

**Enrollment, Employment, and  
Earnings in the Medicaid Buy-In  
Program, 2011**

Final Report

May 20, 2013

Matthew Kehn



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**Policy Research**

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## EXECUTIVE SUMMARY

In an effort to improve employment outcomes for individuals with disabilities, Congress authorized the establishment of the Medicaid-Buy in program, allowing states to expand Medicaid coverage to include working individuals with disabilities whose income and assets would otherwise make them ineligible for traditional Medicaid. Buy-In programs have been authorized by the Balanced Budget Act (BBA) of 1997 and the Ticket to Work and Work Incentives Improvement Act (the Ticket Act) of 1999, and are overseen by the Centers for Medicare & Medicaid Services (CMS). The Buy-In program allows individuals with disabilities to pursue employment without fear of losing access to necessary health care services and supports. CMS has granted states the flexibility to tailor their programs and policies to meet the specific needs of their state's target population, as well as to align with state resources and goals. This flexibility has led to considerable variation in program design and outcomes among the states.

Beginning in 2001, the Ticket Act provided states the opportunity to use the Medicaid Infrastructure Grant (MIG) program, also overseen by CMS, to support the development of state infrastructures which promote competitive employment for individuals with disabilities. One of the most visible activities of MIG funding has been to assist with the establishment and operation of the Buy-In program. It is through the MIG program that states submitted Buy-In-related data that was used for this report.

This report, prepared by Mathematica Policy Research under contract with CMS, is the last in a series of annual reports on participation in the Medicaid Buy-In program. It provides updates on both national and state-level trends in enrollment, employment, and earnings among the 35 reporting MIG states with a Buy-In program in 2011. Additionally, we address recent changes to state program rules and policies, and identify any factors that may have affected recent Buy-In enrollment, as reported by the states in an annual questionnaire. For purposes of consistency, the organization and presentation of these findings are largely unchanged from previous reports. The following are a few highlights from this report:

- In 2011, 38 states had a MIG-supported Buy-In program, the same number of states as in 2010 and the highest number of programs since the Buy-In was first authorized. Of these 38 states, 35 submitted the relevant Buy-In program data.
- Among the reporting states, there were a total of 192,946 enrollees in 2011, representing a 10 percent increase over 2010 enrollment and demonstrating continued interest in the program among working individuals with disabilities. Nearly 27 percent of these enrollees were first-time enrollees.
- The size of state programs varied, from fewer than 50 enrollees to nearly 20,000. The five largest programs—Pennsylvania, Massachusetts, Wisconsin, Iowa, and Michigan—each had more than 12,000 enrollees and, combined, represented more than 55 percent of the nationwide total.
- Over 65 percent of all enrollees were employed in 2011; measured by having reported positive earnings to the Internal Revenue Service (IRS). This represents a rate of employment similar to that reported in previous years. The employment rate varied widely among the state programs.

- Annual earnings among Buy-In participants in 2011 averaged \$9,135, a slight decrease from the \$9,284 average reported in 2010. To a large extent, average earnings are a product of the income eligibility criteria established by state programs, such as the income ceiling and asset limitations. Total earnings among all participants in 2011 were about \$1.15 billion, a 5.5 percent increase from 2010.
- States reported only minor tweaks to program rules in 2011, such as adjustments to the premium structure, the strengthening of income verification requirements, or added restrictions in work interruption provisions.
- The extent to which the recent economic downturn has affected enrollment remains unclear; several states believe it caused an increase in enrollment, some believe it caused a decrease, and others believe it had no effect.
- The majority of states reported that changes in outreach and marketing efforts had an effect on enrollment. Some states reported that focused outreach efforts resulted in increased enrollment, whereas other states noted that state budget cuts limited their marketing efforts, potentially limiting enrollment growth.

## I. BACKGROUND AND PURPOSE

### A. Background and Policy Context

To maintain life quality and independence, individuals with disabilities often require access to a wide range of health care supports and services, thus making obtaining health insurance critically important. The majority of Americans receive care through employer-based health insurance plans; however, such plans are often available only to those who work full time, excluding many individuals with disabilities who work part time. Furthermore, private health plans often lack coverage for many of the basic yet essential needs of individuals with disabilities, such as durable medical equipment, transportation, personal assistance services, and other work-related assistance. For these reasons, many individuals with disabilities obtain coverage through public insurance programs, such as Medicare and Medicaid. Because these programs provide fairly comprehensive coverage, and because access is obtained by virtue of income-based eligibility for other programs—Medicare through Social Security Disability Insurance (SSDI) and Medicaid through Supplemental Security Income (SSI)—individuals with disabilities often work at a level low enough to ensure continued eligibility for SSDI and SSI, so as not to risk losing access to these necessary health services and supports.

Recognizing this disincentive to employment, Congress established the authority permitting states to implement Medicaid Buy-In (MBI) programs to allow employed individuals with disabilities to pay a premium in exchange for Medicaid coverage, using less restrictive financial eligibility criteria than traditional Medicaid. States have enacted Buy-In programs under several authorizations, most notably Section 4733 of the Balanced Budget Act of 1997 (BBA) and the Ticket to Work and Work Incentives Improvement Act of 1999 (Ticket Act). (See Appendix B, Table B.1 for a full list of authorizations.)<sup>1</sup> The Ticket Act also provided states the opportunity to use the Medicaid Infrastructure Grant (MIG) program, which has provided funding to states to develop infrastructure and initiatives that promote competitive employment for this population including to assist with establishing and/or supporting Buy-In programs. It is through the MIG program, which is overseen by the Centers for Medicare & Medicaid Services (CMS), that states submitted Buy-In-related data used in this report. (Data sources and data collection procedures can be found in Appendix A.)

### B. Status of the Buy-In Program

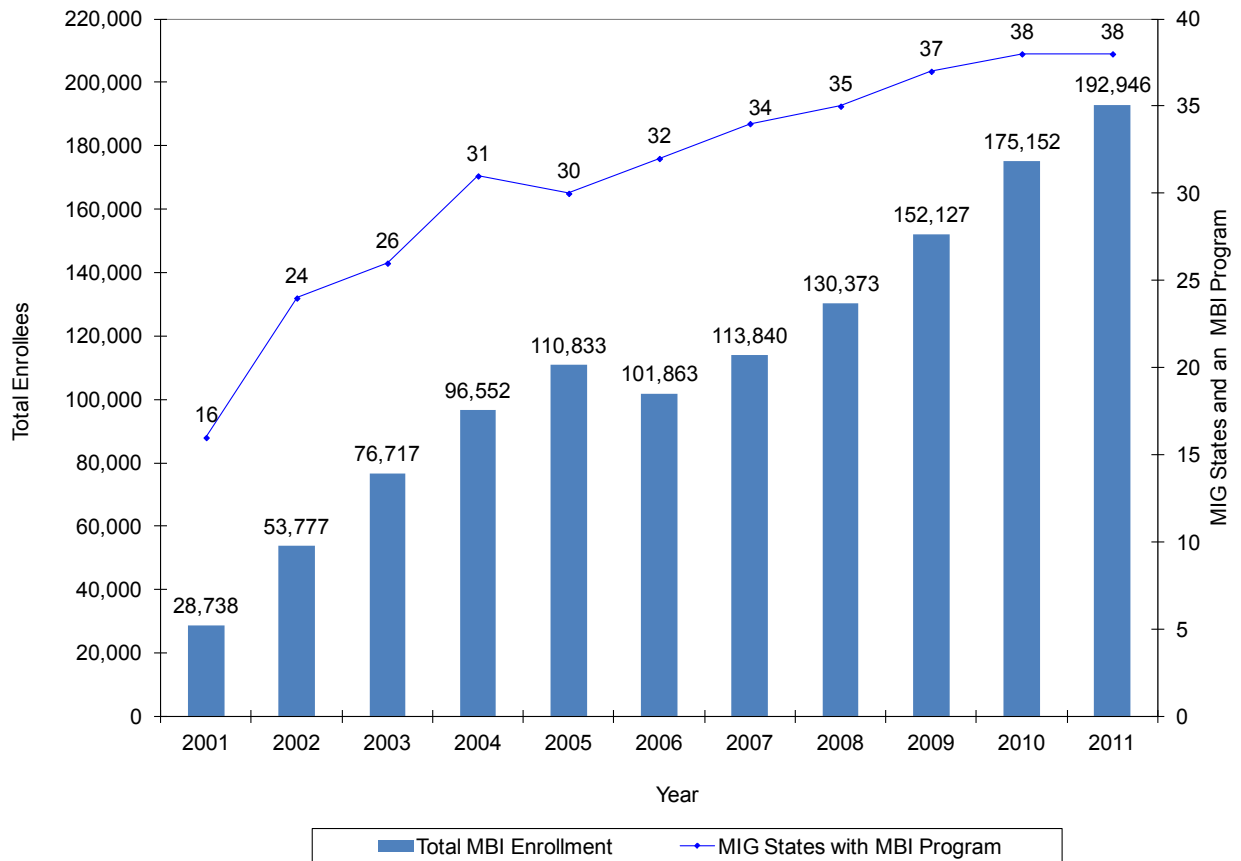
The number of states with a MIG-supported Buy-In program has increased significantly, from 16 states in 2001 to 38 states in 2011. Partly reflecting growth in the number of state programs, total national Medicaid Buy-In enrollment has grown considerably, from nearly 29,000 in 2001 to nearly 193,000 in 2011 (Figure I.1). Only states with MIG funding are required to report data on their Buy-In program to CMS for this report; consequently, our report is limited to these states. Although 38 states had a MIG-supported Buy-In program in 2011, at

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<sup>1</sup> Some states have received Buy-In authorization under a Section 1115 waiver. In Massachusetts, for example, the 1115 waiver authority allows the state to define a level of work (40 hours per month) required for eligibility. The BBA and Ticket Act do not permit states to define “employed” in such specific operational terms for eligibility purposes. Some states which originally received approval to administer their Medicaid Buy-In programs using the Ticket Act or BBA authority have since incorporated their Medicaid Buy-In programs into their state’s 1115 programs.

the time of data submission in 2012, only 35 of them were operating on a no-cost extension status. The remaining three states—Illinois, Nebraska, and West Virginia—had completed all MIG-supported operations and were not required to submit Buy-In enrollment data.<sup>2</sup> Consequently, data presented in this report are based on 35 of the 38 2011 MIG states. National Buy-In enrollment reported for 2011 would be even higher if these three state programs, as well as other Medicaid Buy-In programs in states without a Medicaid Infrastructure Grant, were included.

**Figure I.1. Number of MIG States with Buy-In Programs and Total Program Enrollment<sup>3</sup>**



Consistent with the authorizing legislation, CMS has allowed states flexibility in determining program features such as income and asset eligibility criteria and the amount of premiums charged to participate in the program. States with a Buy-In program under the BBA can offer Medicaid coverage to individuals with incomes up to 250 percent of the poverty level (which could include disregarding certain types of income). Under the Ticket Act, states are free to establish the income and resource standards for their programs, including the possibility of having no limits at all. This flexibility may partly explain the strong state interest in Buy-In programs, since each state can tailor its program to meet its own objectives and to target specific populations.

<sup>2</sup> These states are reporting MBI enrollment through the MSIS data system, which is not used in this analysis.

