

Providing
for
Adults and Children
With
Special Needs
In
New York
A Guide for the Non-Profit Health Agency
Maryland Patient Advocacy Group
2005

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Our-Kids Devoted to Raising

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Section I: Introduction to Income Maintenance and Healthcare

This document has been prepared for non-profit health agencies to help you assist your clients with special needs obtain both income maintenance, healthcare special and vocational education. We have also tried to include supportive services both the disabled individual and the family might require. Based on the severity of their condition they will either be eligible for benefits through the Social Security System by MEETING THE SOCIAL SECURITY DISABILITY CRITERIA for either CHILDREN or ADULTS as listed in the [Social Security Blue Book](#): A set of medical guidelines that must be met to award disability and Medicare benefits. To see the Adult Listings go to <http://www.ssa.gov/disability/professionals/bluebook/AdultListings.htm>

To view the Childhood Listings go to <http://www.ssa.gov/disability/professionals/bluebook/ChildhoodListings.htm>

or if the condition has not reached that severity level through various state programs based on income. We have addressed resources for all age groups because no matter at what age a condition is diagnosed life time care is required.

For over a decade, I, as a parent of two adult children with a genetic disease, have advocated for individuals with chronic illnesses and their families in their quest for both healthcare, personal services and income. This document is based on the questions I have been asked and the answers I have identified. I have tried to create a document, comprised of New York State and other websites, which would provide the basic information in one concise document. While I have included hundreds of links to resources, the basic information can be found within these pages. While I would have loved to address the many other issues we all face – transportation, education, planning for the future when we, the parents, are not longer around, I had to focus on several main issues – access to healthcare, income maintenance and support for the family/caregiver. I welcome your input.

What source of income is there for disabled adult or child?

To aid you in identifying what your client might be eligible for we are beginning this document with the eligibility guidelines for the main income and healthcare programs. These guidelines will appear again in the section that explains the program in depth.

- Supplemental Security Income (SSI) – upon which Medicaid depends

- **Temporary Cash Assistance - temporary help for needy men, women and children if unable to work, can't find a job, or the job does not pay enough, TA may be able to help pay expenses.**
- **Medicaid which is called Child Health Plus or CHPlus A**
- **Children's Health Insurance Program or CHIPs which in NY is called CHPlus B.**

SSI stands for Supplemental Security Income. SSI is a Federal program, run by the Social Security Administration (SSA), which pays a monthly benefit of up to \$ \$666.00 (effective January 1, 2005) to disabled individuals in New York State who may have limited "on-the-books" work history, or low income and limited assets.(\$2000 for an individual and \$3,000 for a couple). It may also pay benefits to eligible people who are waiting for Social Security Disability Insurance (SSDI) to start.

Some states, like New York, supplement the amount the Federal Government pays. For example, the Federal Government pays \$579 to an individual living alone (\$869 to disabled married couples). New York State supplements that amount by adding \$87 to the individual's payment (totaling \$666) and \$104 to the couple's payment (totaling \$973). Your SSI Award Letter may include this information.

To apply for SSI go to: [SSA Office Locator](#)

What is Temporary Cash Assistance?

Temporary Assistance is temporary help for needy men, women and children. If you are unable to work, can't find a job, or your job does not pay enough, TA may be able to help you pay for your expenses.

How do I apply for Temporary Assistance?

If you live outside of New York City, call or visit your local department of social services in the county where you live and ask for an application package. If you live in New York City, call or visit your local Income Support (Welfare) Center, or Job Center. You must fill out the application form and turn it in. You may turn in (file) the application the same day you get it. You should also identify any emergency needs you may have at this time.

What is an Emergency?

An emergency is an urgent need or situation that has to be taken care of right away. Some examples of an emergency are:

- **You are homeless**
- **You have little or no food**
- **Your landlord has told you that you must move or has given you eviction papers**
- **You do not have fuel for heating in the cold weather period**

- Your utilities are shut-off or are about to be shut-off, or you have a 72-hour disconnect notice
- You or someone in your family has been beaten, abused or threatened with violence by a husband, wife, partner or other member of the household

With TA comes Medicaid and other benefits.



[Programs/Services](#) | [How Do I?](#) | [Contracts & Grants](#) | [Forms](#) | [FAQs](#) | [Press Room](#) | [Publications](#) | [Reports](#) | [RFPs](#) | [What's New](#)
 County Departments of [Social Services Offices](#).

How do I know if my income and resources qualify me for Medicaid?

The income levels making one eligible for the various federal and State programs can be accessed by going to the site highlighted above. The income and resource levels depend on the number of your family members who live with you.

You may also own a home, a car, and personal property and still be eligible. The income and resources of legally responsible relatives in the household will also be counted.

Household Size	Resources (\$)	Medicaid Income Level (\$)		100% FPL (\$)		133%FPL (\$)		185% FPL (\$)		200%FPL (\$)	
		Year	Month	Year	Month	Year	Month	Year	Month	Year	Month
1	4,000	8,000	667	9,520	794	12,662	1,056	17,612	1,468	19,040	1,587
2	5,850	11,700	975	12,780	1,065	16,998	1,417	23,643	1,971	25,560	2,130
3	5,900	11,800	984	16,040	1,337	21,334	1,778	29,674	2,473	32,080	2,674
4	5,950	11,900	992	19,300	1,609	25,669	2,140	35,705	2,976	38,600	3,217
5	6,000	12,000	1000	22,560	1,880	30,005	2,501	41,736	3,478	45,120	3,760
6	6,800	13,608	1,134	25,820	2,152	34,341	2,862	47,767	3,981	51,640	4,304
7	7,650	15,300	1,275	29,030	2,424	38,677	3,224	53,798	4,484	58,160	4,847
8	8,500	17,000	1,417	32,340	2,695	43,013	3,585	59,829	4,986	64,680	5,390
Each Add'l Person	+850	+1,700	+142	+3,260	+272	+4,336	+362	+6031	+503	+6,520	+544

Federal Poverty Levels (FPL)

Spousal Impoverishment	Income (\$)	Resources (\$)
Community Spouse	\$2,378	\$95,100*
Institutionalized Spouse	\$50**	\$3,950
Family Member Allowance	\$1,598 is used in the FMA, the maximum allowance is \$533	

**In determining the community spouse resource allowance on and after January 1, 1997, the community spouse is permitted to retain resources in an amount equal to the greater of the following \$74,820 or the amount of the spousal share up to \$92,760.*

The spousal share is the amount equal to one half of the total value of the countable resources of the couple as of the date of the first continuous period of institutionalization of the institutionalized spouse on or after September 30, 1989.

***Please note that there are new income levels for those married Medicaid recipients residing at home receiving certain services. Contact our offices for further information.*

Can I be eligible for Medicaid even if I have more money than the chart shows?

Yes, some people can. Pregnant women and children can have higher income levels and no resource limits.

Pregnant women, children, disabled persons, and others may also be eligible for Medicaid if their income and/or resources are above these levels and they have medical bills. Ask your Medicaid worker if you fit into one of these groups.

Expanded Income levels for Children and Pregnant Women

- **Infants to age one and pregnant women - 200% of the federal poverty level.**
- **Children age 1 to 19 years - 133% of the federal poverty level.**

[Guide to Getting and Keeping Health Insurance in New York](#)

What are the [income guidelines](#) for families whose income is too high for Medicaid and CHPlusA and what are they eligible for?

What is available to cover children whose family income is too high for CHPlusA? This program is called CHPlusB.

Child Health Plus A Final 2005 Federal Poverty Levels (FPLs)						
Age Categories for Children	Monthly Income for Family Size					Each Additional Person, Add:
	1	2	3	4	5	
Children Under 1 Year; Pregnant Women*	1,587	2,130	2,674	3,217	3,760	544
Children 1 - 18 Years	1,056	1,417	1,778	2,140	2,501	362
* Pregnant Women count as two						
Child Health Plus B Final 2005 Premium Levels						
PREMIUM CATEGORIES	MONTHLY INCOME FOR FAMILY SIZE*					Each Add'l Person, Add:
	1	2	3	4	5	
Free Insurance	\$1,269	\$1,703	\$2,138	\$2,573	\$3,007	\$435
\$9 Per Child Per Month (Maximum of \$27 per family)	\$1,762	\$2,365	\$2,968	\$3,571	\$4,174	\$604
\$15 Per Child Per Month (Maximum of \$45 per family)	\$1,984	\$2,663	\$3,342	\$4,021	\$4,700	\$680
Full Premium Per Child Per Month	Over \$1,984	Over \$2,663	Over \$3,342	Over \$4,021	Over \$4,700	
* Pregnant Women count as two						

Section II: What is the Family and Physician’s Responsibility once the Diagnosis of a Genetic or Chronic Disease is made?

One of the most important things a family can do for themselves when a member is diagnosed with a genetic or acquired chronic condition is to educate themselves about the disease, its medical and financial implications and set in motion a plan to meet those needs. If the client is a child it is important that all services are identified to support the family financially, emotionally and

psychologically. Careful planning must be done to provide for the child in his/her adults years. If the client is an adult careful attention must be paid to income maintenance as well as to family issues occur when a once healthy adult is diagnosed with a chronic, oftentimes life threatening condition. Any professional/non-profit health agency working with a client/family in this situation owes it to them to inform them of what they should do to address obtaining medically necessary care, income maintenance as well as the emotional and psychological impact on the family.

Where can a family go for genetic evaluation?

Science has helped us understand how blue eyes or baldness - as well as other inherited traits, both harmless and harmful - can run in a family. In the past few decades, knowledge has exploded in the field of human genetics.

Genetic counseling translates the science into practical information. Anyone who has unanswered questions about diseases or traits in their family should consider genetic counseling. People who might be especially interested include:

- Those who have, or are concerned that they might have, an inherited disorder or birth defect;
- Women who are pregnant or planning to become pregnant after age 35;
- Couples who already have a child with an inherited disorder or a birth defect;
- Couples whose infant has a genetic disease diagnosed by routine newborn screening;
- Women who have had three miscarriages or babies who died in infancy;
- People concerned that their jobs, lifestyles or family or medical history may pose a risk to pregnancy, including exposure to radiation, medications, chemicals, infection or drugs;
- Couples who would like more information or testing about genetic defects that occur frequently in their ethnic group or;
- Pregnant women, who, based on ultrasound tests or blood tests, have been told their pregnancy may be at increased risk for complications or birth defects.



The Newborn Screening Program in the Division of Genetic Disorders performs more than 2.9 million tests annually for ten congenital diseases and the human immunodeficiency virus (HIV) which causes Acquired Immune Deficiency Syndrome (AIDS). The tests are conducted on the quarter of a million babies born each year in New York State.

The concept of newborn screening began in Buffalo, New York in 1960 with the work of Robert Guthrie, M.D., Ph.D. Now, all 50 states have newborn screening programs. New York's begun in 1965 and tests for more disorders than many other states. Since the program began, more than ten million babies have been tested and more than 12,900 cases have been identified.

New York State's law for newborn screening, Public Health Law 2500-a originally required testing for only one genetic disorder, phenylketonuria (PKU), a metabolic disorder which, if left untreated, can cause brain damage. Today newborns are tested for eight inherited metabolic conditions, congenital hypothyroidism, and hemoglobinopathies including sickle cell disease. In 1996, the Public Health Law was amended to require that all newborns also be tested for HIV.

Although most of the disorders are rare, they are usually serious. Some may be life threatening; others may slow down a baby's physical development or cause mental retardation or other problems if left untreated. None of the ten disorders can be cured.

However, serious side effects can be lessened, and often completely prevented, if a special diet or other medical intervention is started early. Without treatment to reduce transmission, a quarter of babies exposed to HIV actually develop the disease.

The tests for all of these conditions are performed on one tiny sample of blood (Guthrie spot) obtained by pricking the baby's heel.

The sample is usually taken the day of hospital discharge. The blood is collected and then dried on a special paper which is sent to the Newborn Screening Program for testing. Test results are reported to physicians and specialty care centers.

General Information

General Information

[NYS Genetic Services.](#)

[Testing Newborn's Health.](#)

[Screening Baby's Health.](#)

[Sickle Cell Trait.](#)

[Hemoglobin C Trait.](#)

[Congenital Hypothyroidism.](#)

[Cystic Fibrosis.](#)

[On-line Ordering.](#)

[Information Sources.](#)

Newborn Screening

[Welcome.](#)

[Guidelines.](#)

[Public Health Law.](#)

[Regulations.](#)

[Annual Reports.](#)

[Contact Us.](#)

Need More Info....

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[Questions/Comments.](#)

[Phone/Mailing Information.](#)

[PRIVACY POLICY.](#)

[XHTML | CSS | WCAG](#)

[.Navigate Newborn Screening](#)

- [NYS Genetic Services Program](#)
- [Testing Your Newborn's Health](#)

[For more information, contact the Newborn Screening Program.](#)

Resources:

[National Organization for Rare Disorders, Inc. NORD](#)

Voice: (800) 999-6673

[National Health Information Center \(NHIC\)](#)

[Parents Helping Parents](#)

[Genetic Alliance](#)

Voice: (800) 336-4363

[Mid-Atlantic Regional Human Genetics Network](#)

E-mail: sschmidt@christianacare.org

[The Center for Human and Molecular Genetics \(CHMG\)](#)

(genetic information and resources web site sponsored by UMDNJ/NJ Medical School)

Section III: Advocacy Resources

[Family to Family](#)

[Healthcare Information and Education Center](#)

FAMILY VOICES®



Home

Contact FV

Projects

Information &
Publications

Resources
& Links

State Contact:

Ruth Walden*

(518) 474-2001

E-mail: rxw03@health.state.ny.us

Brave Kids
Help for children with chronic, life-threatening illnesses or disabilities.



Connecting and supporting families of individuals with special needs in New York State We offer various Services through our Regional Offices to assist us in Our Mission to connect and support families of individuals with special needs. This website serves as a representative sample of how we can help a parent of an individual with a disability or special health care need. We hope that you will contact us so we may assist you in meeting your family's needs.

Our services are free and confidential. Be sure to check out NYS Advocate for Persons with Disabilities
<http://www.advoc4disabled.state.ny.us/>

State Advocate for persons with disabilities

Self-Advocacy Association of New York
<http://www.sanys.org/>

The Self-Advocacy Association of NYS is an organization for and led by people with the challenge of a disability to assure the civil rights and responsibilities that include the opportunities and choices of equal citizenship.

Self-Advocates Becoming Empowered

Mission: To ensure that people with disabilities are treated as equals and that they are given the same decisions, choices, rights, responsibilities, and chances to speak up to empower themselves; opportunities to make new friends; and to learn from their mistakes.

National Association of Protection and Advocacy
<http://www.protectionandadvocacy.com/>

NAPAS was created to facilitate coordination of its members; represent the needs of members before federal agencies and Congress; and provide technical assistance and training to member agencies, which enhance their effectiveness on the state and local level.

Medicare Rights Center (MRC) advocates for those on Medicare nationwide.
<http://www.medicarerights.org/>

Welcome to Partners for Children

Community Partners - Resource Guide
[PDF Version](#)

The Making of a Partners for Children Community

No matter what you call it collaboration, partnership, or community building no one denies the primacy of a cooperative approach. But building effective, community partnerships is neither easy nor formulaic. You won't discern a beginning, middle and end for this dynamic, evolving process. And no one can underestimate the importance of patience, effort, trust and skill.

This guide, developed by the NYS Partners for Children, presents the best of our collective knowledge on successful partnerships in New York State as well as other parts of the country. Bear in mind that this is a guide, not a prescription. Successful partners know when to ask for help, so don't hesitate to call Partners For Children at 877.522.9241 for information, assistance or a referral to a local partnership with first hand experience.

Envisioning the Collaborative Process

Like most dynamic processes, this one is far from linear. Not all partnerships will begin at the same point. A community experience and current level of partnership activity will determine where they begin and what their next steps should be.

Although distinct stages appear here, in reality, they overlap and reverse. That right. Just when you think you are at the final stage, you probably ready to re-visit some of your prior actions.

Wait, There is More.. .

Like the collaboration building process itself, these dynamic elements characterize successful community partnerships:

- **Identify the need**
- **Involve a cross-section of community stakeholders**
- **Engage parents and families**
- **Share leadership among community champions**
- **Endorse a common vision and goals**
- **Engage in joint strategic planning**
- **Establish clear rules and decision-making responsibilities**
- **Create an atmosphere of mutual respect, understanding and trust**
- **Maintain open and frequent communication**
- **Continue to improve through evaluation**

Assembling the Team

Every partnership benefits from alliances that represent the range of community interests and resources. Look for people who will bring clout, commitment, knowledge and diversity to the table.

Remember that consumers, the people, including parents and children, who will use services, must help establish goals and strategies.

Grassroots and volunteer organizations that may not have financial resources are important for their racial and cultural perspectives.

As the conduit for major community resources, public sector organizations offer a direct line to federal and state agencies; key sources of dollars, technical assistance and policy support.

Highly experienced in service delivery strategies, private providers and nonprofit organizations offer well developed volunteer networks as well as useful community contacts. Be sure this group includes the local philanthropic community United Ways,



foundations and other charitable organizations.

- we are a [group of fourteen agencies](#)
- from both public and private sectors
- who came together to make life better for New York's children and families
- by encouraging collaborations at the local community level.

Planning for the Disabled Child when you are no longer around

- Life Planning List - You can subscribe by sending a command like the one below to majordomo@lists.sonic.net

subscribe LifePlanning-List YOUR EMAIL ADDRESS

Be sure to replace "YOUR EMAIL ADDRESS" with your information.

