

Keeping Medicare and Medicaid When You Work, 2005

A Resource Guide
for People with
Disabilities,
Their Families,
and Their Advocates



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TABLE OF CONTENTS

Work-Related Incentives for Persons on Either SSDI or SSI	3
Additional Work Incentives Available to People with Disabilities on SSDI	9
Additional Work Incentives Available to People with Disabilities on SSI	12
Medicaid Buy-In Programs	17

Protecting Health Coverage For People With Disabilities Who Work

Editors' Note: The information presented in this Section regarding SSDI and SSI work incentives is adapted or reprinted from material from the Social Security Administration's 2004 Red Book, available online at <http://www.ssa.gov/work/ResourcesToolkit/redbook.html>. Similarly, information presented on Medicare and/or Medicaid coverage options for employed individuals with disabilities is based on information that is included in the Red Book or posted on the Centers on Medicare and Medicaid Services website at <http://www.cms.hhs.gov/twwiia/factsh01.asp>. Additionally, for background information on Medicare and Medicaid coverage, see the companion document to this publication, *Navigating Medicare and Medicaid, 2005: A Resource Guide for People with Disabilities, Their Families, and Their Advocates*, available from the Kaiser Family Foundation at www.kff.org.

Few groups of adult Americans have higher rates of unemployment or lower rates of participation in the labor force than people with disabilities. While barriers to employment exist in a number of areas, protecting access to health care has historically been a significant barrier that prevented people with disabilities who would like to work from seeking employment.

The program rules for Medicare and Medicaid with regard to work are complex. The standard of disability from which eligibility for both Medicare and Medicaid is determined is tied to the inability to be engaged in substantial gainful activity in the national economy—a substantial barrier that prevents people with disabilities enrolled in Medicare or Medicaid from working. However, there have been longstanding policies of both Medicare and Medicaid that permit employment in certain circumstances. Recently, Congress has enacted additional legislation to remove more of the disincentives to work and to make it easier for people with disabilities to work and to continue to receive health care coverage and long-term services and supports through Medicare and Medicaid—many of these services are frequently unavailable through private, employer-sponsored health insurance programs.

This guide will explain many of the complex issues and policies that can be used to help people with disabilities to keep their health coverage and seek employment.

Can a person with a disability on Medicare and/or Medicaid be employed?

Yes, under certain conditions.

Until fairly recently, federal law has made it extremely difficult for individuals with disabilities to be competitively employed and still retain vital Medicare- or Medicaid-funded benefits that often makes work possible. To correct this flaw, Congress has added several “work incentives” to the Social Security Act that enables you to:

- Receive education, training and rehabilitation to start a new line of work;
- Keep some or all of SSDI or SSI cash benefits while working;
- Obtain or retain vital Medicaid coverage while working; and,
- Retain existing Medicare coverage while working.

Do all work incentives apply to everyone on SSDI and SSI?

No. Some work incentives apply to people with disabilities regardless of the particular cash benefit they receive—SSDI or SSI. Certain incentives only apply to those receiving SSDI, while others can only be used others persons receiving SSI.

Generally speaking, the incentives that will be discussed are meant to help employed individuals with disabilities do one of three things:

- a. Retain some or all of their SSDI or SSI cash benefits;
- b. Obtain rehabilitation, training and employment support; and/or
- c. Retain vital health coverage through Medicare and/or Medicaid.

Though these various types of incentives serve fairly distinct purposes, it is important to keep in mind that they also are interrelated and interactive with each other. For example, to retain Medicaid coverage while working you must keep your earnings below a certain level. Some people with disabilities are able to do this by using work incentives that enable one to deduct certain disability work expenses from your earnings. This, in turn, reduces the amount of income that a state counts to determine whether they are eligible for Medicaid.

WORK-RELATED INCENTIVES FOR PERSONS ON EITHER SSDI OR SSI

Work Incentives for Persons Receiving SSDI or SSI Payments

Individuals with disabilities can use one or more of the following work incentives to work on a part-time or full-time basis if they are receiving SSDI or SSI payments.