<sup>3</sup> Although this figure depicts 38 states in 2011 with a MIG-supported Buy-In program, the enrollment total for 2011 does not include three of these states—Illinois, Nebraska, and West Virginia—because these states did not provide the necessary enrollment data.

States have used the flexibility granted by CMS to shape both enrollment and participant employment outcomes related to their Buy-In programs. Previous research has shown how states use program rules, such as income and asset eligibility criteria, to administer some control over the eligible population, as well as to affect participant employment outcomes (Ireys et al. 2007). For example, states that adopt higher upper income limits will have participants with higher earnings. Other features, such as work-verification requirements or work interruption provisions (that is, “grace periods”),<sup>4</sup> may also affect enrollment, but will more directly affect the level of participant employment.<sup>5</sup> For example, one report found that participants in states with shorter grace periods, stronger work-verification requirements, and higher income limits were more likely to be employed than participants in states without such provisions (Gimm et al. 2008). Program rules should be considered when reviewing cross-state comparisons in this report.

### C. Purpose of This Report

With the end of MIG funding in 2011, this is the last in a series of reports examining Buy-In participation and related outcomes. The purpose of this report is to capture the level of interest in this program by presenting trends in enrollment and participant outcomes. In this report we provide:

- An update on national and state trends in Buy-In program enrollment, as well as on employment and earnings outcomes among participants
- State-reported changes in their Buy-In programs and related policies
- A summary of external factors that may be influencing Buy-In enrollment, as reported by state program project directors, with a particular focus on the role of the recent economic downturn

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<sup>4</sup> Work interruption provisions allow a Buy-In participant who is experiencing a temporary loss of employment to remain in the program up to an established amount of time.

<sup>5</sup> Most states report having a work interruption provision, as shown in Appendix C, Table C.1, even though this is only permitted in those states with a Buy-In program authorized under a Section 1115 waiver.

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## II. NATIONAL AND STATE TRENDS IN ENROLLMENT, EMPLOYMENT, AND EARNINGS

Key to assessing the benefits of the Buy-In program is an examination of program participation over time and the extent to which participants are able to maintain employment. This chapter describes national trends in Buy-In enrollment and participant outcomes, particularly employment and average earnings, and presents comparable state-level data. The flexibility granted to states by CMS in how they design and operate their Buy-In programs has resulted in each state program having some level of distinction; therefore, the reader is cautioned to avoid making cross-state comparisons. The state-level tables in this chapter are presented to help the reader determine a state's individual contribution to the national trends. Complete state-level data for all program years can be found in Appendix B.

### A. Trends in Buy-In Enrollment

Between 2010 and 2011, total Buy-In enrollment among the 35 states that reported Buy-In data<sup>6</sup> grew by about 10 percent, to a total of 192,946 enrollees.<sup>7</sup> State programs varied in size, as shown in Table II.1, ranging from fewer than 50 enrollees to more than 20,000. The five largest programs—Pennsylvania, Massachusetts, Wisconsin, Iowa, and Michigan—each had more than 12,000 enrollees; combined, they represented more than 55 percent of the nationwide total. Among those programs with at least 150 enrollees, the programs that grew the most between 2010 and 2011 were Montana (+155 percent), Michigan (+33 percent), Idaho (+32 percent), Ohio (+28 percent), and Pennsylvania (+23 percent). Only four states with at least 150 enrollees showed a decline in total enrollment from 2010: New Mexico (-18 percent), Arkansas (-13 percent), Washington (-4 percent), and Connecticut (-2 percent). There are many factors that could affect enrollment, and these vary by state. Chapter III of this report presents a summary of factors that have been identified by state program directors.

Nearly 27 percent of total Buy-In enrollees in 2011 (51,190 individuals) were first-time enrollees, as shown in Table II.2.<sup>8</sup> In absolute numbers, the programs with the largest number of new enrollees were Pennsylvania, Michigan, Massachusetts, Ohio, and Wisconsin. Combined, these five programs represent over 60 percent of new enrollees nationwide in 2011. Among those programs with at least 20 new enrollees, several reported a notable percentage increase in the number of new enrollees between 2010 and 2011, most notably Montana (+63 percent), Alaska (+30 percent), North Dakota (+26 percent), Oregon (+21 percent), and Pennsylvania (+20 percent); however, 15 states reported a decrease in the number of new enrollees.

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<sup>6</sup> Only states with an active MIG program in 2011 were required to submit Buy-In enrollment data. Our analysis is limited to these 35 states.

<sup>7</sup> The growth rate would have been higher if all 38 states that provided enrollment data in 2010 had also provided enrollment data in 2011, but three states—Illinois, Nebraska, and West Virginia—did not provide 2011 data.

<sup>8</sup> A newly enrolled Buy-In participant is one who has not been enrolled in the program in previous years. Although the individual is new to the Buy-In program, he or she is not necessarily new to Medicaid. A study by Gimm et al. (2009) found that about two-thirds of first-time Buy-In participants in 2004 had Medicaid coverage in the year prior to enrollment.

**Table II.1. Total Ever Enrolled for Select Years, Sorted by Largest 2011 Enrollment**

	Total Ever Enrolled*	2003	2005	2007	2009	2010	2011	% Growth
<b>National</b>	<b>407,140</b>	<b>76,717</b>	<b>110,833</b>	<b>113,840</b>	<b>152,127</b>	<b>175,152</b>	<b>192,946</b>	<b>10.2%</b>
Pennsylvania	58,826	2,775	8,814	12,906	23,303	29,220	35,946	23.0%
Massachusetts	56,475	10,975	13,425	17,023	18,956	19,741	20,617	4.4%
Wisconsin	31,277	5,669	9,810	12,505	16,084	18,435	20,500	11.2%
Iowa	30,783	7,547	11,210	13,380	16,105	16,979	17,788	4.8%
Michigan	17,666	--	411	1,101	4,995	9,267	12,323	33.0%
New York	18,164	899	4,553	6,930	9,628	10,529	11,481	9.0%
Ohio	13,968	--	--	--	5,728	7,727	9,919	28.4%
Minnesota	23,080	8,420	8,108	8,455	9,152	9,355	9,721	3.9%
California	16,128	1,193	2,548	5,137	6,377	7,433	8,225	10.7%
Indiana	26,545	7,866	9,903	8,347	7,332	7,268	7,449	2.5%
Connecticut	14,903	3,797	5,050	5,971	6,518	6,470	6,344	-1.9%
New Jersey	7,840	1,194	2,231	3,467	3,950	5,157	6,295	22.1%
Louisiana	5,815	--	956	1,528	2,318	2,890	3,119	7.9%
New Hampshire	6,556	1,547	2,187	2,207	2,572	2,575	2,673	3.8%
North Carolina	3,245	--	--	--	1,363	1,903	2,271	19.3%
Washington	3,980	284	950	1,479	2,015	2,158	2,066	-4.3%
Arizona	3,677	439	1,040	1,337	1,367	1,729	1,946	12.6%
Oregon	3,741	984	806	890	1,508	1,638	1,827	11.5%
New Mexico	6,899	1,276	1,928	1,992	2,058	2,171	1,771	-18.4%
Idaho	2,288	--	--	477	860	1,250	1,650	32.0%
Kansas	3,370	835	1,229	1,322	1,425	1,518	1,582	4.2%
Maine	5,467	1,169	1,191	1,349	1,370	1,370	1,374	0.3%
Utah	4,578	352	467	1,143	1,140	1,137	1,197	5.3%
Vermont	3,148	755	898	917	961	971	985	1.4%
Maryland	1,213	--	--	207	658	775	898	15.9%
North Dakota	1,073	--	397	553	665	639	662	3.6%
Montana	676	--	--	--	--	255	651	155.3%
Alaska	1,423	297	352	360	365	388	444	14.4%
South Dakota	526	--	--	78	207	320	389	21.6%
Texas	477	--	--	44	177	296	342	15.5%
Wyoming	473	9	11	87	211	243	288	18.5%
Arkansas	605	80	70	173	199	205	178	-13.2%
Virginia	75	--	--	14	33	36	52	44.4%
Rhode Island	51	--	--	23	26	19	20	5.3%
Nevada	78	--	28	38	21	16	12	-25.0%
Illinois	2,329	686	1,018	902	822	889	--	--
Nebraska	719	142	141	188	160	143	--	--
West Virginia	2,888	--	274	847	1,551	2,095	--	--

Source: Medicaid Buy-In finder files, 1997–2011.

Note: See Appendix B, Table B.2 for all years' data. Dashes indicate a year in which the state did not have both a MIG and Buy-In program.

\*Total ever enrolled includes enrollees for all years between 1997 and 2011.



**Table II.2. Total Newly Enrolled for Select Years, Sorted by Largest 2011 Enrollment**

	Total Newly Enrolled*	2003	2005	2007	2009	2010	2011	2010–11 Growth
<b>National</b>	<b>407,140</b>	<b>30,943</b>	<b>31,594</b>	<b>31,938</b>	<b>45,266</b>	<b>50,343</b>	<b>51,190</b>	<b>1.7%</b>
Pennsylvania	58,826	1,657	4,234	4,899	9,397	10,576	12,638	19.5%
Michigan	17,666	--	393	666	3,890	5,353	5,866	9.6%
Massachusetts	56,475	3,261	4,310	4,726	5,160	4,942	4,744	-4.0%
Ohio	13,968	--	--	--	3,313	3,767	4,111	9.1%
Wisconsin	31,277	2,330	2,881	2,691	3,394	3,866	3,878	0.3%
Iowa	30,783	2,220	2,894	2,515	3,119	2,705	2,707	0.1%
New York	18,164	899	2,036	1,905	2,525	2,254	2,444	8.4%
California	16,128	477	1,312	2,061	1,942	2,221	2,124	-4.4%
Indiana	26,545	4,012	2,890	2,129	1,754	1,990	2,060	3.5%
Minnesota	23,080	1,742	1,346	1,227	1,315	1,324	1,335	0.8%
New Jersey	7,840	552	729	944	0	1,178	1,177	-0.1%
Louisiana	5,815	--	487	594	936	1,091	963	-11.7%
North Carolina	3,245	--	--	--	1,183	940	937	-0.3%
Connecticut	14,903	1,158	1,488	1,355	1,222	1,014	917	-9.6%
New Hampshire	6,556	527	679	571	661	554	562	1.4%
Utah	4,578	220	254	772	514	545	553	1.5%
Idaho	2,288	--	--	477	319	583	494	-15.3%
Arizona	3,677	439	409	328	298	650	459	-29.4%
Oregon	3,741	371	207	235	396	359	434	20.9%
Montana	676	--	--	--	--	255	421	65.1%
Maine	5,467	457	422	439	408	430	402	-6.5%
Kansas	3,370	359	365	277	290	349	327	-6.3%
Washington	3,980	141	480	492	659	532	294	-44.7%
New Mexico	6,899	612	804	634	744	739	273	-63.1%
Maryland	1,213	--	--	126	266	225	249	10.7%
Vermont	3,148	262	265	242	235	204	232	13.7%
Alaska	1,423	124	118	117	87	112	145	29.5%
South Dakota	526	--	--	74	79	161	128	-20.5%
Texas	477	--	--	36	109	156	118	-24.4%
North Dakota	1,073	--	142	137	99	74	93	25.7%
Wyoming	473	6	6	59	95	92	93	1.1%
Arkansas	605	14	20	67	54	44	31	-29.5%
Virginia	75	--	--	14	13	14	19	35.7%
Rhode Island	51	--	--	11	4	3	3	0.0%
Nevada	78	--	21	19	4	3	1	-66.7%
Illinois	2,329	365	331	187	162	219	--	--
Nebraska	719	41	59	80	44	44	--	--
West Virginia	2,888	--	191	389	618	816	--	--

Source: Medicaid Buy-In finder files, 1997–2011.