- [Special Needs Planning, Beyond Wills & Trusts](#) for families with a member who has Special Needs.
- [Special Needs Trusts Email List](#) - Milton Blackstone, Listowner. To subscribe visit the link & enter your email address in the space provided.
- [Trusts, Riverbend Down Syndrome Parent Support Group](#) - A properly drafted trust will provide additional opportunities for the individual with a disability without making them ineligible for government benefits or

exposing the assets to collection by state agencies who have provided services to the individual.

Health Care

Office of New York State Attorney General Eliot Spitzer

The [Health Care Bureau](#) protects - and advocates - for the rights of all health care consumers statewide. The Bureau operates a toll-free Health Care Helpline that assists New Yorkers with individual problems; investigates and takes law enforcement actions to address systemic problems in the operation of the health care system; and proposes legislation to enhance health care quality and availability in New York State.

To file a complaint by phone call the Health Care Bureau's *Helpline* at 1-800-771-7755 (Option 3)

Fax a written complaint to 518-402-2163

[Download Health Care Complaint Form \(45KB PDF\)](#)

[Center for Independence of the Disabled](#)

Links

Especially for parents

- [After-school programs](#)
- [Parent involvement](#)
- [Children with disabilities](#)
- [Private schools and national school search sites](#)
- [Neighborhood and community organizations](#)

For parents, advocates, and policy-makers

- [City & state government sites](#)
- [School reform and advocacy groups](#)
- [Legal resources](#)
- [Sources for researchers](#)
- [Education organizations](#)
- [Labor unions](#)

- [Libraries](#)

Section IV: Income maintenance for disabled adults and children with limited income and assets

Is there a program for emergency situations?

Yes, Temporary Assistance (TA) is temporary help for needy men, women and children. If you are unable to work, can't find a job, or your job does not pay enough, TA may be able to help you pay for your expenses.

How do I apply for Temporary Assistance?

If you live outside of New York City, call or visit your local department of social services in the county where you live and ask for an application package. If you live in New York City, call or visit your local Income Support (Welfare) Center, or Job Center. You must fill out the application form and turn it in. You may turn in (file) the application the same day you get it. You should also identify any emergency needs you may have at this time.

What is an Emergency?

An emergency is an urgent need or situation that has to be taken care of right away. Some examples of an emergency are:

- **You are homeless**
- **You have little or no food**
- **Your landlord has told you that you must move or has given you eviction papers**
- **You do not have fuel for heating in the cold weather period**
- **Your utilities are shut-off or are about to be shut-off, or you have a 72-hour disconnect notice**
- **You or someone in your family has been beaten, abused or threatened with violence by a husband, wife, partner or other member of the household**

What are the two major Temporary Assistance programs?

Family Assistance (FA)

Family Assistance (FA) provides cash assistance to needy families that include a minor child living with a parent (including families where both parents are in the household) or a caretaker relative. FA operates under federal Temporary Assistance for Needy Families (TANF) guidelines.

Under FA, eligible adults are limited to receiving benefits for a total of 60 months in their lifetime, including months of TANF-funded assistance granted in other states. Once this limit is reached, that adult and all members of his or her FA household are ineligible to receive any more FA benefits. The months need not be consecutive, but rather each individual month in which TANF-funded benefits are received is included in the lifetime count. The counting of this 60-month limit began in December 1996.

Parents and other adult relative who can work must be working or involved in work-like activities after receiving FA benefits for two years, or sooner in the local department of social services decides they can work earlier.

Parents are also responsible for cooperating with the local department of social services in locating any absent parent. Non-cooperation without good cause could result in lower benefits.

Safety Net Assistance (SNA)

If you are not eligible for other assistance programs, you may be eligible for SNA. SNA is for:

Single adults

Childless couples

Children living apart from any adult relative

Families of persons abusing drugs or alcohol

Families of persons refusing drug/alcohol screening, assessment or treatment

Persons who have exceeded the 60-month limit on assistance

Aliens who are eligible for temporary assistance, but who are not eligible for federal reimbursement

Generally, you can receive cash SNA for a maximum of two years in a lifetime. After that, if you are eligible for SNA, it is provided in non-cash form, such as a two party check or a voucher. In addition, non-cash SNA are provided for:

Families of persons abusing drugs or alcohol

Families of persons refusing drug/alcohol screening, assessment or treatment

Are there certain individuals who are not eligible for Temporary Assistance?

Yes, workers must not grant Temporary Assistance benefits to individuals:

Who are under the age of 18 and not married with a child over 12 weeks of age in their care and who have not successfully completed high school or its equivalent. However, you will satisfy the educational requirement if you are working towards a high school diploma or its equivalent, or participating in an alternative program approved by your worker.

Who have been convicted in federal court of having made a fraudulent statement or representation with respect to their place of residence in order to receive Temporary Assistance from two or more states. The period of ineligibility is for ten years.

Who are fleeing to avoid prosecution, or custody or confinement under the laws of the place from which the individual flees for a crime or attempts to commit a crime. This is true if the crime is a felony under the laws of the place from which the individual flees. In the case of the State of New Jersey, is a high misdemeanor under the laws of such state.

Who are violating a condition of probation or parole imposed under federal or State law.

Who are illegal aliens, undocumented aliens or aliens with a temporary immigration status.

Is there a limit on how long I can get Temporary Assistance?

There is a 60-month limit on the receipt of Family Assistance benefits received under Family Assistance (FA), the former Aid to Families with Dependent Children (ADC), some Safety Net Assistance (SNA) or the Child Assistance Program (CAP). Additionally, a payment for regular maintenance needs under the Emergency Assistance to Families with Children (EAF) for the month of December 1996, or any month thereafter, are included in the 60-month count. Participants in CAP are also restricted to the 60-month lifetime limit.

Additionally, cash Temporary Assistance in New York State is limited to a cumulative period of 60 months for any adult. No cash assistance (FA or SNA) benefit is granted to a family that contains an adult who has received a combined total of 60-month benefits under FA or cash SNA.

TA Program identifies the TA Program in your county and the supportive services that go with it – Medicaid, food stamps, transportation, child care, etc.

How does one become eligible Supplemental Security Income (SSI)?

Anyone WHO MEETS THE SOCIAL SECURITY DISABILITY CRITERIA for either CHILDREN or ADULTS as listed in the Social Security Blue Book and meets the income and asset criteria set by the federal government is eligible for SSI and Medicaid.

What are the three Ways a Child Can Get Benefits from Social Security Supplementary Income (SSI)?

A Special Message to Parents of Children with Severe Disabilities

The disability evaluation process generally takes several months. However, the law includes special provisions for people (including children) signing up for SSI disability whose condition is so severe that they are presumed to be disabled. In these cases, SSI benefits are paid for up to six months while the formal disability decision is being made. (These payments can be made only if the child meets the other eligibility factors.

Following are some of the disability categories in which we can presume your child is disabled and make immediate SSI payments:

- **HIV infection**
- **Total Blindness**
- **Total Deafness (in some cases)**
- **Cerebral palsy (in some cases)**
- **Down syndrome**
- **Muscular dystrophy (in some cases)**
- **Mental retardation**
- **Diabetes (with amputation of one foot)**
- **Amputation of two limbs**
- **Amputation of leg at the hip**
- **End Stage Renal Disease**

If SS makes these special payments, and later decides that the child's disability is not severe enough to qualify for SSI, the benefits do not have to be paid back.

The three kinds of benefits are:

1. **SSI Benefits for Children-- These are benefits payable to disabled children under age 18 who have limited income and resources, or who come from homes with limited income and resources.**
2. **Social Security Dependents Benefits-- These are benefits payable to children under the age of 18 on the record of a parent who is collecting retirement or disability benefits from Social Security, or survivors benefits payable to children under the age of 18 on the record of a parent who has died. Although children under age 18 who are eligible for these benefits might be disabled, we do not need to consider their disability to qualify them for benefits.**
3. **Social Security Benefits For Adults Disabled since Childhood (DAC) Dependents benefits normally stop when a child reaches age 18 (or 19 if the child is a full-time student). However, those benefits can continue to be paid into**

adulthood if the child is disabled. To qualify for these benefits, an individual must be eligible as the child of someone who is getting Social Security retirement or disability benefits, or of someone who has died, and that child must have a disability that began prior to age 22.

Although most of the people getting these benefits are in their 20s and 30s (and some even older), the benefit is considered a "child's" benefit because it is paid on the basis of a parent's Social Security earnings record.

SSI Benefits for Children with Disabilities

Non-Medical Rules

SSI is a program that pays monthly benefits to people with low incomes and limited assets who are 65 or older, or blind, or disabled. Children can qualify if they meet Social Security's definition of disability for SSI children and if their income and assets fall within the eligibility limits.

Rules for Children Under 18

We consider the parent's income and assets when deciding if a child under 18 qualifies for SSI. This applies to children who live at home, or who are away at school but return home occasionally and are subject to parental control. We refer to this process as "deeming" of income and assets.

Check with your Social Security office for information about your child's specific situation and for a full explanation of the "deeming" process.

Rules for Children 18 and Older

When a child turns age 18, we no longer consider the parent's income and assets when we decide if he or she can get SSI. A child who was not eligible for SSI before his or her 18th birthday because the parent's income or assets were too high may become eligible at age 18.

If a disabled child getting SSI turns 18 **and** continues to live with his or her parents, but does not pay for food or shelter, a lower SSI payment rate may apply.

How SS Decides If a Child Is Disabled For SSI

While you're local Social Security office decides if your child's income and assets are within the SSI limits, all documents and evidence pertaining to the disability are sent to a state office, usually called the Disability Determination Service (DDS). There, a team, consisting of a disability evaluation specialist and a

medical or psychological consultant, reviews your child's case to decide if he or she meets our definition of disability.

If the available records are not thorough enough for the DDS team to make a decision, you may be asked to take your child to a special examination that Social Security will pay for. It is very important that you do this, and that your child puts forth his or her best effort during the examination. The results of the examination will not be considered valid unless your child puts forth his or her best effort. Failure to attend the examination, or invalid results due to poor effort, could result in an unfavorable decision.

Deciding SSI Disability for Children Under 18

The law states that a child will be considered disabled if he or she has a physical or mental condition (or a combination of conditions) that results in "marked and severe functional limitations." The condition must last or be expected to last at least 12 months or be expected to result in the child's death. And, the child must not be working at a job that we consider to be substantial work.

To make this decision, the disability evaluation specialist first checks to see if the child's disability can be found in a special listing of impairments that is contained in Social Security's regulations. These listings are descriptions of symptoms, signs or laboratory findings of more than 100 physical and mental problems, such as cerebral palsy, mental retardation or muscular dystrophy, that are severe enough to disable a child. The child's condition does not have to be one of the conditions on the list. But, if the symptoms, signs or laboratory findings of the child's condition are the same as, or medically equal in severity to the listing, your child is considered disabled for SSI purposes. If your child's impairment(s) does not meet or medically equal a listing, the DDS then decides whether it "functionally equals" the listings. They assess the effects of the condition or combination of conditions on your child's ability to perform daily activities by comparing your child's functioning to that of children the same age who do not have impairments. To do this, they consider questions such as:

- What activities is your child able or not able to perform?
- Which activities are limited in comparison with those of same-age peers?
- What type and amount of help does your child need to complete age-appropriate activities?

To determine whether your child's impairment causes "marked and severe functional limitations," the disability evaluation team obtains evidence from a wide variety of sources that have knowledge of your child's condition and how it affects his or her ability to function on a day-to-day basis and over time. These sources include, but are not limited to, the doctors and other health professionals who treat your child, teacher's counselors, therapists and social workers. A

finding of disability will not be based solely on your statements or in the fact that your child is, or is not, enrolled in special education classes.

The child who gets SSI is eligible for Medicaid and in only one instance, Medicare. In New York children who get SSI benefits qualify for Medicaid. The only exception to this rule is for children with chronic renal disease who need a kidney transplant or maintenance dialysis. Children with chronic renal disease can get Medicare if a parent is getting Social Security or has worked enough to be covered by Social Security.

Supplemental Security Income in New York

SSI, or Supplemental Security Income, is a federal program that provides monthly cash payments to people in need. SSI is for people who are 65 or older, as well as for blind or disabled people of any age, including children.

To qualify you also must have little or no income, and few resources. This means that the value of the things you own must be less than \$2,000 if you are single or less than \$3,000 if you are married. The value of your home does not count. Usually, the value of your car does not count. And the value of certain other resources, such as a burial plot, may not count either.

To get SSI, you also must apply for any other cash benefits you may be able to get. You must live in the United States or the Northern Mariana Islands to get SSI. If you are not a U. S. citizen, but you are a resident, you still may be able to get SSI. For more information, ask for the publication, *Supplemental Security Income (SSI) for Noncitizens* (Publication No. 05-11051).

How does SSA compute a child's SSI eligibility?

Deeming refers to allocating a portion of the parents' income to the child to ascertain eligibility for SSI and Medicaid.

The total parent income is not allocated to the child and thus the child can be eligible for benefits even if the parents' income is relatively high. If there are two disabled children in the household, the parent's income has no bearing on SSI/Medicaid eligibility.

How to Figure Out Eligibility

Deeming Explained

Monthly SSI payment amounts

The amounts include both federal and state payments combined. Not all SSI recipients receive the maximum amount. Your payment may be lower if you have other income.

Category	2005 total monthly payment
Person living alone	\$666.00
Person living with others, but paying his or her own expenses	\$602.00
Person living in someone else's household and receiving support and maintenance	\$409.00
Person living in a public general hospital or Medicaid-approved long-term facility	\$ 35.00
Couple living alone	\$973.00
Couple living with others, but paying their own expenses	\$915.00
Couple living in someone else's household and receiving support and maintenance	\$625.34

TIP – What to Bring to When Applying for Benefits

- multiple copies of birth certificates for all family members,
- marriage certificates,
- income documentation,
- residence verification,
- copies of bank statements, list of liquid assets,
- insurance policies of all types,
- rent/mortgage verification,
- and utility bills.

Suggest that they:

- mail documents by certified mail,
- keep an ongoing record of who they speak to, date and time, what was said
- and keep copies of all documents

If the client has accumulated medical bills they can take all the bills to the Department of Social Services in their county and apply for Medicaid under Spenddown. If the amount they owe for past medical care is several times their monthly income they might be eligible for Medicaid under spenddown.

If the client has an emergent situation requiring immediate access to income/healthcare is there anything that can expedite the SSI process?

Expedited SSI/Medicaid

SSI makes payments more quickly than usual in 4 different situations:

- **presumptive disability or blindness payment;**
- **Emergency advance payment;**
- **Immediate payment; and**
- **Expedited reinstatement cases.**

Presumptive Disability or Blindness Payments

We may make presumptive disability payments available for up to 6 months, if you applied for SSI benefits because of a disability or blindness and are waiting for the State Disability Determination Services (DDS) to make a final decision.

We may make a presumptive disability or blindness determination if you have one or more of the following medical conditions:

Amputation of a leg at the hip; allegation of total deafness; allegation of total blindness; allegation of bed confinement or immobility without a wheelchair, walker, or crutches, allegedly due to a longstanding condition—excluding recent accident and recent surgery; allegation of cerebral palsy, muscular dystrophy, or muscular atrophy and marked difficulty in walking (e.g., use of braces), speaking, or coordination of the hands or arms; Allegation of Down's syndrome; an applicant filing on behalf of another individual alleges severe mental deficiency for claimant who is at least 7 years of age; human immunodeficiency virus (HIV) infection; allegation of a stroke (cerebral vascular accident) more than 3 months in the past with continued, marked difficulty in using arms or legs;

Emergency – Expedited Payments

We may be able to make an emergency advance payment to new applicants, who face a financial emergency and who are due SSI benefits that are delayed or not received. We can only pay one such advance payment. The emergency advance

cannot be higher than the SSI Federal benefit rate (plus any federally administered State supplement).

Who can receive emergency/expedited payments?

People who are:

due SSI benefits (including presumptive disability or blindness payments) that are delayed or not received; and facing a "financial emergency"—which means they need money right away due to a threat to health or safety, such as not enough money for food, clothing, shelter or medical care.

How do we recover emergency payments if they were made in error?

We will subtract the emergency advance payment from the payments already due you and pay you the IMMEDIATE PAYMENT

We may be able to make an immediate payment to new applicants and those already receiving SSI benefits, whose benefits are delayed or not received and who face a "financial emergency". We can make only one such payment in a 30-day period. The immediate payment cannot be higher than \$999.00.

Who can receive an immediate payment?

People who: are initially applying for SSI benefits, or already receiving benefits; and are due SSI benefits (which may be presumptive disability or blindness payments) that are delayed or not received; and are facing a "financial emergency"—which means they need money right away due to a threat to health or safety, such as not enough money for food, clothing, shelter or medical care.

How do we recover an immediate payment?

We will subtract the immediate payment from the payments already due you and pay you the difference. If you are not due past payments, we will subtract the immediate payment from the first monthly payment due you.

Expedited reinstatement

If your benefits ended because you worked and had earnings, you can request to have your benefits started again without having to complete a new application. We call this process *expedited reinstatement*. It was effective January 1, 2001.

You can request that your benefits start again if you: stopped receiving SSI benefits because of earnings from work; are unable to work or perform

substantial gainful activity because of an impairment(s) that is the same as or related to the impairment(s) that allowed you to get benefits earlier; and make the request within 5 years from the month your benefits ended.

Section V: Categorically Needy and Medicaid

New York's Medicaid Program

What is Medicaid?

Medicaid is a program for New Yorkers who can't afford to pay for medical care.

How do I know if I qualify for Medicaid?

You may be covered by Medicaid if:

- **You have high medical bills.**
- **You receive Supplemental Security Income (SSI).**
- **You meet certain income, resource, age, or disability requirements.**

How do I apply for Medicaid?