TRAINING AND REHABILITATION INCENTIVES

- Continued Payments Under a Vocational Rehabilitation Program
- The Ticket to Work Program

EARNINGS-RELATED INCENTIVES

- Retaining Earned Income Up to a Certain Dollar Amount, also known as “earning up to the substantial gainful activity limit”
- Impairment Related Work Expenses
- Subsidies and Special Conditions
- Unincurred Business Expenses
- Unsuccessful Work Attempts
- Establishing a Plan for Achieving Self Sufficiency (PASS plan)

HEALTH COVERAGE INCENTIVES

- Obtaining or Retaining Medicaid Coverage While Working

Training and Rehabilitation Incentives

What are continued payments under a vocational rehabilitation program?

If you medically recover and no longer meet SSA’s definition of disability, your monthly SSDI and/or SSI payments can continue if you are actively participating in an approved vocational rehabilitation (VR) program. To accept you, such a program must have the expectation that you will become self-supporting.

Your monthly SSDI and/or SSI Payments can continue until you complete the program. Examples of “approved VR programs” include those provided by your State Rehabilitation Agency and Ticket to Work programs.

What is the Ticket to Work?

It is a “ticket” or voucher that someone on SSDI or SSI may request and use to obtain vocational rehabilitation, employment or other support services from an approved provider of their choice to help them go to work and achieve their employment goals.

You can get more information on the Ticket to Work program by calling Maximus, Inc., the ticket program manager, at **1-866-968-7842 toll-free** (TTY **1-866-833-2967**). Or you can call the toll-free number, **1-800-772-1213** (TTY number **1-800-325-0778**) and ask for the publication, *Your Ticket To Work* (Publication No. 05-10061).

Earnings-Related Incentives

What is meant by the substantial gainful activity (SGA) limit?

The substantial gainful activity (SGA) requirements apply to those on SSDI and/or SSI. Simply put, this means that to receive SSDI the individual is only able to work—and, therefore, earn—a limited amount each month.

In 2005, most Social Security Disability beneficiaries can earn \$830 per month and remain eligible for benefits. By law, blind persons can earn a somewhat higher SGA amount than those with other disabilities. In 2005, the amount is \$1,380/month for persons who are blind.

In this way, therefore, the SGA limit itself can be seen both as a “work incentive” in itself—to work at least up to a certain income threshold—and as a disincentive to work in ways that exceed the SGA limits. It also means that in order to earn income that exceeds the SGA limit, a person on SSDI or SSI may need to take advantage of one or more of the additional incentives that are discussed below.

What are impairment-related work expenses (IRWEs)?

These are the cost of certain impairment-related work expenses (IRWEs) that someone incurs in order to work. Examples of impairment-related work expenses are things such as wheelchairs, personal assistance you pay for, certain transportation costs and specialized work-related equipment. SSA deducts these from your earnings if it decides you are performing substantial work. Thus, if you’re a person who has a disability with monthly earnings of \$1,300 and monthly personal assistance costs of \$500, SSA regards the \$500 as an

impairment-related work expense and deducts it making your monthly earnings \$800 and your earnings are below SGA.

Special application to SSI: SSA also excludes IRWEs from your earned income when it figures your monthly SSI payment amount.

What are “subsidies and special conditions”?

These refer to support you receive on the job that could result in your receiving more pay than the actual value of the services you performed. These can include:

- You receive more supervision than other workers doing the same or a similar job for the same pay.
- You have fewer or simpler tasks to complete than other workers who are doing the same job for the same pay.
- You have a job coach or mentor who helps you perform some of your work

As with IRWEs, SSA deducts the value of such subsidies and special conditions from your earnings when it decides whether you are working at the SGA level.

Special application to SSI: Unlike with IRWEs, however, SSA does not deduct subsidies or special conditions when it figures your SSI payment amount.

What are unincurred business expenses?

These are self-employment business support that someone provides to you at no cost. In deciding whether you are working at the SGA level, SSA deducts such expenses from your net earnings from self-employment. Examples of unincurred business expenses are (1) a vocational rehabilitation agency gives you a computer that is used in a graphic arts business; and (2) a friend works for your business as unpaid help. One way to identify an unincurred business expense is that the Internal Revenue Service (IRS) does not allow you to deduct the cost for income tax purposes because someone gave you the item or services.

Special application to SSI: SSA does not deduct such unincurred business expenses when it figures your SSI payment amount.

What are unsuccessful work attempts?

