Children with Disabilities Medicaid Coverage

Children with disabilities often have higher medical bills that can go over the qualifying limits of private health insurance. Children with Disabilities Medicaid coverage allows families with children to “buy-into” the Medicaid program by paying a monthly premium based on the family’s income. The program also covers mental health and some dental services.

Parents can apply at their local county social service office.

To Qualify:

- A child must be under the age 19. If an eligible child turns 19 during a portion of a month, he or she could be covered through the end of that month.

- The child must be disabled.  
  (NOTE: Meet the Social Security Administration’s definition of disability.)

- The family's total net countable income cannot be more than 200 percent of the Federal Poverty Level.

- If an employer of either parent offers medical coverage for the child, and the employer pays at least half of the premium, the child must be enrolled in the private health insurance plan.

- A family can have private health care insurance and still qualify for the buy-in program.

- There is no asset limit for this coverage. Children can qualify even if their family owns a home, more than one car, or other assets.

Premiums:

- Children who qualify pay a monthly premium equal to five percent of the family's gross countable income.  
  (Example: Sally and Joe Smith earn $3,000/month. The child’s premium would be $150/month.)

- If the child is covered by other private health insurance, the Children with Disabilities premium will be reduced by the amount the family pays for the private health insurance premium.
Frequently Asked Questions: 
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Q - Are children who are eligible under the Children with Disabilities Medicaid Coverage required to have a primary care physician?
A - No. Children who qualify for the coverage do not have to name a primary care physician.

Q - If a child qualifies for Children with Disabilities Medicaid Coverage, does the county make a referral to Child Support Enforcement?
A - Yes. If one parent is out of the household, a referral is made to the Child Support Enforcement Division to establish paternity and to secure health insurance coverage and other supports for the child.

Q - How much is the enrollment fee for a child who qualifies for the Children with Disabilities Medicaid Coverage?
A - There is no enrollment fee for this coverage.

Q - What is the earliest day my child can be covered under the Children with Disabilities Medicaid Coverage?
A - Coverage can start up to three months before the month the family applies for Medicaid. (Example: If your application is received in June, coverage could go back three months to March if you qualify.)

Q - My child is receiving home and community-based services. Will she qualify for the Children with Disabilities Medicaid Coverage?
A - Any child that meets the criteria for the coverage would qualify.

Q - If a child is in a Psychiatric Residential Treatment Facility (PRTF) or in a Long Term Care Facility, would the child qualify for Children with Disabilities Medicaid Coverage?
A - Any child that meets the criteria for the coverage would qualify.

Q - What services are covered under the North Dakota Children with Disabilities Medicaid Coverage?
A - Children who qualify receive full Medicaid coverage and are subject to the Medicaid benefit limits.

Q - Does the Children with Disabilities Medicaid Coverage cost families any out-of-pocket costs besides the premium?
A - No. The monthly premium is the only cost for covered services. All Medicaid rules need to be followed to ensure there are no other out-of-pocket costs.

For information, contact your local county social service office. County contact information is at www.nd.gov/dhs/locations/countysocialserv/index.html.