

Don't Get Turned Down - Ensuring Your Medicaid Success

The seemingly endless paper work and the grindingly slow inefficiency of the government's processing system can make Medicaid application appear to be a daunting, if not impossible, task. Add to that the fact that many state and local offices often fail to uphold the federally mandated guidelines, fail to file paperwork on time and in completion, and make errors in rendering dispositions on applications, and the applicant should take heed to be as well-prepared to ensure the success of his/her application for assistance as possible. Following are some issues that should be addressed before and during filing to ensure that your application for Medicaid is handled with success and not met with unnecessary delays or denials.

- 1.) Know what you want and what you can get - With many different Medicaid assistance programs available, the applicant should be well-versed in which programs he might be in need of or qualify for. Some programs focus on individuals with various physical needs or ailments, such as Alzheimer's Disease. Still other programs have strict income and asset limitation requirements. How much you make and/or how much you own can affect your eligibility status for these programs. Applying for the right program or programs can make the difference between acceptance and denial of your application.
- 2.) Know your deadlines - Filing too soon for Medicaid assistance can be as deadly to the success of your application as missing a deadline. Certain assets may have to be liquidated or transferred first to meet income eligibilities. Certain paperwork may have to be completed by your medical practitioner. Likewise, missing a filing deadline, or waiting too long to produce certain documentation may doom your application to denial, as well. Filing during a period of ineligibility is never a good idea, as that can lead to serious delays in the completion of the application process. Knowing when to file, and when to file what paperwork will greatly enhance your chances of success.
- 3.) Know your abilities - Most Medicaid applicants must prove that they are unable to care for themselves in the course of everyday living. You will have to demonstrate through a physical exam that you can no longer dress yourself, feed yourself, bathe yourself and attend to your other basic everyday needs. This exam is usually conducted by a medical practitioner or someone affiliated with an agency such as a hospice, or institution such as a nursing facility. If you perform too well on this exam, you may not receive your application approval. A mental exam is often a part of this exam, as well, to determine if, even though you may be physically capable of looking after yourself, your mental state prevents you from doing so.
- 4.) Know your county's procedures - Most Medicaid intake interviews, at least the initial ones, must be conducted face-to-face. This differs from county to county, throughout the state of course, but as a general rule of thumb, either you or a legal, eligible representative for you, will have to go to the local office to initiate the application process. Some offices even limit the actual completion of the application to their case workers. Know who you need to see, who may go in your stead if you can't, and what they may need to take with them before attempting to file your Medicaid application.
- 5.) Know your paperwork - The Medicaid application is a multi-page document. Each question's answer must be supported with other legal or medical documentation. These support documents might include: social security cards, Medicare cards, health insurance cards, birth certificates, marriage certificates, death certificates, life insurance policies, property deeds, car registrations, monthly household bills, funeral arrangement documents, pay or pension stubs, and financial statements typically going back three years prior to the time the Medicaid application is filed. The local office can obtain certain information from its computer records, should you need it. They should also be able to help you in obtaining records from the state's Office of Vital Statistics, should you be missing any birth, death, or marriage certificates that may be required. The IRS regularly sends income and financial records to local offices, and your Medicaid can be denied or even revoked if certain vital financial information is withheld. Medicaid fraud is taken seriously. It is better to not file until all your supporting paperwork is in order than to file without it and risk denial or worse. Having all of your ducks in a row and all your paperwork lined up behind them can greatly enhance the chances of your application's success, as well as speed up the application completion itself.
- 6.) Know your rights - Medicaid application success depends not only on you, but on the individuals at your local office who manage your case for you. The federal government has mandated that all Medicaid claims must be decided upon within 90 days. An administrative law judge can expedite an application disposition at a fair hearing. If your application disposition is taking longer than you think it should, you may need to arrange for just such a fair hearing to be held. This will involve retaining an attorney, but it could save you a wait time of a year or more to learn whether or not your expenses are covered by Medicaid benefits, and to what extent that coverage will take. Applying for Medicaid benefits for assisted living may be a necessary evil, but the process itself doesn't have to be devilish. Knowing these 6 simple basics can speed the application disposition process and have you well on your way to application approval, without anxiety, delays or denial demons.

About the Author

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