

People who would benefit from making Buy-In Available after age 65

POLICY ISSUE:

After years of enforced poverty, people with disabilities have been allowed to earn money, save money and pay a premium for Medicaid since late 2013 in Colorado. The federal authority for this program says that it only applies until someone reaches age 65. No one retires at age 65 anymore. Moreover, while it allows people to acquire assets, if someone lives to be 65 and still needs Medicaid they will be required not only to stop working but to get rid of any assets saved. We are asking that states be allowed to claim FFP for clients that work past age 65 if they were on buy-in before age 65 AND that people are allowed to continue to exempt the assets acquired before reaching age 65. Below are stories of Coloradans that will be harmed if this action is not taken in the near future. These individuals, all age 55 or over and all employed, are Democrat, Independent, and Republican, and from Urban, Rural and Suburban communities.



Kristen Castor turned 65 this week. She lives in Pueblo. Instead of a celebration being one of the few disabled people to reach this milestone, the birthday has filled her with fear. She has cerebral palsy and has worked all of her life. She has been able to manage without personal care for most of her life but has had repeated injuries and health problems common to people who were born with physical disabilities who are aging. She will soon lose her Medicaid Buy-In and have to survive only on Medicare. She has had several surgeries over the past few years, each one requiring home health care. This is provided by Medicaid. She also requires an electric wheelchair and only Medicaid covers chairs that are safe for outdoor use. Medicare only covers chairs that are for indoor use and because she has some limited walking ability they would not cover her wheelchair. Without a wheelchair she is at risk for falls and further injuries to her arms, wrists and shoulders. She carefully saved money all of her adult life and if she has one more injury that requires her to have home health care she will have to stay in the hospital as she will no longer have home health care if she has already lost the Medicaid Buy-In

program. She could stop working, spend down her remaining assets, and go on Medicaid long-term care through the home and community based services waiver. This would require her to give up her vehicle (her community has very limited public transportation) and her phone. Additionally, if she has an unplanned repair on her very old home that she will be in crisis, and be forced to take a high-interest loan or use a high interest credit card to manage the repair. Any unplanned expense could literally cause her to lose her home. This is the wrong message for someone who worked with a disability before there were any work incentive programs and did everything "right" for her adult life. She is not wealthy, or even solidly middle class. She barely survives now but manages with her small savings and because she is able to keep working. Forcing her into deep poverty simply because she lived to see 65 is wrong.

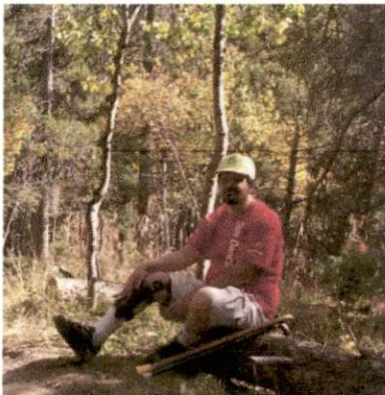


Curtis Wolff is 62 and lives in Thornton in Adams County. He was a business owner when he was "bit by the wrong mosquito" about 7 years ago. He contracted West Nile and became a quadriplegic. Even though he had "great" insurance he had over \$2 million of medical expenses making Medicaid necessary. He had saved up some money and has a nice home. He left the hospital and went right onto the Medicaid Buy-In program and never had to impoverish himself. He has Medicaid to cover his long-term care such as help to get in and out of bed, get dressed, personal care, eating, etc. While he was not able to maintain his business he does continue to work. He is in his 60's. If he has to go off of the Buy-In when he turns 65 he will have to get rid of any assets and will not be able to keep enough income to pay for the cost of his housing. He has used his home modification funding on his current home. With the cost of housing in Colorado, he would not be able to sell and find something cheaper. There is no available rental housing, even the poor quality government housing has long waiting lists. If he cannot maintain his housing he is at risk of nursing facility placement. Curt has never been on food stamps, LEAP or housing assistance because of the Buy-In.



Martha Mason is 60 years old and lives in La Plata County in Southwest Colorado. She has spent her life in rural America working in the nonprofit sector. She has ill controlled psoriatic arthritis and needs Medicaid to be able to continue working and is having to use more powerful medications. . She does not have a lot of money and needs to keep working to afford her mortgage in a place with escalating costs. Her medical bills are more than Medicare would cover and more than what she could afford on her salary. She does not have funds to retire at 65 because social security does not kick in until 67. Her nonprofit does not have retirement benefits. There is no affordable private insurance for someone like her and Medicare supplements are not available to people who are already disabled. So she would be forced to choose between impossible situations:

- a) Keep working and forgo necessary medical care which allows her to function at her job and stay out the hospital. This will likely cause her to need long-term care within a few months. She would have to go back to being uninsured and rely on emergency room care, which would eventually claim her home.
- b) Stop working and lose the income that enables her to pay her mortgage, she is not physically strong enough to be able to survive homelessness, especially in the rural community with harsh winters. She would not be able to afford rent if she lost her home, even if she did get early retirement or disability benefits.



