

Create a National Medicaid for Workers with Disabilities Program that Removes Asset and Income Eligibility Limits and Expands Eligibility to Allow Workers with Disabilities Over 65 Years Old

DID YOU KNOW?

- Medicaid is the primary payer of long-term care services—such as attendant care or home health aides—that allow individuals with disabilities and others to maintain their health and independence. These services are not typically covered by Medicare or private health insurance. (Source: Centers for Medicare & Medicaid Services)
- Most states allow individuals with disabilities who qualify for Medicaid due to their disability to work and earn above traditional Medicaid income and asset thresholds while still maintaining their Medicaid healthcare and home and community-based services. (Source: U.S. Department of Health and Human Services)
- State Medicaid for Workers with Disabilities Programs sometimes include very low income and asset thresholds that significantly limit the earnings and career potential of workers with disabilities. In addition, these programs cap participation at age 65, preventing older adults with disabilities from working past 65 and retaining their essential Medicaid coverage. (Source: Urban Institute)
- Nearly 30% of adults with spinal muscular atrophy (SMA) who work part-time said they maintain their part-time employment status to stay below an income threshold to maintain their eligibility for Medicaid, which provides essential attendant care and other home and community-based services.
 (Source: Cure SMA Community Survey).

CURE SMA POSITION

To promote employment and economic self-sufficiency, and to remove existing work disincentives, Cure SMA urges Congress to adopt the **Bipartisan Policy Center recommendations** for the Medicaid Workers with Disabilities Program.

This will:

- Create a single Medicaid Workers with Disabilities Program across all states to simplify the program and allow working-age individuals with disabilities to pursue careers and accept promotions that may require relocation to other states.
- Remove income and asset limits to allow all eligible workers with disabilities, regardless of income level, to maintain their Medicaid care and supports using a reasonable sliding premium scale.
- Remove the age cap in Medicaid for Workers with Disabilities Programs to allow individuals with disabilities over the age of 65 years to stay employed and maintain their Medicaid benefits.

WHY CONGRESS SHOULD ACT

Some individuals with disabilities work only part-time or remain out of the workforce completely to maintain eligibility for Medicaid and other supports that are essential for their health and independence. In the 1990s, Congress helped to address systematic work disincentives for individuals with disabilities by providing <u>increased flexibility</u> to states to provide Medicaid coverage to higher income-earning workers with disabilities. Many states have established Medicaid Workers with Disabilities Programs (also referred to as Medicaid buy-in programs) to help individuals with disabilities earn a living while maintaining their Medicaid services. However, income and asset caps that exist in some state programs force individuals with SMA to choose between a meaningful career and independence. In addition, the state-by-state patchwork requires workers with disabilities to restart the eligibility process if they relocate or are transferred to a work location in a different state.



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<u>Cure SMA</u> is a national organization that advocates for individuals with spinal muscular atrophy, a progressive neurodegenerative disease that robs people of physical strength, taking away their ability to walk, swallow, and breathe.