You can apply for Medicaid in any one of the following ways: Write, phone, or go to your local department of social services.

In New York City, contact the Human Resources Administration by calling (718) 557-1399. Residents of the five boroughs of New York City may call toll free at 1-877-472-8411. For a listing of the Human Resources Administration Medical Assistance Program offices in the five boroughs of New York City contact: <http://www.nyc.gov/html/hra/html/micaid.html>

Pregnant women and children can apply at many clinics, hospitals, and Prenatal Care Assistance Program (PCAP) offices. Call your local department of social services to find out where you can apply.

If you are in a facility operated by the New York State Office of Mental Health, contact the patient resource office.

If you are in a facility certified by the New York State Office of Mental Retardation and Developmental Disabilities, contact the revenue and reimbursement office.

When I go for my application interview, what should I take with me?

- **Proof of age, like a birth certificate**
- **Proof of citizenship or alien status***

- Recent paycheck stubs (if you are working)
- Proof of your income from sources like Social Security, Supplemental Security Income (SSI), Veteran's Benefits (VA), retirement
- Any bank books and insurance policies that you may have
- Proof of where you live, like a rent receipt or landlord statement
- Insurance benefit card or the policy (if you have any other health insurance)
- Medicare Benefit Card

***NOTE: Medicaid coverage is available, regardless of alien status, if you are pregnant or require treatment for an emergency medical condition. A doctor must certify that you are pregnant or had an emergency, and you must meet all other eligibility requirements.**

If I think I am eligible for Medicaid, should I cancel any other health insurance I might already have?

No. If you currently pay for health insurance or Medicare coverage or have the option of getting that coverage, but cannot afford the payment, Medicaid can pay the premiums under certain circumstances.

Even if you are not eligible for Medicaid benefits, the premiums can still be paid, in some instances, if you lose your job or have your work hours reduced. If you need help with a COBRA premium, you must apply quickly, to determine if Medicaid can help pay the premium.

You may be eligible for the Medicare Buy-in Program. This program pays your Medicare premiums and deductibles.

If you have Acquired Immune Deficiency Syndrome (AIDS), Medicaid may be able to help pay your health insurance premiums.

If I can't leave the house, can I still apply?

Yes. Call your local social services office and ask how this can be done.

How do I know if my income and resources qualify me for Medicaid?

The chart below shows how much income you can receive in a month and the amount of resources you can retain and still qualify for Medicaid. The income and resource levels depend on the number of your family members who live with you.

PUBLIC ASSISTANCE (PA) STANDARD OF NEED

Use this section for Low Income Families with Children (LIF) and Single Individuals and Childless Couples (S/CC) Categories

FAMILY SIZE	1	2	3	4	5	6	7	8	FOR EA. ADD'L MEMBER ADD:
1. MAX. GROSS INCOME TEST (185% OF PA STANDARD)	\$ 566	\$ 776	\$ 936	\$1127	\$ 1326	\$ 1474	\$1628	\$ 1811	
2. MAX. PA GRANT (STANDARD OF NEED)	\$ 306	\$ 419	\$ 506	\$ 609	\$ 717	\$ 797	\$ 880	\$ 979	72.50
3. RESOURCE TESTS FOR LOW INCOME FAMILIES \$3,000 AND									
S /CC CATEGORIES CHILDLESS COUPLES \$2,000					SINGLE INDIVIDUALS AND 60 YEARS AND OVER \$3,000				

REGULAR MEDICAID ELIGIBILITY MONTHLY INCOME AND RESOURCE LEVELS

Use this section for ADC-related families and SSI related individuals

Number in Family	1	2	3	4	5	6	7	8	Each Additional Person
INCOME	667	975	984	992	1,000	1,134	1,275	1,417	+142
RESOURCES	4,000	5,850	5,900	5,950	6,000	6,800	7,650	8,500	+850

EXPANDED MEDICAID MONTHLY INCOME ELIGIBILITY LEVELS (No Resource Test)

Number in	1	2	3	4	5	6	7	8	Each Additional
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Family									Person
200% 2005 FPL for pregnant women* limited perinatal); children to age 1	1,587	2,130	2,674	3,217	3,760	4,304	4,847	5,390	+544
133% 2005 FPL for children 1-19	1056	1,417	1,778	2,140	2,501	2,862	3,224	3,585	+ 362
100% 2005 FPL for pregnant women* full coverage)	794	1,065	1,337	1,609	1880	2,152	2,424	2,695	+272

*** A pregnant woman's family size begins with two.**

Income and Resource Levels are subject to yearly adjustments.

You may also own a home, a car, and personal property and still be eligible. The income and resources of legally responsible relatives in the household will also be counted.

Can I be eligible for Medicaid even if I make more money than the chart shows?

Yes, some people can. Pregnant women and children can have higher income levels and no resource limits.

Pregnant women, children, disabled persons, and others may also be eligible for Medicaid if their income and/or resources are above these levels and they have medical bills. Ask your Medicaid worker if you fit into one of these groups.

Expanded Income levels for Children and Pregnant Women

- Infants to age one and pregnant women - 200% of the federal poverty level.**
- Children age 1 to 19 years - 133% of the federal poverty level.**

*** Income Levels are subject to yearly adjustments.**

**** FPL = Federal Poverty Level**

What are my rights?

If you wish to apply for Medicaid, contact the local department of social services. Generally, local districts must determine if you are eligible and send a letter notifying you if your application has been accepted or denied within 45 days of the date of your application. If you are pregnant or applying on behalf of children, the local district has 30 days from the date of your application to determine if you are eligible for Medicaid. If you are applying and have a disability which must be evaluated, it can take up to 90 days to determine if you are eligible.

If you are dissatisfied with a decision made by the local social services district, you may request a conference with the agency. You may also appeal to the New York State Office of Temporary and Disability Assistance and request a Fair Hearing.

To apply for a Fair Hearing you should telephone the New York State Office of Temporary and Disability Assistance Fair Hearing Office nearest your home:

- | | |
|---------------------------------------|-------------------------------------|
| Albany Co. (518) 474-8781 | Buffalo (716) 852-4868 |
| Long Island (516) 739-4868 | New York City (212) 417-6550 |
| Rochester (585) 266-4868 | Syracuse (315) 422-4868 |
| Westchester Co. (518) 474-8781 | |

Or write:

**Fair Hearing Section
New York State Office of Temporary and Disability Assistance
P.O. Box 1930
Albany, NY 12201**

Can I still keep part of my income if I am in a nursing home (Residential Health Care Facility) or in an intermediate care facility for the developmentally disabled?

Yes. Under Medicaid you are allowed to keep a small amount for your personal needs. You can also keep some of your income for your family if they are dependent on you. A spouse who remains in the community may also keep resources and income above the levels shown.

Will there be a lien (legal claim) placed on my estate (my assets) when I die?

If you receive medical services paid for by Medicaid on or after your 55th birthday, or when permanently residing in a medical institution, Medicaid may recover the amount of the cost of these services from the assets in your estate upon your death.

What health services are covered by Medicaid?

In general, the following services are paid for by Medicaid, but some may not be covered for you because of your age, financial circumstances, family situation, transfer of resource requirements, or living arrangements. Some services have small co-payments. These services may be provided using your Medicaid card or through your managed care plan if you are enrolled in managed care. You will not have a co-pay if you are in a managed care plan.

- **smoking cessation agents**
- **treatment and preventive health and dental care (doctors and dentists)**
- **hospital inpatient and outpatient services**
- **laboratory and X-ray services**
- **care in a nursing home**
- **care through home health agencies and personal care**
- **treatment in psychiatric hospitals (for persons under 21 or those 65 and older), mental health facilities, and facilities for the mentally retarded or the developmentally disabled**
- **family planning services**
- **early periodic screening, diagnosis, and treatment for children under 21 years of age under the Child/Teen Health Program**
- **medicine, supplies, medical equipment, and appliances (wheelchairs, etc.)**
- **clinic services**
- **transportation to medical appointments, including public transportation and car mileage**
- **emergency ambulance transportation to a hospital**
- **prenatal care**
- **some insurance and Medicare premiums**
- **other health services**

If you are eligible for Medicaid, you will receive a Benefit Identification Card which must be used when you need medical services. There may be limitations on certain services.

For you to use your Benefit Identification Card for certain medical supplies, equipment, or services (e.g., wheelchair, orthopedic shoes, transportation), you or the person or facility that will provide the service must receive approval before the service can be provided (prior approval).

What is a Medicaid managed care program?

Enrollment in a Medicaid managed care program through a Health Maintenance Organization (HMO), clinic, hospital, or physician group is available at any local departments of social services. You may be required to join a managed care plan. When you join a managed care program, you will choose a personal doctor who will be responsible for making sure all your health care needs are met. The doctor will send you to someone else if you need more help than the doctor can provide.

What does managed care cover?

Managed care covers most of the benefits recipients will use, including all preventive and primary care, inpatient care, and eye care. People in managed care plans use their Medicaid benefit card to get those services that the plan does not cover.

Do I have to join a managed care plan?

In many counties you can join a plan if there is one available and you want to. However, there are some counties where families will have to join a plan. In these counties there are some individuals who don't have to join. Please check with your local social services department to see if you have to join a plan.

Of special interest to persons with disabilities:

If you think you are disabled, and if you meet the criteria for disability included in the Social Security Act, you may be eligible for Medicaid.

If you believe you are disabled, you must furnish the local department of social services with medical evidence about your impairment(s).

It may be necessary for you to have further examinations and/or tests for the disability to be determined.

The cost of such examinations, consultations, and tests requested by the disability review team, if not otherwise covered, will be paid by the local social services agency.

NOTE: Persons who are denied for reasons of failure to meet the disability criteria are entitled to appeal the disability decision that led to the denial of their application. See the section of this pamphlet entitled "What are my rights?". Any person dissatisfied with the Fair Hearing decision of the New York State Office of Temporary and Disability Assistance may also appeal to the court system.

Medicaid - Medically Needy Program

People who have high medical expenses may also qualify for Medicaid. You may qualify as medically needy if you have high medical expenses that, when subtracted from your income, would make you eligible for Medicaid coverage. For example, people who have to pay a lot for prescription drugs, nursing home care, or other long term care services sometimes qualify as medically needy if they don't have health insurance that covers these services.

Those eligible for Temporary Cash Assistance are also eligible for Medicaid.

Food stamps

If you get SSI, you may be able to get food stamps. Food stamps can help you buy more food without spending more money. However, Social Security does not decide if you can get food stamps. If you live in a household where everyone is applying for or getting SSI, you can apply for food stamps at a Social Security office. If not, you must apply at your local county welfare agency.

Do you need Emergency Food?

[Click Here to Search for a Food Program](#)

Call the toll free Hunger Hotlines:
For NYC: 1-866-888-8777 or
1-866-NYC-FOOD (1-866-692-3663)
For Upstate: 1-866-526-2978

Child and Adult Care Food Program - CACFP

The Child and Adult Care Food Program - CACFP is a nutrition education and meal reimbursement program helping providers serve nutritious and safely prepared meals and snacks to children and adults in day care settings.



- [Prospective Sponsors](#)

- [Participating Day Care Centers](#)
- [Participating Day Care Homes](#)
- [Visitors](#)
- [Related Web Links](#)



How Does NY Implement Healthcare Programs for needy children?

Access NY Health Care



New York State has a health insurance plan for kids, called Child Health Plus. Depending on your family's income, your child may be eligible to join either Child Health Plus A (formerly Children's Medicaid) or Child Health Plus B. Both Child Health Plus A and B are available through dozens of providers throughout the state. Enrolling in Child Health Plus is easy

Call this toll-free number: 1-800-698-4KIDS (1-800-698-4543), and ask about Child Health Plus. (If you are hearing impaired, call the TTY number, 1-877-898-5849.) If you are eligible for Child Health Plus A (see [“Who is eligible?”](#)), ask for organizations in your community who can help you enroll. Or you can enroll through your local [Department of Social Services](#). The address and phone number for your local Department of Social Services is here. If your income is above Child Health Plus A levels, you can enroll with a Child Health Plus B insurer directly. Participating Child Health Plus B insurers are listed by county [here on this web site](#). Each insurer offers health care through many providers. The insurer will send you an application and give you a list of providers in your area.

If you would like someone to assist you in applying for either Child Health Plus A or Child Health Plus B, there are enrollers in your community who can help. These enrollers will help you fill out the application, collect the necessary documents, and select a health plan. In many cases, assistance is available during evenings and weekends. To learn the nearest location where application assistance is available, please call 1-800-698-4KIDS (1-800-698-4543), or [check the list on this web site](#).

There is no monthly premium for families whose income is less than 1.6 times the poverty level. That’s about \$460 a week for a three-person family, about \$560 a week for a family of four. Families with somewhat higher incomes pay a monthly premium of \$9 or \$15 a month per child, depending on their income and family size. For larger families, the monthly fee is capped at three children. If the family’s income is more than 2.5 times the poverty level, they pay the full monthly premium charged by the health plan. There are no co-payments for services under Child Health Plus, so you don’t have to pay anything when your child receives care through these plans.

What coverage is available to the employed uninsured?



Working Uninsured Individuals

The working uninsured individual eligibility criteria are as follows:

- Your employer does not currently provide you with health insurance. (Please see FAQ and the exceptions listed below for guidance as to whether this rule applies to you).

- **Your gross household income meets the income guidelines of the program. The amount of the household income limit depends upon the number of household members you have.**



Healthy NY Income Guidelines*		
Family Size	Annual Household Income	Monthly Household Income
1	Up to \$23,800	Up to \$1,984
2	Up to \$31,950	Up to \$2,663
3	Up to \$40,100	Up to \$3,342
4	Up to \$48,250	Up to \$4,021
5	Up to \$56,400	Up to \$4,700
Each Additional Person	Add \$8,150	Add \$680

*When calculating family size include the number of family members in your household whether they will be included on the Healthy NY policy or not.

Family Size is not related to whether you are purchasing individual, spousal or family coverage through the Healthy NY program. Also, pregnant women count as 2 people for the purpose of calculating family size.

- **You have not had health insurance in effect for the twelve-month period preceding application or have lost that coverage due to a qualifying event.**
 - ◆ **Loss of employment**
 - ◆ **Death of a family member**
 - ◆ **Change to a new employer**
 - ◆ **Change of residence**
 - ◆ **Discontinuation of a group health plan**

- ◆Termination or cancellation of COBRA coverage
 - ◆Legal separation, divorce or annulment
 - ◆Loss of eligibility for group health insurance coverage
 - ◆Reaching the maximum age for dependent coverage
- You must be ineligible for Medicare.
 - You must reside in NYS.
 - You must be currently employed or have worked some time in the past year.

The Impact of Prior Insurance Coverage

Individuals are not eligible for Healthy NY if their employers currently arrange for AND contribute to the cost of the employer's health insurance coverage. Individuals who have purchased health insurance on their own and have thus been insured during the last twelve months are also not eligible.

◆If someone is eligible for COBRA or is even currently covered through COBRA or other continuation type coverage, they may apply for Healthy NY. They are NOT required to apply for COBRA coverage and, if enrolled in COBRA coverage, they are NOT required to maintain it.

◆If an individual has participated in other public benefits programs such as Family Health Plus, Child Health Plus or Medicaid they would not be precluded from applying for Healthy NY.

All HMOs offer the same two benefit packages, one with prescription drug coverage and one without prescription drug coverage. Therefore, it may be wise to shop and compare among the different insurers.

Mid-year fluctuations in household income and employment status will not result in termination of your Healthy NY coverage. The program provides only for an annual recertification process.

New York City's Physically Handicapped Children's Program

is a diagnostic and medical treatment and rehabilitation program administered by the N.Y.C. Department of Health, under guidelines developed by the N.Y.S. Department of Health. The goal of the program is to ensure that comprehensive, specialized, quality medical care is available to physically handicapped and chronically ill children to help minimize the disability and maximize rehabilitative services so that they can reach their full potential.

Any child under 21 years of age with residence in New York City, who has a diagnosis within the scope of the program and whose family's financial situation meets the program guidelines, is eligible for an Initial Diagnostic Evaluation

(IDE) and/or may receive limited assistance toward inpatient and outpatient care, appliances, adaptive devices, equipment, hearing aids, therapy, medications and transportation. Fees paid by the program to the treating hospital are always at established state Medicaid rates less any insurance coverage that the family may have. PHCP financial assistance is limited to a maximum of \$1,500.00 per year of eligibility per child. PHCP provides a means of "last resort funding" only and cannot substitute for or duplicate coverage by the family's private health insurance or any other third party payer. The program's funds are limited...assistance will be provided on a first come basis to eligible applicants.

The Physically Handicapped Children's Program historically emerged from the need to care for the large number of children afflicted by polio during WWI. This was the first public acknowledgment that handicapped children needed both medical and financial assistance. Although the battle against polio has been won, there are still children who must battle various handicapping and challenging conditions. It is for this reason PHCP continues to encourage hospital participation and makes accessible the best medical care and services possible.

The Physically Handicapped Children's Program also provides care coordination services through its Children with Special Health Care Needs resource program. The purpose of this is to help assure accessible, appropriate, coordinated, culturally competent, comprehensive, community-based care for chronically ill and disabled children (ages 0-21 years of age) and their families.

The Care Coordination service involves identification of family needs, and facilitation of the coordination of services at the local level to children, ages 0-21, and their families to promote optimal use of professional and financial resources, and to alleviate the financial and emotional stress on families.

