

Autism Insurance Resource Center

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Medicare and Health Insurance for Disabled Adults in Massachusetts

Medicare primarily serves senior citizens (65+). However, a person under age 65 becomes eligible for Medicare 24 months after they begin to receive Social Security Disability Insurance (SSDI) benefits. This is an overview of some questions disabled adults (under age 65) may face when they become eligible for Medicare. ***It is not intended to provide comprehensive information about Medicare. (Links to general Medicare resources are at the end of this document.)***

What is Medicare?

Medicare is a federal health insurance program. Medicare coverage is divided into three primary “parts”:

Part A – Hospital insurance

Part B – Medical insurance (i.e., outpatient care)

Part D – Prescription drug coverage

(Part C, refers to Medicare Advantage plans, an “all in one” alternative to Original Medicare. These “bundled” plans include Part A, Part B, and usually Part D.)

Everyone covered by Medicare receives Part A. Most people also take Part B and Part D. If the person has MassHealth (Medicaid as administered by the Commonwealth of Massachusetts), then MassHealth will pay the monthly Part B premium (\$170.10/month in 2022) and there will be no out-of-pocket cost for Part B coverage. MassHealth members are also eligible for Part D prescription drug coverage with no premiums or deductibles and with minimal co-pays.

Personalized assistance regarding Medicare enrollment and benefits is available through the SHINE (Serving the Health Insurance Needs of Everyone) Program. The SHINE website is <https://shinema.org>; the toll-free number is 1-800-243-4636.

Social Security – SSI and SSDI

SSI (Supplemental Security Income) provides financial help to disabled adults and children who have limited income and assets. SSI limits assets to \$2,000. Many disabled people apply for SSI as an individual after their 18th birthday, when a family's assets won't disqualify them. When a person is approved for SSI, they are automatically enrolled in MassHealth Standard. (Note: They do not have to drop other insurance.)

What is SSDI? How does it differ from SSI?

SSDI (Social Security Disability Insurance) is a benefit paid to a disabled person based on their work record or the work record of a parent who begins taking Social Security benefits (or is deceased). To get SSDI based on a parent's work record, the adult child must have a disability that began before age 22. Unlike with SSI, there are no income or asset limitations associated with SSDI eligibility. For more information, see <https://www.ssa.gov/pubs/EN-05-10026.pdf>.

In many cases, the SSDI benefit is higher than what the individual was receiving from SSI. If so, SSDI replaces SSI. If not, the individual will receive a combination of SSDI and SSI.

After someone has been receiving SSDI for 24 months, they are automatically enrolled in Medicare.

When a person goes from SSI to SSDI, do they lose their MassHealth?

No, they will not lose MassHealth. But if the SSDI benefit is significantly more than they were receiving from SSI, they may be required to pay a small premium for their MassHealth.

When a disabled person gets Medicare, do they lose their MassHealth?

No! Many disabled adults have been covered by MassHealth for several years before they obtain Medicare eligibility. When Medicare is added, it takes over as the "primary" insurance (the one that pays first), but MassHealth coverage does not end, so long as the individual continues to meet all MassHealth eligibility criteria. Eligibility criteria are set by the state government and include income limits and in many cases an asset limit.

If MassHealth covers a prescription, service, or provider not covered by Medicare, MassHealth will pay, in its role as secondary insurer. MassHealth will also pay most of the Medicare out-of-pocket expenses (premiums, deductibles, and copays). If the disabled adult doesn't have MassHealth at the time he goes on Medicare, he may still apply for MassHealth.

What steps do I need to take with respect to MassHealth?

If the person is already covered by MassHealth, receipt of the Medicare card (usually a few months before Medicare begins) should trigger several actions (by the disabled adult or their authorized representative):

- Enroll the beneficiary in a Medicare Part D prescription drug plan (or in a Medicare Advantage Plan that includes Part D).
- Keep an eye out for letters from MassHealth and Medicare that may contain important information. MassHealth may send a letter asking the covered person (or their representative) to complete an eligibility review form, if MassHealth notes changes that could possibly affect the person's eligibility.

What happens when a disabled adult who is covered by a parent's employer-sponsored private insurance starts to receive Medicare?

In most cases, Medicare becomes the primary insurance, meaning it pays claims before the private insurance. MassHealth always pays last. Inform your private insurance provider that the disabled adult has Medicare coverage and ask about how that provider coordinates coverage with Medicare.

Note: Unlike many private insurance plans, Medicare does not pay for autism therapies, such as ABA; neither does MassHealth, for persons over age 21. However, when the disabled adult also has private insurance, that insurance may cover gaps in Medicare coverage (such as ABA). See AIRC's Fact Sheet, "Options after Age 26", for information on keeping an adult child on employer-sponsored health insurance.

How does Medicare affect MassHealth Premium Assistance?

If a person is receiving Premium Assistance (offsetting the cost of private insurance), once they start receiving Medicare, MassHealth will no longer provide this benefit. Instead, MassHealth pays for certain costs associated with Medicare that would otherwise become out-of-pocket expenses for the disabled adult (for example, the Part B premium).

What is "OneCare"?

Massachusetts has created a program called "OneCare" as an option for people covered by both MassHealth and Medicare (referred to as "dual eligibles"). Think carefully about the person's specific needs when evaluating the advantages (e.g., managed care) and disadvantages (e.g., reduced choice of providers) of this program. ***OneCare is optional and may be declined.***

Resources:

Personalized Medicare and MassHealth counseling:

SHINE: <https://shinema.org/>; the toll-free number is 1-800-243-4636.

Medicare and MassHealth customer service lines:

Medicare: 1-800-MEDICARE

MassHealth: 1-800-841-2900

Preserving benefit eligibility when working:

Work Without Limits, <https://workwithoutlimits.org>

Dual Eligibility

“Dually Eligible Beneficiaries under Medicare and Medicaid”

https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/Medicare_Beneficiaries_Dual_Eligibles_At_a_Glance.pdf

Additional help navigating the health care benefit system

Health Care for All, <https://hcfama.org>

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