An unsuccessful work attempt is an effort by a person with a disability to do substantial work that either stopped or produced earnings below the SGA level after 6 months or less because of:

- The individual’s disabling condition, or
- Elimination of the special services or assistance that the individual needed in order to work.

Special application to SSI: SSA does not consider such attempts as a factor in determining your SSI payment.

What is a Plan for Achieving Self Support (a PASS plan)?

A plan for achieving self support is a document that allows you to use your income or things you own to reach a work goal and still maintain your eligibility for SSI and/or Medicaid.

PASS plans are typically used by SSI beneficiaries, but there are some ways that SSDI beneficiaries can use one both to set aside funds to achieve an employment goal and become eligible for Medicaid as well. For more information on how to create and make a PASS plan work for you see pages 14–15.

SSA has teams that can answer questions on such plans called PASS Cadres. For the location nearest you, go to:

<http://www.ssa.gov/work/ResourcesToolkit/cadre.html>. Or, you can call SSA at call 1-800-772-1213 from anywhere in the U.S.

Health Coverage Incentives

How can people with disabilities obtain or retain Medicaid coverage while working?

Depending on what state you live in, Medicaid can offer people with disabilities access to the wide range of health care, equipment and supportive services they need to live and work in their communities. There are a variety of ways that people with disabilities can retain or obtain Medicaid coverage when they are employed by meeting certain requirements. It is important to point out this applies to employed individuals with disabilities who fall into one of the following categories:

- Certain persons with disabilities who are eligible for Medicaid only or are dually eligible for Medicare and Medicaid
- Certain persons with disabilities who are eligible for Medicare only; and,
- Certain other employed individuals with disabilities who can “buy into” Medicaid in their state even when their earnings and assets would otherwise make you ineligible.

About 2 million working age people with disabilities receive both SSDI and SSI and are dually eligible for Medicare and Medicaid as well. If you are one of these individuals, you may be able to use a combination of one or more of the SSDI and SSI work incentives that will be described in the following sections. The best way to know if you are dually eligible for Medicare and Medicaid is to look at your Medicaid card. If you have both Medicare and Medicaid, the state will make some notation on your Medicaid card so that providers for services can bill appropriately. If you receive both SSDI and SSI, then you are eligible for both Medicare and Medicaid.

ADDITIONAL WORK INCENTIVES AVAILABLE TO PEOPLE WITH DISABILITIES ON SSDI

Additional Work Incentives for SSDI Beneficiaries

SSDI recipients may be able to take advantage of one or more of the following incentives:

EARNING RELATED INCENTIVES

- Trial Work Period
- Extended Period of Eligibility
- Establishing a Plan for Achieving Self Sufficiency (PASS plan)

HEALTH COVERAGE INCENTIVES

- Continuation of Medicare Coverage
- Medicare for People With Disabilities Who Work
- Obtaining Medicaid coverage while employed

Earnings-Related Incentives

What is a trial work period?

A trial work period allows you to test your ability to work for 9 months. During this time you receive your full SSDI payment regardless of how much you earn as long as you continue to be disabled. The 9 months does not need to be consecutive. It will last until you accumulate 9 months within a rolling 60-month period. Certain other rules apply.

What is the extended period of eligibility?

If your disability benefits stop after successfully completing the trial work period because you worked at the substantial gainful activity (SGA) level, SSA can automatically reinstate your benefits without a new application for any months in which your earnings drop below the SGA level.

So, for example, if after you complete the trial work period you may need to spend more on personal assistance or other impairment related work expenses for a particular month. This, in turn, may reduce our earnings below the SGA level for that month. SSA will provide you a SSDI check for that month.

This reinstatement period lasts for 36 consecutive months following the end of the trial work period. You must continue to have a disabling impairment in addition to having earnings below the SGA level for that month.

Health Coverage Incentives

Can someone on SSDI continue Medicare coverage when they return to work?

Yes. If you go off SSDI when you return to work you can continue Medicare coverage for 93 months after completing the 9 months work period. Combined with the trial work period, therefore, you can receive Medicare Part A coverage premium-free for a total of 8 and half years. You can also continue to pay for Part B during this same time.

Most people who return to work after the trial work period will automatically retain Medicare in this manner if they have completed the initial 24 waiting period or were otherwise exempted from the waiting period requirement.

