



## Medicare for Individuals Under Age 65 Webinar Series

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### **Webinar #1** **An Overview of Eligibility, Enrollment and Payment**

January 21, 2016

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## Medicare For Individuals Under Age 65: Eligibility, Enrollment and Payment

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**Part 1:** When Can an Individual Under 65 Get Medicare?

**Part 2:** What Are the Enrollment Steps?

**Part 3:** What Help May Be Available to Pay For Medicare?

**Part 4:** How Does Medicare Coordinate With Other Types of Coverage?

**Part 5:** When is Medicare Available After Eligibility Ends or If an Individual Returns to Work?

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Part 1:  
When Can an Individual Under Age 65  
Get Medicare?

When Can an Individual Under  
Age 65 Get Medicare?

- The General Rule
- Exceptions to the General Rule:
  - That allow more people under age 65 to get Medicare: Disabled widow(er)s, people with ESRD, government employees
  - That allow people under age 65 to get Medicare more quickly: Previously disabled, people with ESRD, people with ALS

## When Can an Individual Under Age 65 Get Medicare? The General Rule:

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1. An individual has been determined, under the Social Security or Railroad Retirement Acts, to meet the criteria for the program (SSDI/RRDB) based on their own work record.

AND

2. An individual has fulfilled a **29** month waiting period (not including a partial month) beginning from the SSA determined onset of the disability.

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## General Rule Example:

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- Mr. Hall applies for SSDI and SSA determines the onset date of his disability (the date he became unable to perform regular and continuous work activity) to be June 10, 2014.
- Mr. Hall's waiting period for benefit entitlement is five months after the 1<sup>st</sup> of the month in which he was found to be disabled (Jul-Aug-Sep-Oct-Nov) = Dec. 1, 2014.
- Mr. Hall's waiting period for Medicare is 24 additional months. His Medicare eligibility will be Dec. 1, 2016.

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Exceptions To The General Rule – Allowing More  
Individuals Under Age 65 to Be Eligible for Medicare:

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In This Section

- Disabled Widow(er)s
- Individuals With End Stage Renal Disease
- Government Workers Not “Insured” For Social Security Disability Insurance

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More Individuals Under Age 65 Who Are Eligible  
For Medicare: Disabled Widow(er)s

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- Reach age 50 [but if a widow(er) is over 60, s/he may file a Disabled Widow(er) Benefit claim for Medicare entitlement purposes only]
- Prove the relationship to the deceased insured worker
- Prove disability under the Act

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## More Individuals Under Age 65 Who Are Eligible For Medicare: Individuals With ESRD

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- Individuals of any age with ESRD
- Who receive a kidney transplant OR receive dialysis on a regular basis
- Apply for Part A (and are deemed enrolled in Part B unless coverage is refused)
- Meet one of three criteria:
  - “Insured” under one of the Acts, OR
  - Entitled to monthly Social Security or Railroad Annuity, OR
  - A spouse or dependent child of an insured or eligible person
- Eligibility usually begins after a 3 month waiting period

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## More Individuals Under Age 65 Who Are Eligible For Medicare: Individuals With ESRD - Example

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- Ms. Wall begins regular dialysis on April 20<sup>th</sup>. Medicare coverage (May-Jun-Jul) typically begins on August 1<sup>st</sup>
- **NOTE:** Entitlement for Medicare will be the entire qualifying period of the 3 month waiting period if:
  - Ms. Wall receives a transplant OR
  - Ms. Wall participates in a self-dialysis training program during the waiting period

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## More Individuals Under Age 65 Who Are Eligible For Medicare: Government Workers Not Insured For Social Security Disability Insurance

- Some public employees only pay Medicare taxes, not Social Security
- Once an individual has earned 40 Medicare quarters of coverage, he or she is eligible for premium free Medicare Part A

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## Exceptions to The General Rule: Individuals Who Have a Shorter Waiting Period

### In This Section

- Individuals Who Have Previously Been Found to be Disabled
- Individuals With ESRD
- Individuals With ALS