This manual is divided into two sections:

- **Initial Diagnostic Evaluation, and**
- **Medical Treatment**

Please make special note that the billing for the Initial Diagnostic Evaluation (IDE), after being reviewed by the NYC PHCP, is returned to the service provider to forward to the New York State Department of Health in Albany for direct payment to the medical provider or vendor. There is a three month time limit for billing NYS DOH for the IDE's. All bills for IDE's must be in Albany within three (3) months of the date the IDE is performed in order to be reimbursed.

The staff of the Physically Handicapped Children's Program is available to assist you Monday through Friday between the hours of 9:00am and 5:00pm with any

questions or concerns regarding the program or procedures described in this manual. For your convenience, listed below are telephone numbers of personnel available to assist you.

April 2000

For more information on the Physically Handicapped Children's Program, call 212-676-2950. A child's own insurance coverage pays first; there are no income restrictions but it is a first come first serve program of last resort.

Remember your own county has its own programs. To go to your county's website go to:

<http://www.nysac.org/nysac/countylinks.html>

[Application for NY Health Insurance Programs](#)

NEW YORK MEDIGAP POLICY PREMIUMS

How much does Medigap insurance cost? [Monthly premiums vary](#) by area. See the [area-zip code](#) where you live for premiums as of March 1, 2005 for New York State approved Medigap benefit plans. To check on recent changes, call the NYS Insurance Department Consumer Services Hot Line at 1-800-342-3736 or in New York City call 212-480-6400.

Monthly Premiums Vary

Although the **benefits** are identical for all Medigap plans of the same type, **the premiums vary** from one company to another and from area to area. The main question you need to answer for yourself is whether you can afford the premium based on your retirement income.

In New York State, you are protected by "community rating." An insurance company's premiums for its Medigap policies must be the same without regard to age, gender or health condition. This means the premium charged by a company must be the same for each approved standardized plan that it offers regardless of your age, gender or health condition. For example, a woman aged 90 in poor health will pay the same premium as a man aged 68 in good health for the same plan with the same company in the same area of the state.

Monthly Premiums by Area-Zip Code

Click on your area-zip code below to find the monthly premiums for New York State approved Medigap plans where you live.

- [Albany - Zip codes beginning with 120-123 & 128-129](#)
- [Buffalo - Zip codes beginning with 140-143 & 147](#)
- [Long Island - Zip codes beginning with 115-118](#)
- [Mid-Hudson - Zip codes beginning with 124-127](#)
- [New York City - Zip codes beginning with 100-104 & 110-114](#)
- [Rochester - Zip codes beginning with 144-146](#)
- [Syracuse - Zip codes beginning with 130, 132, 137-139 & 148-149](#)
- [Utica - Zip codes beginning with 133-135](#)
- [Watertown - Zip codes beginning with 136](#)
- [Westchester - Zip codes beginning with 105-109](#)

[If You Would Like Help](#)

Section VI: Special Programs for those with Kidney failure

History and Role of the Federal ESRD System

The federal End Stage Renal Disease (ESRD) Program was established in 1972 pursuant to the provisions of Section 2991, Public Law 92-603. This legislation extended Medicare coverage to virtually all individuals with ESRD who require dialysis or transplantation to sustain life.

This legislation and subsequent regulations also established health and safety standards applicable to providers of ESRD services and required the establishment of ESRD Network Coordinating Councils. Networks serve as liaisons between the federal government and the providers of ESRD services.

In 1978, the ESRD Network program was designed to provide an oversight system uniting dialysis providers with the common goals of:

1. Providing immediate access to treatment;
2. Treating patients with quality care through medical standards developed by the scientific community;
3. Helping patients to maintain a quality of life; and
4. Enabling each individual to live as a functioning member of society.

The 18 Networks are currently in immediate contact with 4,153 dialysis facilities and 242 transplant centers, serving in excess of 300,000 patients. The ESRD Network

budget is funded through dialysis payments to facilities. The budget for the national Network program is under \$12 million annually, less than .007 percent of the total Medicare budget for 1994.

Each Network is required by federal contract to be active in the areas of:

- Data Collection;
- Quality Improvement;
- Patient Satisfaction; and to serve as a
- clearinghouse for federal agencies, renal related organizations, patients and their families.

Providing Healthcare for Children with ESRD

While the child with ESRD is eligible for Medicaid and MCHIP the State will always shift the financial burden to the federal government and children with ESRD can be eligible for Medicare.

How is the Medicare ESRD System Different from Standard Medicare?

To be eligible for Medicare the patient, patient's spouse, or patient's parent (if the patient is a dependent) must have worked and paid into the Social Security System for 40 quarters [*Social Security Act, § 214(a)*]. However, *quarters are prorated for young adults if the determination is based on the patient's work record. The younger the patient, the fewer quarters needed to qualify.*

Work Quarters Needed To Qualify for Medicare Due to ESRD

If the date of onset is before age 24, they, their spouse or parent must have worked 1.5 years in the 3 years ending with the quarter of the date of onset.

If the date of onset is age 24 to 31, they or their spouse must have worked 1.5 years out of the last 3 years and 3 months.

If they are 31 and over, they need to have worked 10 years total with 5 of the years worked in the 10 years prior to the date of onset.

When Medicare ESRD Coverage Begins;

People who receive Social Security disability qualify for Medicare in the 25th month after the date of disability; however for those with ESRD Medicare begins;

1. The months in which you have a kidney transplant
2. Three months after beginning a course of out patient hemodialysis
3. The month you begin a course of home peritoneal or hemodialysis

To fill in this three months gap many states have a kidney disease program or patients rely on Medicaid or private insurance.

Due to potential penalties, non-elderly, non-disabled ESRD patients with EGHP coverage, and that includes children who are covered by their parent's policy, should be encouraged to file for Medicare Part B at the same time when filing for Medicare Part A. If application for Medicare Part B coverage is not made, enrollment in it can only take place during an open enrollment period (typically January through March of each year) with coverage becoming effective in July. This could mean a gap in coverage and higher premiums. Patients should carefully review their EGHP policy on coordinating with Medicare.

Who is eligible?

Anyone, with chronic renal failure, who has paid into the SS system, whose spouse has paid into the system or anyone, of any age, who is a dependant of anyone who has paid into the system is eligible for ESRD Medicare coverage, however there is no pamphlet for parents' whose children are ESRD. To be eligible for Medicare a child must meet the Social Security Disability Guidelines for Renal Disease as outlined in the Blue Book can be found at

<http://www.ssa.gov/disability/professionals/bluebook/106.00-Genito-Urinary-Childhood.htm> . Children can also be eligible for Social Security Supplementary Income; with it comes Medicaid. To determine eligibility go to <http://www.ssa.gov/pubs/10026.html>.

What has to be done, when a one is diagnosed, to assure coverage under the Medicare ESRD system?

By regulation, within 45 days of diagnosis of chronic renal failure a physician must fill out a CMS 2728, a patient's "birth certificate" into the Medicare End Stage Renal Disease Program. One copy must be sent to Social Security, one to the Renal Network and one retained in the medical file in the dialysis unit or transplant center. However if this is not done immediately there will be a lag time in obtaining benefits and medical coverage. Make sure the parent takes the form to their local Social Security Office and obtains a receipt.

The Medicare ESRD Program is the ONLY portion of Medicare available to children less than 19 years old.

Children who require chronic renal dialysis or a kidney transplant are eligible for the Medicare if they are the dependant of a person who would be eligible if they themselves were on Social Security due to age or disability. The ESRD Program regulations are the same for beneficiaries no matter what their age.

How does the ESRD patient obtain healthcare during the 3 months prior to Medicare coverage?

Either the patient has private insurance, is eligible for Medicaid or the Kidney Disease Program.

When a patient is covered under an employer group plan and chooses Medicare who pays what?

If a patient is under age 65 and entitled to Medicare solely on the basis of End Stage Renal Disease (ESRD), and is receiving health care benefits through his/her parent's employer, Medicare is the secondary payer during the coordination period between the employer and Medicare.

The current coordination period is 30 months, which for dialysis patients dialyzing in a unit would be 33 months from the beginning of treatment. For transplant patients it would be 30 months from the 1st day of the month in which they were transplanted.

Medicare becomes the primary payer when the coordination period has ended or when the patient reaches age 65, even if he/she is still being covered by the employer's plan during the coordination period.

During the coordination of benefit period the group plan pays first, based on the Medicare fee schedule and Medicare pays the coinsurance/deductible. After the coordination of benefit period is over than Medicare becomes primary and the employer group plan pays the coinsurance and deductibles. This can become confusing and it is best t hat the patient consult with his/her benefits manager.

Consult with the Medicare Dialysis and Kidney Transplant Handbook on the Medicare website listing the various publications.

<http://www.medicare.gov/Publications/Search/View/ViewPubList.asp?Language=English>

Problems:

Oftentimes a family declines Medicare due to its premiums.

There are penalties for not accepting Medicare initially. If an ESRD patient does not accept Medicare during the first 7 months of eligibility they will pay a higher premium in the future if they decide to seek Medicare coverage. If the child's family has limited income perhaps they are eligible for the Qualified Medicare Beneficiary, SLMB, etc. programs. Additionally, if the child is a dialysis patient the American Kidney Fund has a program that will pay health insurance premiums – private, Medicare . For information contact <http://www.akfinc.org/Programs/ProgramsContentHIPP.htm> or call 800.638.8299.

Parents of ESRD children are not aware of their child's eligibility.

Of the approximately 7,500 children with ESRD only 1400 are currently on Medicare. The NKF Patient and Family Council is compiling data from a survey of renal social workers. None of the educational material currently available to patients, families and the professional community serving this population presents a clear picture of how Medicare coverage would benefit children. For instance, while parents' might feel that they have sufficient coverage when their child is facing a kidney transplant, they might not be aware of the fact that when their child reaches adulthood and at some point becomes disabled, Medicare will not cover their transplant medications if Medicare did not pay for the transplant.

Resources in New York for ESRD patients

National Kidney Foundation



Information for Professionals

one of 18 Medicare-funded organizations in the US responsible for improving the quality of care delivered to patients with End Stage Renal Disease.

New York Dialysis Centers

National Kidney Disease Education Program

An education program to increase awareness of kidney disease and the promotion of early testing among African Americans, who are hard hit by kidney disease and kidney failure.

Section VII: How does NY educate the developmentally disabled?

The New York State Developmental Disabilities Planning Council is responsible for developing new ways to improve the delivery of services and supports to New Yorkers with developmental disabilities and their families. The Council focuses on community involvement, employment, recreation and housing issues faced by New Yorkers with developmental disabilities and their families.

The DDPC affects positive systems change through grant programs that fund such activities as:

Demonstration programs
Training for families and staff
Outreach to unserved / underserved populations
Support to communities
Interagency collaboration and coordination
Systems design and redesign

To a large extent, DDPC programs are developed in direct response to the concerns and ideas voiced by consumers, families, service providers, policy-makers and other professionals. *What programs are in place to provide education and rehabilitation for the disabled?*

What is available to families with young children with developmental disabilities?



[Early Intervention Programs by County](#)

The Early Intervention Program is a statewide program that provides many different types of early intervention services to infants and toddlers with disabilities and their families.



Mission and Goals

The mission of the Early Intervention Program is to identify and evaluate as early as possible those infants and toddlers whose healthy development is compromised and provide for appropriate intervention to improve child and family development.

FAMILY-CENTERED:



Support parents in meeting their responsibilities to nurture and enhance their children's development.

COMMUNITY-BASED:



Create opportunities for full participation of children with disabilities and their families in their communities by ensuring services are delivered in natural environments to the maximum extent appropriate.

COORDINATED SERVICES:



Ensure early intervention services are coordinated with the full array of early childhood, health and mental health, educational, social, and other community-based services needed by and provided to children and their families.

MEASURABLE OUTCOMES FOR CHILDREN & FAMILIES:



Enhance child development and functional outcomes and improve family life through delivery of effective, outcome-based high quality early intervention services.

EARLY INTERVENTION & THE MEDICAL HOME:



Ensure early intervention services complement the child's medical home by involving primary and specialty health care providers in supporting family participation in early intervention services.

LOCAL CONTROL, FISCAL REFORM, & PROGRAMMATIC ACCOUNTABILITY:



Assure equity of access, quality, consistency, and accountability in the service system by ensuring clear lines of public supervision, responsibility, and authority for the provision of early intervention services to eligible children and their families.

A Parent's Guide

For Children with Special Needs - Birth to Age Three

Clinical Practice Guideline

Report of the Recommendations, Autism / Pervasive Developmental Disorders, Assessment and Intervention for Young Children (Age 0-3 Years)

Clinical Practice Guideline

Report of the Recommendations, Communication Disorders, Assessment and Intervention for Young Children (Age 0-3 years)

Early Help Makes a Difference!

Checklist for Growing Children - Look for signs that your infant or toddler might need extra help. Early help makes a difference!

Checklist for Growing Children is also available in Portable Document Format (PDF - 305 KB ([Help for PDF format files.](#)))

Early Intervention Program Memoranda and Guidance



Regulations

[Final Regulations - Subpart 69-4](#) (PDF file size approximately 159 KB)

Available as Adobe's Portable Document Format ([help for PDF](#))

[Title 10: Rules and Regulations](#)

[Early Intervention Program Publications](#)

A list of publications available through the Health Department's Early Intervention Program

For information about becoming an approved New York State Early Intervention Service Provider, call 518-473-7016 or write eip@health.state.ny.us

Educating Children with Special Needs

[Special Education Handbook for Parents](#)

Preschool

Mission: The VESID Special Education Policy Unit ensures that preschool children with disabilities are getting timely and appropriate services in the least restrictive environment and that those services are coordinated with State and local agencies. The Policy Unit provides technical assistance, policy development (legislation/regulations), training, approvals for special education preschool programs, and monitoring of certain early intervention programs.

Who to Contact:

VESID-Special Education Policy and Partnerships Unit
Room 1624 OCP
Albany, N Y 12234
518-473-2878
518-473-5387 Fax

Publications:

[Guide for Determining Eligibility and Special Education Programs and/or Services for Preschool Students with Disabilities - January 2003](#)

[Information for Parents of Preschool Students with Disabilities AGES 3-5](#)

Información para padres de alumnos preescolares con incapacidades Edades 3-5 años.

Review a listing of all available publications on line

Preschool Special Education Data: **Data and reports to support reform -**

Regents Reports on Preschool Special Education February, 1999

Early Intervention: **Calculating Dates to Plan Transition from Early Intervention to Preschool Special Education**

Early Childhood Direction Centers

New York State Department of Health

News and Announcements: **Timely information from Special Education**

Quality Assurance for Preschool Programs:

If you have general questions about preschool special education or have a specific question about preschool special education services, please contact your regional office for assistance

List of Approved Preschool Programs:

A current listing of approved preschool programs is being compiled and will be available in the near future.

Resources:

Helpful Websites

New York State Office of Teaching

New York State Office of Professional Licensing

Elementary, Middle, Secondary, Continuing Education

Program Services Reimbursement Unit

Office of Child and Family Services

Vocational and Educational Services for Individuals with Disabilities Strategic Planning Process

VESID has been doing strategic planning for the last five years. During these years VESID staff has heard from thousands of our customers; New Yorkers with disabilities and employers who are looking for qualified people to hire.

VESID's goals are based on what we heard from our customers and we have allocated our resources to help achieve these goals. VESID has had unprecedented success in achieving these goals. If we are to continue this success, we must:

- **determine how we will measure our success towards each goal**
- **set standards that reflect high expectations for each measure**
- **align our resources to support the goals**
- **rigorously evaluate all activities to determine the potential impact of each on our goals**
- **drop those activities that do not directly impact on the goals, and redirect the resources used in these activities to those that have a high impact on goal attainment**
- **regularly assess and communicate our progress**

We are sharing these goals, measures and standards with a wide audience that includes our customers and key stakeholders. The objective is to get feedback. Although we welcome all comments and suggestions on our goals and key performance indicators, we will not lower our expectations.

Integration of New York State Education Department (SED)/VESID Strategic Planning Processes

VESID does not provide services to people with disabilities alone neither are we the only office in the department to interact with employers; we share a commitment to our customers with other SED offices. Therefore, VESID's goals and key performance indicators must be congruent with those of the department and, where we share responsibility and/or resource, complementary to those of individual department offices.

VESID's office goals and those of all units within VESID will be aligned with all SED offices and units. This process is not based on a document but on communicating, sharing resources and, most importantly, sharing the commitment and responsibility for results.

- **VESID Goals**

- Students receiving special education services will meet the educational standards established for all students.
- Students receiving special education services will be integrated with their non-disabled peers throughout their educational experience.
- Individuals with disabilities will participate successfully in postsecondary education (including colleges and universities, adult education, tech preparation and proprietary schools)
- Individuals with disabilities will be employed in integrated work settings.

[Home](#) > [Vocational Schools by State](#) > [New York Vocational Schools](#) > New York Education & Childcare Vocational Schools

[New York Education & Childcare Vocational Schools and Colleges](#)

[New York Early Hearing Detection & Intervention \(EHDI\) Information](#)

[State Profile](#) | [Newborn Hearing Screening](#) | [Diagnostic Audiology](#) | [Early Intervention](#) | [Data Management](#) | [Medical Home](#) | [Program Evaluation](#) | [Family Support](#)

Help for Parents

[A Parent's Guide to Special Education](#)

[A Parent's Guide to Resolving Concerns About Your Child's Special Education Services](#)

[Information for Parents of Preschool Students with Disabilities AGES 3-5](#)

[Camps for the Disabled](#)

[Approved Schools for the Disabled](#)

Mediation

All school districts must offer special education mediation as a means to resolve disputes relating to the identification, evaluation, educational placement or the provision of a free appropriate public education to a child with a disability.

Parent Centers

Programs and services are provided for parents and families of children with disabilities by four parent centers located in New York City.