Note: See Appendix B, Table B.3 for all years' data. Dashes indicate a year in which the state did not have both a MIG and Buy-In program.

\*Total newly enrolled includes new enrollees for all years between 1997 and 2011.

Although states may collect premiums from Buy-In participants in exchange for Medicaid coverage, they are not required to do so. When premiums are charged, they are typically calculated based on participant income; however, each state has a unique system for calculating this premium, and there are CMS-imposed percentage limits per beneficiary. In 2011, 26 of the 35 reporting states with MIG funding and a Buy-In program reported charging premiums to participants. Among the 26 states, a total of \$39,349,693 in premiums was charged to participants, as detailed in Appendix B, Table B.4. Readers are cautioned not to make cross-state comparisons when reviewing the average premium data, because the methods for calculating a premium vary widely by state and may not reflect the true premium being charged. Of the nine states that did not charge premiums, six (Arkansas, New Mexico, New York, South Dakota, Vermont, and Virginia) did not have a premium structure in place from which rates could be determined, whereas the remaining three states (Michigan, New Jersey, and North Carolina) had a set premium structure but decided not to charge participants a premium. Earlier work (Ireys et al. 2007) has shown that often these states believed that the administrative costs associated with charging premiums outweighed the expected revenue.

## **B. Trends in Participant Employment and Earnings**

Just over 65 percent of all enrollees were employed in 2011, as measured by having reported earnings to the IRS, and as detailed in Table II.3. Although this rate of employment is similar to that reported in all previous years, the rate has been steadily declining since 2006, when the employment rate of Buy-In participants was approximately 72 percent. The employment rate varied widely among the programs, with seven states reporting a rate over 90 percent (Rhode Island, North Dakota, Montana, Virginia, Vermont, Maine, and New Hampshire). Our measure of employment is based on earnings data from the Internal Revenue Service (IRS) and excludes individuals who did not report earnings to the IRS; participants in noncompetitive arrangements, such as volunteer positions or in-kind work; those who did not have taxes collected on their earnings or had not yet submitted income information to the IRS for the report period.<sup>9</sup>

Earnings among Buy-In participants in 2011 averaged \$9,135 a year, as detailed in Table II.4, a slight decrease from the \$9,284 average reported in 2010.<sup>10</sup> Among those programs with at least 150 participants, the states with the highest average earnings were Arkansas (\$16,672), Texas (\$13,926), Louisiana (\$13,266), Pennsylvania (\$12,954), and Massachusetts (\$12,867). To a large extent, average earnings are a product of the income eligibility criteria established by state programs, such as the income ceiling and asset limitations. For example, states that set a higher income eligibility criterion will inevitably have a pool of program participants with higher earnings. Since states have not made significant adjustments to these criteria over the years, average earnings by state have remained fairly constant. Total earnings among all participants in 2011, as detailed in Appendix B, Table B.7, were about \$1.15 billion, a 5.5 percent increase from 2010, with the largest state contributions coming from Pennsylvania (\$329 million), Massachusetts (\$157 million), New York (\$85 million), Minnesota (\$55 million), and Indiana (\$53 million).

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<sup>9</sup> Our measure of employment—the percentage with positive earnings—is measured using annual data from the Master Earnings File (MEF), which contains data from the IRS about earned income reported for tax purposes. Most Buy-In states require participants to verify employment by proving that taxes are being paid on their wages.

<sup>10</sup> Average earnings for a state are calculated by dividing total earnings by the number of participants who have positive earnings, as reported by the Internal Revenue Service (IRS). For additional information on how this data was used, please see the data Appendix A.

**Table II.3. Percentage of Enrollees with Earnings for Select Years, Sorted by 2011 Percentages**

	2003	2005	2007	2009	2010	2011
<b>National</b>	<b>69.44</b>	<b>66.64</b>	<b>71.10</b>	<b>68.61</b>	<b>67.11</b>	<b>65.34</b>
Rhode Island	--	--	100.00	88.46	94.74	95.00
North Dakota	--	95.72	96.20	94.74	94.52	93.96
Montana	--	--	--	--	95.29	92.78
Virginia	--	--	100.00	84.85	94.44	92.31
Vermont	87.81	85.75	94.11	90.53	89.08	90.76
Maine	91.96	93.12	92.88	90.44	90.51	90.47
New Hampshire	87.72	90.08	92.25	90.90	89.86	90.09
Texas	--	--	--	94.92	92.91	89.77
South Dakota	--	--	94.87	90.82	92.50	89.72
Minnesota	86.37	93.08	92.75	91.38	90.75	89.06
Kansas	94.97	93.98	94.93	92.77	90.71	88.69
Arizona	--	--	90.28	88.08	89.36	88.39
Maryland	--	--	94.20	87.23	87.61	88.08
North Carolina	--	--	--	93.25	88.70	87.71
Ohio	--	--	--	93.58	90.19	86.78
Utah	74.15	84.37	88.98	86.93	86.37	85.88
Indiana	88.86	87.31	86.99	82.95	85.20	85.86
Louisiana	--	91.74	90.64	89.13	88.30	85.35
Washington	93.31	87.05	88.37	83.87	83.18	83.54
Arkansas	--	85.71	88.44	84.92	83.41	83.15
Connecticut	87.17	88.00	87.04	84.52	82.69	82.27
Oregon	86.38	88.96	91.80	88.00	87.00	81.83
Idaho	--	--	--	86.63	87.92	80.67
New York	83.20	82.25	--	78.39	78.73	78.24
Nevada	--	85.71	86.84	80.95	75.00	75.00
Pennsylvania	76.90	74.04	72.88	71.29	70.82	70.56
Michigan	--	91.24	87.10	84.22	71.81	63.39
Massachusetts	84.89	76.01	69.91	63.80	61.31	59.11
New Jersey	90.62	84.18	75.94	62.84	57.84	55.31
Alaska	58.25	57.39	55.28	55.62	52.58	52.25
Wyoming	--	45.45	68.97	54.03	51.85	52.08
California	74.52	73.86	68.93	57.08	52.58	49.60
New Mexico	43.34	45.64	48.39	47.62	46.66	44.95
Iowa	49.36	42.28	39.64	34.80	33.18	34.91
Wisconsin	63.03	51.96	47.53	40.22	37.88	34.81
Illinois	97.96	96.56	96.12	95.50	94.94	--
Nebraska	90.85	97.16	96.28	95.63	98.60	--
West Virginia	--	--	89.85	87.36	85.92	--

Sources: Medicaid Buy-In finder files and SSA's Master Earnings File, 2003–2011.

Note: See Table B.5 for all years' data. Dashes indicate a year in which the state did not have both a MIG and a Buy-In program.

**Table II.4. Average Earnings for Select Years, Sorted by Highest 2011 Average Earnings**

	2003	2005	2007	2009	2010	2011
<b>National</b>	<b>8,718</b>	<b>8,869</b>	<b>9,498</b>	<b>9,182</b>	<b>9,284</b>	<b>9,135</b>
Nevada	--	12,969	13,009	13,595	17,058	20,622
Arkansas	--	15,161	15,920	15,594	16,358	16,672
Texas	--	--	--	13,027	13,812	13,926
Rhode Island	--	--	14,600	13,685	11,242	13,287
Louisiana	--	10,685	12,651	13,152	13,490	13,266
Pennsylvania	8,810	10,506	11,681	12,106	12,634	12,954
Massachusetts	15,466	14,566	13,992	13,150	13,174	12,867
Virginia	--	--	6,028	9,690	11,977	12,762
Washington	9,034	9,175	10,410	10,757	11,572	11,632
South Dakota	--	--	9,591	10,213	10,971	10,680
Maryland	--	--	9,996	10,104	10,644	10,909
Alaska	13,730	13,356	12,925	12,153	11,610	10,231
California	11,537	11,564	11,468	10,195	9,985	9,824
Maine	10,367	9,780	9,807	9,764	9,656	9,571
New Mexico	9,601	9,559	10,100	10,085	9,694	9,554
New York	8,656	9,120	--	9,633	9,559	9,407
New Jersey	9,315	9,654	9,896	9,571	9,579	9,077
Arizona	--	--	10,729	9,963	9,052	8,832
Wyoming	--	13,709	7,759	7,358	8,612	8,662
Indiana	7,036	7,635	8,457	8,420	8,533	8,354
Vermont	8,193	8,375	8,491	7,863	7,837	7,767
North Carolina	--	--	--	8,047	7,869	7,736
Connecticut	8,466	8,450	8,252	8,092	7,933	7,611
Utah	9,123	9,549	8,565	7,980	8,186	7,451
Idaho	--	--	--	7,028	7,237	7,281
Kansas	5,950	6,185	6,904	7,757	7,498	7,251
New Hampshire	6,693	7,548	8,149	7,776	7,468	7,134
Oregon	9,156	9,960	10,035	7,139	7,028	6,988
Michigan	--	7,664	8,420	6,183	6,393	6,421
North Dakota	--	6,150	5,881	5,946	7,054	6,370
Minnesota	6,911	6,867	6,681	6,436	6,339	6,299
Ohio	--	--	--	6,156	6,127	5,722
Iowa	5,164	5,310	5,396	5,546	5,388	4,938
Montana	--	--	--	--	5,093	4,901
Wisconsin	5,873	5,524	5,154	4,811	4,822	4,823
Illinois	8,082	8,384	8,274	8,036	8,369	--
Nebraska	10,003	9,444	9,869	9,870	10,685	--
West Virginia	--	--	13,209	13,764	14,199	--

Sources: Medicaid Buy-In finder files and SSA's Master Earnings File, 2003–2011.

Note: See Table B.6 for all years' data. Dashes indicate a year in which the state did not have both a MIG and a Buy-In program.

### **III. STATE-REPORTED PROGRAM CHANGES AND FACTORS AFFECTING ENROLLMENT**

Over the years, some states may have adjusted Buy-In program rules to affect enrollment and related outcomes. Program changes may be in response to a number of different factors, including interest in the program, broader state Medicaid policy changes, or changes in the economic environment. In this section, we describe 2011 program rule changes, along with any factors identified as affecting enrollment, as reported by the states MIG Project Directors through a questionnaire (see Appendix A for details of the questionnaire).