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## Individuals With a Shorter Waiting Period: People Who Have Been Previously Disabled

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- Months of a previous period of entitlement to disability benefits may count toward the 24 month Medicare waiting period if:
  - A prior period of entitlement ended no more than 5 years before the month of current onset, OR
  - A prior period of Disabled Widow(er) Benefits or Child Disability Benefits eligibility ended no more than 7 years before the month of current onset, OR
  - The current disabling impairment is the same as, or directly related to, the impairment which served as the basis of the disability
  - NOTE: A person does not have to be eligible for the same type of disability benefit for these rules to apply

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## Individuals With a Shorter Waiting Period: People With ESRD and People With ALS

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- ESRD – Medicare usually begins after a 3 month waiting period, with exceptions: transplant OR participation in a self-dialysis training program during the waiting period (in which case eligibility for Medicare will be the entire qualifying 3 month period)
- ALS – Medicare begins with entitlement to SSDI

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Part 2:  
What Are The Medicare Enrollment Steps  
For Individuals Under Age 65?

## Medicare Enrollment For Individuals Under Age 65

- An individual getting SSDI or Railroad benefit will be contacted a few months before he or she becomes eligible for Medicare.
- An individual will be automatically enrolled in Medicare Parts A and B (with the option of turning down Part B, since he or she must pay a premium).



## Medicare Enrollment For Individuals Under Age 65 Including:

- An individual who is getting SSDI or RRB
- A disabled widow(er) between 50 and 65 who has not applied for SSDI because he or she is already getting another kind of Social Security benefit
- Some government employees disabled before age 65
- An insured individual, spouse, or dependent child with ESRD
- An individual who had Medicare Part B in the past, but had dropped the coverage
- An individual who had turned down Part B when he or she became eligible for Part A

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## Medicare Enrollment For Those Who Initially Decline Part B

- Failure to enroll timely may result in a Part B late enrollment penalty (10% for every 12 months not enrolled)
- Timely enrollment periods:
  - Initial enrollment period (the 7<sup>th</sup> month period surrounding the notice of disability)
  - Special enrollment period (up to 8 months following separation from coverage based on current employment)
- General Enrollment period (Jan 1 – Mar 31, coverage that begins the next July 1)
- May be subject to enrollment penalty
- If a late penalty is incurred under age 65, it will be vacated when the individual turns 65 and the individual will receive a new IEP

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Part 3:  
What Help May be Available  
For Individuals Under Age 65  
to Pay For Medicare?

**Payment Assistance for Individuals Under  
Age 65: Medicare Savings Programs (MSPs)**

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- MSPs provide assistance with meeting some or all of the costs of Medicare premiums, deductibles, co-payments and co-insurance
- Based on Federal Poverty Level (updates each April 1<sup>st</sup>). States, territories and DC may alter MSP requirements, e.g. CT eliminated the resource (asset) test; DC raised the income eligibility for QMB from 100% to 300%
- The vast majority of states use the Federal Guidelines. States (and DC) with revised guidelines include: Alaska, Connecticut, DC, Hawaii, Maine, Minnesota, and Virginia

## Payment Assistance for Individuals Under Age 65: Medicare Savings Programs (MSPs)

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### MSPs:

- Qualified Medicare Beneficiary Program (QMB)
- Specified Low-Income Medicare Beneficiary Program (SLMB)
- Qualifying Individual Program (QI)
- Qualified Disabled and Working Individuals (QDWI)

LIS: Low-Income Subsidies

## MSP: Qualified Medicare Beneficiary Program (QMB)

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- Up to 100% of the Federal Poverty Level
- Pays all cost sharing (premiums, deductibles, co-insurance, copayments)
- Monthly income limits: \$1,001 (individual); \$1,348 (married) \*
- Resource limits: \$7,280 (individual); \$10,930 (married)\*

\*Subject to change April 1, 2016; limits may vary by state (DC)