Technical Assistance Alliance for Parent Centers

Helpful Resources

A list of additional resources and websites that are designed for parents and families of children with disabilities

Please feel free to call the office in your region of the state or contact us by e-mail at VESIDQA@mail.nysed.gov for assistance. Regional Associates in these offices work with local districts, parents, and other stakeholders to assist them in both understanding the complex issues related to special education services and resolving concerns that may arise. We are committed to working together to improve the services to students with disabilities and we value your input and feedback in this process.

Providing transition for secondary students with disabilities -



This section describes the transition process for secondary students with disabilities. This process requires school districts, in collaboration with students, families and community service agencies, to help students with disabilities to prepare for post school employment, community living and postsecondary education.

The information provided here is intended to be a comprehensive resource. In some cases documents are located within this web site, but in others you will be linking to an external web site. To return to our web site, use the "back" arrow on the top menu bar. Note that while our web materials are to the greatest extent possible designed to be easily accessible to text reader technology; external web sites may not be equally accessible. Also, some web sites with maps take a little longer to load.

Our goal is to help all students with disabilities transition successfully. If you have comments or suggestions about this web site please contact us.

Providing Vocational Rehabilitation

Adults - District Offices

VESID starts with the presumption that all persons with disabilities can benefit from vocational rehabilitation services and should have opportunities to work in jobs integrated within their communities.

VESID Counselors guide individuals through service programs they need to reach their employment goals.

At Our District Office:

- **Each year VESID assists hundreds of businesses in hiring qualified, dependable employees.**
- **Our handbook outlines eligibility requirements, next steps and services provided.**
- **Our offices are located in your community. Each district office describes services specific to their office.**

- **VESID works with students, families and school districts to coordinate appropriate services for students with disabilities who are leaving secondary education and entering adult vocational rehabilitation and related services.**
- **If you design, manufacture, or sell equipment that may be useful by people with disabilities, or if you teach disabled people how to use such equipment, please contact VESID.**
- **Independent living services (one unit without our lifelong services network) can help people with disabilities learn to have more control over their own lives and to live more independently in their communities.**
- **Expectations are described in our rights and responsibilities brochure.**

The New York State Talking Book and Braille Library provides recorded and Braille books to adults and children who, owing to a disability, can't read print, or hold a book, or turn its pages. People qualify for this free, public library service if they have a permanent or temporary visual, physical or learning disability. The Library offers 65,000 book titles and over 60 magazines.

- **Vocational Rehabilitation District Office Information**
 - **Albany District Office**
 - **Buffalo District Office**
 - **Hauppauge District Office**
 - **Hempstead District Office**
 - **Malone District Office**
 - **Mid-Hudson District Office**
 - **NYC Regional Offices**
 - **Manhattan District Office**

- [Brooklyn District Office](#)
- [Bronx District Office](#)
- [Queens District Office](#)
- [Rochester District Office](#)
- [Southern Tier District Office](#)
- [Syracuse District Office](#)
- [White Plains District Office](#)
- [Utica District Office](#)

Providing Education for those with Traumatic Brain Injuries - [Traumatic Brain Injury Waiver](#)

Traumatic Brain Injury: A Guidebook for Educators (1995)

Many children each year receive an injury to the head, have serious illnesses or are treated for serious medical conditions, which cause a traumatic brain injury (TBI). Moderate to severe injuries, and in some cases mild injuries, can lead to immediate and long term impairments in physical, social, emotional, cognitive and behavioral development. Schools are central to assisting students with TBI in overcoming the challenges they face.

As more children survive serious childhood accidents and illnesses, it is vital for schools to have the knowledge and skills to identify and address their educational needs. In 1995, the State Education Department published a guidebook for educators help school staff to better understand the specialized needs of students with TBI and appropriately apply educational interventions to improve special and general education services for these students. The guidebook provides information on the following topics:

- The causes, incidence, and characteristics of TBI.
- Factors unique to TBI as a disability category.
- Special considerations in the assessment of students with TBI.
- The school's role as the student with TBI reenters school.
- Strategies for school personnel to assist students with TBI in learning skills, managing behavior and dealing with social and emotional difficulties.
- Resources for further information or technical assistance.
- Information regarding other State agency resources.
- Information regarding school--based prevention efforts.

A copy of this publication may be requested from:

**Special Education Publications
Office of Vocational and Educational Services for Individuals with Disabilities
Room 1624, One Commerce Plaza
Albany, NY 12234**

**Facsimile requests: (518) 474-2219
E-mail request to VESIDSPE@mail.nysed.gov**

Questions regarding this publication should be directed to the Special Education Policy Unit at (518) 473-2878.

Additional information about brain injury may be obtained at the website of the Brain Injury Association of New York State: www.bianys.org

PUBLICATIONS AND DIRECTORY INFORMATION

AVAILABLE NOW! Camp Guide 2004 is available now. See our Publications Page for more information.

For those who have already purchased any of our directories, please visit our [Directory Corrections](#) page for recent changes/corrections to programs contained in these directories. We also invite readers to submit changes to agency names, address and contact information and program changes. Please send the information to Dlittwin@resourcesnyc.org and we will include them in our future updates.

Resources for Children with Special Needs, Inc.

116 E. 16th St., 5th Floor

New York, NY 10003

Phone: (212) 677-4650

info@resourcesnyc.org

Section VIII: Benefits for Adults with a work history

How do you know if your adult client is eligible for Social Security Disability Income (SSDI) and Medicare?

To qualify for Social Security disability benefits, you must have worked long enough and recently enough under Social Security. You can earn up to a maximum of four work credits per year, one for each quarter of the year you worked. The amount of earnings required for a credit increases each year as

general wage levels rise. Family members who qualify for benefits on your work record do not need work credits.

The number of work credits you need for disability benefits depends on your age when you became disabled. Generally you need 20 credits earned in the last 10 years ending with the year you became disabled. However, younger workers may qualify with fewer credits. The rules are as follows:

- **Before age 24:** You may qualify if you have six credits earned in the three-year period ending when your disability starts.
- **Age 24 to 31:** You may qualify if you have credit for having worked half the time between 21 and the time you become disabled. For example, if you become disabled at age 27, you would need credit for three years of work (12 credits) out of the past six years (between age 21 and age 27).
- **Age 31 or older:** In general, you will need to have the number of work credits shown in the chart shown below. Unless you are blind, at least 20 of the credits must have been earned in the 10 years immediately before you became disabled.

Born After 1929, Become Disabled At Age	Credits You Need
31 through 42	20
44	22
46	24
48	26
50	28
52	30
54	32
56	34
58	36
60	38
62 or older	40

The Social Security Administration operates an online Benefits Eligibility Screening Tool (BEST) that can help you determine if you are eligible for Medicare, Social Security Disability Insurance (SSDI), Supplemental Security Insurance (SSI), and other programs. If you are connected to the Internet, go to: <http://best.ssa.gov/>

When does a client get the first SSDI check?

There is a 5 months waiting period before the beneficiary receives the first check.

What is the monthly amount based on?

The amount is based upon the earnings of the beneficiary.

When is the beneficiary eligible for Medicare?

It begins 24 months from the date of the first check or 29 months from the date of disability.

If the beneficiary is covered by a spouse’s employee group plan (EGHP) or under COBRA from his/her previous employer who pays first, the EGHP or Medicare?

There are specific rules as to which plan is primary and which is secondary. Usually the EGHP is primary for a period of time depending on the size of the company. Check with the Benefits Manager.

How much monthly income can one have before they are eligible for Medicaid and the Medicare Savings Programs?

Medicare Savings Program 2004 Income Criteria

THE FOLLOWING PROGRAMS ADMINISTERED BY LOCAL DEPARTMENTS OF SOCIAL SERVICES AND THE HUMAN RESOURCES ADMINISTRATION IN NEW YORK CITY CAN ASSIST INDIVIDUALS/COUPLES IN PAYING FOR THEIR MEDICARE PREMIUMS.

The income below, except for full Medicaid, is prior to a \$20 exemption.

Full Medicaid: This program pays for a wide range of medical care, services and supplies as well as the coinsurance and deductible payments for Medicare beneficiaries. The 2005 income and resource requirements for those applicants who are aged, or certified blind or disabled are:

	Income Below	Resources Below
Single:	\$667 per month	\$4,000

Couple:	\$975 per month	\$5,850
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Qualified Medicare Beneficiary Program (QMB): This program can pay for either the Medicare Part A or Part B premium. For payment of the Medicare Part A premium, applicants must conditionally enroll in Medicare Part A at their local Social Security Office. This program also pays for the Medicare Parts A and B coinsurance and deductibles. The 2005 income and resource requirements for this program are:

	Income Below	Resources Below
Single:	\$818 per month	\$4,000
Couple:	\$1,090 per month	\$6,000

Specified Low Income Medicare Beneficiary Program (SLIMB): This program pays for the Medicare Part B premium only. The applicant must have Medicare Part A in order to be eligible for the program. The 2005 income and resource requirements for this program are:

	Income Below	Resources Below
Single:	\$977 per month	\$4,000
Couple:	\$1,303 per month	\$6,000

Qualified Individual-1 (QI-1): This program pays for the Medicare Part B premium only. The applicant must have Medicare Part A. States are allotted money for this program on a yearly basis. The 2005 income requirements for this program are:

	Income Below
Single:	\$1,091 per month
Couple:	\$1,464 per month

Qualified Disabled and Working Individual (QDWI): This program pays for the Medicare Part A premium only, not Part B. The applicant must be a disabled worker under age 65 who lost Part A benefits because of return to work. The 2005 income and resource requirements for this program are:

	Income Below	Resources Below
Single:	\$1,615 per month	\$4,000
Couple:	\$2,159 per month	\$6,000

Applications for all of these programs may be obtained from the Medicaid office at the local (county) Department of Social Services. In New York City, the phone number for the Medicaid Infoline is (718) 557-1399. The toll free number for residents of New York City who are calling from within any of the five boroughs is 1-877-472-8411.

For individuals/couples applying for the Specified Low Income Medicare Beneficiary Program (SLIMB) or the Qualified Individual -1 (QI -1) Program, click on the link below for a copy of the shortened application form which may be used to apply for these programs. Return the form to your local Department of Social Services.

Shortened Application Form (PDF, 71KB, 2pg)

The Shortened Application Form is available only as a portable document format (PDF) file. Click here for help using PDF files. To obtain a form in another format you should contact your local Department of Social Services.

Can you have both Medicare and Medicaid?

Yes, if the client's monthly SSDI amount is below the SSI monthly amount than the state contributes an amount bringing the monthly amount up to the State level. By awarding the client SSI benefits they automatically become eligible for Medicaid. This pays the Medicare premium, deductibles and copayments and gives them all other Medicaid benefits.

How can those over age 65 pay for their prescription drugs?

Elderly Pharmaceutical Insurance Coverage (EPIC) Program

**A Prescription Plan for Senior Citizens
Sponsored by New York State**

- The EPIC application form is available as an Adobe Portable Document Format (PDF) file. A special reader software is needed and can be downloaded free. Click here for help with PDF files. Ayuda con archivos PDF
- Click here to download and print the EPIC Application form in English (file size 693 KB)
- Pulse aquí para descargar e imprimir la aplicación de EPIC en español (tamaño de archivo es 630 KB)
- You may request an EPIC Application using the on-line Application Request Form
- Or call 1-800-332-3742 for more information or an application
- Researchers may be interested in EPIC's Annual Report

- [October 1999 – September 2000 \(PDF format – 233 KB\)](#)
- [October 2000 – September 2001 \(PDF format – 2,025 KB\)](#)

[Notice of EPIC Program Privacy Practices](#)

What is EPIC?

EPIC is a New York State sponsored prescription plan for senior citizens who need help paying for their prescriptions. Over 320,000 seniors already belong and are saving over half the cost of their medicines.

Who can join?

New York State residents can join EPIC if they are 65 or older, and have an annual income of \$35,000 or less if single, or \$50,000 or less if married.

Seniors who receive full Medicaid benefits or have other prescription coverage that is better than EPIC are not eligible for EPIC benefits.

How does EPIC work?

EPIC is a cost sharing program. Seniors with moderate incomes pay a low quarterly fee, and participate in the [Fee Plan](#). Seniors with higher incomes meet an annual [deductible](#), and participate in the [Deductible Plan](#). Those who pay a fee or meet their [deductible](#) make a [copayment](#) at the pharmacy when purchasing prescriptions.

Fee Plan

Single seniors with income up to \$20,000 and married seniors with income up to \$26,000 are eligible for the Fee Plan; the cost to join this plan is based on annual income. Seniors may pay their annual fee in quarterly installments.

[Click here to see the new fees](#)

Deductible Plan

The Deductible plan is available to single seniors with income between \$20,001 and \$35,000, and married seniors with income between \$26,001 and \$50,000. This plan is designed to help seniors with high drug costs. There is no fee to join the Deductible Plan. Those enrolled pay full price for their prescriptions until they meet an annual deductible which is also based on income. There is no need to send in receipts; EPIC automatically keeps track of how much deductible enrollees have spent at the pharmacy. After the deductible is met, these enrollees save more than half of their prescription costs for the rest of the year.

[Click here to see the new deductibles](#)

Copayments

At the pharmacy, those enrolled in the Fee Plan and those enrolled in the Deductible Plan who have met their annual deductible show their EPIC cards, and...

For Each Prescription Costing:	Enrollees Pay:
Up to \$ 15	\$ 3
\$ 15.01 to \$ 35	\$ 7
\$ 35.01 to \$ 55	\$ 15
Over \$ 55	\$ 20

What drugs are covered?

Almost all prescription medicines are covered, as well as insulin, and insulin syringes and needles. Both brand name and less expensive generic drugs are included. Enrollees can buy up to 100 tablets or a 30-day supply at a time.

How can I find out more about EPIC?

EPIC operates a toll-free Helpline which is available from 8:30AM to 5:00PM, Monday through Friday. Call 1-800-332-3742 for more information or an application.

[Click here for an EPIC application](#)

The individual pharmaceutical companies also have INDIGANT DRUG PROGRAMS for those with limited incomes. Go to the attached link.

HelpingPatients.org

Benefits Under the New Medicare Law

For regular updates on the new law and other Medicare coverage issues, [subscribe](#) to Dear Marci, MRC's free e-mail newsletter.



Many people are confused about how the Medicare law passed in December 2003 will affect their health care coverage. That is quite understandable since many details of how the law will be implemented are still undecided. While the recently passed

Medicare law offers some guidelines, the details of administering the changes are left up to the federal agency that oversees Medicare (Centers for Medicare and Medicaid Services), which will write the regulations governing the changes.

Here we provide you with up-to-date information on how changes mandated by the new Medicare legislation will be implemented as that information becomes available. Return to this page frequently for the most recent news on the changes to Medicare coverage.

Different aspects of the new Medicare law go into effect at different times. For details on these changes select from the FAQ's below or click on the individual change from the timeline chart that outlines when major changes will occur:

- [Automatic Enrollment in Discount Cards – Winter 2005](#)
- [What's Changing in Medicare?: Consumer Handout \(PDF file\)](#)
- [Medicare Drug Demonstration Project](#)
- [Presentations about the Medicare-approved discount cards now available for: US, AZ, CA, FL, IL, MI, NJ, NY, NC, OH and PA.](#)
- [Chart to help you compare your prescription drug discount options and questions to ask before joining a prescription drug discount program \(PDF file\)](#)
- [Medicare-Approved Drug Discount Cards: Consumer Handout \(Also available as a PDF file for better printing\)](#)
- [Medicare Prescription Drug Discount Cards: Overview](#)
- [76 Things You Should Know about the New Medicare Drug Discount Cards – June 2004](#)
- [New Medicare Law: Drugs, Outpatient Therapy, New Wellness Benefits, and Changes to Your Costs](#)

En Español

- [Tarjetas de Descuento de Medicinas de Medicare: Folleto para el consumidor](#)
- [Las Tarjetas de Descuento de Medicinas de Medicare: Perspectiva General](#)
- [76 Cosas Usted Debe Saber Sobre la Nueva Tarjeta de Descuento de Medicina de Medicare](#)
- [La Nueva Ley de Medicare: Medicinas, Terapia de Paciente Externo, Nuevos Beneficios de Salud Preventiva, y Cambios a Sus Costos](#)



Date	Change
January 1, 2005	<ul style="list-style-type: none">• <u>Part B deductible increases to \$110 and be indexed to inflation every year.</u>• <u>New preventive care benefits added: Screening</u>

	tests to detect cardiovascular disease; Laboratory screening tests for people at high risk for diabetes; A check-up in the first six months after enrolling in Part B.
November 15, 2005	Initial Enrollment Period for Medicare drug coverage begins.
December 31, 2005	Medicare drug discount cards are discontinued.
January 1, 2006	<ul style="list-style-type: none"> • <u>Medicare drug coverage begins (Part D).</u> • Outpatient therapy cap reinstated.
May 15, 2006	Initial Enrollment Period for Medicare drug coverage ends.
January 1, 2007	<u>Part B premium increases</u> for those with incomes over \$80,000 (will continue to increase over five years).
January 1, 2010	Demonstration project begins requiring Medicare to compete with private plans (which will receive extra subsidies) in six geographic areas.

If your client has an adult onset genetic disease and can no longer work can he/she keep their health insurance?

Under COBRA, a federal law allowing people to keep their health insurance for various periods of time depending on circumstance allows those who are certified as disabled PRIOR to leaving their job and eligible for Social Security Disability benefits may receive COBRA coverage for 29 months. They must pay their own premiums. Go to Insure.com for a good explanation of insurance terms and regulations.

Does New York have a plan for adults over the Medicaid limit and who do not have coverage through employment?



