

Medicare, Kidney Transplant, and Work

This document is intended for dialysis social workers to help answer questions for dialysis patients who are concerned about how their Medicare could be affected after a kidney transplant. Financial coordinators at the transplant programs should also be able to answer these types of questions for patients.

Medicare coverage lasts at least 36 months post-transplant. People who are 65 or older, those who are disabled, and those who return to dialysis within 3 years continue to be eligible for Medicare. In order to have full coverage through Medicare, make sure your Part B and D premiums are paid. Two Social Security work incentive programs can continue Medicare beyond 36 months for people with transplants. They are:

1. Continuation of Medicare
2. Continued Payment under Vocational Rehabilitation (VR) or Similar Program (Section 301 of the Social Security Disability Amendments of 1980, described in [Social Security's Red Book](#)).

Staff and patients should know that a transplant patient who *only* gets Social Security Disability Income (SSDI) or Supplemental Security Income (SSI) due to End Stage Renal Disease (ESRD) can lose it as soon as one year after transplant. (Section 6.04 in Determination under Social Security at <https://www.ssa.gov/disability/professionals/bluebook/6.00-Genitourinary-Adult.htm>).

1. Continuation of Medicare

Those with transplants who work with a disability in addition to ESRD can keep Medicare if:

- Work earnings are too low to count as a month of trial work (\$880/month in 2019 or 80 hours/month if self-employed); OR
- Work earnings after the 9-month trial work period stay below the substantial gainful activity (SGA) level (\$1,220 per month for people who are not blind or \$2,040 for people who are legally blind in 2019); OR
- Work earnings are above the guidelines. While the SSDI check may stop, **Continuation of Medicare** extends free Medicare Part A, premium Part B and Part D for 93 months (7.75 years) starting the month after SSDI ends. In some cases, disabled workers can buy into both Medicare Part A and Part B after the 93-months. States can pay Medicare Part A premiums if the patient's income and assets work for the Qualified Disabled and Working Individuals program (<https://www.medicare.gov/your-medicare-costs/get-help-payingcosts/medicare-savings-programs>).

NOTE: With receipts, the Social Security Administration (SSA) can deduct impairment-related work expenses (IRWE) from work earnings before testing whether those earnings use a trial work month or exceed the SGA.

2. Continued Payment Under VR or Similar Program (Section 301)

Transplant recipients with a successful transplant for 36 months who have **no other disability besides ESRD** can keep their SSDI cash and Medicare (or SSI cash, any state supplement and Medicaid) if they qualify for Continued Payment under VR or similar program (Section 301).

To qualify:

- The person must be in an “appropriate program” of VR before medically improved (successful transplant after one year); **AND**
- SSA determines the program will make it more likely the person will be permanently removed from the disability rolls. The Social Security Red Book lists these as appropriate programs:
 - An individualized education program (IEP) for those 18-21
 - Ticket-to-Work
 - An individualized plan for employment (IPE) by a state VR agency, the Veterans Affairs Education and Career Counseling program or a public or private employment network
 - Plan for achieving self-support (PASS)

SSDI and Medicare (or SSI and Medicaid) continues until the person completes the program, stops participating in VR, or Social Security decides continuing with the program won't increase his/her likelihood of staying off the disability rolls permanently.

For more information about these two and other Social Security work incentive programs, see the Social Security Red Book (<https://www.ssa.gov/redbook/>).

Questions & Answers

Where can I find more information?

You can find information about Continuation of Medicare for people with disabilities in Social Security's Program Operations Manual System at <https://secure.ssa.gov/poms.nsf/lnx/0428055001>.

Section 301 of the Social Security Disability Amendments of 1980 (P.L. 96-265) provides SSDI or SSI cash to people while they're in VR plans. Getting SSDI keeps Medicare. Getting SSI keeps Medicaid. You can find citations for Section 301 including amendments in Social Security's Program Operations Manual System at <https://secure.ssa.gov/poms.nsf/lnx/0414505010>.

Also see the Social Security Red Book: A Summary Guide to Employment Supports for Persons with Disabilities Under Social Security Disability Income (SSDI) and Supplemental Security Income (SSI) Programs at <https://www.ssa.gov/redbook/>.

Is this provided through legislation, regulation, or Medicare coverage rules?

Both of these were established by law. The goal was to help people with disabilities work, keep Medicaid and Medicare, and be less dependent on cash benefit programs.

<https://secure.ssa.gov/poms.nsf/lnx/0455001001>

Are there specific requirements for eligibility? (Used VR services anytime? Did VR services have to result in employment? What if employed but did not use VR services?)

Under Section 301, the person must be doing the activities in their public or private VR program's plan. Those not currently receiving VR services are not eligible.

Are there differences among Medicare carriers throughout the country?

No. This is a Social Security rule, not a Medicare benefit left to a Medicare Administrative Contractor's interpretation.

How would a patient know if he/she is receiving VR services?

A patient who is eligible for VR services is assigned a counselor, develops an individualized plan for employment (IPE) that states the patient's goal and steps to achieve it. When the IPE is approved, state VR agencies can provide such training services as vocational training and tuition assistance, such career services as VR counseling and job search assistance, and other services such as the provision of rehabilitation technology to individuals with disabilities. Private employment networks evaluate applicants to find out if they offer the services the patient needs. If so, they provide needed services. Patients should maintain regular contact with their counselor and should know if they're receiving services and working the steps to reach their goal.

Do people need to continue to remain enrolled in VR services but not necessarily move toward employment? How long does a VR agency keep a person in the program if there is no move toward employment?

Under Section 301, SSA reviews the VR program and the individual's plan to assure that once completed, the person will be off the disability rolls permanently. Patients continue to get cash benefits plus Medicare or Medicaid. Examples of plans might include but are not limited to getting more education or job training or setting up a business.

NOTE: Those who are on hemodialysis or peritoneal dialysis and who qualify for Medicare do not have to limit the amount of money they make from work or the number of hours they work if self-employed to keep it. If they're 18 through 64 and getting SSDI or SSI, they can use the Ticket-to-Work and work incentive programs described in the Red Book.