## MSP: Specified Low-Income Qualified Medicare Beneficiary Program (SLMB)

- 100% to 120% of the Federal Poverty Level
- Helps pay for Part B premiums
- Individual must be eligible for Part B
- Monthly income limits: \$1,197 (individual); \$1,613 (married) \*
- Resource limits: \$7,280 (individual); \$10,930 (married)\*

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## MSP: Qualifying Individual Program (QI)

- 120% to 135% of the Federal Poverty Level
- Helps pay for Part B premiums
- Apply annually, priority to those previously receiving QI, no QI if Medicaid qualified
- Monthly income limits: \$1,345 (individual); \$1,813 (married) \*
- Resource limits: \$7,280 (individual); \$10,930 (married)\*

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## MSP: Qualified Disabled and Working Individual Program (QDWI)

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- Up to 200% of the Federal Poverty Level
- Helps pay for Part A premiums
- May qualify if the following apply:
  - A working disabled individual under age 65;
  - Lost premium-free Part A after going back to work;
  - Not getting state medical assistance
  - Meets income and resource limits required by the state
- Monthly income limits: \$1,962 (individual); \$2,655 (married) \*
- Resource limits: \$4,000 (individual); \$6,000 (married)\*

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## Low-Income Subsidy (LIS) For All or Most Part D Premium & Cost-Sharing

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- Automatically eligible if have Medicaid or a MSP
  - Auto-Enrolled to Part D LIS (also called “Extra Help”)
  - Retroactive to the date of MSP entitlement
- Also available for individuals on a sliding scale:
  - With income up to 150% of the Federal Poverty Level
  - With resources up to \$13,640; \$27,250 (married)\*

\*Subject to change April 1, 2016

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Part 4:  
How Does Medicare Coordinate  
With Other Types of Coverage  
For Individuals Who Are Under Age 65?

Ensuring The Proper Payment Order For  
Individuals Under Age 65

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1. An individual should provide all types of coverage information on his or her Initial Enrollment Questionnaire (IEQ)
2. If health coverage changes thereafter, an individual should tell Medicare, doctors, all providers
3. Confirm this information with the Benefits Coordination and Recovery Center (BCRC) at:  
1-855-798-2627 (TTY 1-855-797-2627)

NOTE: Medicare may make a conditional payment, even when it doesn't pay first

## Who Pays First For Individuals Under Age 65?

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- Generally
- COBRA
- ESRD
- Other: Accident victims with no fault or liability insurance, Worker's Compensation recipients, Veterans, TRICARE members, Federal Black Lung Program

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## Who Pays First? Generally

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- Entitled to Medicare and Medicaid?
  - Medicare pays first, Medicaid second
- Disabled and covered by a Large Group Health Plan (LGHP = 100+ employees), based on current employment (family member)?
  - LGHP pays first, Medicare second
- Disabled and covered by a Group Health Plan (GHP = or less than 100 employees), based on current employment (family member)?
  - Medicare pays first, GHP second

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## Who Pays First? COBRA and ESRD

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- Disabled and covered by COBRA?
  - Medicare pays first, COBRA pays second
- ESRD with a GHP or COBRA?
  - 1<sup>st</sup> 30 months of eligibility for Medicare
    - GHP or COBRA pays first, Medicare pays second
  - After 30 months of eligibility for Medicare
    - Medicare pays first, GHP or COBRA pays second

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## Who Pays First? Other

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- An accident victim with no fault or liability insurance coverage?
  - Insurance pays first for services related to the accident, Medicare pays second
  - Medicare pays first for non-accident related services.
- An individual with a Worker's Compensation illness or injury?
  - Worker's Compensation pays first for services related to the claim, Medicare pays second
  - Medicare pays first for non-claim related services
- A Veteran with Veteran's benefits? VA "authorized coverage" coordinates with Medicare coverage, neither pays twice
- TRICARE? Military hospitals & federal providers, TRICARE pays 1st
- Federal Black Lung Benefits? FBL, for related services, pays 1st

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## A Note of Caution About COBRA

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- When an individual loses employer coverage and has Medicare, he or she should be aware of the timeframes of the following:
  - The COBRA Election Period,
  - The Part B Enrollment Period, and
  - The Medigap Open Enrollment Period
- These may all have different deadlines that overlap
- What an individual decides about one type of coverage (COBRA, Part B, Medigap) might cause them to lose rights under other types of coverage

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### Part 5: When is Medicare Available After Disability Eligibility Ends or When an Individual Under Age 65 Returns to Work?

