

## Financial Services

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After brain injury, many people face financial struggles and challenges that may seem overwhelming. You are encouraged to consult with a qualified attorney or financial planner to structure a solid financial plan.

All Government financial programs have an appeals process for individuals who have been denied benefits. It is very common for persons with brain injury to appeal financial decisions. If you think that you should be eligible and have been denied benefits, you are encouraged to begin the appeals process immediately. Please do not feel that you are “complaining” or “being difficult.” The appeals process is a normal and necessary aspect of the application.

### **Supplemental Security Income (SSI)**

Supplemental Security Income (SSI) is a strictly need-based federal financial assistance program for persons with disabilities who have limited resources. The program is intended to guarantee a minimum monthly income to persons with disabilities who have little or no income and resources.

Persons with disabilities can be eligible for SSI even if they have never worked. Age is not a factor. If a person is eligible for SSI, he or she is automatically eligible for Medicaid. People receiving SSI must meet certain income and resource limitations to be eligible. Insurance policy payments, court settlements, worker’s compensation and other financial resources may limit your eligibility for SSI.

### **Social Security Disability Insurance (SSDI)**

To qualify for Social Security Disability Insurance (SSDI), a person must have a physical or mental impairment that is expected to keep him or her from doing any substantial work for at least a year, or a condition that is expected to result in death. The amount of a person’s SSDI payment depends upon how much he or she has worked and how much he or she has paid in the Social Security system through taxes. Some people who have SSDI may also be eligible for SSI.

A knowledgeable financial planner or lawyer should be able to assist you in structuring a compensation plan that will allow you to keep eligibility for government benefits. When choosing a financial planner or attorney, be sure to ask the questions found in the Legal Services Section (Section J). It is advised that you apply for SSDI benefits as soon as possible

because of a six-month waiting period. If eligible, benefits begin on the sixth full month after the application is accepted.

To apply for SSI or SSDI, call your local Social Security Administration (SSA) office. To find out where the nearest SSA office is located, call 800-772-1213 or see the Administration's web site at [www.ssa.gov](http://www.ssa.gov).

## **Medicare**

Medicare is a federal health insurance plan that includes persons with disabilities that are determined to be eligible for SSDI due to disability. Medicare is not based on income.

Medicare has 4 components:

- Hospital insurance (Part A)
- Medical insurance (Part B)
- Medicare Advantage Plans (Part C)
- Prescription Drug Coverage (Part D)

Local Social Security Administration offices process applications and provide information about the program.

## **Hospital Insurance (Part A)**

Any person who has received SSDI for 29 months automatically becomes eligible for Medicare hospital insurance at no monthly cost without an application process. You may wish to call the Centers for Medicare & Medicaid Services at 800-633-4227, TTY at 877-468-2048 or visit [www.cms.hhs.gov](http://www.cms.hhs.gov). Medicare will help pay for the following health care options:

- **Hospital Inpatient Care:** Patients are responsible for a deductible. After the deductible is met, Medicare will pay a certain percentage of inpatient care based upon length of stay.
- **Skilled Nursing Home Care:** Medicare pays 100 percent for the first 20 days for skilled care or physician ordered rehabilitation when the person has been hospitalized for at least three days. There is a daily charge beginning on the 21st day. It does not cover Long Term or Custodial care.
- **Home Health Care:** Medicare can pay for a limited amount of home-based skilled nursing care and physical, occupational, and speech therapy.

- **Hospice Care:** Medicare provides full coverage for inpatient and home care services. There are no deductibles.

### **Medical Insurance (Part B)**

After receiving SSDI benefits for 29 months, a person with brain injury may choose to enroll in the Medicare medical insurance program (Part B). Premium and deductible charges do apply. If a recipient does not want the medical insurance Part B, he or she must refuse it in writing.

After the deductible is met and premiums are paid, Medicare will cover:

- **Doctor's services:** After the deductible is met, Medicare pays 80 percent of allowable or approved charges for an unlimited number of surgical, diagnostic and other medical doctor-administered services.
- **Other Services:** Services covered may include ambulance transport, home health visits, outpatient services such as emergency room or clinics and certain durable medical equipment.

\*Currently, many persons receiving Medicare also purchase supplemental insurance (Medigap) to ensure more reliable health coverage. For more information, call your county social service office.

\*Services NOT covered under Medicare include personal assistants, institutional services, dental care/dentures, hearing aids, eye care/glasses, routine foot care, some screening tests, bathroom grab bars, etc. Call **1-800-633-4227** for more information about Medicare coverage.

