**Medicaid: Referring Military Families to Supports and Services**

Military families are in a unique position when it comes to receiving supports and services when a child has special needs. On the one hand, they have guaranteed medical coverage through TRICARE, the military health care system and its range of special programs. On the other hand, there are distinct limits to coverage and programs which may leave military families without some essential supports and services. Medicaid, which can provide these supports and services can be problematic for military families, yet it is a resource they should be encouraged to explore.

**Parent Center staff can consider the following when helping military families find supports and services:**

* TRICARE offers the Extended Care Health Option (ECHO), which has a range of supports and services available to active duty family members with qualifying conditions. ECHO is a supplement to TRICARE coverage and its services and supplies are not available through regular TRICARE coverage. [ECHO program information](https://branchta.org/extended-care-health-option-echo/).
	+ Although ECHO was developed to provide services and supports similar to Medicaid, limitations may leave some military families still in need of Medicaid services.
	+ Many military families are either unaware of the ECHO program, or are unaware of its full range of services. Parent Center staff may wish to help military families explore whether their child is eligible for ECHO.
	+ When a military member leaves active service (retires, separates, or moves to the Reserves or National Guard\*), their family members will no longer qualify for ECHO. Parent Centers might encourage these families to explore Medicaid to ensure continuity of supports and services.
* Military families may believe that their TRICARE coverage (with or without ECHO) disqualifies them for Medicaid. Since TRICARE and Medicaid are both entitlement programs established by law, Congress has established a hierarchy of benefits between the two programs so eligible military family members receive the maximum range of benefits. When a military family member is dually-enrolled in TRICARE and Medicaid, TRICARE is the primary payee and Medicaid covers remaining costs.

\*Reserve and National Guard families are only eligible for ECHO benefits during the period when the service member is called to active duty for more than 30 consecutive days (this period begins once orders for active duty are in hand, and ends when they return to Reserve or National Guard status). These families may need Medicaid during those periods when their service member is on non-active status.

**Eligibility for and Barriers to Receiving Medicaid Benefits (including Home and Community Based Services and other waivers):**

* Income: Even with the recent expansion of Medicaid in some states under the Affordable Care Act, many military families will not qualify based on their income. [Exceptions: families where the service member is in the lowest enlisted ranks may qualify, especially when that is the family’s sole income or when the civilian parent works in low-paying or part-time employment.]
* Mobility: Active duty military families can expect to move every 18 months to three (3) years as their service member is assigned to new duty locations. Every move will require a reapplication for services, and in the case of waivers, going back onto a wait list. A recent study showed significant percentages of military families already receiving Medicaid either lose services from relocation, or experience family separation to maintain benefits (Defense Manpower Data Center, 2014,p. 28).
* Lack of information: Many military families whose child(ren) have special needs were unaware of Medicaid services and benefits; only 7% of the respondents had even heard of HCBS waivers (DMDC, 2014, pp. 24-29).
* Wait Times for Medicaid Waivers: Military families encounter the same wait lists as civilians. Unlike civilians, they are likely to relocate due to a change in duty stations before waiver services can begin (DMDC, 2014, pp.24-25, 28).
	+ Military families may qualify for special Medicaid Waiver enrollment status in your state. Legislation initiatives are underway to allow active-duty and separating military families to maintain their enrollment status from state to state without affecting wait list status for current state citizens. Because these legislative changes are ongoing, you can contact The Branch for updated information.

**Collaborate to Reach Out to Military Families**

Parent Center staff can build relationships and collaborate with military personnel such as [EFMP Support](https://branchta.org/exceptional-family-member-program-efmp-2/) liaisons at local installations, sharing resources to help military families understand and access Medicaid. Use your [Regional Map](https://branchta.org/toolkits/) to locate Family Support personnel.

Parent Center staff can liaise with other Parent Centers to assist relocating military families apply, maintain, or reapply for Medicaid benefits. Military parents may be initially unaware of the significant differences in Medicaid programs (especially waivers) from state to state. Parent Center staff in the “receiving” (new) state can be of great assistance in referring families to resources in advance of a relocation.

[Beneficiary Counseling and Assistance Coordinators at TRICARE](http://www.tricare.mil/bcacdcao/) can answer questions about receiving Medicaid benefits while on TRICARE.

**References**

Defense Manpower Data Center. (2014). **Q***uickcompass of tricare child beneficiaries: utilization of*

*medicaid waivered services: tabulations of responses*. (DMDC Report No. 2014-010).Retrieved from http://oai.dtic.mil/oai/oai?verb=getRecord&metadataPrefix=html&identifier=ADA610440