Persons who complete their trial work period before the 24 month Medicare waiting period runs out can still take advantage of this incentive. But, they must wait for the full 24 months to elapse before such Medicare coverage goes into effect. Hence, if you begin your trial work period at the beginning of the sixth month after you started to receive your SSDI and ends 9 months later that means you will be 15 months into the 24 month Medicare waiting period, you will have to wait another 9 month for coverage to begin. Alternatively, if you begin your trial work period at the start of month 15 and it ends 9 months later, the waiting period will be satisfied and your Medicare coverage will start at this point. If you begin working before your Medicare benefits start, you should take care to maintain your SSDI benefits if you earn more than SGA. If you believe that you will earn more than SGA, we urge you to explore using work incentives such as the impairment-related work expenses (IRWE) or plan for achieving self-sufficiency (PASS) to get your countable earnings below the SGA standard. If you have questions, you should contact your local Benefits Planning, Assistance and Outreach (BPAO) program. To locate the BPAO project nearest you, call 1-866-968-7842 or for the hearing impaired, call 1-866-833-2967 (TTY/TDD). You can also find a list with contact information on the Social Security Administration's website at www.socialsecurity.gov/work/ServiceProviders/BPAODirectory.html.

People with disabilities that have Medigap who return to work and have employee-based insurance can request that such Medigap coverage and premiums be suspended. The Ticket to Work Act also requires reinstatement of a Medigap policy if group coverage is lost provided that the person gives notice of loss of employer coverage within 90 days.

Can people with disabilities who work buy into Medicare once their eight and a half years of premium-free coverage runs out?

Yes. After premium-free Medicare coverage ends due to work, some people who have returned to work may buy continued Medicare coverage by paying the full premium, as long as they remain medically disabled.

Will people with disabilities who return to work be eligible for Part D?

Eligibility for the Medicare Part D prescription drug benefit (that begins on January 1, 2006) is not tied to an individual's work status. The Part D benefit is available to individuals who are entitled to Medicare Part coverage and/or enrolled in the Medicare Part B program.

Can people with disabilities on SSDI who return to work buy into Medicaid?

As previously noted, there are ways that people with disabilities on SSDI who return to work can receive Medicaid coverage by meeting certain requirements. These will be in the sections on Medicaid below.

ADDITIONAL WORK INCENTIVES AVAILABLE TO PEOPLE WITH DISABILITIES ON SSI

Additional Work Incentives for SSI Beneficiaries

SSI recipients may be able to take advantage of one or more of the following incentives:

EARNING RELATED INCENTIVES

- Student Earned Income Exclusion
- Earned Income Exclusion
- Blind Work Expenses
- Plan for Achieving Self-Support
- Property Essential to Self-Support
- Special SSI Payments for People Who Work

HEALTH COVERAGE INCENTIVES

- Continued Medicaid eligibility under Section 1619 (a)
- Continued Medicaid eligibility under Section 1619 (b)
- Special benefits for people eligible under Section 1619 (a) or (b) who enter a medical treatment facility
- Medicaid Buy-In Opportunities

REINSTATEMENT OF SSI CASH BENEFITS

- Reinstating Eligibility Without a New Application

Earnings-Related Incentives

What are earned income exclusions for persons on SSI?

In general, an earned income exclusion allows an individual who qualifies for SSI to earn a certain amount of income and have it “excluded” from being counted against or diminish their cash benefit. There are two types of exclusions that can apply to those on SSI—one that applies to students and the other that applies to all others on the program.

What is the student earned income exclusion?

It allows a student, under age 22, not married nor head-of-household and regularly attending school to exclude up to \$1,410 monthly and the \$5,670 in gross earnings in 2005. These limits are adjusted annually based on any increases in the cost-of-living index. Someone is considered to be a student for this purpose if he or she is:

- In grades 7–12, for at least 12 hours a week; or
- In a college or university, for at least 8 hours a week; or
- In a training course to prepare for employment, for at least 12 hours a week (15 hours a week if the course involves shop practice); or
- In school for less time than indicated above for reasons beyond the student's control, such as illness.

A person who is homebound because of a disability may be a student when he or she studies a course or courses given by a school (grades 7–12), college, university, or government agency; and has a home visitor or tutor from school who directs the study or training.

Students with disabilities on SSI who want to earn more than \$5,670 a year can do so but will have the general earned income exclusion applied to them as described below.