#### **A. State-Reported Medicaid Buy-In Program Rule Changes in 2010–2011**

CMS permits states to have flexibility in how they design and operate their Buy-In program; as a result, states have enacted a wide range of program features, as detailed in Appendix C, Table C.1. States were asked through a questionnaire to report any rule changes made to their Buy-In program during 2010–2011. For the most part, states reported only minor tweaks to program rules rather than any significant changes. The following is a summary of the changes reported:

- California, Iowa, and Rhode Island reported changes to their Buy-In premium structures. For example, in an effort to reduce a potential disincentive to enroll, Rhode Island adopted a sliding scale premium structure, in which payment due is based on countable income. California and Iowa both reported an increase in premiums.
- Kansas and Wisconsin reported changes to their programs' work interruption provisions. Kansas reported a reduction in the allowable unemployment period from six to four months, whereas Wisconsin added a six-month maximum work interruption protection, provided that the enrollee is unable to work due to health problems.
- Idaho reported strengthened work verification policies. Going forward, enrollees in that state must provide employer pay stubs and other documentation that proves that income is subject to income taxes.
- Alaska reported an increase in its unearned income limit from \$1,156 to \$1,252, allowing individuals with a higher amount of unearned income, such as Social Security Disability Insurance income or in-kind support, to meet eligibility criteria.
- California and Idaho both reported changes to their program asset-eligibility criteria. Idaho increased the asset limit for couples from \$10,000 to \$15,000. California removed the asset cap on retained earnings once enrolled, thus encouraging participants to increase their assets without risk of losing eligibility.

In addition to the above, two states reported broader policy changes that affect the Buy-In program:

- Minnesota passed a state law requiring that Buy-In enrollees be notified of Buy-In eligibility termination at least 24 months prior to their 65th birthday and informed of the medical assistance eligibility rules affecting income, assets, and treatment of a spouse's income and assets that will be applied upon reaching age 65.

- California added several rules related to retirement income that the state hopes will encourage increased enrollment. In particular, the state added a rule that retirement accounts started during Buy-In participation (which are exempt from the Buy-In program resource limit) will be exempt from the resource limit for any other Medicaid eligibility category the individual may transfer to in the future. This effectively removes the penalty if the participant needs to transfer out of the Buy-In and into another Medicaid eligibility category.

## B. State-Reported Factors Affecting Enrollment in 2010–2011

State MIG Project Directors were asked whether they believed that economic conditions, particularly the recent recession, had an effect on enrollment. About half of the states (18 of the 37) reported that there was some impact; however, the responses received suggest that a more complicated and nonlinear relationship may exist between macroeconomic conditions and enrollment, a finding consistent with a previous report that more closely examined this relationship (Kehn et al. 2013).

- Ten states reported that, directly or indirectly, the economic downturn contributed to *decreased* Buy-In enrollment. Programs may have witnessed a decline in Buy-In enrollment if, for example, a large number of previously working participants lost their jobs because of the recession, making them no longer eligible for the program. Similarly, the recession may have reduced the pool of employed individuals with disabilities, thus reducing the pool of potentially eligible participants.
- Eight states reported that, directly or indirectly, the economic downturn contributed to *increased* Buy-In enrollment. Programs may have witnessed an increase in Buy-In enrollment if a number of workers previously ineligible because their earnings exceeded the earnings income limit became eligible due to a reduction in hours as a result of poor economic conditions. Additionally, an increase in enrollment could also be linked to a decrease in the number of workers receiving employer sponsored insurance (ESI). Individuals who previously met the income eligibility criteria may have declined enrollment due to their medical needs being met by ESI coverage. If that coverage is lost, these individuals could have turned to the Buy-In.
- Nine states reported that the economy had not had any impact on Buy-In enrollment. Enrollment in these states either remained stable or continued to grow, but the states believed this could not be attributed to the economy.
- One state, Illinois, reported that economic conditions led to a tightened state budget, causing a reduction in funding for program outreach that likely prevented the program from growing to the fullest extent possible. Although only one state reported this as a barrier, this type of indirect effect may have been more widespread.

States were also asked if they believed the Patient Protection and Affordable Care Act, or any anticipated changes to the health care system, had any impact on their Buy-In program policies or procedures. All states that responded to this question indicated that no such effect could be identified. States did, however, note other factors that have, or will have, an effect on the Buy-In program:

- Ten states reported that changes in outreach methods or outreach efforts have affected program enrollment. Louisiana for example, targeted their marketing efforts to small businesses and business groups, whereas the Maryland program staff collaborated with the state's Division of Rehabilitation in an effort to identify potentially eligible individuals. These states believed that these efforts were partly responsible for growth in enrollment. Other states, like New Hampshire and Rhode Island, identified staffing cuts as contributing to a lower than expected growth in enrollment.
- Two states reported that new eligibility requirements or procedures may have caused a fluctuation in enrollment. In Arkansas, for example, a tightening of the requirements for annual disability redeterminations for non-SSA beneficiaries led some individuals to lose Buy-In eligibility. In contrast, California passed legislation establishing program changes that will make the Buy-In more appealing. Although the changes have not yet gone into effect, community providers recognize the upcoming advantages of the changes and consequently have increased their program promotion efforts.
- Two states indicated that a change to an automated eligibility system has had an adverse effect on program enrollment. Utah, for example, believes the automated system decreases the amount of face-to-face interaction occurring between potential participants and eligibility workers, thus hindering potential enrollees from learning about their full Medicaid options and the benefits of the program. Similarly, Nebraska believes its shift from in-person eligibility determination to an online and call-based application process has reduced in-depth program awareness among potential participants.

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## IV. CONCLUSION

Congress established the authorities for states to implement Medicaid Buy-In programs as a way to encourage employment among individuals with disabilities without fear of losing access to essential health services and supports. Despite poor economic conditions, widespread cuts in social services, the program has remained popular, with 35 active, MIG-supported state programs in 2011 collectively enrolling nearly 193,000 individuals with disabilities, 27 percent of whom were first-time Medicaid Buy-In enrollees. According to IRS data, nearly two-thirds of all enrollees reported positive earnings in 2011, representing a further decline in the earnings rate among Buy-In participants. Participants reported an average of \$9,135 a year in earnings, totaling nearly \$1.15 billion in taxable earnings nationwide. While on average earnings among Buy-In participants fell in 2011 relative to 2010, these declines were relatively modest and may point to a weaker labor market. Although we cannot be certain, it is possible that employment outcomes for these participants would have been even lower without the Buy-In program providing the supports individuals with disabilities need to successfully live in the community.

Although national trends illustrate overall patterns of Buy-In enrollment and participant outcomes, they obscure large cross-state deviations in such measures. These variations are consistent with the authorizing authorities for the Buy-In, which give flexibility to states in determining program rules such as income eligibility and asset criteria. Because of these variations as well as other state program differences, such as resources committed to outreach and marketing efforts, and administration of Buy-In policies, we are unable to attribute differences in enrollment and participant outcomes directly to any specific factor. The availability of state-level data continues to be beneficial to states, however, as they analyze and consider modifying their Buy-In programs to make data-driven decisions to further meet the needs of their populations.

States reported few significant changes to Buy-In program policies and program rules between 2010 and 2011; however, they did report a range of minor tweaks, such as adjustments to their premium structure, limitations in work interruption provisions, and expansions of program asset rules. Previous research has shown that adjustments to program rules and provisions have a direct impact on the enrollment and employment outcomes of the program's participant pool (Grimm et al. 2007), perhaps more so than external environmental factors, such as macroeconomic conditions (Kehn et al. 2013). Program outreach and recruitment efforts may also play a prominent role in determining enrollment outcomes. A majority of states have identified factors they believe have affected enrollment, including changes in outreach procedures such as a shift to auto-enrollment systems, changes in the way information spreads among potential participants, and changes in marketing and promotion efforts.

With the end of MIG funding in 2011, states have expressed interest in maintaining the program, and the continued growth, both in the number of states with programs and in the number of enrolled participants within those states, demonstrates that interest. Although only time will tell whether the infrastructure built by the state MIG grants can be sustained and effectively maintain the growth of the program as the health care system continues to evolve, the data presented here suggest that the Medicaid Buy-In Program continues to be a growing part of the health insurance picture for working individuals with disabilities.

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**APPENDIX A**  
**DATA SOURCES**

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## A. Medicaid Buy-In Finder Files

States with a Medicaid Infrastructure Grant (MIG) that also operated a Buy-In program in 2011 were required to submit a Medicaid Buy-In finder file to CMS, via Mathematica, which included information on all Buy-In participants during the reporting year. Buy-In finder files contain individual-level information including Social Security number (SSN), date of birth, state of residence, and enrollment and disenrollment dates for all Buy-In participants who enrolled between state program inception and December 31, 2011. For 2011, Mathematica received finder files from the following 35 states with both a MIG and a Buy-In program in 2011: Alaska, Arizona, Arkansas, California, Connecticut, Idaho, Indiana, Iowa, Kansas, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Montana, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oregon, Pennsylvania, Rhode Island, South Dakota, Texas, Utah, Vermont, Virginia, Washington, Wisconsin, and Wyoming. The 35 submitting states all received a no-cost extension from CMS at the end of 2011, providing the resources for the submission of data. Three other states— Illinois, Nebraska, and West Virginia—also had a MIG and Buy-In program in 2011; however, these states did not provide the relevant data, as their MIG programs did not continue to 2012. Mathematica validated all participant identifiers (SSNs) from the finder files by matching them with SSA’s Numident file; SSNs with errors or missing information were excluded from the analytic sample.

## B. Master Earnings File (MEF)

SSA’s MEF includes earnings data on nearly all workers in the U.S. for each calendar year. In this analysis, we used the amount of wages subject to Medicare taxes to represent annual earnings (as reported on the W-2 form). Unlike wages subject to Social Security taxes, there is no maximum wage base for Medicare taxes. Medicare wages include any deferred compensation, 401k contributions, or other fringe benefits that are normally excluded from the regular income tax and, therefore, should accurately represent an individual’s total earnings.

Given that the MEF is based on tax information from the W-2 form, the file is accessible only under rules established by the Internal Revenue Service (IRS). Those rules protect data privacy by restricting access to micro-level records to SSA employees only. Even though the CMS-SSA interagency data use agreement does not give CMS direct access to the micro-level data, the agency may obtain aggregated data tables by using derived variables approved by SSA. Mathematica obtained only aggregated earnings data for this report.

MEF data are available for all Buy-In participants regardless of SSDI or SSI status, as long as participants or their employer reported earned income to the IRS. Buy-In participants are likely to have some earnings in order to meet the eligibility criteria for the Buy-In program, especially if income verification is a necessary precondition for eligibility. However, some participants may not be in the MEF if they earned small amounts of cash income from a part-time job, received in-kind benefits, did not report their income, or worked in a setting where an employer is not required to report income.

Our measure of employment is derived from the number of Buy-In participants who have reported earnings in the MEF. To calculate average earnings among Buy-In participants, we take total earnings reported in the MEF and divide by the number of participants with positive earnings. This calculation does not exclude any earnings reported outside of Buy-In

participation. For example, if a participant enrolled in the Buy-In in June, any earnings reported between January and May would be included in the MEF data, and thus included in our earnings calculation.

### **C. State Policy Questionnaire**

In 2011, state MIG project directors were asked to complete a questionnaire, developed by Mathematica with approval from CMS and the Office of Management and Budget, about the status of their MIG and Buy-In programs in 2011, including whether any changes were made to the Buy-In program and if there were external factors, such as economic conditions, that may have influenced Buy-In enrollment. Of the 38 states with both a MIG and Buy-In program in 2011, 37 responded to the questionnaire (the exception was Montana, which only began its program in 2010).



