

 Dedicated Patient Champion

*A.C.C.E.S.S.<sup>®</sup>  
Helping Families Cope*



 **PSI<sup>®</sup>**

**The A.C.C.E.S.S.<sup>®</sup> Program by PSI**





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## SECTION 1

# How A.C.C.E.S.S. Can Help

Advocating for Chronic Conditions, Entitlements, and Social Services (A.C.C.E.S.S.) is a PSI program dedicated to helping patients find solutions to the social and economic problems that confront families facing chronic conditions. A.C.C.E.S.S. helps families navigate the often complex maze of state and federal entitlement programs and other federal laws that affect their ability to obtain or continue health care coverage.

A.C.C.E.S.S. has offered legal representation to people on their claims for Social Security Disability (SSD) and Supplemental Security Income (SSI) since 1989. In addition to ensuring monthly income when you are no longer able to work, these benefits may qualify you for health care coverage under Medicare or Medicaid. Our goal is to reduce the time and effort required to obtain the benefits to which you may be entitled, so that you may concentrate your efforts on managing your care and providing for your loved ones. You can reach our disability representatives toll-free at **1-888-700-7010**.

In addition, our A.C.C.E.S.S. Legal Support Hotline can help you:

- Continue group health coverage for you and your family under COBRA
- Obtain health insurance under the Affordable Care Act
- Appeal a denial of coverage by your health insurance carrier for medical treatment needed for your condition
- Understand your rights under the Family Medical Leave Act
- Seek reasonable accommodations for your condition at school or in the workplace under the Americans with Disability Act

Our legal staff is available to answer your questions at our toll-free Legal Support Hotline, **1-877-851-9065**.

## PSI provides all A.C.C.E.S.S. services without charge.

All of our services are completely confidential and provided at no cost by Patient Services, Inc. for people with the following rare chronic disorders:

- Alpha-1 Antitrypsin Deficiency
- Certain Auto-Immune Neuromuscular Disorders
- Chronic Inflammatory Demyelinating Polyneuropathy
- Hemophilia and other related Bleeding Disorders
- Primary Immune Deficiency

**“Knowledge is the key to fighting the fear associated with chronic illness.”**

*— Rachel Warner*

New chronic conditions are occasionally added to this list. Please contact us if you have any questions or need advice on any of these issues. **We are here to help you!**

## SECTION 2

# Understanding Your Health Care Coverage Choices

There are two health care programs operated by the federal government, Medicare and Medicaid. Eligibility for disability benefits from the Social Security Administration is one way to qualify for this coverage and will be discussed in greater detail in Section 3 of this booklet.

In addition, the Congressional Omnibus Budget Reconciliation Act of 1985 (COBRA) provides for continuation of group health coverage for you and your family when you change jobs (or when you experience other qualifying events set forth in the law). Finally, individuals can purchase individual insurance policies in the Marketplace created by the Affordable Care Act (ACA).

The A.C.C.E.S.S. team is dedicated to helping you navigate the maze of health care options available under these federal laws and programs. What follows is a brief overview of the choices that may be available to you. We encourage you to call us with your questions about eligibility for yourself or a family member.

## What is the difference between Medicare and Medicaid?

**Medicare** helps pay a portion of medical and hospital costs but does not cover most medications. Recipients often have significant out-of-pocket expenses and pay a monthly premium for non-hospital coverage. The only way to qualify for Medicare is to either be eligible for Social Security Disability (SSD) or be age 65 or older. There is a 29-month waiting period from the point your disability begins before you become eligible for Medicare.

In many states, a person with Medicare Part A (hospital coverage) or Medicare Part B (medical coverage) can purchase a Medicare Supplement (Medigap policy) to cover part of their out-of-pocket costs under Medicare. Not all plans are available in all states, and some are only available to those who are 65 or older.

Medicare prescription drug plans are available in all states for an additional premium and pay a portion of your drug costs. There are also special Medicare Complete plans offered by private insurers that may cover expenses not covered by traditional Medicare, such as vision and dental. Some of these plans also have prescription drug coverage.

**Medicaid** pays most medical and hospital costs at little or no cost to the recipients. Thus, they rarely have significant out-of-pocket expenses. In many states, eligibility for at least \$1 in Supplemental Security Income (SSI) benefits will qualify you for Medicaid. Unlike Medicare, there is no waiting period for Medicaid.

There may be other ways to qualify for Medicaid besides disability; this will vary from state to state. Some states have expanded Medicaid eligibility under the Affordable Care Act (ACA).