Family Health Plus is a public health insurance program for adults between the ages of 19 and 64 who do not have health insurance — either on their own or through their employers — but have incomes too high to qualify for Medicaid. Family Health Plus is available to single adults, couples without children, and parents with limited income who are residents of New York State and are United States citizens or fall under one of many immigration categories.

Family Health Plus provides comprehensive coverage, including prevention, primary care, hospitalization, prescriptions and other services. There are no costs to participate in Family Health Plus. Health care is provided through participating managed care plans in your area.

Section IX: Consumer Guide to Community-Based Services in New York State to allow those with Developmental Disabilities to Remain in the Home

What are long term care services?

Long term care services may include the medical, social, housekeeping, or rehabilitation services a person needs over months or years in order to improve or maintain function or health. Such services are provided not only in nursing homes, but also in patients' homes or in community-based settings such as assisted-living facilities.

New York State has many services and programs as alternatives to nursing home care. Both medical and non-medical care may be received at home or in residential settings, and can range from simple (light housekeeping) to complex (nursing care or physical therapy) services.

Who can receive which services?

You may be able to receive a service or participate in a program through your private health insurance, a managed care agency, Medicaid or Medicare - depending on whether you are financially and medically eligible and meet the criteria of the service or program you are interested in - or by paying for it yourself.

- Some services are available to persons who are eligible for Medicaid, have Medicare coverage, use their own funds ("private pay"), or have private health or long term care insurance.
- Some services are available *only* to persons who are eligible for Medicaid.

What is Medicare and what does it do?

Medicare is a federal health insurance program for:

- **people 65 years of age and older**
- **some people under 65 who have disabilities**
- **people with end-state renal disease**

Medicare helps pay for hospital care, skilled nursing facilities, hospice care, some home health care, doctors' services, outpatient hospital care, and some other medical services.

To find out whether you are eligible for Medicare, or whether the service you need is covered by Medicare, call 1-800-MEDICARE (1-800-633-4227), or 1-877-486-2048 or go to www.medicare.gov.

Medicare Savings Program

**Health Insurance Information Counseling and Assistance Program (HICAP)
for more information about Medicare.**

What is Medicaid and what does it pay for?

Medicaid is a health insurance plan for New Yorkers who cannot afford medical care.

You are eligible for Medicaid if you receive Supplemental Security Income (SSI) or meet certain income, resource, age, or disability requirements.

Medicaid can pay for a variety of medical services that can help you continue to live in your home, or for special services available to participants in waivers. Some of the covered services are: doctor and clinic services, prescription and non-prescription drugs, home care, personal care aides, adult day care, lab tests, transportation to medical care, physical, occupational and speech therapy, mental health services, x-rays, durable medical equipment such as wheelchairs, orthotics and prosthetic appliances.

For more information on Medicaid call:

The NYS Medicaid Helpline

1-518-486-9057 (Monday – Friday 8:00 am – 5:00 pm)

1-800-541-2831 (Monday – Friday 8:00 am – 5:00 pm)

In New York City, residents of the 5 Boroughs may call the Human Resources

Administration toll free
at 1-877-472-8411.

Other Payment Sources

If you will be using private insurance or a managed care organization, contact your insurance carrier.

Veterans may wish to contact the Veterans' Administration Health Benefits Service Center at 1-877-222-VETS or go to www.va.gov/elig/.

How to Find Services:

In this web page you will find broad descriptions of some long term care services and programs that may help you remain at home. The page contains general information on services certified, operated or overseen by the NYS Department of Health and points you toward other sources that offer services and information you may be interested in.

Please note that the information provided is general in nature and may not apply to your specific circumstances.

You may be medically and financially eligible for some of the services. In determining this, you may need to undergo an assessment and authorization process which may include orders from your health-care provider.

Generally, a person must meet several criteria in order to be eligible for a service or program. For example, the fact that you may need personal care or occupational therapy does not mean you qualify for all programs that provide those services.

The following links contain information on some services and programs. This is not a comprehensive list, since other services or programs may be available from other government agencies or from private organizations.

If you need help with meals or housekeeping:

[Certified Home Health Agencies](#)
[Consumer Directed Personal Assistance Program](#)
[New York State Office for the Aging](#)
[Local Offices for the Aging](#)
[Expanded In-home Services for the Elderly](#)
[Licensed Home Care Services Agencies](#)
[Long Term Home Health Care Program](#)

Managed Long Term Care Program
Personal Care Services Program

If you need personal care (such as help with dressing, bathing or getting into bed):

- Certified Home Health Agencies**
- Consumer-Directed Personal Assistance Program**
- Expanded In-home Services for the Elderly**
- Licensed Home Care Services Agencies**
- Managed Long Term Care Program**
- Long Term Home Health Care Program**
- Personal Care Services Program**
- New York State Office for the Aging Resource Guide**
- Local Offices for the Aging**
- NYS Association of Area Agencies on Aging**

If you need respite care:

- NYS Office for the Aging - Families and Caregivers**
- Expanded In-home Services for the Elderly**
- Local Offices for the Aging**
- Department of Social Services**

If you need skilled nursing care at home:

- Certified Home Health Agencies**
- Consumer Directed Personal Assistance Program**
- Hospice**
- Licensed Home Care Services Agencies**
- Long Term Home Health Care Program**
- Managed Long Term Care Program**
- Private Duty Nursing**
- New York State Office for the Aging**
- Local Offices for the Aging**

If you need services for an elderly person:

- New York State Office for the Aging**
- New York State Office for the Aging Find Help**
- Local Offices for the Aging**
- New York State Office for the Aging Resource Guide**
- Expanded In-home Services for the Elderly**
- Adult Day Health Care**
- Certified Home Health Agencies**

[Long Term Home Health Care Program](#)
[Managed Long Term Care Program](#)
[Personal Care Services Program](#)
[Health Insurance Information Counseling and Assistance Program \(HIICAP\)](#)
[Your Guide to Senior Housing](#)
[Private Duty Nursing Services](#)

What is available to help with managing the care of a disabled individual?

This page includes a listing of directories to specific programs, groups, or resources across New York State using an Evidence-Based Practices approach.

- [Assertive Community Treatment \(ACT\) Teams Directory in New York State](#)
- [Case Management Providers in New York State](#)
- [Family Support Services Providers in New York State](#)
- [Home Based Crisis Intervention Providers in New York State](#)
- [Home and Community Based Services Waiver Assistance in New York State](#)
- [Self-Help Groups and Programs in New York State](#)
- [Supported Employment Resources in New York State](#)

If you need transportation:

Handicapped license plate:

Application for a New York State Parking Permit for People with Disabilities

General Instructions

Parking Permit for People with Disabilities
28-11 Queens Plaza North, 8th Floor
Long Island City, New York 11101-4008
Telephone: (718)433-3100
TTY: (718) 433-3111

- 1. You are eligible to receive New York State disability parking permit for the disabled issued by Department of Transportation's Parking Permits for People with Disabilities Unit if you are a New York City resident and have a severe, permanent or temporary, qualifying mobility impairment as certified by a NY State licensed physician or podiatrist.**
- 2. You do not have to be a driver or registered owner of a vehicle to get a permit. Disabled children and legally blind persons are eligible for permits.**
- 3. The permit is valid everywhere in New York State where there are designated parking spaces for people with disabilities. It is also valid in all other states and Canadian provinces. However, its use never allows you to disobey state or local parking regulations. The permit may be used to park in disabled marked parking spaces only when the vehicle is being used to transport the disabled person.**
- 4. Any person who has been issued a disability parking permit, who abuses any privilege, benefit, precedence or consideration arising from possession of the permit, may have it revoked.**
- 5. Please print, fill out and sign your section of the application form and have your doctor fill out and sign his certification section. Disclosure of applicant's Social Security number is voluntary. Such disclosure is requested pursuant to the practice of the Department of Transportation. The number will be used for identification purposes only.**
- 6. Send your completed application (please keep a copy) to the issuing agent for city residents:**

**Parking Permits for People with Disabilities (PPPD),
NYC Department of Transportation,
28-11 Queens Plaza North, 8th floor,
Long Island City, New York 11101-4008**

[Application for a New York State Parking Permit for People with Disabilities](#)

Disabled and Handicapped Transportation

Transportation Discounts

Many public transportation systems offer discounts for older riders. In New York City, for example, there are reduced fares for subway and buses. Residents 65 and older must show their Medicare card or other proof of age to obtain a Reduced Fare Metro Card. For more information, contact the New York City Department for the Aging at 1-212-442-3000.

To determine if senior discounts exist in your community, contact your local office for the aging or local transportation system.

Transportation to Appointments

Some local offices for the aging and senior centers offer transportation for seniors to doctor's appointments, shopping or other vital appointments. Contact your local office for the aging or senior center to inquire about transportation options available to you.

New York Provider's of Handicapped Transportation Service

If you need occupational therapy:

Adult Day Health Care
Certified Home Health Agencies
Long Term Home Health Care Program
Managed Long Term Care Program

If you need physical therapy:

Adult Day Health Care
Certified Home Health Agencies
Long Term Home Health Care Program
Managed Long Term Care Program

If you need case management or referral coordination:

Local Offices for the Aging
Expanded In-home Services for the Elderly
Managed Long Term Care Program

If you need residential facilities:

[Adult Care Facilities/Enriched Housing/Residences for Adults Assisted Living Program](#)

If you've suffered a brain injury and want to receive services in the community:

[Traumatic Brain Injury Waiver](#)

If you've been diagnosed with HIV or AIDS and need help getting access to doctors and home health care, or paying for prescriptions:

[ADAP/ADAP Plus AIDS & HIV Information](#)

If you're over age 65 and you need help paying for prescriptions:

[Elderly Prescription Insurance Coverage](#)

If your child is between the ages of 5 and 17 and has a serious mental health disability:

**[NYS Office of Mental Health \(OMH\) Home and Community-Based Services Waiver](#)
[OMH Web site](#)**

How to receive services at home:

**[NYS Office of Mental Retardation and Developmental Disabilities Home and Community-Based Services Waiver](#)
[OMRDD Web site](#)**

If you need your home modified to be accessible:

**[Long Term Home Health Care Program](#)
**[Managed Long Term Care Program](#)
**[NYS Vocational and Educational Services for Individuals with Disabilities](#)
**[NYS Office of Mental Retardation and Developmental Disabilities Home and Community-Based Services Waiver](#)
**[OMRDD Web site](#)
[Traumatic Brain Injury Waiver](#)**********

Expanded In-home Services for the Elderly

Additional Links and Resources

NYS Agency Links

Services that are Available to Medicaid Recipients

Long Term Care Programs and Services Licensed, Certified, or Operated by

NYS Department of Health

Other Government Agencies that Offer Community-Based Services or Information

Links to Non-Government Organizations

Section X: Housing for the Disabled

Reasonable Accommodation for Persons with Disabilities in Housing

The City Human Rights Law protects the rights of people with disabilities by requiring that landlords, co-ops and condominiums reasonably accommodate the needs of disabled tenants, shareholders or owners. Reasonable accommodation can be structural, such as a ramp at the primary entrance to provide wheelchair access, or installing grab bars in the bathroom. They can also involve policy or rule changes, such as permitting a tenant who is blind or has a psychological disability to have a guide dog or a companion animal, despite a building's "no pets" policy. The Law provides guidance in assessing requests for reasonable accommodation, taking into account the nature and cost of the proposed accommodation and the financial resources of the landlord.

The City Human Rights Law also requires the landlord to pay for an accommodation in a common area if it is deemed to be reasonable.

If you have a disability and need an accommodation, you should inform the landlord and identify the type of accommodation you need. You may have to give the landlord a note from your doctor or other health care professional stating that you have a disability and describing the functional limitations that your disability imposes. You do not have to give the landlord your medical records.

Programs Addressing Homelessness and At-Risk Populations

The Office of Temporary and Disability Assistance administers an array of programs to address homelessness in New York State. These range from programs to prevent homelessness to the actual construction of housing for homeless persons. Several programs administered by the Bureau of Housing Services provide essential services to homeless persons to stabilize their housing situation and increase levels of self-sufficiency.

Learn about Homeless Services from the topics below:

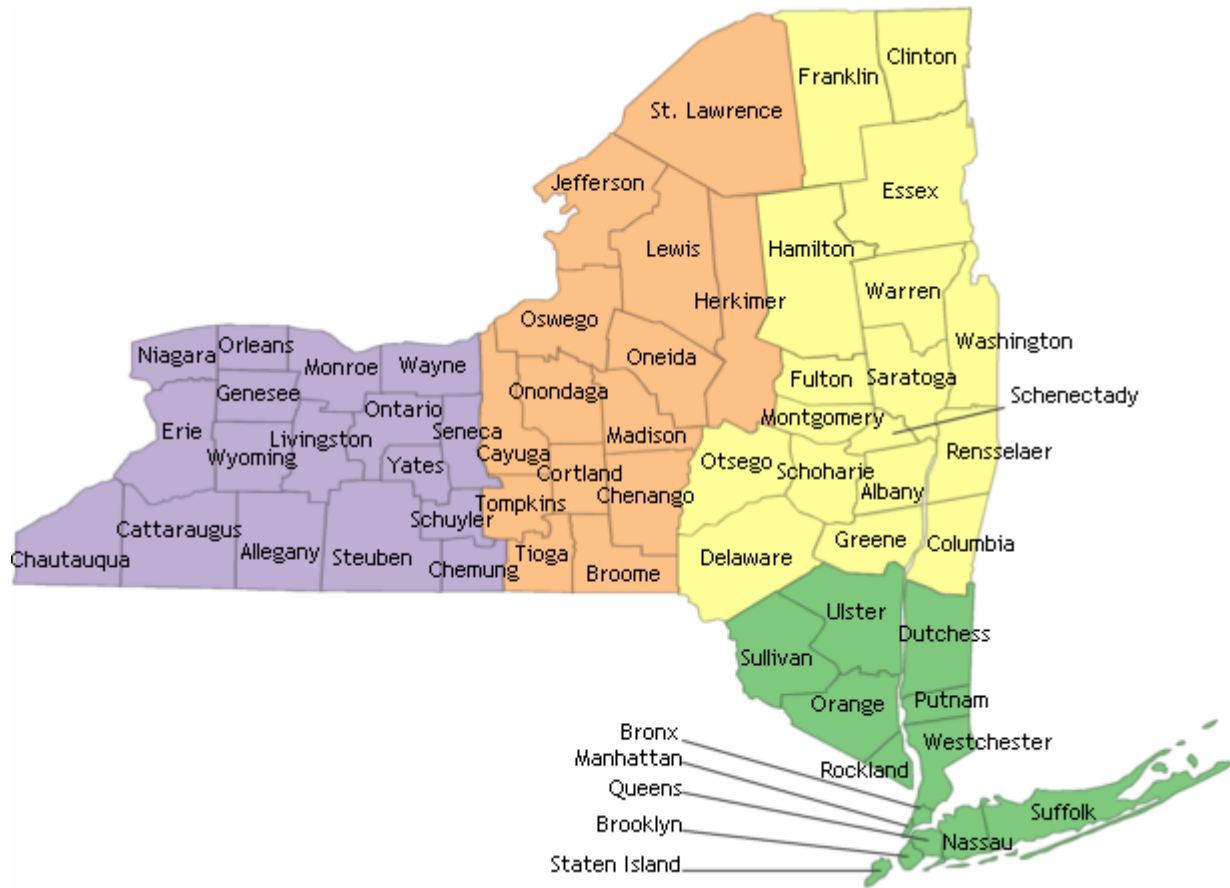
- [Homeless Housing and Assistance Program \(HHAP\)](#)
 - [Residences for Survivors of Violence Program \(RSVP\)](#)
 - [Homelessness Intervention Program \(HIP\)](#)
 - [Single Room Occupancy Support Services Program \(SRO\)](#)
 - [Emergency Shelter Grants Program \(ESGP\)](#)
 - [Housing Opportunities for Persons with AIDS \(HOPWA\)](#)
 - [Operational Support for AIDS Housing \(OSAH\)](#)
-

Adult Care Facilities

To file a complaint regarding Certified Adult Care Facilities, call toll-free 1-866-893-6772.

- [About the Adult Care Facility Directory](#)
- [About the "Do Not Refer" List](#)
- [Adult Home Quarterly Survey Reports Issued](#)
- [Press Releases](#)
- [Adult Home Resident Resources](#)
- [Related Web Sites](#)
- [The 2002 NYS Adult Care Facilities Workgroup Report](#)

To find an adult care facility, select a county from the map below, or [from a list of counties in New York State](#).



Childrens' Residential Treatment

Little Flower Children's Services of New York

Where children are the heart... and family is the soul



- [Foster Care & Adoption](#) • [Residential Treatment Center & School](#) •
- [Family Day Care](#) • [New Life for Disabled](#) • [Opportunities for Giving](#) •
- [What's New](#) • [Calendar of Events](#) • [Volunteering](#) • [Employment](#) • [Home Page](#) •

Homeless Housing and Assistance Program (HHAP)

The HHAP provides capital grants and loans to not-for-profit corporations, charitable and religious organizations, municipalities and public corporations to acquire, construct or rehabilitate housing for persons who are homeless and are unable to secure adequate

housing without special assistance. The program provides capital funding for the development of a broad range of housing options for the diverse homeless population in the state's urban, suburban and rural areas.

The statute governing the program defines a "homeless person" as an undomiciled person who is unable to secure permanent and stable housing without special assistance. Families, single persons, youth, the elderly, as well as a range of special needs groups such as the mentally disabled, victims of domestic violence, and persons with AIDS have all been assisted at projects financed by HHAP.

