Medicare and Disability Entitlement Correction

Resolving Federal Errors to Increase Individual Benefits and State Savings

Situation

Thousands of Medicaid recipients with disabilities may be missing out on Social Security cash and Medicare benefits due to errors in Social Security Administration (SSA) eligibility review processes. As a result, individuals are denied earned benefits that are necessary to maintain an adequate standard of living, and the costs of these missed benefits are shifted from federal responsibility to state Medicaid and other health and human service programs.

SSA has acknowledged errors in determining entitlement to Social Security cash benefits and Medicare, specifically among certain populations of Medicaid recipients with disabilities. As states continue to provide Medicaid coverage – and in some cases state cash benefits – to individuals who should be receiving federal benefits, these errors are costing individuals and states millions of dollars.

Solution

The University of Massachusetts Medical School (UMass), through its Center for Health Care Financing division, has developed the Medicare and Disability Entitlement Correction initiative to identify individuals who appear entitled to Social Security cash and/or Medicare benefits, but are not currently receiving them. Our team uses proprietary data mining and analysis applications to identify and calculate missed benefits and provide documentation to SSA for review and correction. We then work with state Medicaid programs and SSA Regional Offices to ensure that benefit determinations are corrected.

Corrected cases generally result in retroactive Social Security cash and/or Medicare benefits for the Medicaid recipients. Individuals experience immediate increases in monthly income. State Medicaid programs can reduce future costs with Medicare as the new primary payer, and are able to recover expenditures paid during retroactive Medicare benefit periods.

UMass has identified thousands of instances of missed entitlement for federal benefits among Medicaid recipients across multiple states. In some cases, recipients have been granted retroactive Social Security cash and Medicare benefits from as far back as 25 years.

Benefits

States

- As Medicare becomes the primary payer for health care services for eligible Medicaid recipients, state Medicaid programs realize savings in future costs.
Medicaid programs may also recover historical expenditures when retroactive Medicare coverage is granted to recipients.

Dual eligible populations with new Medicare benefits may qualify for integrated care initiatives to improve coordination of Medicaid and Medicare services and funding.

State cash benefits paid to Medicaid recipients, including State Supplement Payments, may decrease as a result of recipients becoming eligible for Social Security cash benefits, and payments may also be reimbursed for periods when individuals should have received federal cash benefits.

Individuals

Medicaid recipients receive all federal benefits – both prospectively and retroactively – to which they are entitled, including Social Security cash and Medicare benefits.

Qualifying relatives of recipients – including spouses, former spouses, and disabled adult children – may also be eligible to receive cash and Medicare benefits.

Sample Results

Through the Medicare and Disability Entitlement Correction initiative, UMass has helped identify and correct missing benefits for thousands of individuals, and has helped states save and recover significant costs.

As a result of our findings, three SSA Regional Offices acknowledged discrepancies in SSA processes for evaluating individual work history and recognizing qualifying eligibility coverage for Social Security cash and Medicare benefits.

For a sample population reviewed by one SSA Regional Office, we achieved an accuracy rate of more than 95% in identifying Social Security cash and Medicare entitlements that SSA previously missed.

In one state, we identified more than 2,300 Medicaid recipients who appear to have been missed for Social Security cash and/or Medicare benefits, and referred the cases to SSA for correction.

  - To date, benefits have been corrected for more than 1,000 recipients, leading to an additional **$8 million in estimated annual savings**.
  - Upon approval for Medicare benefits, the state projects **savings of $10 million to $15 million annually** in cost avoidance.

In another state, we identified more than 5,500 recipients in initial reviews, with an estimated potential savings of **$20 million to $40 million** in cost avoidance.

Why Choose Us?

Unlike most health consulting firms, UMass Medical School is itself a public entity driven by a mission to serve public health and human service agencies. We work to understand your agency’s mission and programs, and are flexible to your needs and capacity.

As a public organization, we are uniquely prepared to recognize and address the challenges of state and local agencies. In addition to strong academic backgrounds, many of us have professional experience in government at the state and federal levels. We have come from Medicaid, welfare and other human services agencies, and we understand the problems, issues and concerns faced by states every day because we have dealt with those issues ourselves.

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