## Continuing Group Health Coverage under COBRA

Employers with 20 or more employees who sponsor group health plans must give you (and your covered spouse and children) the right to continue group health insurance when you stop working for up to 18 months after you leave your job.

Your spouse and children can also elect COBRA for up to 36 months in the event of divorce or legal separation from the covered worker or if the covered worker dies or becomes eligible for Medicare.

If you are covered as a dependent under a parent's group health plan, you can elect coverage for up to 36 months once you lose dependent status as a result of reaching the age limit.

## Disability, COBRA and Medicare

A disabled worker can extend COBRA continuation coverage for an additional 11 months (29 months total) if:

- Social Security finds you became disabled within 60 days of the date your employment ended;
- Your initial 18 months of COBRA eligibility has not yet run out; and
- You notify your COBRA provider within 60 days of the determination that you are eligible for disability benefits.

The 29 months of COBRA coverage fills the gap between qualifying for SSD and receiving Medicare.

## COBRA and the Marketplace

*What if the 18-month COBRA period runs out before you are approved for SSD or SSI?* If your COBRA eligibility expires outside of open enrollment for the health insurance Marketplace under the Affordable Care Act (ACA), you qualify for a **Special Enrollment Period (SEP)**. However, you do not qualify for a SEP if you drop COBRA outside of the open enrollment period. The Marketplace will determine whether you qualify for a Qualified Health Plan (QHP), Medicaid, or the Children's Health Insurance Program (CHIP).

During the open enrollment period for the ACA Marketplace (November 15<sup>th</sup> – February 15<sup>th</sup>) you can drop your COBRA coverage and purchase a more affordable Marketplace plan. Your COBRA eligibility does not need to be exhausted to enter the Marketplace during open enrollment.



## SECTION 3

### Answering Your Disability Questions

A.C.C.E.S.S. helps families understand the complicated issues involved in proving entitlement for Social Security Disability (SSD), Supplemental Security Income (SSI), Medicare, and Medicaid. Many people do not realize that they may be eligible for these benefits even though they are not yet 65 years of age. The Social Security Administration, however, must determine that you are disabled in order for you to obtain these benefits before age 65. A.C.C.E.S.S. can help you decide if applying for disability is right for you by providing accurate information about your choices and the benefits for which you and your family may be eligible.

### Helping You with Your Disability Claim

A.C.C.E.S.S. facilitates the process of your claim by collecting all medical records and evidence for the Social Security examiner and by providing adequate information about your condition so that a prompt and informed decision can be made on your claim. An A.C.C.E.S.S. representative familiar with Social Security law will help you through every phase of filing your claim. If the records that Social Security requires are missing or outdated, A.C.C.E.S.S. will work with your doctors and other care providers to obtain the medical evidence needed to have your claim approved.

If your initial application is denied, your advocate will review Social Security's file on your claim, obtain any additional evidence that may be required and help you appeal the decision. In the event that your claim must be appealed to an administrative law judge, an attorney or other legal consultant from A.C.C.E.S.S. will help you prepare for your hearing and will appear at your hearing to represent you free of charge.

### What is the difference between Social Security Disability (SSD) and Supplemental Security Income (SSI)?

For adults, both SSD and SSI require that you have a condition that prevents you from working according to the rules and regulations of the Social Security Administration. To receive SSD, you must have worked and paid Social Security payroll taxes (FICA) for a sufficient period of time. SSD benefits are available regardless of your current financial situation and are based upon your past earnings. There is a 5-month waiting period for SSD benefits from the date you



are found to be disabled and an additional 24-month waiting period for Medicare (in most instances). Back benefits are available up to 12 months prior to the application date, if you delayed filing after you became disabled.

To qualify for SSI benefits, your household must have very limited income and financial resources. Your benefit amount is based on your family's size and income. In most states, SSI recipients usually become eligible for Medicaid in the month following the month in which their application was filed. In certain circumstances, a disabled person may be eligible for both SSD and SSI. Unlike SSD, you do not need to have a work history for SSI, so children can qualify for these benefits. Back benefits cannot begin any earlier than the month after the date you applied for them.

Workers who are eligible for a small SSD benefit based on low earning may also qualify for SSI. In certain limited circumstances, a disabled adult child may qualify for SSD on the parent's work record if the parent is deceased, disabled, or drawing their retirement benefit. Likewise, certain disabled widows or widowers may collect a higher benefit on the record of the deceased spouse in some instances. The rules governing eligibility for these programs are often quite complex and subject to change. This brochure provides only a brief overview of how these rules operate currently.