Program funds are awarded through an annual competitive Request for Proposal process. Applicants and awardees represent a broad range of not-for-profit and charitable organizations, generally with experience either in housing development or management, or in the provision of social services. Project sponsors include small, community-based organizations as well as larger agencies with a more regional focus. A relatively small number of grants have also been made to municipalities.

In the seventeen years since the HHAP was implemented, over \$380 million has been awarded in program grants and loans to 443 projects throughout the state, yielding approximately 10,000 units of housing. Over half of the beds funded under the program provide permanent housing for homeless families and individuals and the remainder provide housing in a transitional setting (generally over 30 days) or on an emergency basis (30 days or less). HHAP grants have been made to sponsors in 51 counties throughout the state over the life of the program.

HHAP also has a strong commitment to the development of housing for persons with AIDS and their families. Specifically, over \$45 million has been committed for the development of AIDS housing in 35 projects, yielding 602 units.

Homelessness Intervention Program (HIP)

HIP issues grants to eligible local social services districts and/or not-for profit corporations that provide services to single individuals and/or families who are homeless or at risk of being homeless. Eligible services under HIP include services to resolve conflicts between landlord and tenant, legal services to prevent eviction, activities which educate households on tenants rights and responsibilities, advocacy to ensure that households are receiving assistance in securing and maintaining permanent housing. In addition, HIP allows for the provision of or referral to support services related to substance abuse, domestic violence, housekeeping, budgeting, education, daycare, employment, parenting, and physical and mental health care. The SFY 2000-2001 appropriation was \$5 million. A new Request for Proposals (RFP) will be issued in early 2001.

Single Room Occupancy (SRO) Support Services Program

The SRO Support Services Program provides grants for the provision of support services to low-income tenants in Single Room Occupancy housing operated by non-profit agencies. The objective of these support services is to assist SRO tenants in maintaining and/or enhancing independent living and prevent homelessness.

The SFY 2000-01 appropriation was \$11.5 million, which supports 9,000 units of SRO housing.

Emergency Shelter Grants Program (ESGP)

The purpose of the ESGP is to help improve the quality and quantity of emergency shelters for the homeless, help meet the cost of operating such shelters, provide essential social services to the homeless and avoid an initial occurrence of homelessness through the provision of preventive services. The FFY 2000 allocation is \$3.026 million.

Housing Opportunities for Persons with AIDS (HOPWA)

The purpose of this program is to provide states and localities with the resources and incentives to devise long-term comprehensive strategies for meeting the housing and support services needs of low-income persons with AIDS and HIV-related diseases. A broad range of housing-related activities may be funded under HOPWA, including, but not limited to: project or tenant based rental assistance; supportive services; short-term rent or mortgage payments to prevent homelessness; and technical assistance in establishing/operating a community residence. The FFY 2000 allocation is \$1.89 million.

Operational Support for AIDS Housing (OSAH)

The state budget appropriates funds to provide operational support to projects that have received capital financing through HHAP to house homeless persons with HIV/AIDS and their families. The OSAH initiative is intended to give support to this limited pool of AIDS housing providers to more appropriately meet the support services needs of this particular population. The SFY 2000-01 allocation was \$1.4 million.

For more information on any of the homeless programs, contact OTDA's:

Office of Transitional Support and Policy
Bureau of Housing Services
40 North Pearl Street
Albany, NY 12243
(518) 473-5868

**The Empire State Association of Adult Homes
and Assisted Living Facilities**

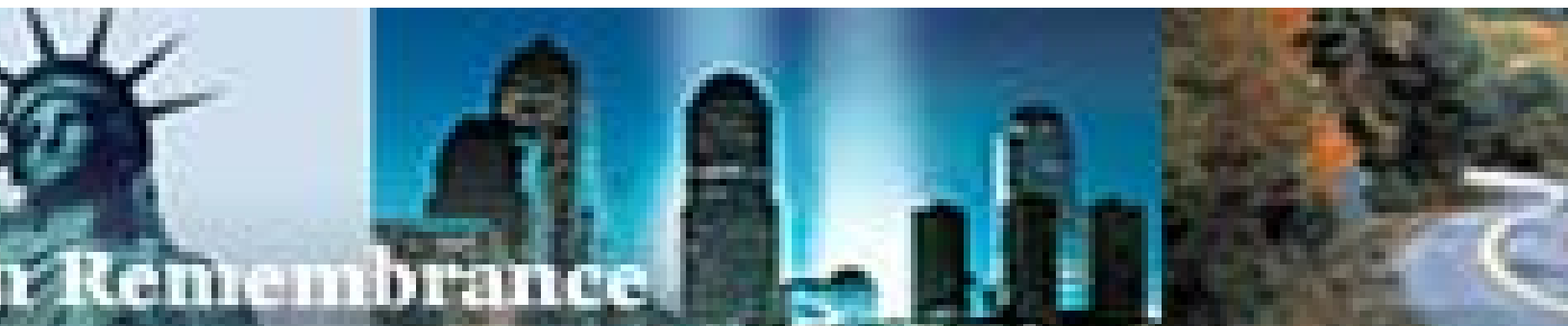
646 Plank Road Suite 207, Clifton Park, NY 12065

Phone: 518-371-2573 Fax: 518-371-3774

Email: nyasstliv@aol.com



Section XI: Resources for Children/Adults with Disabilities



Office of
**Mental Retardation
and
Developmental Disabilities**



George E. Pataki, Governor

Thomas A. Maul, Commissioner

Welcome from Governor Pataki

Welcome from Commissioner Maul



Families Helping Families
of Children with Special
Emotional, Behavioral,
and Social Needs.



► About Us

Mission, Staff, Board of
Directors, History

► News

Press Releases, Alerts,
Newsletters, Articles

► Events

Conferences, Group
Meetings, Workshops

► For Parents

Parenting info, Rights,
Parent Share

► Links

Other Helpful
Websites

► Chapters

List of Program
Affiliates

► Resources

Publications, Guides,
Reports

► Support Us

Your donations help
us help families, List
of our Supporters

► Membership

Become a Member,
Member Organizations

► Contact Us

E-mails, Addresses,
Directions



Our-Kids

Devoted to Raising Special Kids with Special Needs

<http://www.our-kids.org/>

NYSARC, Inc.

A family-based organization working with and for people who
have mental retardation or other developmental disabilities.



Resources for Individuals with Disabilities

[Adults with Disabilities](#) - Information on Independent Living Centers, Higher Education opportunities, grants & contracts, employer incentives and more.

[Contacts for Students with Special Needs](#) - Degree-granting universities and colleges.

[Information about Special Education](#) - Information on schools, programs, state policy and procedures, as well as information for parents, teachers and school administrators.

[Organizations Serving People with Disabilities](#) - State, federal and national organizations dedicated to serving the disabled.

[New York Resources for the Disabled](#)



Program Development Associates

1-800-543-2119

Newsroom

Request Catalog

For Producers



New York State TRAIID Project (1990)

NYS Office of Advocate for Persons with Disabilities

One Empire State Plaza, Suite 1001

Albany, NY 12223-1150

Project Manager: Lisa Rosano-Kaczkowski

Phone/TTY: 518.474.2825

Phone/TTY: 800.522.4369 (In State)

TTY: 518.473.4231

Fax: 518.473.6005

Email: traid@oapwd.org

Web: <http://www.oapwd.org>



ABLEDATA

Your source for assistive technology information

Self Help and Informational Resources

While there are literally thousands of Self Help sites the resources below will link you to almost all of the existing information you might need.

American Self-Help Group Clearinghouses: Access American and New Jersey self help groups
www.selfhelpgroups.org

Genetic Alliance: Umbrella organization advocating for those with rare diseases
<http://www.geneticalliance.org/>

HealthWorld online: Portal to health information sites worldwide
<http://www.healthy.net/tour/>

National Mental Health Self Help Clearinghouse
<http://www.mhselfhelp.org/>

National Organization of Rare Disorders
<http://www.rarediseases.org/>

Section XII: Caregiver Resources

Well Spouses Foundation support and education for the caregiving spouse.

Caregiver Resource Centers serve 17 counties of New York State. If you do not have one in your area, contact your local office for the aging for assistance.

Broome County Office for the Aging
County Office Building
Government Plaza
Binghamton, NY 13902-1766
Kathleen Bunnell, Director
Judith Whiteman
(607) 778-2411
FAX:(607) 778-2316

Cattaraugus County Dept. for the Aging
1701 Lincoln Avenue
Suite 7610

Olean, NY 14760-1101
Cherianne Wold
David Rodkey
(716) 373-8032
FAX:(716) 372-4734

Clinton County Office for the Aging

137 Margaret Street
Plattsburgh, NY 12901-1394
Crystal L. Carter, Director
Joanne Benway
(518) 565-4620
FAX:(518) 565-4812

Cortland County Office for the Aging

County Office Building
60 Central Avenue
Cortland, NY 13045-5590
Sharon Stevans
Cynthia Lewis
(607) 753-5060
FAX:(607) 758-5528

Fulton County Office for the Aging

19 North William Street
Johnstown, NY 12095-2534
Kathryn Leitch
Meredith Lord
(518) 736-5650
FAX:(518) 762-0698

Genesee County Office for the Aging

Batavia-Genesee Senior Center
Two Bank Street
Batavia, NY 14020-2299
Pamela Whitmore
Ruth Beatty
Don Kirkwood
(716) 343-1611
FAX:(716) 344-2442

Madison County Office for the Aging

Box 250, Route 20
Morrisville, NY 13408-0250
Theresa Roberts, Ex. Director
(315) 684-7870
(315) 684-9597

Monroe County Office for the Aging

50 West Main St., Ste 4100
Rochester, NY 14614-1236
Lorraine Anderson
Steven Newcomb
(716) 428-4949
(716) 428-9011

Nassau County Department of Senior Citizen Affairs

1550 Franklin Avenue
South Wing, 2nd Floor
Mineola, NY 11501-4828
Ralph Caruso, Acting Commissioner
Carolyn Acerra
(516) 571-5814
(516) 571-5978

Onondaga County Office for the Aging

Civic Center - 13th Floor
421 Montgomery Street
Syracuse, NY 13202-2982
Marilyn Pinsky, Commissioner
Paula Flanders
(315) 435-2362
FAX:(315) 435-3129

Orange County Office for the Aging

30 Matthew Street
Suite 201
Goshen, NY 10924-1963
Nicholas Gerten
Bobbi Hull
(845) 291-2150
FAX:(845) 291-2182

Putnam County Office for the Aging

110 Old Route 6
Building A
Carmel, NY 10512-2196
William Huestis
Doreen Crane
(845) 225-1034
FAX:(845) 225-1915

Rockland County Office for the Aging

Building B
Health & Social Services Complex
Pomona, NY 10970-0350
June Molof
Mary Kay Eggers
(845) 364-2110
FAX:(845) 364-2348

Steuben County Office for the Aging

3 East Pulteney Square
Bath, NY 14810-1510
Linda Tetor
Patricia Barcodey
(607) 776-7813
FAX:(607) 776-7813

Sullivan County Office for the Aging

100 North Street
New County Government
Monticello, NY 12701-5192
James Lyttle
Deborah Allen
(845) 794-3000
FAX:(845) 794-3459

Tompkins County Office for the Aging

320 North Tioga Street
Ithaca, NY 14850-3392
Irene Stein
David Stoyell

(607) 274-5482
FAX:(607) 274-5495

Westchester County Office for the Aging

9 South First Avenue
10th Floor
Mt. Vernon, NY 10550
Mae Carpenter
Gerri Cisco
(914) 665-5920
FAX: (914) 665-5914

Section XIII: Low Income Utilities Program

- **LifeLine Service** A discounted telephone service program offered by local telephone service companies as required by the federal law that is available to low-income telephone customers who are eligible for the following programs:
 - **Temporary Assistance Program**
 - **Food Stamps**
 - **Home Energy Assistance Program (HEAP)**
 - **Supplemental Security Income (SSI)**
 - **Veteran's Disability of Surviving Spouse Pension**

[Home Energy Assistance Program](#)



Choose from the topics below:

- **BACKGROUND**
- **TARGETED HOUSEHOLDS**
- **ELIGIBILITY**
- **BENEFIT STRUCTURE**
- **RECEIVING BENEFITS**

BACKGROUND

The Low-Income Home Energy Assistance Program (HEAP) is a federally funded energy assistance program. New York's grant is allocated among OTDA for a heating benefit program, the state Division of Housing and Community Renewal for weatherization activities, and the State Office for the Aging for outreach and referral activities. Applications are taken at all local departments of social services. For information on where to apply, call 1-800-342-3009.



TARGETED HOUSEHOLDS

New York's benefit program is structured in such a way that higher benefits are provided to those households that: have larger percentages of their income spent on energy costs; contain a vulnerable individual; and have the lowest income.

Vulnerable individuals are defined as children under the age of 6, adults aged 60 or older, or disabled individuals.

ELIGIBILITY

Eligibility for the program is based on income and your housing situation. Your total gross monthly income for your household size must be at or below the following:

HOUSEHOLD SIZE	INCOME LIMIT
1	\$1,729
2	\$2,261
3	\$2,793
4	\$3,325
5	\$3,857
6	\$4,389
7	\$4,489
8	\$4,588
9	\$4,688
10	\$4,788
11	\$5,049
Each Additional Person: Add \$393	
Income Guidelines:	

You must also live in an eligible housing situation. This generally means that you must either pay directly for heating costs or must pay rent that includes heating costs. If you reside in subsidized housing, you must pay heating costs separately from your rent. Individual applicants must be U.S. citizens or qualified aliens.

In order to be eligible for emergency benefits, the household must meet the above criteria and also must:

- Be in an energy emergency as designed by New York State's HEAP Plan
- Be the customer and tenant of record

- Reside in the dwelling
- Have insufficient liquid resources to meet the emergency

From time to time, our system or Internet service may not be available for applying for HEAP online. During the times when this occurs and it is normal business hours (9 AM to 4 PM, Monday through Friday, except holidays) you can contact the department of social services in the county where you live to ask how you can apply for HEAP. Phone numbers for each county department of social services are located:

- on our web site,
- in the blue pages of your phone book under local government, or
- by calling 1-800-342-3009 and following the voice instructions for obtaining the number where you live.

IF YOU HAVE AN ENERGY RELATED EMERGENCY SUCH AS A POWER OR GAS SHUTOFF OR YOU HAVE LESS THAN SEVEN DAYS' SUPPLY OF HEATING FUEL, YOU NEED TO CONTACT YOUR LOCAL DEPARTMENT OF SOCIAL SERVICES AND FIND OUT HOW AND WHERE TO APPLY.

Disabled Homeowners' Exemption (DHE)

Property tax exemption to low income disabled homeowners who meet the income requirements.

Eligibility

Owners of houses, condominiums, and cooperative apartments are eligible for this exemption if they occupy the property and use it as their primary residence.

- **Disability -- Applicant(s) must have a disability, defined as a physical or mental impairment not due to current use of alcohol or illegal drugs. The person must submit proof of this disability by one of the following: (1) Social Security Disability Insurance; (2) Supplemental Security Income Benefits; (3) Railroad Retirement Disability Benefits; (4) Disability pension from the US Postal Service; (5) Certificate from the State Commission for the Blind and Visually Handicapped stating that the person is legally blind.**

If co-owners who are not married or siblings own the property, all must be disabled to qualify for this exemption. If a husband/wife or siblings own the property, only one needs to have a disability to qualify.

- **Primary Residence -- Applicant must use all or part of the property as his/her primary residence, unless applicant is absent from the property due to medical reasons or institutionalization.**

- **Income --** The total adjusted gross income of all the owners of the property from all sources must be less than \$32,400, which is the 2004 income cap set by New York State. Medical and prescription expenses that were not covered or not reimbursed by insurance can be deducted from the applicant's income to determine income eligibility.

Properties with Other Exemptions

If the property has other partial exemptions, such as STAR or exemptions granted to clergy or to veterans, it may still be eligible for DHE. However, state law prohibits the granting of a Disabled Homeowners' Exemption if the property has a Senior Citizen Homeowners' (SCHE), 421a, 421b, or 421g exemption, unless an official waiver of these other exemptions is signed. In addition, tenant-shareholders who receive a Senior Citizen Rent Increase Exemption (SCRIE) and who live in a tax subsidized cooperative development organized under certain Articles of the New York State Private Housing Finance Law, or who are shareholders living in housing that was previously or is currently subject to a mortgage insured by the federal government under Section 213 of the National Housing Act are not eligible for the Disabled Homeowners' Exemption. Requirements Applicants must submit a completed DHE application, signed by all owners of the property, and copies of the following documents:

- Applicant's most recent deed, or proprietary lease for co-op owners, showing names of all owners of the property;
- Award letter from Social Security Administration or other organization, attesting to applicant's disability;
- Death certificate, if any owner listed on the deed or proprietary lease is deceased;
- Copy of marriage certificate, if any owners are married;
- Proof of income for the last calendar year before applying. Acceptable proof of income includes a copy of each owner's federal income tax return, including all schedules; Social Security statement; pension fund statement; and/or IRA distribution.
- Bills, receipts, and insurance company statements documenting claimed deductions from income for unreimbursed/not covered medical and prescription expenses.

Level of Benefit

The program provides a tax exemption for eligible homeowners from five to fifty percent of the property's assessed value, depending on the applicant's household income. If the applicant's annual adjusted gross income is just below the income cut-off of \$32,400, he/she would receive the lowest level of tax exemption – a 5 percent reduction in assessed value. As the applicant's income level decreases, the level of tax exemption increases, to a maximum of 50 percent of the property's assessed value.

Forms & Publications

Disabled Homeowners Tax Exemption Application

 [Download Application](#) (50k)

 [Download Fill-In Application](#) (181k)

Deadline

Applications must be received by March 15th for benefits to begin July 1st of that same year, the start of the City's new tax year.