**APPENDIX B**

**STATE-LEVEL DATA ON ENROLLMENT,  
EMPLOYMENT, EARNINGS, AND PREMIUMS**

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**Table B.1. Legislative Authority and Initial Implementation Year of MBI Programs**

	Initial Legislation	Year of Implementation
Alaska	1999	Balanced Budget Act of 1997
Arizona	2003	Ticket Act Basic and Medical Improvement
Arkansas	2001	Ticket Act Basic
California	2000	Balanced Budget Act of 1997
Connecticut	2000	Ticket Act Basic and Medical Improvement & BBA
Idaho	2007	Ticket Act Basic
Illinois	2002	Ticket Act Basic
Indiana	2002	Ticket Act Basic
Iowa	2000	Balanced Budget Act of 1997
Kansas	2002	Ticket Act Basic and Medical Improvement
Louisiana	2004	Ticket Act Basic
Maine	1999	Balanced Budget Act of 1997
Maryland	2006	Section 1115 Waiver and Ticket Act Basic
Massachusetts	1997	Section 1115 Waiver
Michigan	2004	Ticket Act Basic
Minnesota	1999	Balanced Budget Act of 1997 & Ticket Act Basic
Montana	2010	Balanced Budget Act of 1997
Nebraska	1999	Balanced Budget Act of 1997
Nevada	2004	Ticket Act Basic
New Hampshire	2002	Ticket Act Basic
New Jersey	2000	Ticket Act Basic
New Mexico	2001	Balanced Budget Act of 1997
New York	2003	Ticket Act Basic and Medical Improvement
North Carolina	2008	Ticket Act Basic and Medical Improvement
North Dakota	2004	Ticket Act Basic
Ohio	2008	Ticket Act Basic and Medical Improvement
Oregon	1999	Balanced Budget Act of 1997
Pennsylvania	2002	Ticket Act Basic and Medical Improvement
Rhode Island	2006	Balanced Budget Act of 1997
South Dakota	2006	Balanced Budget Act of 1997
Texas	2008	Balanced Budget Act of 1997
Utah	2001	Balanced Budget Act of 1997
Vermont	2000	Balanced Budget Act of 1997
Virginia	2007	Ticket Act Basic
Washington	2002	Ticket Act Basic and Medical Improvement
West Virginia	2004	Ticket Act Basic and Medical Improvement
Wisconsin	2000	Balanced Budget Act of 1997
Wyoming	2002	Ticket Act Basic

Sources: 2001–2011 MIG Solicitations; email and telephone communication with CMS staff.

Notes: List in this table is the legislative authorities used to implement the program. Some states which originally received approval to administer their Medicaid Buy-In programs using TWWIIA or BBA authority have since incorporated their Medicaid Buy-In programs into their state's 1115 programs.

**Table B.2. Total Number Ever Enrolled in Buy-In Program, by State and Year, 2001–2011**

	Total Ever Enrolled	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Alaska	1,423	179	246	297	343	352	351	360	376	365	388	444
Arizona	3,677	--	--	439	753	1,040	1,280	1,337	1,470	1,367	1,729	1,946
Arkansas	605	210	201	80	58	70	126	173	179	199	205	178
California	16,128	749	956	1,193	1,633	2,548	4,140	5,137	5,698	6,377	7,433	8,225
Connecticut	14,903	2,622	3,472	3,797	4,270	5,050	5,618	5,971	6,271	6,518	6,470	6,344
Georgia	2	--	--	--	--	--	--	--	1	1	2	--
Idaho	2,288	--	--	--	--	--	--	477	770	860	1,250	1,650
Illinois	2,329	11	378	686	876	1,018	965	902	820	822	889	0
Indiana	26,545	--	4,274	7,866	9,399	9,903	8,857	8,347	7,570	7,332	7,268	7,449
Iowa	30,783	4,112	5,906	7,547	9,415	11,210	12,610	13,380	14,452	16,105	16,979	17,788
Kansas	3,370	--	513	835	1,026	1,229	1,278	1,322	1,379	1,425	1,518	1,582
Louisiana	5,815	--	--	--	520	956	1,300	1,528	1,874	2,318	2,890	3,119
Maine	5,467	993	1,111	1,169	1,062	1,191	1,228	1,349	1,386	1,370	1,370	1,374
Maryland	1,213	--	--	--	--	--	83	207	456	658	775	898
Massachusetts	56,475	7,652	9,732	10,975	11,914	13,425	14,863	17,023	18,609	18,956	19,741	20,617
Michigan	17,666	--	--	--	18	411	795	1,101	1,659	4,995	9,267	12,323
Minnesota	23,080	8,217	8,146	8,420	8,045	8,108	8,242	8,455	8,830	9,152	9,355	9,721
Missouri	26,769	--	8,851	17,478	23,037	20,811	--	469	--	--	--	--
Montana	676	--	--	--	--	--	--	--	--	--	255	651
Nebraska	719	168	149	142	180	141	143	188	184	160	143	0
Nevada	78	--	--	--	8	28	28	38	51	21	16	12
New Hampshire	6,556	--	1,123	1,547	1,996	2,187	2,153	2,207	2,377	2,572	2,575	2,673
New Jersey	7,840	329	738	1,194	1,695	2,231	2,808	3,467	4,025	3,950	5,157	6,295
New Mexico	6,899	481	921	1,276	1,582	1,928	2,074	1,992	1,919	2,058	2,171	1,771
New York	18,164	--	--	899	2,741	4,553	5,963	6,930	8,165	9,628	10,529	11,481
North Carolina	3,245	--	--	--	--	--	--	--	185	1,363	1,903	2,271
North Dakota	1,073	--	--	--	275	397	475	553	633	665	639	662
Ohio	13,968	--	--	--	--	--	--	--	2,777	5,728	7,727	9,919
Oregon	3,741	512	800	984	791	806	818	890	1,312	1,508	1,638	1,827
Pennsylvania	58,826	--	1,245	2,775	5,255	8,814	11,067	12,906	17,422	23,303	29,220	35,946
Rhode Island	51	--	--	--	--	--	19	23	31	26	19	20
South Carolina	207	105	105	83	70	71	47	51	--	--	--	--
South Dakota	526	--	--	--	--	--	4	78	150	207	320	389
Texas	477	--	--	--	--	--	8	44	89	177	296	342
Utah	4,578	215	348	352	406	467	646	1,143	1,242	1,140	1,137	1,197

Table B.2 (Continued)

	Total Ever Enrolled	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Vermont	3,148	523	679	755	849	898	939	917	955	961	971	985
Virginia	75	--	--	--	--	--	--	14	28	33	36	52
Washington	3,980	--	154	284	548	950	1,253	1,479	1,657	2,015	2,158	2,066
West Virginia	2,888	--	--	--	86	274	551	847	1,155	1,551	2,095	--
Wisconsin	31,277	1,665	3,749	5,669	7,742	9,810	11,150	12,505	14,109	16,084	18,435	20,500
Wyoming	473	--	3	9	7	11	30	87	161	211	243	288
<b>National</b>	<b>407,140</b>	<b>28,738</b>	<b>53,777</b>	<b>76,717</b>	<b>96,552</b>	<b>110,833</b>	<b>101,863</b>	<b>113,840</b>	<b>130,373</b>	<b>152,127</b>	<b>175,152</b>	<b>192,946</b>

Source: Medicaid Buy-In finder files, 2001–2011.

Notes: Cells with "--" denote years in which the state did not have a MIG-funded Buy-In program or did not provide the relevant data.

**Table B.3. Total Number Newly Enrolled in Buy-In Program, by State and Year, 2001–2011**

	Total Newly Enrolled	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Alaska	1,423	100	124	124	130	118	123	117	123	87	112	145
Arizona	3,677	--	--	439	359	409	380	328	355	298	650	459
Arkansas	605	210	24	14	15	20	72	67	54	54	44	31
California	16,128	503	411	477	699	1,312	2,179	2,061	1,917	1,942	2,221	2,124
Connecticut	14,903	1,658	1,388	1,158	1,117	1,488	1,355	1,355	1,231	1,222	1,014	917
Georgia	2	--	--	--	--	--	--	--	1	--	1	--
Idaho	2,288	--	--	--	--	--	--	477	415	319	583	494
Illinois	2,329	11	367	365	339	331	192	187	156	162	219	--
Indiana	26,545	--	4,274	4,012	3,396	2,890	2,408	2,129	1,632	1,754	1,990	2,060
Iowa	30,783	1,922	2,270	2,220	2,674	2,894	2,656	2,515	2,695	3,119	2,705	2,707
Kansas	3,370	--	513	359	336	365	256	277	298	290	349	327
Louisiana	5,815	--	--	--	520	487	499	594	725	936	1,091	963
Maine	5,467	504	443	457	387	422	421	439	449	408	430	402
Maryland	1,213	--	--	--	--	--	83	126	264	266	225	249
Massachusetts	56,475	2,797	3,688	3,261	3,708	4,310	4,365	4,726	5,479	5,160	4,942	4,744
Michigan	17,666	--	--	--	18	393	464	666	1,016	3,890	5,353	5,866
Minnesota	23,080	2,367	1,692	1,742	1,372	1,346	1,124	1,227	1,338	1,315	1,324	1,335
Missouri	26,769	--	8,851	8,721	7,346	1,851	0	469	--	--	--	--
Montana	676	--	--	--	--	--	--	--	--	--	255	421
Nebraska	719	70	48	41	72	59	61	80	73	44	44	--
Nevada	78	--	--	--	8	21	5	19	17	4	3	1
New Hampshire	6,556	--	1,123	527	658	679	583	571	638	661	554	562
New Jersey	7,840	322	426	552	640	729	850	944	1,015	0	1,178	1,177
New Mexico	6,899	481	511	612	746	804	747	634	608	744	739	273
New York	18,164	--	--	899	1,848	2,036	2,013	1,905	2,240	2,525	2,254	2,444
North Carolina	3,245	--	--	--	--	--	--	--	185	1,183	940	937
North Dakota	1,073	--	--	--	275	142	122	137	131	99	74	93
Ohio	13,968	--	--	--	--	--	--	--	2,777	3,313	3,767	4,111
Oregon	3,741	421	308	371	160	207	186	235	573	396	359	434
Pennsylvania	58,826	--	1,245	1,657	2,856	4,234	4,023	4,899	7,301	9,397	10,576	12,638
Rhode Island	51	--	--	--	--	--	19	11	11	4	3	3
South Carolina	207	27	19	5	17	16	6	17	--	--	--	--
South Dakota	526	--	--	--	--	--	4	74	80	79	161	128
Texas	477	--	--	--	--	--	8	36	50	109	156	118
Utah	4,578	215	244	220	239	254	378	772	644	514	545	553

Table B.3 (Continued)

	Total Newly Enrolled	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Vermont	3,148	277	293	262	285	265	244	242	246	235	204	232
Virginia	75	--	--	--	--	--	--	14	15	13	14	19
Washington	3,980	--	154	141	308	480	456	492	464	659	532	294
West Virginia	2,888	--	--	--	86	191	323	389	465	618	816	--
Wisconsin	31,277	909	2,278	2,330	2,729	2,881	2,583	2,691	2,930	3,394	3,866	3,878
Wyoming	473	--	3	6	2	6	24	59	93	95	92	93
<b>National</b>	<b>407,140</b>	<b>12,789</b>	<b>30,675</b>	<b>30,943</b>	<b>33,303</b>	<b>31,594</b>	<b>29,168</b>	<b>31,938</b>	<b>38,661</b>	<b>45,266</b>	<b>50,343</b>	<b>51,190</b>

Source: Medicaid Buy-In finder files, 2001–2011.