What is the earned income exclusion that applies to all others on SSI?

If your only income besides SSI is the money you make from your job, then SSA does not count the first \$85 of your monthly earnings. After this, SSA deducts from your SSI payments 50 cents of every dollar you earn after the \$85 deduction. So, for example, if the SSI benefit is \$500 a month in your State you can earn up to \$1085 per month before the cash benefits are totally suspended. You may be able to earn even more before the exclusion completely kicks in if you incur impairment-related work expenses or if you can establish a Plan for Achieving Self Sufficiency (PASS plan) with SSA's approval.

Moreover, your payments will automatically start again for any month your income drops to less than the SSI limits. You just need to tell SSA if your earnings are reduced, or if you stop working.

What are blind working expenses?

These are expenses paid by a blind person on SSI out of their earned income for goods or services the individual uses to stay employed. SSA does not count when it determines SSI eligibility and payment amount. The expenses do not need to be related only to blindness. Such costs can include those paid for by earned income to pay for anything job related such as income taxes, meals consumed during work hours, transportation costs or guide dog expenses.

What is a Plan for Achieving Self-Support (PASS plan)?

A PASS plan is a written document approved by SSA that enables a person with a disability or blindness to set aside income or resources to reach a work goal. For example, a person could set aside money for an educational or training program or to start a business. Any person who is blind or disabled and has income or resources that cause either SSI ineligibility or a reduced SSI benefit may request a plan.

This includes a person on SSDI who may need to obtain Medicaid in order to return to work.

How does a PASS plan affect my SSI benefit?

Money that you save under an approved plan will not count against your resource limit of \$2,000 for an individual or \$3,000 for a couple. SSA does not count income that is set aside under an approved plan when it decides how much SSI a person receives. This means that a person who sets aside income under a plan may receive a higher SSI benefit than if he or she did not have a plan.

It also means that a person who would not otherwise be eligible for SSI benefits can set aside income and resources under an approved plan to become eligible for SSI benefits. Again, this could include a person on SSDI who may need to obtain Medicaid in order to return to work.

How can someone set up a PASS plan?

People with disabilities who want to work should consider developing a PASS plan. If someone needs help doing so they may want to get assistance from a vocational counselor or a relative. SSA can also help you with a plan or refer you to someone who can help you write a plan. You can get a copy of the PASS application Form SSA-545-BK from your local Social Security office or online at www.socialsecurity.gov/online/ssa-545.

SSA also has contracts with different organizations to assist beneficiaries with disabilities who want to work. For more information, go to the SSA work site at: www.socialsecurity.gov/work/ServiceProviders/providers.html.

What is property essential to self-support?

It is anything you own and that you make use of to earn income. SSA does not count resources that you need to be self-supporting when it decides if you are eligible for SSI. This includes property such as tools or equipment that you use for work. Or, if you have a trade or business, property such as inventory.

How does someone qualify for continued Medicaid eligibility under Section 1619 (b)?

Section 1619 (b) is the provision in the Social Security Act that enables those on SSI to retain Medicaid and earn up to a certain income level as set by their state. In most states, for your Medicaid to continue, you must:

- Need it in order to work;
- Be unable to afford similar medical coverage without SSI;
- Continue to have a disabling condition; and
- Meet all other SSI eligibility requirements.

If you qualify for Medicaid under these rules, SSA will review your case from time to time to see if you are still disabled or blind and still earn less than your state's allowable level. In general, the amount someone can earn and retain Medicaid using Section 1619(b) ranges from \$18,000 in some states to the mid to high 30,000's in other states. To learn what the earnings threshold is in your state, contact your local SSA office. Five states (California, Iowa, Massachusetts, Nevada and Oregon) have set different thresholds for blind persons and individuals with other disabilities.

If someone exceeds the Section 1619(b) earnings threshold must they automatically lose their Medicaid eligibility?

No. Anyone who is taking advantage of Section 1619(b) to retain Medicaid to continue to work should immediately contact their local SSA office if this becomes a problem. This is because if a SSI beneficiary has gross earnings higher than the threshold amount for his/her State, SSA can figure an individual threshold amount if that person has:

- Impairment-related work expenses; or
- Blind work expenses; or
- A plan for achieving self-support; or
- Personal attendant whose fees are publicly funded; or
- Medical expenses above the average State amount.