### **Medicare Part D: Prescription Drug Benefit**

Beginning in the later part of 2005 Medicare recipients were notified of a change the federal government instituted that provided a new outpatient prescription drug benefit. Beginning in 2006, beneficiaries can remain in traditional Medicare and enroll separately in private prescription drug plans or they can enroll in a Medicare Advantage Plan (Part C) that also covers prescription drugs. The government enacted these changes with the belief that it will save money on the rising costs of drugs for beneficiaries. There is extra help available for people with limited income and resources. Individuals who are Medicaid eligible automatically are enrolled in a plan. Almost 1 in 3 people with Medicare qualify for this extra help. Medicare will

pay for almost all of their drug costs. Up until this point drug coverage was not a part of Medicare. For more information call the Linkage Line at 1-866-333-2466 or [www.medicare.gov](http://www.medicare.gov).

### **Dual Eligibility**

This term describes individuals that are eligible for both Medicare and Medicaid (Medical Assistance in MN) due to low income and are either age 65+ or have a disability. For many people Medicaid provides a critical supplement to Medicare, filling gaps in coverage. Some specific types of drugs will still be paid for via Medicaid (check with your pharmacist).

### **Medicaid**

Some persons will be eligible for Medicaid. Medicaid is a need-based program (ie. Low income, few assets and meet immigration/residency requirements). It pays for eyeglasses, dental care, mental health services, family planning, hospice care, lab and x-ray, health centers, medical equipment, home health care, inpatient and outpatient hospital services, nursing home services, some prescribed drugs and transportation to and from medical appointments. People receiving SSI are eligible for Medicaid. For more information, call your local social service office or visit [www.ncdhhs.gov](http://www.ncdhhs.gov).

### **Waivers**

Waivers are a funding source usually targeted toward a specific age, income group or other variable. The waivers provide the opportunity for individuals to live in the community rather than in nursing homes or institutionalized settings. You must be on medical assistance, certified disabled and eligible for nursing home or institutionalized care to qualify for waivers. Do not worry if you have never heard of these waivers. Ask your LME to direct you to the department that does intake for waived services.

### **Department of Veterans Affairs (VA)**

The Department of Veterans Affairs is a federal program that provides benefits to eligible veterans and their eligible dependents. An honorable or general discharge will qualify a veteran for benefits. Veterans in prison or on parole may be entitled to certain VA benefits.

Eligible veterans may receive acute rehabilitation, residential care, outpatient treatment, dental treatment, alcohol and drug treatment, prosthetic devices or mental health services. The VA has a system that prioritizes who can receive services and at what time. Since there are limited numbers of beds available in VA facilities, there are often waiting lists for services. For more information about eligibility and services call the VA at 336-725-8781.

If you sustained a brain injury during active military status, you may be eligible for services through the Defense and Veterans Brain Injury Center. For more information, call 800-870-9244 or visit [www.dvbic.org](http://www.dvbic.org).

### **Workers Compensation**

Workers Compensation Program is an insurance program provided by many employers at no cost to the employee. If an employee is hurt on the job or develops a disease due to conditions on the job, Workers Compensation pays all reasonable and necessary medical care related to the injury or illness.

If a brain injury happens on the job, a person or his or her family should immediately inform the employer that an injury has occurred. Many employers require that an employee report his or her injury within 24 hours.

The worker should only seek treatment at approved medical facilities. The worker must report any earnings, Social Security benefits, or unemployment compensation benefits to the insurance company. These forms of income can affect the amount of Workers Compensation benefits received.

### **Special or Supplemental Needs Trusts**

If there is a financial settlement for the person with a brain injury or if there are resources the person may inherit during their lifetime, the family may want to consider a Special Needs Trust which would allow the person with the brain injury to continue to be eligible for government benefits while protecting their assets.

A Special or Supplemental Needs Trusts is a US-specific term for a type of special needs trust (an internationally recognized term). Supplemental needs trusts are compliant with provisions of United States (federal and state) law and are designed to provide benefits to, and protect the assets of, physically disabled or mentally disabled persons and still allow such persons to be qualified for and receive governmental health care benefits, especially long-term nursing care benefits, under the Medicaid welfare program. Supplemental or Special Needs Trusts are frequently used to receive an inheritance or personal injury litigation proceeds on behalf of a disabled person in order to allow the person to qualify for Medicaid benefits.