Notes: Cells with "--" denote years in which the state did not have a MIG-funded Buy-In program or did not provide the relevant data.

**Table B.4. Percentage of Participants Charged Buy-In Premiums for at Least One Month in 2011, by State**

	Percentage of Buy-In Participants Charged a Nonzero Premium	Average Monthly Premium Charged (Among Those With a Nonzero Premium)	Total Amount of Premiums Charged in 2011
Alaska	65	43.25	102,702.00
Arizona	19	134.85	314,650.00
Arkansas	NR	NR	NR
California	100	34.97	2,393,742.00
Connecticut	16	21.46	195,933.00
Idaho	39	8.40	34,333.00
Illinois	NR	NR	NR
Indiana	40	87.96	2,218,968.00
Iowa	28	41.09	2,021,714.00
Kansas	83	69.34	896,559.00
Louisiana	10	68.73	177,050.00
Maine	14	9.73	12,940.00
Maryland	80	27.32	175,945.00
Massachusetts	65	38.06	5,016,632.00
Michigan	NR	NR	NR
Minnesota	99	65.32	6,192,254.04
Montana	95	60.56	285,964.00
Nebraska	NR	NR	NR
Nevada	100	41.41	4,466.00
New Hampshire	98	36.18	192,510.00
New Jersey	NR	NR	NR
New Mexico	NR	NR	NR
New York	NR	NR	NR
North Carolina	NR	NR	NR
North Dakota	97	74.77	461,607.00
Ohio	26	30.27	528,800.00
Oregon	96	62.86	1,028,250.00
Pennsylvania	92	44.86	12,078,913.00
Rhode Island	53	104.63	12,310.00
South Dakota	NR	NR	NR
Texas	48	130.57	118,844.13
Utah	91	150.66	828,090.00
Vermont	NR	NR	NR
Virginia	NR	NR	NR
Washington	95	88.29	1,738,875.00



Table B.4 (Continued)

	Percentage of Buy-In Participants Charged a Nonzero Premium	Average Monthly Premium Charged (Among Those With a Nonzero Premium)	Total Amount of Premiums Charged in 2011
West Virginia	NR	NR	NR
Wisconsin	7	166.04	2,087,730.00
Wyoming	93	90.40	226,912.00
<b>National</b>	<b>57</b>	<b>51.50</b>	<b>39,346,693.17</b>

Sources: 2011 Buy-In finder and premium files.

NR = states that did not report premium data in 2011.

**Table B.5. Percentage of Buy-In Enrollees with Positive Earnings, by State and Year, 2001–2011**

	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Alaska	59.22%	52.03%	58.25%	55.39%	57.39%	59.26%	55.28%	54.26%	55.62%	52.58%	52.25%
Arizona	--	--	--	--	--	--	90.28%	88.30%	88.08%	89.36%	88.39%
Arkansas	--	--	--	--	85.71%	91.27%	88.44%	89.39%	84.92%	83.41%	83.15%
California	--	75.52%	74.52%	74.83%	73.86%	71.76%	68.93%	63.51%	57.08%	52.58%	49.60%
Connecticut	93.67%	90.12%	87.17%	87.68%	88.00%	87.31%	87.04%	86.65%	84.52%	82.69%	82.27%
Georgia	--	--	--	--	--	--	--	--	--	--	--
Idaho	--	--	--	--	--	--	--	--	86.63%	87.92%	80.67%
Illinois	--	98.94%	97.96%	96.46%	96.56%	97.41%	96.12%	94.88%	95.50%	94.94%	.
Indiana	--	--	88.86%	89.01%	87.31%	86.49%	86.99%	86.88%	82.95%	85.20%	85.86%
Iowa	64.93%	54.54%	49.36%	44.88%	42.28%	41.22%	39.64%	37.99%	34.80%	33.18%	34.91%
Kansas	--	95.71%	94.97%	93.96%	93.98%	92.49%	94.93%	93.40%	92.77%	90.71%	88.69%
Louisiana	--	--	--	94.04%	91.74%	87.54%	90.64%	88.90%	89.13%	88.30%	85.35%
Maine	91.34%	92.80%	91.96%	92.84%	93.12%	92.67%	92.88%	91.27%	90.44%	90.51%	90.47%
Maryland	--	--	--	--	--	96.39%	94.20%	89.25%	87.23%	87.61%	88.08%
Massachusetts	91.18%	88.11%	84.89%	79.56%	76.01%	71.47%	69.91%	68.42%	63.80%	61.31%	59.11%
Michigan	--	--	--	--	91.24%	86.42%	87.10%	85.96%	84.22%	71.81%	63.39%
Minnesota	85.10%	85.76%	86.37%	90.55%	93.08%	92.72%	92.75%	92.97%	91.38%	90.75%	89.06%
Missouri	--	42.53%	40.16%	39.06%	35.50%	--	97.44%	--	--	--	--
Montana	--	--	--	--	--	--	--	--	--	95.29%	92.78%
Nebraska	94.64%	93.96%	90.85%	93.89%	97.16%	95.80%	96.28%	95.11%	95.63%	98.60%	.
Nevada	--	--	--	87.50%	85.71%	71.43%	86.84%	72.55%	80.95%	75.00%	75.00%
New Hampshire	--	91.54%	87.72%	87.47%	90.08%	92.34%	92.25%	92.01%	90.90%	89.86%	90.09%
New Jersey	93.01%	91.60%	90.62%	87.20%	84.18%	79.70%	75.94%	71.20%	62.84%	57.84%	55.31%
New Mexico	39.92%	39.09%	43.34%	46.08%	45.64%	45.03%	48.39%	50.23%	47.62%	46.66%	44.95%
New York	--	--	83.20%	82.27%	82.25%	80.71%	--	--	78.39%	78.73%	78.24%
North Carolina	--	--	--	--	--	--	--	90.27%	93.25%	88.70%	87.71%
North Dakota	--	--	--	97.09%	95.72%	96.21%	96.20%	94.47%	94.74%	94.52%	93.96%
Ohio	--	--	--	--	--	--	--	95.89%	93.58%	90.19%	86.78%
Oregon	90.82%	89.38%	86.38%	88.87%	88.96%	90.22%	91.80%	89.94%	88.00%	87.00%	81.83%
Pennsylvania	--	75.66%	76.90%	74.56%	74.04%	73.03%	72.88%	73.52%	71.29%	70.82%	70.56%
Rhode Island	--	--	--	--	--	100.00%	100.00%	90.32%	88.46%	94.74%	95.00%
South Carolina	--	--	87.95%	91.43%	94.37%	95.74%	96.08%	--	--	--	--
South Dakota	--	--	--	--	--	75.00%	94.87%	94.00%	90.82%	92.50%	89.72%
Texas	--	--	--	--	--	--	--	95.51%	94.92%	92.91%	89.77%
Utah	80.93%	70.69%	74.15%	79.56%	84.37%	86.38%	88.98%	90.02%	86.93%	86.37%	85.88%
Vermont	91.97%	87.78%	87.81%	89.28%	85.75%	88.50%	94.11%	93.51%	90.53%	89.08%	90.76%

Table B.5 (Continued)

	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Virginia	--	--	--	--	--	--	100.00%	85.71%	84.85%	94.44%	92.31%
Washington	--	96.10%	93.31%	90.51%	87.05%	87.07%	88.37%	86.84%	83.87%	83.18%	83.54%
West Virginia	--	--	--	91.86%	--	90.20%	89.85%	87.79%	87.36%	85.92%	--
Wisconsin	84.20%	71.99%	63.03%	57.05%	51.96%	48.88%	47.53%	44.77%	40.22%	37.88%	34.81%
Wyoming	--	--	--	--	45.45%	80.00%	68.97%	57.14%	54.03%	51.85%	52.08%
<b>National</b>	<b>84.17%</b>	<b>73.08%</b>	<b>69.44%</b>	<b>67.04%</b>	<b>66.64%</b>	<b>71.96%</b>	<b>71.10%</b>	<b>70.25%</b>	<b>68.61%</b>	<b>67.11%</b>	<b>65.34%</b>

Sources: Medicaid Buy-In finder files and SSA's Master Earnings File, 2001–2011.

Notes: Cells with "--" denote years in which the state did not have a MIG-funded Buy-In program or did not provide the relevant data.

**Table B.6. Average Earnings Among Buy-In Enrollees with Positive Earnings, by State and Year, 2001–2011**

	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Alaska	13,770	13,097	13,730	14,451	13,356	12,600	12,925	12,725	12,153	11,610	10,231
Arizona	--	--	--	--	--	--	10,729	10,339	9,963	9,052	8,832
Arkansas	--	--	--	--	15,161	15,008	15,920	16,676	15,594	16,358	16,672
California	--	11,854	11,537	11,488	11,564	11,961	11,468	11,162	10,195	9,985	9,824
Connecticut	8,463	8,674	8,466	8,678	8,450	8,488	8,252	8,292	8,092	7,933	7,611
Georgia	--	--	--	--	--	--	--	--	--	--	--
Idaho	--	--	--	--	--	--	--	--	7,028	7,237	7,281
Illinois	--	8,337	8,082	8,313	8,384	8,122	8,274	8,029	8,036	8,369	--
Indiana	--	--	7,036	7,461	7,635	8,298	8,457	8,281	8,420	8,533	8,354
Iowa	5,358	5,220	5,164	5,194	5,310	5,408	5,396	5,661	5,546	5,388	4,938
Kansas	--	5,612	5,950	6,160	6,185	6,716	6,904	7,339	7,757	7,498	7,251
Louisiana	--	--	--	11,167	10,685	11,651	12,651	12,787	13,152	13,490	13,266
Maine	10,284	10,648	10,367	10,523	9,780	9,872	9,807	9,459	9,764	9,656	9,571
Maryland	--	--	--	--	--	10,050	9,996	9,674	10,104	10,644	10,909
Massachusetts	16,615	15,981	15,466	15,212	14,566	14,035	13,992	13,841	13,150	13,174	12,867
Michigan	--	--	--	--	7,664	8,195	8,420	8,169	6,183	6,393	6,421
Minnesota	6,797	6,912	6,911	6,758	6,867	6,914	6,681	6,606	6,436	6,339	6,299
Missouri	--	5,599	6,477	7,004	7,060	--	8,850	--	--	--	--
Montana	--	--	--	--	--	--	--	--	--	5,093	4,901
Nebraska	8,985	10,456	10,003	9,560	9,444	9,321	9,869	9,232	9,870	10,685	--
Nevada	--	--	--	10,173	12,969	15,622	13,009	12,951	13,595	17,058	20,622
New Hampshire	--	6,615	6,693	7,122	7,548	7,836	8,149	8,267	7,776	7,468	7,134
New Jersey	8,383	8,682	9,315	9,802	9,654	9,714	9,896	9,570	9,571	9,579	9,077
New Mexico	9,505	9,261	9,601	9,817	9,559	9,994	10,100	10,285	10,085	9,694	9,554
New York	--	--	8,656	9,413	9,120	9,407	--	--	9,633	9,559	9,407
North Carolina	--	--	--	--	--	--	--	9,737	8,047	7,869	7,736
North Dakota	--	--	--	5,487	6,150	6,213	5,881	5,948	5,946	7,054	6,370
Ohio	--	--	--	--	--	--	--	6,477	6,156	6,127	5,722
Oregon	12,433	10,948	9,156	10,136	9,960	10,244	10,035	7,655	7,139	7,028	6,988
Pennsylvania	--	8,224	8,810	9,751	10,506	11,220	11,681	11,958	12,106	12,634	12,954
Rhode Island	--	--	--	--	--	9,543	14,600	14,427	13,685	11,242	13,287
South Carolina	--	--	15,814	17,073	18,217	20,331	18,816	--	--	--	--
South Dakota	--	--	--	--	--	30,320	9,591	10,211	10,213	10,971	10,680
Texas	--	--	--	--	--	--	--	13,196	13,027	13,812	13,926
Utah	10,856	10,071	9,123	9,098	9,549	9,904	8,565	7,997	7,980	8,186	7,451
Vermont	8,288	8,512	8,193	8,308	8,375	8,348	8,491	8,026	7,863	7,837	7,767

