



DSHS Medical Programs

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<http://www.whatcomalliance.org/services/documents/DSHSMedicalPrograms.pdf>

Revised 1/4/08

Program	Names for these programs	Who is eligible?	What benefits do I get?	How long do I get them for?	Can I lose my benefits?
Children's Coverage	<ul style="list-style-type: none"> • Medicaid or DSHS • CHIP or S-CHIP • CNP • Basic Health Plus • F06/F07/F08 (listed on coupon) • Healthy Options 	All children under age 19 at or below 250% FPL , regardless of immigration status. There is no limit on family resources.	Standard Benefits Package <ul style="list-style-type: none"> • Medical, Dental, Vision & Mental Healthcare Services • Interpreters for and transportation to health services \$15/child monthly premium for 200-250% FPL	12 months Reapply every year to keep coverage Medicaid can also cover 3 months retroactively	<ul style="list-style-type: none"> • Child turns 19 • Fails to reapply/recertify • Does not supply all documents requested • When family reapplies, their income is above 250%
Pregnancy	<ul style="list-style-type: none"> • Medicaid or DSHS • Pregnancy medical • CNP • P02/P04 (listed on coupon) 	Pregnant women of all ages and immigration status, at or below 185% FPL . There is no limit on family resources.	Standard Benefits Package <ul style="list-style-type: none"> • Medical, Dental, Vision & Mental Healthcare Services • Interpreters for and transportation to health services 	Until 2 months after the baby is born or the pregnancy ends. Plus 10 months of family planning only coverage thereafter.	<ul style="list-style-type: none"> • Woman moves and does not report her change of address.
Kids and Pregnancy Spend down	<ul style="list-style-type: none"> • Medicaid spend down • F99/P99 	Any citizen or legal permanent resident (for 5 years) that is over income for program above. Person must pay a deductible amount out of pocket that is calculated based on income, before coverage begins.	<ul style="list-style-type: none"> • Essentially free catastrophic insurance • Standard Benefits Package • Medical, Dental, Vision & Mental Healthcare Services • Interpreters for and transportation to health services 	3-6 months Client can choose whether deductible is calculated and reset every 3 or 6 months	<ul style="list-style-type: none"> • Fails to reapply/recertify • Does not supply all documents requested
Families with Children under 18	<ul style="list-style-type: none"> • TANF (Temporary Assistance for Needy Families) • CNP • Medicaid or DSHS • Family Medical (Extension) • F01,2,3,4,9 (listed on coupon) 	Families with dependant children living in the home who meet the income and family resource requirements and are US citizens or qualified immigrants	Standard Benefits Package Medical, Dental, Vision & Mental Healthcare Services Interpreters for and transportation to health services Cash Benefits and Food Stamps Available with additional requirements.	6 months Recertify every 6 months. A family can only receive cash benefits for a lifetime total of 5 years (60 months).	<ul style="list-style-type: none"> • All kids turn 18 or older • Fails to reapply • Fails to supply proof of family income & resources • Family goes over income (will be given 1 more year of only medical benefits) • Fails to comply with WorkFirst requirements

This is meant to be a readable summary of most, not all, state medical programs and does not cover all deductions or other exceptions that can be made. If you think you may qualify, we recommend you contact DSHS at 1-800-735-7040 or call one of the WAHA Access Counselor with your questions at 788-6594.



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Alien Emergency Medical	<ul style="list-style-type: none"> • Medicaid or DSHS • AEM • Emergency only • F09/S07 (listed on coupon) 	Non citizens who have an emergent condition AND would have qualified for an other DSHS programs if they were a US citizen.	All services directly related to your emergent condition, including the emergency room, hospital visits, specialist charges, office visits, prescriptions, etc.	3 months for most conditions See list of exceptions. Can be past 3 months or 3 months starting from the application	<ul style="list-style-type: none"> • Fails to meet the requirements for the DSHS program they would have qualified for as a citizen • Fails to reapply or does not supply proof of family's income • Condition no longer meets criteria as 'emergent'
General Assistance for the Unemployable	<ul style="list-style-type: none"> • GAU • GA-X • DSHS • G01/G02 (listed on coupon) 	Adults who have evidence of a medical or psychiatric problem that will prevent them from working for at least 90 days (12 months for GA-X). They must also meet the income and resource requirements and be US citizens or lawfully admitted immigrants .	<p>Limited Benefits Package</p> <ul style="list-style-type: none"> • Medical, Emergent Dental & Vision services • Mental health services (G02 only) • Interpreters/Transportation <p>Cash benefits Food Assistance (usually)</p>	Income and resources are checked every 12 months. Evidence of inability to work will be required every 3, 6, or 9 months depending on the condition.	<ul style="list-style-type: none"> • Fails to reapply • Doesn't supply adequate proof of income, resources, or disabling condition • Income or resources go above the allowed limits • Condition no longer meets criteria as preventing employment
ADATSA	<ul style="list-style-type: none"> • Alcohol & Drug Addiction Treatment Services Act • W01, W02, W03 (listed on coupon) 	Adults who have a substance abuse problem that will prevent them from working for at least 90 days, who are willing to receive treatment, meet the income and resource requirements and are US citizens or legal immigrants.	<p>Limited Benefits Package</p> <ul style="list-style-type: none"> • Medical, Emergent Dental & Vision services • NO mental health services • Interpreters/Transportation • Residential & Out-patient Treatment • Detox <p>Cash benefits (county funds) Basic Food Assistance</p>	For the duration of your approved treatment plan.	<ul style="list-style-type: none"> • Withdraw from treatment (which is different than relapsing) • Finish treatment plan • Gaining employment once you are in outpatient treatment does not make you ineligible for ADATSA

