will produce disability, disfigurement, limitation of function, need for a special diet, or dependence on an assistive device; or non-intervention will, within one year, lead to a chronic disabling physical condition; and (3) the child has at least one eligible condition.

Eligible Conditions:

The specific provisions include:

- Autism
- Apnea
- Arthritis resulting in disability
- Asthma
- Bilateral hearing loss greater than 40 decibels
- Cerebral palsy or other static encephalopathy resulting in loss of motor function or dysarthria
- Chronic anemia
- Chronic pulmonary disease
- Cleft lip or palate or both
- Chromosomal disorders resulting in loss of motor function or expressive language function
- Congenital or acquired developmental deformities
- Congenital heart disease or arrhythmias
- Cystic fibrosis
- Endocrine deficiencies requiring replacement therapy longer than 5 years
- Epilepsy requiring daily prescription medication
- Hemophilia requiring factor replacement at least 2 times/year
- Hydrocephalus requiring or likely to require a shunt during childhood
- Inborn errors of metabolism that have a potential for significantly improved outcome
- Inflammatory bowel disease
- Myelodysplasia or other spinal cord dysfunction
- Neuromuscular dysfunction
- Oncologic disorders
- Progressive or chronic renal disease with hypertension or renal insufficiency

Excluded Conditions (including but not limited to)

- Acute disorders requiring short-term medical care
- Custodial care reimbursement
- Functional and psychological disorders
- Mental handicaps

FINANCIAL ELIGIBILITY CRITERIA:

General Financial Eligibility:

Effective October 1, 1994, a child is financially eligible for CSHCS if the child's family's gross income is equal to or less than 250% of the federal poverty level.

Financial Eligibility for Initial Screening:

Children may receive initial diagnostic and evaluation services regardless of income or medical eligibility. Application to the CSHCS program is required. Application for Medicaid is also required. (This policy is being reviewed.)

Family Co-Payment or Financial Participation Requirements:

None. Contact the Program directly.

SCOPE OF SERVICES

SERVICES: *

- Care coordination
- Diagnostic evaluations
- Immunizations
- Prescription drugs
- Primary care visits
- Resource information and referral
- Routine dental care
- Secondary care visits

Limited health care services authorized as appropriate to the eligible medical condition of an enrolled child:

- Durable equipment and supplies
- Emergency services
- Inpatient services
- Specialty dental services
- Surgery
- Therapy

* Availability and provision of health care services is contingent upon availability of funds.

Excluded Services:

- Experimental services
- Kidney transplants (but will cover child after transplant)
- Mental health services
- Organ transplants
- Prenatal care, delivery and newborn care

HOW/WHERE SERVICES ARE PROVIDED:

Services may be provided by approved primary and specialty care physicians, tertiary care facilities, or other approved providers.

Out-of-State Services:

Out-of-state services may be provided if the program Director determines that the specific health care service is not readily available within the state of Indiana and referred by an Indiana doctor.

COORDINATION OF FINANCIAL BENEFITS AND SERVICES:

Coordination of Financial Benefits:

CSHCS is the payor of last resort. Providers bill a family's health insurance prior to submitting a claim to the program for payment of a claim. All potentially eligible children must be enrolled in or apply for Medicaid.

Coordination of Services:

Care coordination includes assistance to help ensure the effective and efficient organization of and access to services and resources that are appropriate and necessary to meet the needs of a child with special health care needs and the child's family. This service is offered to any child who has an identified special health care need.

SPECIALIZED OR UNIQUE SERVICES, SPECIAL GRANTS, WORKSHOPS, ETC.:

SPRANS – Integration of Services.

STATUTORY/REGULATORY AUTHORITY:

Ind. Code § 16-6.5-2 (1992), et. seq.