Quick Reference Guide
“I can’t afford to lose my medical benefits if I work.”

Social Security and Health Care
The Social Security Administration (SSA) manages two programs that provide benefits based on disability or blindness: the Social Security Disability Insurance (SSDI) program and the Supplemental Security Income (SSI) program. To meet SSA’s definition of disability, an individual must not be able to engage in any substantial gainful activity (SGA) because of a medically-determinable physical or mental impairment(s). Substantial Gainful Activity changes each year. To learn more about SGA, go to ssa.gov/oact/cola/sga.html.

SSDI provides benefits to disabled or blind persons who are “insured” by workers’ contributions to the Social Security trust fund based on earnings as required by the Federal Insurance Contributions Act. The SSI program makes cash assistance payments to aged, blind and persons with disabilities who have limited income, resources and work histories. The federal government funds SSI from general tax revenues. When an individual receives SSI, the healthcare they receive is Medicaid. For an individual that receives SSDI, the healthcare they receive is Medicare. For most people, entitlement begins after a two-year waiting period.

One of SSA’s highest priorities is to support the efforts of beneficiaries who want to work by developing services to help them reach their employment goals. The SSDI/SSI programs include numerous employment support provisions referred to as work incentives.

Medicaid & SSI
Medicaid is a jointly funded, federal-state health insurance program for low-income people. It covers children, the aged, blind and/or people with disabilities and others who are eligible to receive federally assisted income payments.

Most states provide Medicaid eligibility to people eligible for SSI benefits. In these states, the SSI application is also the Medicaid application. Medicaid eligibility starts the same month as SSI eligibility. Other regions use the same rules to decide eligibility for Medicaid as SSA.

For more information about this Reference Guide, please send an email to ask@ndi-inc.org.
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uses for SSI, but require the filing of a separate application. Some states use their own eligibility rules for Medicaid, which are different from SSA’s SSI rules.

SSA & Medicaid Information: bit.ly/2vxzm8G

One of the biggest concerns that SSI beneficiaries have about going to work is the possibility of losing Medicaid. Section 1619(b) of the Social Security Act provides critical protection for these beneficiaries.

To qualify for continuing Medicaid coverage, a person must:

• Have been eligible for an SSI cash payment for at least one month;
• Still meet the disability requirement;
• Still meet all other non-disability SSI requirements;
• Need Medicaid benefits to continue to work; and
• Have gross earnings that are insufficient to replace SSI, Medicaid and publicly-funded attendant care services.

This means that SSI beneficiaries who have earnings too high for a SSI cash payment may be eligible for Medicaid if they meet the above requirements. SSA uses a threshold amount to measure whether a person’s earnings are high enough to replace his/her SSI and Medicaid benefits. A WIPA program can assist beneficiaries to determine eligibility for 1619(b), as well as to make informed decisions regarding how increased work earnings may impact cash/medical benefits.

To learn more about Medicaid 1619(b), go to bit.ly/2vxzHZ0.

Tools and Resources from Hands on Banking®

Healthcare: bit.ly/3ffopCn

Work Incentive Planning & Assistance (WIPA)

WIPA projects are community-based organizations that provide SSI/SSDI beneficiaries with free access to work incentives planning and assistance. A WIPA project can help a beneficiary understand employment supports to help make informed choices about work.

Each WIPA project has counselors called Community Work Incentives Coordinators (CWIC) who provide work incentives planning and assistance. Given the array and complexity of work incentives, many SSI/SSDI beneficiaries remain unaware of how to apply for them and often assume they can only work part-time.

Locate WIPA organizations nationwide: bit.ly/3szWuQu

MEDICAID COVERAGE MAY CONTINUE EVEN IF A RECIPIENT’S EARNINGS BECOME TOO HIGH FOR A SSI CASH PAYMENT.

Medicaid Protection for Working People with Disabilities

The Center for Medicare and Medicaid Services (CMS) recognizes that employment is an essential part of life for all people. Employment provides us all with a sense of worth and purpose. Work enables us to contribute to our community and enhances our overall well-being. All individuals, regardless of disability and age, should have access to pre-vocational services, education and training opportunities that build on strengths and interests. Whether through career planning, job development, job training and/or job supports, each individual should have the opportunity to contribute to the labor market.

The Medicaid Buy-In program is an optional state Medicaid benefit group for workers with disabilities who have earnings in excess of traditional Medicaid rules. Individuals with disabilities, who would be ineligible for Medicaid because of earnings, can work and access the services and supports they need. Ultimately, it means workers with disabilities do not need to choose between healthcare and work.

Most states allow individuals to buy Medicaid if they have a disability and are no longer entitled to free Medicaid because they returned to work.

To learn more, visit bit.ly/2FgckHg.

Provided to you by National Disability Institute nationaldisabilityinstitute.org.