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## When Will Medicare Eligibility End if an Individual Does Not Try to Return to Work?

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- When a person is no longer considered to be disabled, Medicare eligibility stops at the end of the month following the month of notification, UNLESS
- The reason is eligibility would end only because of work - then Medicare may continue

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## Medicare Eligibility for Working Individuals with Disabilities

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- During the Trial Work Period. Followed by,
- 93 Months After The End of The Trial Work Period. Followed by,
- An Indefinite Period Following The 93 Months.
- NOTE: Medicare eligibility during each of these periods applies only while the individual continues to meet the medical standard for disability under SSA rules.

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## Medicare Eligibility During the Trial Work Period

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- An individual is entitled to continue Medicare during a nine (9) month Trial Work Period
  - During any rolling 5 year time period
  - The 9 months do not have to be consecutive
- An individual must have gross earnings of at least \$810 per month in 2016 OR work more than 80 hours of self-employment per month
- The ability to perform such work will not disqualify an individual from being considered disabled and receiving Medicare

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## Medicare Eligibility During the Extended Period of Eligibility

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- Following the Trial Work Period, individuals who still have the disabling impairment, but meet or exceed Substantial Gainful Activity (SGA), may continue to receive Medicare after the Trial Work Period:
  - For 2016, the SGA monthly threshold is \$1,130 (\$1,820 for an individual who is statutorily blind).
  - Under these circumstances, Medicare may continue for as long as 93 months after the Trial Work Period has ended.

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## Medicare Eligibility With Indefinite Access to Medicare

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- Following the EPE, working individuals with disabilities may continue to receive benefits as long as they are medically disabled.
  - Must be under age 65
  - Must pay Part A and Part B premiums
    - Part A premium will depend upon the quarters of work an individual (or spouse) paid into SS
    - Qualified Disabled and Working Individual Program (QDWI) help may be available for a low-income individual

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## Acknowledgements: Under Age 65 Project Partners and Advisors

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- Thank you to the partners and advisors to the Center For Medicare Advocacy in this Under Age 65 Project. You strive with us to better understand, and better serve, the Medicare population under age 65:
  - Administration for Community Living (HHS ACL)
  - American Association of People with Disabilities
  - Christopher and Dana Reeve Foundation
  - Center for Medicare & Medicaid Services
  - Justice in Aging
  - State of Connecticut SHIP (CHOICES)
  - Social Security Administration
  - Team Gleason/The Gleason Initiative Foundation

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## With Gratitude

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- To the U.S. Department of Health and Human Services, Administration for Community Living for the funding, counsel, and support to make this work possible.
- To all the SHIP and SMP counselors across the country, and to everyone else who helps Medicare beneficiaries better understand fair access to Medicare and health care.

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## Next in the Medicare for Individuals Under Age 65 Webinar Series

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### **Webinar #2**

Wednesday, March 17, 2016

#### **Medicare for Dually Eligible and Low-Income People Under Age 65**

Led by Jennifer Goldberg, Directing Attorney,  
Justice In Aging

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## Future Topics in the Under Age 65 Webinar Series

- Transitioning into (and out of) Medicare
- Medicare Part A, Part B, and Medigap coverage
- Medicare Advantage
- Medicare Part D Coverage and Issues
- Durable Medical Equipment, Prosthetics, Orthotics, and Supplies
- Connecting Through Social Media
- Connecting Through Outreach and Education
- Resources, Collaborations and Help (Federal and State)

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We will respond, and get copies to all participants.

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