Are You a Working Individual
With a Disability?

OR

Have lost SSI due to initial receipt of SSDI and are waiting for Medicare?

NOW YOU CAN GET MEDICAID!

In January 2001, New Mexico implemented the Working Disabled Individuals Program (WDI)!

To qualify for this Medicaid category, you must:

1. Meet SSA (Social Security Administration) criteria for disability.
2. Have a recent attachment to the work force. You are considered to have a recent attachment to the work force, if:
3. Your quarterly earnings from employment meet SSA definition of a qualifying quarter ($1120.00/quarter for 2010). This amount changes every year.
4. or
5. No longer eligible for the SSI (Supplemental Security Income) benefit due to receiving SSDI (Social Security Disability Insurance) and waiting to receive Medicare.
6. Must be 18 years of age or older.
7. Have countable resources of less than $10,000. A married couple must have countable resources of less than $15,000.
8. A person could gross approximately $55,000 a year from employment and still qualify for this program. Not all income is counted. There is a $20.00 disregard and a $65.00 earned income disregard given. Of the remainder of the income, one half is disregarded. Countable income then is less than one-half of the gross amount. Impairment Related Work Expenses are allowed to further bring down countable income. The resulting net income must not exceed 250% of the Federal Poverty Level (FPL). This amount changes and becomes effective every April of every year).
9. If there is a spouse in the household, some or all of their income is counted toward the eligibility of the applicant.
10. Have unearned income (SSDI, Veteran’s benefits, royalties etc.) of less than double the SSI (Supplemental Security Income) standard for an individual plus $20.00 ($1368.00 for the year 2010). This amount changes every year.

A qualifying quarter for WDI is defined as having earnings from employment to meet the definition of a qualifying quarter, i.e. Social Security’s definition. A quarter is a 3 month period in which earnings must be maintained for continued eligibility.

If you are presently on Social Security Disability Insurance (SSDI) or have received Supplemental Security Income for the disabled (SSI), you meet the definition of disability according to Social Security. If you have never had a determination of disability made, WDI will have one made for you according to the criteria Social Security uses except in regards to income from employment.

There are co-payments for this category of Medicaid. Co-payments are due at the time of service. Maximum annual co-payment amounts are based on an individual’s total income (earned and unearned). Once this maximum is met, there are no further co-payments that need to be paid until the end of the calendar year. Recipients are asked to keep their co-payment receipts for verification. The co-payments amounts are:

- $7.00 per outpatient visit, other practitioner visit, clinic visit, urgent care visit, outpatient therapy session, or behavioral health sessions
- $7.00 per dental visit
- $20.00 per emergency visit
- $30.00 per inpatient hospital admission
- $5.00 per prescription applies to covered prescription and non-prescription drug items

* * Native Americans are exempt from co-payments.

For more info, please call:

1-800-318-1469 or 1-888-997-2583
How do you apply for this Medicaid program?

You must apply and submit the Medical Assistance Division form 327 to your local Income Support Division office. This application is also available at http://www.state.nm.us/hsd/mad. ISD office locations are available by calling the Human Services Department at 1-888-473-3676, or visit http://www.state.nm.us/hsd/isd.

WHAT TO BRING:

1. Social Security card;
2. Birth certificate or comparable proof of age;
3. Names, addresses, and phone numbers of all doctors, hospitals, clinics, and institutions that have treated you (and approximate dates of treatment);
4. All medical records available to you;
5. Verification of assets including bank statements, redeemable stocks, bonds, insurance policies etc.;
6. Income verification including check stubs, award letter from Social Security, etc.;
7. Verification of any type of income including rental income, royalties, etc.;
8. If married and spouse is in the household, verification of their income if applicable.

How Long Does Benefit Determination Take?

"Completed applications must be acted upon and notice of approval, denial, or delay sent out within 60 days of the date of application. Individuals will have time limits explained and be informed of the date by which the applications should be processed." If found ineligible, there is an appeals process.

Eligibility begins the month of approval. A redetermination of eligibility is made every twelve (12) months. You must have qualifying earned income in each quarter to maintain eligibility if employed. If receiving Medicare, there is a work requirement for eligibility.

You may be eligible for up to three (3) months retroactive Medicaid coverage beginning after January 1, 2001.

Special provisions for Retirement Funds -
Contributions to Internal Revenue Service recognized retirement fund accounts are not considered a resource in the eligibility determination so long as funds are not withdrawn from the account. Examples of such retirement funds include PERA, ERA and employer’s qualifying pensions plan, 401(K) plan, civil service annuity, IRA, Roth IRA, KEOUGH PLAN.

For general program information, brochures, presentations, please contact:

Outreach Coordinator/WDI Program
Division of Vocational Rehabilitation
(505) 954-8523 or 1-800-318-1469

For Technical Assistance with program enrollment or participation please call:

Working Disabled Individuals Program
Human Services Department/MAD
1-888-997-2583