Background/History of Tax

This exemption was implemented for the first time in Fiscal Year 2000.

Contact Us

▶ [E-mail Individual Tax Reductions](#)

Section XIV: Palliative Care & Hospice

[Upstate New York Hospice Alliance, Inc.](#)

[New York Hospice Directory](#)



Welcome to the [Hospice and Palliative Care Association of New York State](#) webpage. This site is designed to provide the public and our members with information about end-of-life care.



Section V: Important Offices

Social Security Administration – apply for Social Security Benefits –

[SSA Office Locator](#)



Office of Children and Family Services

The **[Office of Children and Family Services](#)**

serves New York's public by promoting the well-being and safety of our children, families and communities.

We will achieve results by setting and enforcing policies, building partnerships, and funding and providing quality services. The **[Commissioner of OCFS is John A. Johnson.](#)**

Responsibilities and Services

OCFS has numerous responsibilities including: foster care, adoption and adoption assistance, child protective services, preventive services for children and families, services for pregnant adolescents, child care and referral programs, and protective programs for vulnerable adults. OCFS is also responsible for the functions performed by the State Commission for the Blind and Visually Handicapped (CBVH), and coordinates state government response to the needs of Native Americans on reservations and in communities.

The agency is also responsible for the administration and management of 46 residential facilities and specialized programs for over 2,000 youth remanded to the agency's custody by family and criminal courts. OCFS works closely with municipalities such as the local social services districts and county youth bureaus to encourage the provision of adequate youth development services and programs at the local level.

[Citizen's Access to State Government](#)

Social Services -

New York State is divided into fifty-eight local social services districts. The five boroughs of New York City comprise one district. Outside of New York City each district corresponds to one of the fifty-seven counties that make up the remainder of the state. County Departments of Social Services (DSS) provide or administer the full range of publicly funded social services and cash assistance programs. Families whose income meets state guidelines and who meet other criteria may be able to receive a subsidy to offset some of their child care costs. (Temporary cash assistance, Medicaid, CHPlusA, CHPlusB, etc.) If you are interested in learning more about the availability of child care subsidies in your county, please contact your DSS office.

Listed below is an alphabetical list of the fifty-eight DSS Offices available throughout New York State.

Albany County DSS

162 Washington Avenue Albany, NY 12210 • (518) 447-7300

Allegany County DSS

County Office Building • 7 Court St. • Belmont, NY 14813-1077 • (716) 268-9303

Broome County DSS

36-42 Main Street • Binghamton, NY 13905-3199 • (607) 778-2600

Cattaraugus County DSS

Cattaragus County Building 1701 Lincoln Avenue • Suite 6010 • Olean, NY 14760-1158 • (716) 373-8065

Cayuga County DSS

County Office Building • 160 Genesee Street • 2nd Floor • Auburn, NY 13021-3433 • (315) 253-1451

Chautauqua County DSS

Hall R. Clothier Building • Mayville, NY 14757 • (716) 753-4421

Chemung County DSS

Human Resource Center • 425 Pennsylvania Avenue • Elmira, NY 14902 • (607) 737-5309

Chenango County DSS

County Office Building • Court Street • Norwich, NY 13815 • (607) 337-1546

Clinton County DSS

13 Durkee Street • Plattsburgh, NY 12901-2911 • (518) 565-3221

Columbia County DSS

25 Railroad Avenue • P.O. Box 458 • Hudson, NY 12534 • (518) 828-9411

Cortland County DSS
County Office Building · 60 Central Avenue · Cortland, NY 13045-5590 · (607) 753-5091

Delaware County DSS
111 Main Street · P.O. Box 469 · Delhi, NY 13753-1265 · (607) 746-2325

Dutchess County DSS
60 Market Street · Poughkeepsie, NY 12601-3299 · (845) 486-3001

Erie County DSS
Rath County Office Building · 95 Franklin Street, 8th Floor · Buffalo, NY 14202-3959 · (716) 858-7511

Essex County DSS
7551 Court St. · PO Box 217 · Elizabethtown, NY 12932 · (518) 873-3441

Franklin County DSS
Court House · Malone, NY 12953 · (518) 481-1873

Fulton County DSS
4 Daisy Lane · P.O. Box 549 · Johnstown, NY 12095 · (518) 736-5640

Genesee County DSS
5130 East MainSt. · Suite #3 · Batavia, NY 14020-3497 · (585) 344-2580

Greene County DSS
465 Main Street · P.O. Box 528 · Catskill, NY 12414-1716 · (518) 943-3200

Hamilton County DSS
White Birch Lane · P.O. Box 725 · Indian Lake, NY 12842-0725 · (518) 648-6131

Herkimer County DSS
320 North Washington Street · Site 2110 · Herkimer, NY 13350 · (315) 867-1222

Jefferson County DSS
Human Services Building · 250 Arsenal Street · Watertown, NY 13601 · (315) 785-3101

Lewis County DSS
Outer Stowe Street · P.O. Box 193 · Lowville, NY 13367 · (315) 376-5402

Livingston County DSS
Livingston County Campus · Building #3 · Mt. Morris, NY 14510-1699 · (585) 243-7300

Madison County DSS
North Court St. · P.O. Box 637 · Wampsville, NY 13163 · 315-366-2211

Monroe County DSS
111 Westfall Road - Room 660 · Rochester, NY 14620-4686 · (716) 274-6298

Montgomery County DSS
County Office Building · Broadway Fonda, NY 12068 · (518) 853-8290

Nassau County DSS
101 County Seat Drive · Mineola, NY 11501 · (516) 571-4444

New York City DSS
250 Church Street - Room 1500 · New York, NY 10013-3403 · (212) 274-2664

NYC Administration for Children's Services · 150 William St. 18th Fl. · New York, NY 10038 · (212) 341-0903

Human Resources Administration · 180 Water St. 25th Fl. · New York, NY 10038 · (212) 331-6000

Niagara County DSS
100 Davison Rd. P.O. Box 506 · Lockport, NY 14095-0506 · (716) 439-7602

Oneida County DSS
County Office Building · 800 Park Avenue · Utica, NY 13501-2981 · (315) 798-5733

Onondaga County DSS
Onondaga Co. Civic Center · 421 Montgomery Street · Syracuse, NY 13202-2923 · (315) 435-2985

Ontario County DSS
3010 County Road #46 · Canandaigua, NY 14424-1296 · (585) 396-4060

Orange County DSS
Quarry Road, Box Z · Goshen, NY 10924-0678 · (914) 291-4311

Orleans County DSS
14016 Route 31 West · Albion, NY 14411-9365 · (716) 589-7004

Oswego County DSS
100 Spring Street · Mexico, NY 13114 · (315) 963-5435

Otsego County DSS
County Office Building · 197 Main Street · Cooperstown, NY 13326-1196 · (607) 547-7594

Putnam County DSS
110 Old Route Six Center, Building #2 · Carmel, NY 10512-2110 · (845) 225-7040

Rensselaer County DSS
133 Bloomingrove Drive · Troy, NY 12180-8403 · (518) 283-2000

Rockland County DSS
Building L · Sanatorium Road · Pomona, NY 10970 · (845) 364-3300

St. Lawrence County DSS
Harold B. Smith County Office Building · 6 Judson Street · Canton, NY 13617-1197 · (315) 379-2101

Saratoga County DSS
County Complex · McMaster Street · Ballston Spa, NY 12020 · (518) 884-4140

Schenectady County DSS
106 Erie Boulevard · Schenectady, NY 12305 · (518) 388-4736

Schoharie County DSS
County Office Building · P.O. Box 687 · Schoharie, NY 12157 · (518) 295-8311

Schuyler County DSS
County Office Building · 105 Ninth Street · Watkins Glen, NY 14891 · (607) 535-8303

Seneca County DSS
1 DiPronio Drive · P.O. Box 690 · Waterloo, NY 13165-0690 · (315) 539-1830

Steuben County DSS
3 East Pulteney Square · Bath, NY 14810 · (607) 776-7611

Suffolk County DSS
3085 Veterans Memorial Highway · Ronkonkama, NY 11779 · (631) 854-9930

Sullivan County DSS
16 Community Lane · P.O. Box 231 · Liberty, NY 12754 · (845) 292-0100

Tioga County DSS
P.O. Box 240 · Owego, NY 13827 · (607) 687-8301

Tompkins County DSS
320 West State Street · Ithaca, NY. 14850 · (607) 274-5252

Ulster County DSS
1061 Development Court · Kingston, NY 12401-1959 · (845) 334-5221

Warren County DSS
Warren Co. Municipal Center · Lake George, NY 12845-9803 · (518) 761-6309

Washington County DSS
Municipal Building · 383 Broadway · Fort Edward, NY 12828 · (518) 746-2322

Wayne County DSS
77 Water Street · P.O. Box 10 · Lyons, NY 14489-0010 · (315) 946-4881

Westchester County DSS
County Office Building #2 · 112 East Post Road · White Plains, NY 10601-5113 · (914) 995-5000

Wyoming County DSS
466 North Main Street · Warsaw, NY 14569-1080 · (716) 786-8901

Yates County DSS
County Office Building · 110 Court Street · Penn Yan, NY 14527-1118 · (315) 536-5183

[Family & Community Health](#)

[Health Insurance Programs](#)

[Forms](#)

[Doctors & Other Health Professionals](#)

[Hospitals, Nursing Homes & Other Health Care Facilities](#)

Glossary/Resources

Adult Care Facilitates: adult care facilities which provide temporary or long-term, non-medical residential care services to adults who are substantially unable to live independently

<http://www.health.state.ny.us/nysdoh/acf/map.htm>

Adult Overnight Summer Camp Information: Directory of summer camps for adults with developmental disabilities.

http://www.omr.state.ny.us/hp_camp_directory.jsp

Advocate for Persons with Disabilities: State advocate, Richard Warrender acts as NY's advocate for this population.

<http://www.advoc4disabled.state.ny.us/>

Brave Kids: Provides education, support and networking for children with special needs.

www.bravekids.org

Center for Medicare and Medicaid Services (CMS): Department within HHS overseeing Medicare and Medicaid

<http://cms.hhs.gov/>

Center for Students with Disabilities: NYU's resources for students with disabilities.

<http://www.nyu.edu/osl/csd/index.html>

Children's Literature and Disability: Disability specific resources list for children with disabilities.

<http://www.nichcy.org/pubs/bibliog/bib5txt.htm>

COBRA: Federal law allowing people who leave employment to keep their health insurance for up to 3 years depending on circumstance.

<http://info.insure.com/health/highriskpool.html>

Community Health Law Project: The CHLP provides legal and advocacy services, training, education, and related activities to persons with disabilities and the elderly.

<http://www.chlp.org/>

County Websites: Each county has its own programs and services. To go to your county's website go to

<http://www.nysac.org/nysac/countylinks.html>

Disability Info.gov: Overview of all disability services provided by the federal government.

<http://www.disabilityinfo.gov/>

Disability and Health in New York: Statewide Conference on Health Promotion for People With Disabilities The first statewide conference on health promotion for people with disabilities will be held on April 15 and 16, 2004 at the Marriott Hotel in Albany. <http://www.health.state.ny.us/nysdoh/prevent/main.htm>

Division of Housing and Community Renewal: Implements the Rehabilitation Act and Americans with Disabilities Act (ADA) which prohibits discrimination based on disability, with guidelines on providing reasonable accommodations

<http://www.dhcr.state.ny.us/fheo/ccu/fheoccu.htm>

Elder (Disability) Law Resources: Provides links to ADA and other necessary legal resources.

<http://www.estateplanninglinks.com/elder.html#state>

Elderly Pharmaceutical Insurance Coverage Program: Provides prescription drug coverage for those over 65 within certain incomes.

<http://www.health.state.ny.us/nysdoh/epic/faq.htm>

eMedNY is the name of the new electronic Medicaid system of New York State

<http://www.emedny.org/index.html>

Expedited SSI Payment: SSA Filed Office authority to provide up to 6 months of emergent SSI payments and Medicaid to those on a list of Presumptive Disabilities who appear to meet the financial eligibility criteria and who are in an apparent threat of homelessness, a life threatening medical condition, etc.

<http://www.ssa.gov/notices/supplemental-security-income/text-expedite-ussi.htm>

Family Village – New York Advocacy Resources: Listing of resources for adults/ children with disabilities

<http://www.familyvillage.wisc.edu/comm/newyork.html>

Federal Qualified Health Centers: FQHC Federally Qualified Health Center. A comprehensive primary care provider that offers care to all persons regardless of their ability to pay and is governed by a consumer- dominated of directors.

<http://www.fha.state.md.us/opcs/pco/html/mdhlthctrs.html>

Federal Poverty Level (FPL): This represents the basic income levels, or percentages thereof, tied to family size as set by the Federal government and used to award various monetary or health benefits.

<http://aspe.os.dhhs.gov/poverty/04poverty.htm>

Genetic Testing – Wadsworth Center - New York State Department of Health: Newborn Screening Program in the [Division of Genetic Disorders](#) performs more than 2.9 million tests annually for ten genetic disorders.

<http://www.wadsworth.org/newborn/>

Health Plus: New York State has a health insurance plan for kids,

<http://www.health.state.ny.us/nysdoh/chplus/index.htm>

Indigent Drug Program: Provides access to all the pharmaceutical companies free drug programs.

<http://www.helpingpatients.org/>

Maryland Patient Advocacy Group: Non-profit group providing informational resource directory for citizens with genetic/chronic diseases. It has a website that focuses on renal healthcare.

www.kidneyadvocacy.50megs.com

Medicaid: Joint federal and state program providing healthcare to low income children, pregnant women, elderly and disabled.

<http://www.state.nj.us/humanservices/dmahs/dhsmed.html>

MedicalHomes@Work: An eNewsletter for families with children with special needs by the National Center on Birth Defects and Developmental Disabilities

<http://www.medicalhomeinfo.org/weblinks/announce.html#a6>

Medicare (MC): A Federal program which provides healthcare to the elderly and disabled.

<http://www.medicare.gov/>

Medicare Publications:

<http://www.medicare.gov/Publications/Search/View/ViewPubList.asp?Language=English>

Medicare Rights Center (MRC): The MRC educates and advocates for Medicare beneficiaries.

<http://www.medicarerights.org/>

National Energy and Affordability and Accessibility Project: Provides assistance for gas, electricity, and weatherization for low income families.

<http://neaap.ncat.org/programs/lowincome/NY-li.htm>

New York – Citizens Guide: Portal to all NY services.

<http://www.nysegov.com/citGuide.cfm>

New York State Commission on Quality of Care for the Disabled: Oversees the entire system of services, reports to the Governor, the Legislature and the public on the manner in which laws and policies to protect the rights of mentally disabled citizens.

<http://www.cqc.state.ny.us/>

New York State Council on Developmental Disabilities: The DDPC is responsible for developing new ways to improve the delivery of services and supports to New Yorkers with developmental disabilities and their families

<http://www.ddpc.state.ny.us/>

New York State Department of Health Directory of Services: Provides numbers to all programs within the Department of Health.

<http://www.health.state.ny.us/nysdoh/consumer/director.htm>

Peoples Law Library: Provides legal and self-help information on New York and federal law affecting low and moderate income persons and their families.

<http://www.peoples-law.org/>

Personal Assistance Services Program (PASP) provides personal assistants to adults with physical disabilities who live in the community.

<http://www.state.nj.us/humanservices/dds/persast.html>

Pharmaceutical Assistance to the Aged and Disabled (PAAD): Provides access to pharmaceuticals to the aged and disabled who meet certain eligibility criteria.

<http://www.state.nj.us/health/seniorbenefits/paadapp.htm#paad>

Qualified Medicare Beneficiary (QMB): A Medicare beneficiary, within certain income limits, whose Medicare premium, co-payments and deductibles are covered by Medicaid, also called Medicare Savings Program.

<http://www.peopleslaw.org/Public%20Benefits/Government%20Benefits/qmb.htm>

Social Security Administration (SSA): An agency of the Federal government that oversees the retirement and disability system.

<http://www.ssa.gov/>

Social Security Blue Book: A set of medical guidelines that must be met to award disability and Medicare benefits. The link below takes you to the renal guidelines.

<http://www.ssa.gov/disability/professionals/bluebook/106.00-Genito-Urinary-Childhood.htm>

Social Security Offices: These are local offices of the Social Security Administration at which to apply for Medicare benefits.
<http://s00dace.ssa.gov/pro/fo/fo-home.html>.

Special Needs Planning Information: Bart Stevens has created a site on special needs planning for the disabled.
<http://www.bssnp.com/AboutUs.asp>

Special Parent Assistance Resource Center (SPARC): Provides support and information to parents of special needs children.
<http://www.geocities.com/sparcofucp/sparcwelcome.htm>

Supplemental Security Income (SSI): A Federal income supplement program funded by general tax revenues (*not* Social Security taxes) designed to help the aged, blind and disabled that have little or no income.
<http://www.ssa.gov/notices/supplemental-security>

Utilities, Handbook for Customers with Disabilities: Explains special safeguards and provisions for customers with disabilities.
<http://www.dps.state.ny.us/disable.html>

Vocational and Educational Resources for Individuals with Disabilities: Listing by area of all State approved vocational and educational resources.
<http://www.vesid.nysed.gov/specialed/privateschools/853dismd.htm>

Vocational and Educational Services for People with Disabilities: Services Provided by the NY Board of Education
<http://www.vesid.nysed.gov/do/locations.htm>

Well Spouses Foundation: support and education for the caregiving spouse.
<http://www.wellspouse.org/index2.html>

WrightsLaw: Special Education Advocacy organization.
<http://www.wrightslaw.com/>

