How to Guide: Medicaid

How to Apply

Kansas Medicaid, known as KanCare, provides medical and long-term care services to eligible Kansans through managed care organizations (MCOs). Assistive technology, such as durable medical equipment (DME), prosthetics, and communication devices, can be covered when medically necessary and prescribed by a physician.

You can apply for KanCare (Kansas Medicaid) in several ways:

- 1. Online: Apply through the KanCare Medical Services Self-Service Portal (https://kancare.ks.gov).
- 2. Paper Application: Download and print the application from the KanCare website or request one to be mailed to you.
- 3. By Phone: Call 1-800-792-4884 to request an application or get help completing it.
- 4. Waiver or PACE Services: If you're applying for specialized Medicaid programs (such as waivers or PACE), contact the appropriate agency for a functional eligibility assessment:
 - Frail Elderly, Brain Injury, Physical Disability Waivers, or PACE: Call the Area Agency on Aging or ADRC at (855) 200-2372.
 - Intellectual or Developmental Disability (I/DD) Waiver: Contact your local Community Developmental Disability Organization (CDDO).
 - Autism Waiver: Complete the preliminary application on the KDADS website or call (785) 296-8131.
 - Serious Emotional Disturbance (SED) Waiver: Contact your local Community Mental Health Center (CMHC).
 - Technology Assisted (TA) Waiver: Call (785) 296-9551 or email tawaiver@family-waiver-care.com.

Information Needed

- Before applying for Medicaid, gather the following documentation:
 - o Proof of identity (driver's license, state ID, or birth certificate)
 - Social Security number for each person applying
 - Proof of income (pay stubs, tax returns, Social Security statements)
 - o Proof of disability (if applicable, from the Social Security Administration)
 - Proof of residency (utility bill, lease, or similar)

- Health insurance information (if you have any current coverage)
- Bank statements or information about assets
- Medical documentation if applying for assistive technology, durable medical equipment, or waiver services

When applying for Medicaid coverage or assistive technology reimbursement, you will need:

- Medical records or evaluations showing medical necessity for assistive technology.
- Physician's prescription or Letter of Medical Necessity for each device requested.
- Vendor information, including a quote or estimate from a Medicaid-approved supplier.
- For waiver services, an eligibility assessment from the appropriate agency (ADRC, CDDO, or CMHC).

Assistive technology must meet Medicaid's definition of Durable Medical Equipment (DME):

- It can withstand repeated use.
- It serves a primary medical purpose.
- It is not useful without illness or injury.
- It is appropriate for home use.

Helpful Tips

- Check your eligibility first. Eligibility is based on income, age, disability status, and residency.
- Choose a Medicaid-enrolled provider. Medicaid pays providers directly; they cannot charge you extra.
- Kansas Medicaid covers a wide range of assistive technology, including wheelchairs, walkers, prosthetics, communication devices, oxygen units, hearing aids, and adaptive equipment.
- Prior authorization is required for most equipment—your provider must submit medical documentation before purchase.
- Medicaid may rent or purchase equipment based on cost-effectiveness.
- Providers must be enrolled with Kansas Medicaid and accept the state's reimbursement rate.
- Medicaid is a payor of last resort—it will only pay after all other available funding sources are applied.

- For repairs, maintenance, or replacement of equipment, contact your provider or KanCare MCO for authorization.
- If you are denied coverage or experience service issues, you may file:
 - o A Grievance (for dissatisfaction not related to service denial)
 - A Reconsideration (for third-party review)
 - An Appeal (for denied services or payment)
 - o A State Fair Hearing (through the Office of Administrative Hearings)
- The KanCare Ombudsman (1-855-643-8180) can help answer questions, resolve issues, and guide you through the appeal or fair hearing process.
- Keep copies of all documents, prescriptions, and communications related to your
 Medicaid or assistive technology request.