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Healthcare for Workers with Disabilities	<ul style="list-style-type: none"> • Medicaid or DSHS • CNP • HWD • S08 (listed on coupon) 	<p>Disabled adults (age 18-64) who are working , are below 220% FPL, and are US citizens or lawfully admitted immigrants. There is no limit on family resources. *Must pay a monthly premium!</p>	<p>Standard Benefits Package</p> <ul style="list-style-type: none"> • Medical, Dental, Vision & Mental Healthcare Services • Interpreters for and transportation to health services 	<p>Income is checked every 12 months</p>	<ul style="list-style-type: none"> • Fails to reapply • Doesn't supply adequate proof of income • Income goes above the allowed limits • Fails to complete disability review, if required • Fails to pay monthly premium
Aged, Blind, Disabled Medical	<ul style="list-style-type: none"> • CNP • Medicaid or DSHS • S01/S02 (listed on coupon) 	<p>Adults who are unable to work for at least 12 months according to social Security's definition of disability and/or are over 65 and who meet the income and resource requirements</p> <p>Children receiving SSI may also qualify.</p>	<p>Standard Benefits Package</p> <ul style="list-style-type: none"> • Medical, Dental, Vision & Mental Healthcare Services • Interpreters for and transportation to health services 	<p>Income, resources and evidence of disability are checked every 12 months. Those receiving SSI payments will not need to reapply.</p>	<ul style="list-style-type: none"> • Disability no longer meets Social Security definition • Fails to reapply • Does not supply adequate proof of income, resources or disabling condition. • Income or resources go above allowed limits – see spend down below
Aged, Blind, Disabled Spend down	<ul style="list-style-type: none"> • Medically Needy • MN • Spend down • S95/S99 (listed on coupon) 	<p>Adults who are unable to work for at least 12 months according to social Security's definition of disability and/or are over 65 and do not meet the income requirements. Resources must still be within the limit</p>	<p>Limited Benefits Package</p> <ul style="list-style-type: none"> • Medical, Emergent Dental & Vision services • NO mental health services • Interpreters/Transportation • Residential & Out-patient Treatment <p>*Must meet your spend down amount first</p>	<p>Income and resources are checked every 3 or 6 months depending on the spend down period you have chosen</p>	<ul style="list-style-type: none"> • "Disability" status changes according to Social Security definition • Fails to reapply • Does not supply adequate proof of income, resources or disabling condition • Resources go above allowed limits

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QMB	<ul style="list-style-type: none"> • Quimby • Medicare Savings Program • MSP • S03 (listed on coupon) 	Person on Medicare who is at or below 100% FPL	<ul style="list-style-type: none"> • Pays the Part A & B premiums and deductibles • Pays the co-insurance for Medicare covered services <p>Doesn't pay for services that Medicare won't cover</p>	Income and resources are checked every 12 months.	<ul style="list-style-type: none"> • Fails to reapply • Doesn't supply adequate proof of income or resources, when asked • Income or resources go above the allowed limits
Medicare Savings Program	<ul style="list-style-type: none"> • SLMB (Slimby) • E-SLMB or QI-1 • MSP • S05/S06 (no coupon received) 	Person on Medicare who is at or below 135% FPL	<ul style="list-style-type: none"> • Pays the Part B premium 	Income and resources are checked every 12 months.	<ul style="list-style-type: none"> • Fails to reapply • Doesn't supply adequate proof of income • Income goes above the allowed limits

Basic Health – a state medical program, not part of DSHS.

[Click here](#) for information on qualifications and application help or call a WAHA Access Coordinator at 360-788-6594

Take Charge – a medical coupon that covers all forms of birth control for individuals who have fairly high incomes.

For information call Planned Parenthood at 360-734-9007

Breast & Cervical Health Program (BCHP) – covers annual physicals and mammograms for women over 40.

For information call Planned Parenthood at 360-734-9007, Sea Mar Clinic at 360-671-3225 or Interfaith Clinic at 360-676-6177.

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