Craig Simon is a cancer survivor who is 58. He lives in unincorporated Adams County. He graduated from Regis University Cum Laude and got an internship with the federal government but had to leave work because he would have lost his Medicaid eligibility. He stopped working until the Buy-In was

implemented and has been working ever since. Because of the residual effects of his cancer he has ongoing disabilities and requires minimal long-term care services as well as medical care. Any private insurance would be unaffordable. If he were to lose his Medicaid eligibility he would not be able to afford medical care. While he is not able to work a lot, the work he does is essential to his physical and mental health, as well as enabling him to afford a modest, yet independent life style.



Donna Sablan is 57 years old and lives in Aurora. She was widowed when her three children were young, two of her children have disabilities and rely on her for some support. She became disabled in 1999 and has had two strokes since worsening her disability. Despite this, she has been determined to work as much as she can. She is just now beginning to be in a position to start escaping poverty and would like to start saving money for a possible retirement. If she is not allowed to save, she cannot think about a retirement. Because she needs personal care and receives it through the Home and Community Based Services Waiver she must maintain Medicaid eligibility. She is at a place now when she must make a choice soon, either decrease her income to maintain HCBS eligibility and not save any money, or move onto the Buy-In program. If she knows any savings cannot be kept after age 65, she has no incentive to save at all. Due to her working she has been able to get off of SSI, Food Stamps, LEAP, and stop using food banks. Her daughter, who is disabled also, has been able to get off of food stamps and TANF through her own work because of some support from her mother.



Julie Reiskin is 55 and lives in Denver County. She has had multiple sclerosis since the mid 1980's and is functionally a low-level quadriplegic with a visual impairment. She has a 34 year-old stepson who has a disability. His biological parents are in their 70's. They are both in poor health and have no savings. She raised the young man since he was 7 with her partner who is the biological mother of this young man. Because there was no right to gay marriage during his childhood, there is no legal relationship that

is protected by Medicaid estate recovery laws. She will be his sole source of support for a good part of his adult life. She currently pays his rent and ancillary expenses (vet bills for his service dog, glasses, etc.) While he works, he is not able to work more than 15 hours a week in a supported setting. Julie lives in the home of her partner. When her partner passes, the home goes to the stepson and Julie will need to find an accessible apartment to rent. This is not affordable on what one can earn without the Buy-In, especially with other expenses. She will still need to help the stepson with expenses like homeowners insurance and property taxes. Her stepson has a special needs trust but under the current rules she would not be allowed to leave her money to the trust. Moreover, she loves to work and is still in a place where she is furthering and developing her career and cannot see retiring in 10 years. She worked without pay for 20 years until the Buy-In was possible because Medicaid is essential to her survival. She has been able to escape poverty and does not want to return to living in poverty after only 15 years of work, and does not want to lose the savings she has worked hard to acquire. She has been able to give up SSDI benefits and get her stepson out of subsidized housing due to the Buy-In.



Kevin Smith is 55 years old and lives in Adams County. He has worked for many years at his current company, Accent on Independence. He is a quadriplegic and cannot get in and out of bed without assistance. He had to keep his income low until the Buy-In was available. His company has also begun to offer profit sharing and a retirement plan. He is not considering retirement at this point and because he was only recently able to start making more than a nominal amount he wants more time to save money and to pay into his retirement. Even though he has only recently been allowed to earn and save money, he has been working in the healthcare field since 1985. Because he has to have Medicaid, if he is not allowed to keep his retirement he will have to spend it before turning 65. Early withdrawal of retirement causes people to take a significant financial loss. He will also have to spend all of the profit sharing. If he has to stop working he will be forced back into poverty. With the cost of housing in the metro area, Kevin would be at risk for homelessness. For any quadriplegic this means at risk of nursing facility placement. Kevin has worked as hard (if not harder) than his non-disabled peers at his company. Why should he be deprived of his hard earned profits simply because he is a quadriplegic and needs help with every day activities? Kevin has given up SSDI benefits due to the Buy-In.

Prepared by the Colorado Cross-Disability Coalition
1385 South Colorado Boulevard Suite 610A Denver, CO 80222
www.ccdconline.org @CCDC501c3 (Twitter) @CCDC.CO (Facebook)
Julie Reiskin, Executive Director jreiskin@ccdconline.org
Josh Winkler, Board Co-Chair jkwinkler@gmail.com CD 6 Resident