Finally, it should be noted that a person using Section 1619 (b) can receive a SSI cash benefit for up to 2 months while in a Medicaid facility or a public medical or psychiatric facility.

Under federal law, states have the option of creating Medicaid buy-in programs that enable employed individuals with disabilities who make more than what is allowed under Section 1619(b) to obtain Medicaid coverage at a low or no cost. A state has 3 distinct ways that it can create and offer a Medicaid buy-in under two separate federal laws—the Balanced Budget Act (the BBA) and Ticket to Work and Work Incentives Improvement Act (TWWIA). In brief, these provisions provide for the following:

The BBA Medicaid Buy-In—Allows a state to offer Medicaid coverage to any employed person with a disability who has a net family income below 250 percent of the Federal poverty level for a family of the size involved.

TWWIA Medicaid Buy-In Provisions—TWWIA allows a state to offer Medicaid coverage to individuals who fall into one of the following groups:

(1) Basic Coverage Group. States have the option to offer Medicaid to working individuals who are at least 16 but less than 65 years of age who, except for their income and resource levels, are eligible to receive SSI. States are free to establish their own income and resource standards. Individuals who have never received SSI benefits can be eligible.

(2) Medical Improvement Group. States have the option to offer Medicaid to employed individuals with a medically improved disability who lose Medicaid eligibility under the group described above because they no longer meet the SSI definition of disability.

States offering coverage to the second group must also cover the first group. States may impose premiums or other cost-sharing charges on a sliding scale based on income for individuals eligible for either of the new eligibility groups.

As of September 2004, a total of 25 states offered a Medicaid buy-in to working age people with disabilities who are eligible for coverage under one or more of the

3 options just described. For information about eligibility policies in specific states, go to <http://www.cms.hhs.gov/twwiia/statemap.asp>. If you have determined that there is buy-in program in your state for which you may qualify, you should contact the Medicaid program in your state for more information.

What rules apply to states implementing the BBA eligibility group?

The following rules must be adhered to in each state that offers this form of Medicaid buy-in:

- Family Income Standard—Net family income below 250 percent of the Federal poverty level for a family of the size involved.
- Except for earned income (which is completely disregarded) the individual must meet all SSI eligibility criteria, including:
 - Unearned income not exceeding the SSI income standard (currently \$599 a month for an individual; \$889 for a couple in 2005).
 - Resources not exceeding SSI resource standard (\$2,000 for an individual; \$3,000 for a couple in 2005).
 - Disabled as defined under the SSI program.
 - SSI income and resource methodologies are used to determine eligibility.

Can a state impose additional requirements?

Yes. A state with a BBA Medicaid buy-in can also:

- Use more liberal income and resource methodologies than are typically used by SSI.
- Use more restrictive eligibility criteria than are used by SSI (209(b) States).
- Require payment of such premiums or other cost-sharing charges, on a sliding scale based on income, as the State may determine.

What are the basic Medicaid buy-in provisions in TWWIIA?

These provisions were approved by Congress to build and expand on the buy-in option available under the BBA. TWWIIA created two additional optional categorically needy Medicaid buy-in eligibility groups: (1) the Basic Coverage Group; and (2) the Medical Improvement Group.

Who qualifies for coverage under the basic coverage group?

The Basic Coverage Group is similar to the BBA group, however states can establish their own income and resource standards (or choose to not have any

income or resource standards), and there is an age limit (at least 16 but not more than 64 years of age).

What rules apply to states implementing the TWWIA basic coverage group?

States implementing this provision must ensure that:

- Individuals covered must be between 16 and 64 years of age.
- Individuals covered must meet the SSI definition of disability.
- Earned income is not automatically disregarded.
- No federally required income and resource standards.
- If States establish income and resource standards, SSI income and resource methodologies are used to determine eligibility.

Who qualifies for coverage as part of the medical improvement group?

Under this option, a state can offer Medicaid to employed individuals with a medically improved disability who lose Medicaid eligibility under the group described above because they no longer meet the SSI definition of disability. It is important to note that States offering coverage to the second group must also cover the first group.

What rules apply to states implementing the medical improvement group?