Table B.6 (Continued)

	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Virginia	--	--	--	--	--	--	6,028	9,581	9,690	11,977	12,762
Washington	--	7,484	9,034	8,719	9,175	9,809	10,410	10,200	10,757	11,572	11,632
West Virginia	--	--	--	12,822	--	12,619	13,209	13,705	13,764	14,199	--
Wisconsin	6,506	5,981	5,873	5,702	5,524	5,278	5,154	4,995	4,811	4,822	4,823
Wyoming	--	--	--	--	13,709	9,020	7,759	8,370	7,358	8,612	8,662
<b>National</b>	<b>10,132</b>	<b>9,322</b>	<b>8,718</b>	<b>8,778</b>	<b>8,869</b>	<b>9,334</b>	<b>9,498</b>	<b>9,456</b>	<b>9,182</b>	<b>9,284</b>	<b>9,135</b>

Sources: Medicaid Buy-In finder files and SSA's Master Earnings File, 2001–2011.

Notes: Cells with "--" denote years in which the state did not have a MIG-funded Buy-In program or did not provide the relevant data.

**Table B.7. Total Earnings Among Buy-In Enrollees with Positive Earnings, by State and Year, 2001–2011 (in the hundred thousands)**

State	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Alaska	1,460	1,676	2,375	2,746	2,698	2,621	2,572	2,596	2,467	2,368	2,374
Arizona	--	--	--	--	--	--	12,950	13,420	11,995	13,986	15,191
Arkansas	--	--	--	--	910	1,726	2,436	2,668	2,635	2,797	2,467
California	--	8,559	10,257	14,039	21,764	35,536	40,608	40,397	37,110	39,020	40,083
Connecticut	20,784	27,140	28,021	32,490	37,550	41,634	42,886	45,061	44,577	42,444	39,723
Georgia	--	--	--	--	--	--	--	--	--	--	--
Idaho	--	--	--	--	--	--	--	--	5,236	7,954	9,691
Illinois	--	3,118	5,431	7,025	8,242	7,635	7,174	6,246	6,308	7,064	--
Indiana	--	--	49,181	62,421	66,015	63,562	61,408	54,467	51,211	52,836	53,431
Iowa	14,305	16,814	19,235	21,944	25,171	28,108	28,619	31,077	31,078	30,350	30,662
Kansas	--	2,756	4,718	5,938	7,143	7,939	8,665	9,452	10,255	10,325	10,173
Louisiana	--	--	--	5,461	9,371	13,259	17,522	21,303	27,171	34,427	35,314
Maine	9,328	10,978	11,144	10,375	10,845	11,235	12,288	11,966	12,097	11,973	11,897
Maryland	--	--	--	--	--	804	1,949	3,937	5,799	7,227	8,629
Massachusetts	115,922	137,034	144,100	144,191	148,635	149,081	166,507	176,226	159,041	159,439	156,811
Michigan	--	--	--	--	2,874	5,630	8,075	11,649	26,014	42,545	50,160
Minnesota	47,528	48,290	50,259	49,235	51,823	52,834	52,390	54,232	53,825	53,819	54,536
Missouri	--	21,074	45,467	63,033	52,151	--	4,044	--	--	--	--
Montana	--	--	--	--	--	--	--	--	--	1,238	2,960
Nebraska	1,429	1,464	1,290	1,616	1,294	1,277	1,786	1,616	1,510	1,507	--
Nevada	--	--	--	71	311	312	429	479	231	205	186
New Hampshire	--	6,800	9,082	12,434	14,869	15,578	16,590	18,081	18,181	17,280	17,179
New Jersey	2,565	5,869	10,079	14,488	18,131	21,740	26,056	27,429	23,755	28,575	31,605
New Mexico	1,825	3,334	5,309	7,156	8,412	9,334	9,736	9,915	9,883	9,820	7,605
New York	--	--	6,474	21,227	34,156	45,278	--	--	72,702	79,234	84,502
North Carolina	--	--	--	--	--	--	--	1,626	10,228	13,282	15,411
North Dakota	--	--	--	1,465	2,337	2,839	3,129	3,557	3,746	4,261	3,962
Ohio	--	--	--	--	--	--	--	17,250	32,995	42,702	49,251
Oregon	5,781	7,828	7,783	7,126	7,142	7,560	8,198	9,033	9,474	10,014	10,447
Pennsylvania	--	7,747	18,801	38,204	68,562	90,683	109,873	153,172	201,121	261,439	328,562
Rhode Island	--	--	--	--	--	181	336	404	315	202	252
South Carolina	--	--	1,154	1,093	1,221	915	922	--	--	--	--
South Dakota	--	--	--	--	--	91	710	1,440	1,920	3,247	3,727
Texas	--	--	--	--	--	--	--	1,122	2,188	3,798	4,275
Utah	1,889	2,477	2,381	2,939	3,762	5,526	8,710	8,941	7,908	8,039	7,659
Vermont	3,986	5,073	5,432	6,298	6,448	6,938	7,328	7,167	6,841	6,779	6,944

Table B.7 (Continued)

State	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Virginia	--	--	--	--	--	--	84	230	271	407	613
Washington	--	1,108	2,394	4,325	7,588	10,702	13,606	14,677	18,180	20,772	20,076
West Virginia	--	--	--	1,013	--	6,272	10,052	13,897	18,650	25,558	--
Wisconsin	9,122	16,143	20,983	25,186	28,154	28,764	30,636	31,547	31,120	33,677	34,421
Wyoming	--	--	--	--	69	216	466	770	839	1,085	1,299
<b>National</b>	<b>235,894</b>	<b>335,179</b>	<b>461,232</b>	<b>563,294</b>	<b>647,371</b>	<b>675,538</b>	<b>718,429</b>	<b>806,722</b>	<b>958,363</b>	<b>1,091,346</b>	<b>1,151,658</b>

Source: Medicaid Buy-In finder files and SSA's Master Earnings File, 2001–2011.

Notes: Cells with "--" denote years in which the state did not have a MIG-funded Buy-In program or did not provide the relevant data.

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**APPENDIX C**

**CHARACTERISTICS OF STATE BUY-IN PROGRAMS IN 2011**

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**Table C.1. Selected Characteristics of State Buy-In and Medicaid Programs**

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
Alaska	July 1999	BBA	Earned income: up to 250% FPL for Alaska <sup>a</sup> (includes spousal income)  Unearned income: at or below \$1,252 per month	\$10,000 (individual) \$15,000 (couple)	n.a.	n.a.	\$1,036 <sup>b</sup>	\$4,224	100% FPL	A sliding-scale premium as a fixed percentage of income; maximum premium is 10% of net family income	Eligibility based entirely upon receipt of earned income, which includes spousal income  Not required to demonstrate that income and FICA taxes are being paid	None
Arizona	January 2003	Ticket Act Basic and Medical Improvement	Up to 250% FPL of earned income (excluding spousal income)	n.a.	n.a.	\$903 (effective 4/1/10-3/31/11)  \$908 (effective 4/1/11-3/31/12)	\$674 (2010 and 2011)	\$2,257 (effective 4/1/10-3/31/11)  \$2,269 (effective 4/1/11-3/31/12)	\$500 of monthly earned income	Sliding-scale premium not to exceed 2% of net earned income	Must document that Social Security and FICA taxes are being paid	n.a.
Arkansas	February 2001	Ticket Act Basic	Up to 250% FPL net personal income (earned plus unearned, after SSI income exclusions)  Unearned income must be less than SSI standard plus \$20; spousal income not counted	\$4,000 (individual) \$6,000 (couple)	\$108	n.a.	\$674	\$2,301.91	n.a.	No premium required  Co-payments higher than those for regular Medicaid are required when income is above 100% FPL	Must demonstrate that earned income is reported to the IRS	May remain enrolled for up to six months if participant states his or her intention to return to work

Table C.1 (Continued)

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
California	April 2000	BBA	\$2,000 (individual), \$3,000 (couple) for entry into program  No cap on assets once enrolled; funds must be in separate identified account	\$2,000 (individual) \$3,000 (couple)	\$600	\$1,081 (includes a \$230 disregard)	\$856	\$2,918	Net countable income of \$1	A sliding-scale premium based on net countable income  For income from \$1 up to 250% FPL, premiums from \$20 to \$250 for an individual and \$30 to \$375 for a couple	Proof of employment (e.g., pay stubs or written verification from the employer)  Self-employed individuals and contractors provide records such as W-2 forms, 1099 IRS forms, etc.  No requirement to show that income and FICA taxes are being paid	Two-month grace period for enrollees who are out of work “for good cause”—such as a layoff, worksite closure, health problems due to disability, or a loss of transportation with no other means of transportation
Connecticut	October 2000	Ticket Act Basic and Medical Improvement and BBA (added October 2006)	Up to \$75,000 per year (excludes spousal income)	\$10,000 (individual) \$15,000 (couple)	\$506	n.a.	\$842	\$4,461	200% FPL	Premiums equal 10% of total income above 200% FPL	Must have payroll taxes (including FICA) taken out of wages, unless self-employed  If self-employed, must provide tax forms or legitimate business records	May remain enrolled up to 12 months if job loss due to (1) health crisis or (2) involuntary dismissal and if participant intends to return to work; must continue to pay premium based on remaining income

Table C.1 (Continued)