## **SSD and SSI have the same medical rules for determining disability**

Social Security defines disability as the inability to do any Substantial Gainful Activity (SGA) by reason of any medically determinable physical or mental impairment that is expected to last for a continuous period of at least 12 months or result in death. They use a set of five questions to evaluate a claim:

1. Is the person engaged in "Substantial Gainful Activity"?
2. Does the person have a "severe" medical impairment?
3. Does the severity meet or equal any condition in Social Security's Listing of Impairments?
4. Does the person retain the "residual functional capacity" to perform any "past relevant work"?
5. Given the person's age, education and work experience, does the severity of their physical and mental impairments preclude any other kind of substantial work which exists in the national economy?

There are special rules for evaluating the capacity to perform substantial work for people over 50. There are also rules that are used specifically to evaluate disability in children under the age of 18. We encourage you to contact us with specific questions about how these rules may apply in your particular situation.

## Applying for Disability

To start an application for disability benefits from Social Security Disability or Supplemental Security Income, you can:

- Apply online at [www.ssa.gov](http://www.ssa.gov)
- Call the Social Security Administration toll-free at **1 (800) 772-1213**
- Call or visit your local Social Security office

There are a number of forms that Social Security will ask you to complete, but the date you first contact them will be treated as your protective filing date for purposes of determining when your benefits may begin.

Your initial application is processed by a state Disability Determination Service. If you disagree with their decision, most parts of the country have another level of review called “reconsideration.” The next step is a hearing before an Administrative Law Judge in the Office of Disability Adjudication and Review. The last administrative remedy is review by the Appeals Council; from that point, you can file suit against the Social Security Administration in federal court.

The good news is that most cases are won at the hearing level. The bad news is that it can take months or years to get a hearing and a decision due to the backlog of cases. It is not unusual to have your initial application for disability benefits denied. Because many of these claims are later approved as part of Social Security’s administrative appeal process, you should seriously consider appealing an unfavorable decision. The A.C.C.E.S.S. team is always happy to assist you with any questions you may have about federal disability programs, so please feel free to call us at **1-888-700-7010**.

## Things to Consider when Applying for Disability

Because many people who apply for disability benefits end up going through a sometimes lengthy appeals process, you should carefully consider your financial circumstances. If you stop working or substantially reduce your income, you may have to depend upon a long-term disability policy, your savings, and even other family members for an extended period before your disability claim is paid.

While you can continue your current health care coverage under COBRA, this can be very expensive, particularly with significantly reduced family income. Because it is critical for a person with a chronic health condition to maintain access to health care, you will want to thoroughly explore your eligibility for programs that will allow you to continue to receive medical treatment. Premium assistance may be available from Patient Services, Inc. Please visit [www.patientservicesinc.org](http://www.patientservicesinc.org) for more information.

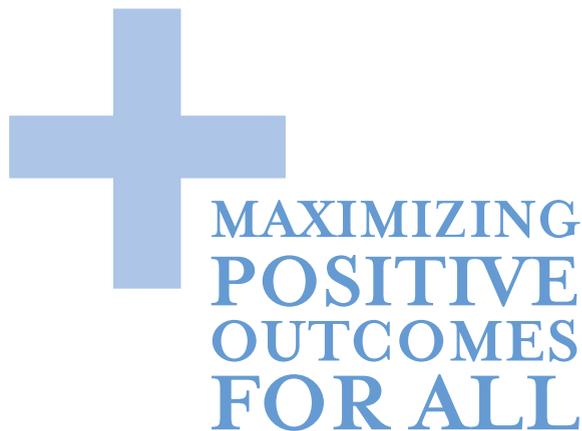
## Current PSI Assistance Programs:

PSI is a dedicated patient champion committed to providing a variety of patient services to patients living with specific chronic illnesses. For the most current list of PSI programs, please visit [www.patientservicesinc.org](http://www.patientservicesinc.org) or call 1.800.366.7741.

## Tackling the Difficult Cases

We want to make the process of accessing treatment as easy as possible. Therefore, we continue to expand our services to include things such as:

- Online applications
- Pharmacy co-payment cards
- Current website with expanded capabilities
- Translation services
- And more!



## PSI Credibilities

- Approved for 501 (c)(3) status by IRS (1992, 1999)
- GuideStar Silver Preferred Member (2014)
- Received a positive U.S. Office of the Inspector General Opinion (2002)
- Received a positive response from CMS for non-profits to satisfy the “donut hole” with cash donations (June, 2004)
- Approved IRS “Facts and Circumstance” Determination (December 30, 2004)
- PSI’s OIG opinion affirmed in new OIG Advisory Bulletin of November, 2005
- Received four star rating from Charity Navigator (2009-present)



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