States implementing this provision must ensure that:

- Individuals covered must be between 16 and 64 years of age.
- Individual covered must have a medically improved disability.
- Individual covered must have been eligible under the Basic Coverage Group but lost that eligibility because his or her medical condition has improved to the point where it is determined at the time of a regularly scheduled continuing disability review that he or she is no longer disabled as SSI defines the term.
- Earned income is not automatically disregarded.
- No federally required income and resource standards.
- If States establish income and resource standards, SSI income and resource methodologies are used to determine eligibility.

Can a state that has a TWWIIA Medicaid buy-in impose additional requirements?

Yes, it can:

- Establish their own income and resource standards, or have no income and resource standards if they choose.
- Use more liberal income and resource methodologies than are typically used by SSI.
- Use more restrictive eligibility criteria than are used by SSI (209(b) States).
- Require payment of such premiums or other cost-sharing charges, on a sliding scale based on income, as the State may determine.
- Impose premiums or other cost-sharing charges on a sliding scale based on income for individuals eligible for either of the new eligibility groups.

To obtain information on TWWIIA Medicaid buy-in requirements that have been set by your state, you can contact your state Medicaid agency (see the table on the next page or consult the Centers on Medicare and Medicaid Services website at <http://www.cms.hhs.gov/twwiia/statemap.asp>).

Can a person resume receiving SSI cash benefits if you are not able to work any longer?

Yes. If you have not been eligible for an SSI benefit for 12 months or less, you do not have to file a new application to reinstate your SSI cash payments or Medicaid coverage. If you stop working after more than 12 months you will have to apply for the benefits again but provided that your disability has not improved regaining them should not be an issue.

How to Contact Medicaid in Your State			
	Telephone	TTY	Toll-Free*
Alabama	334-242-5000		800-362-1504
Alaska	907-465-3030		
Arkansas	501-682-8292		800-482-5431
Arizona	602-417-4000	602-417-4191	800-962-6690
California	916-445-4171	916-445-0553	
Colorado	303-866-2993	303-866-3883	800-221-3943
Connecticut	860-424-4908		800-842-1508
Delaware	302-255-9040		
District of Columbia	202-442-5999		
Florida	888-419-3456		
Georgia	770-570-3300		866-322-4260
Hawaii	808-524-3370	808-692-7182	800-316-8005
Idaho	208-334-5500	208-332-7205	800-685-3757
Illinois		800-526-5812	800-226-0768
Indiana	317-233-4455		800-889-9949
Iowa	515-327-5121		800-338-8366
Kansas	785-274-4200	800-766-9012	800-766-9012
Kentucky	502-564-4321		800-635-2570
Louisiana	225-342-9500		
Maine	207-621-0087	207-287-1828	800-977-6740
Maryland	410-767-5800		800-492-5231
Massachusetts	617-628-4141		800-841-2900
Michigan	517-373-3500	517-373-3573	
Minnesota	651-297-3933	651-296-5705	
Mississippi	601-359-6050		800-880-5920
Missouri	573-751-4815		800-392-2161
Montana	406-444-4540		800-362-8312
Nebraska	402-471-3121	402-471-9570	800-430-3244
Nevada	775-684-7200		
New Hampshire	603-271-4238		
New Jersey	609-588-2600		800-792-9745
New Mexico	505-827-3100	505-827-3184	888-997-2583
New York	518-747-8887		800-541-2831
North Carolina	919-857-4011	877-733-4851	800-662-7030
North Dakota	701-328-2321	701-328-8950	800-755-2604
Ohio	614-728-3288		800-324-8680
Oklahoma	405-522-7171	405-522-7179	800-522-0310
Oregon	503-945-5772	503-945-5895	800-527-5772
Pennsylvania	717-787-1870	717-705-7103	800-692-7462
Rhode Island	401-462-5300	401-462-3363	
South Carolina	803-898-2500		
South Dakota	605-773-3495		800-452-7691
Tennessee	615-741-019	615-313-9240	800-669-1851
Texas	512-424-6500		888-834-7406
Utah	801-538-6155		800-662-9651
Vermont	802-241-2800	802-241-1282	800-250-8427
Virginia	804-786-7933		
Washington	800-562-6188		800-562-3022
West Virginia	304-558-1700		
Wisconsin	608-221-5720	608-267-7371	800-362-3002
Wyoming	307-777-7531	307-777-5578	

*For many states, toll-free numbers work in-state only.



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