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
Idaho	January 2007	Ticket Act Basic	Less than or equal to 500% FPL (excludes retirement accounts, life insurance); earned income >15% of total earned and unearned income	\$10,000 (individual) \$15,000 (couple)	NR	NR	NR	NR	133%	Income 133% to 250% FPG = \$10; income 250% to 500% FPG = greater of \$10 or 7.5% of income above 250% FPG	Must verify employment via pay stubs and employer documents showing that income is subject to income taxes and FICA	None
Illinois	January 2002	Ticket Act Basic	Up to 200% FPL (includes spousal income); increased to 350% in February 2009	\$10,000 (includes spousal resources); increased to \$25,000 and exempts retirement and medical savings accounts	\$283	\$903	Individually budgeted	\$2,390	Net earned income or unearned income exceeds \$250	Premium payment categories are calculated using a premium table (table is based on the sum of 7.5% of unearned and 2.5% of earned income)	Must verify employment via pay stubs, employer documents, or self-employment records that show FICA taxes are paid	Up to 90 days if premiums are paid and a letter from a physician is submitted stating that the enrollee is unable to work due to health problems  Up to 30 days for any other reason
Indiana	July 2002	Ticket Act Basic	Up to 350% FPL (excludes spousal income)	\$2,000 (excludes spousal resources)	n.a.	n.a.	\$623	\$2,668	150% FPL	Based on percentage of applicant's and spouse's gross income according to family size	Must have pay stubs and documentation that show enrollee is paying income and FICA taxes	May remain enrolled for up to one year after losing employment

Table C.1 (Continued)

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
Iowa	March 2000	BBA	Up to 250% FPL (includes spousal income)	\$12,000 (individual) \$13,000 (couple)	\$483	\$903	\$674	n.a.	150% FPL	Based on sliding-scale premium schedule with 18 premium brackets, ranging from \$34 to \$660	Must have earned income verifiable by pay stubs, completed tax forms, or a signed statement from workplace; not required to show that income and FICA taxes are being paid	Six months
Kansas	July 2002	Ticket Act Basic and Medical Improvement	Up to 300% FPL (includes spousal income)	\$15,000 (includes spousal resources)	\$475	n.a.	\$623	\$2,488	100% FPL	Sixteen premium amounts based on income brackets from \$55 to \$152 for individual and \$74 to \$205 for two or more; cannot exceed 7.5% of income	Must verify employment via pay stubs and employer documents that income is subject to FICA taxes	Four months
Louisiana	January 2004	Ticket Act Basic	Up to 250% FPL (excludes spousal income)	\$25,000 (excludes spousal resources)	\$100	\$674	\$674	\$2,257	150% FPL	\$80 for 150%–200%, \$110 for 200%–250% FPL	Must show that income and FICA taxes are being paid	May retain eligibility for up to six months if individual intends to return to the workforce
Maine	August 1999	BBA	Up to 250% FPL on total income, up to 100% FPL on unearned income (includes spousal income)	\$12,000 (includes spousal resources)	\$315	\$908	\$674 + \$55 income disregard for state SSI supplement and \$10 state supplemental check	\$3,523	150% FPL	\$10 premium for 150%–200% FPL, \$20 for 200%–250% FPL	Must have earned income; not required to show that income and FICA taxes are being paid	None

Table C.1 (Continued)

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
Maryland	April 2006	Ticket Act Basic	Up to 300% FPL (includes spousal income)	\$10,000 (includes spousal resources)	\$350	116% FPL for adults with dependent children age 20 or younger who live with them	\$674	\$3,194	100% FPL	Countable income to 100% FPL = \$0 premium; over 100% FPL up to 200% FPL = \$25/month premium; over 200% FPL up to 250% FPL = \$40/month premium; over 250% up to 300% FPL = \$55/month	Must verify employment via pay stubs or tax forms, with some exceptions for new self-employment if business owner has not yet had opportunity to file taxes	None
Massachusetts	July 1997	1115 Demonstration Waiver	No limit	No limit <sup>c</sup>	n.a. <sup>d</sup>	The income standards vary depending on the population, ranging from 100%–200% FPL (\$797–\$1,595 for a family of one)	\$693	\$3,146	150% FPL	Premiums based on two sliding scales—one for enrollees with other health coverage and one for enrollees without it; premiums begin at 100% and increase in increments of \$5 to \$16 based on 10% increments of the FPL	Must be employed at least 40 hours per month, or if employed less than 40 hours per month, have been employed at least 240 hours in the six months immediately preceding the month of application receipt or eligibility review	CommonHealth Working members who terminate their employment continue to be eligible for CommonHealth for up to three calendar months after termination of employment provided they continue to pay premiums

Table C.1 (Continued)

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
Michigan	January 2004	Ticket Act Basic	Pre-enrollment: total countable income (earned and unearned) cannot exceed 100% of FPL using the SSI methodology  During enrollment: no limit on earned income, but unearned income cannot exceed 100% of FPL (excludes spousal income)	\$75,000 (excludes spousal resources)	\$350	\$903	\$688 (includes \$674 federal and \$14 state supplement)	\$2,304	250% FPL using SSI methodology	Based on sliding scale ranging from \$50 to \$920 per month	Must be employed on a regular and continuing basis; not required to demonstrate income or FICA tax payment	Up to 24 months if the result of an involuntary layoff or determined to be medically necessary



Table C.1 (Continued)

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
Minnesota	July 1999	BBA (before October 2000), Ticket Act Basic (as of October 2000)	No upper income limit; must have monthly wages or self-employment earnings of more than \$65 (excludes spousal income)	\$20,000 (excludes spousal resources)	\$867 January–June  \$903 July–December  People with income over 100% FPG must spend down to 75% FPG	\$867 January–June  \$903 July–December	\$735	\$4,103	All enrollees must pay a minimum premium of \$35	Premiums based on a minimum of \$35 or a sliding fee scale based on income and household size; premium gradually increases to 7.5% of income at or above 300% of FPL  Must also pay 0.5% of unearned income; no maximum premium amount	Must have earned monthly income above \$65; required to demonstrate that FICA taxes are being paid	Up to four months if no earned income due to medical condition or involuntary job loss
Nebraska	July 1999	BBA	Two-part income test: (1) sum of spouse's earned income and applicant's unearned income must be less than SSI standard (\$698 for an individual and \$1,048 for a couple in 2012) <sup>6</sup> ; (2) countable income up to 250% FPL (includes spousal income)	\$4,000 (individual)  \$6,000 (couple)	\$908 (individual)  \$11,226 (couple)	\$387	\$698 or \$1,048	\$3,054.25	200% FPL	Sliding scale based on income ranging from 2% of income (if income is 200% to 210% of FPL) to 10% of income (if income is from 240% to 250% of FPL)	Must have earned income based on pay stubs, employer forms, or tax returns; not required to demonstrate that income and FICA taxes are being paid	NR

Table C.1 (Continued)

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
Nevada	July 2004	Ticket Act Basic	Up to 250% FPL on earned income and \$699 on unearned income	\$15,000 (excludes spousal resources)	n.a.	\$1,060	\$699	\$2,269	All enrollees pay at least 5%	<p>Combined net income less than 200% FPL: pay a monthly premium of 5% of combined net income</p> <p>Combined net income between 200% and 250% FPL: pay a monthly premium of 7.5% of combined net income</p>	Must provide proof of employment (pay stub) or self-employment (tax return)	Three months, as long as premiums are paid
New Hampshire	February 2002	Ticket Act Basic	Up to 450% FPL on earned income (includes spousal income)	<p>\$24,991 (individual)</p> <p>\$37,487 (married couple)</p>	\$591	n.a.	\$674	\$3,324	150% FPL	<p>Six brackets from \$102 to \$271 for individuals; those with gross income (including spousal income) that exceeds \$75,000 are required to pay the full premium</p>	<p>Must be employed (proven with a pay stub or 1099 estimated tax statement for self-employment)</p> <p>Must show that appropriate FICA contributions are being made</p> <p>Must not be earning less than the hourly federal minimum wage</p>	Six months, with a possible subsequent six-month grace period if the individual demonstrates medical necessity or has documentation of a job search



Table C.1 (Continued)

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
North Carolina	November 2008	Ticket Act Basic and Medical Improvement	Up to 450% FPL (excludes spousal income); phased implementation open to people up to 150% FPL by December 2009	\$20,880 (includes spousal resources)	NR	NR	NR	NR	NR	Annual enrollment fee and premium; premiums based on a sliding scale	NR	NR
North Dakota	June 2004	Ticket Act Basic	Up to 225% FPL (excludes spousal income)	\$13,000 (includes family income)	\$750	n.a.	\$674	\$3,006	Must pay a premium (beginning July 1, 2009, premiums and enrollment fees are not charged to Native Americans due to federal statute)	5% of an individual's gross income	May verify earned income with a letter from an employer or a pay stub; not required to show that income or FICA taxes are being paid	Individual quits one job to begin another: remains eligible if he or she will not be unemployed for more than one month  Individual stops working due to illness or injury: remains eligible if he or she intends to and can return to work (if illness or injury is expected to last more than three months, need statement from physician indicating whether the individual can reasonably be expected to return to work)

Table C.1 (Continued)

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
Ohio	April 2008	Ticket Act Basic and Medical Improvement	Up to 250% FPL, excluding spousal income (countable income limit is 250% FPL; income above FPL is disregarded up to \$20,000)	\$10,580 (includes spousal resources)	NR	NR	NR	NR	150% FPL	Premium charged is 10% of the difference between 150% FPL and total income	NR	NR
Oregon	February 1999	BBA	Up to 250% FPL on adjusted earned income (excludes spousal income)	\$5,000 (excludes spousal resources)	n.a.	NR	\$638.70 (includes a \$170 state supplement) <sup>h</sup>	\$2,469.83	\$651.00	Premium based on sliding scale	Required to show FICA or SECA taxes are being paid; participants who are self-employed but have not yet filed for or paid SECA tax can be asked to produce clear and convincing evidence of self-employment to be considered eligible	Remains "engaged in employment" while not working if the employer treats the client as an employee, such as when the client is absent from the job under the provisions of the Family Medical Leave Act
Pennsylvania	January 2002	Ticket Act Basic and Medical Improvement	Up to 250% FPL (includes spousal income)	\$10,000 (includes spousal resources)	\$425	\$908 in 2011 plus \$20 disregard (individual)  \$1,226 in 2011 plus \$20 disregard (couple)	\$696.10 in 2011	\$2,269 in 2011 (after all allowable deductions)	All participants pay a premium (5% of countable income); premiums of less than \$10 are waived	All participants pay a premium (5% of countable income); premiums of less than \$10 are waived	Must provide verification of earned income; not required to show that income and FICA taxes are being paid	May remain in program for up to two months if unable to work due to job loss or health problems

Table C.1 (Continued)

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
Rhode Island	January 2006 (revised 2011; revision implemented in January 2012)	BBA	Up to 250% FPL (excludes spousal income)	\$10,000 (individual) \$20,000 (couple)	\$825	\$903 plus \$20 disregard (individual) \$1,215 plus \$20 disregard (couple)	\$737.92	\$2,991	Based on formula counting individual's or couple's earned income	Sliding scale in accordance with a monthly payment or payment formula counting a portion of an individual's or couple's earned income	Must provide verification of earned income; not required to show that income and FICA taxes are being paid	May remain in program and have premium waived for up to four months if unable to work due to job loss or health problems
South Dakota	October 2006	BBA	Up to 250% FPL (excludes spousal income)	\$8,000 (excludes spousal resources)	n.a.	NR	\$674	\$2,541	n.a.	No premium required	Must provide verification of earned income and show that income and FICA taxes are being paid	May remain in program for three months if enrollee is unable to verify employment
Texas	September 2006	BBA	Up to 250% FPL (excludes spousal income; must earn \$1,090 in qualifying SSA quarter before application date)	\$5,000 (excludes spouse); one-half of any jointly owned (with spouse) assets considered	\$275	\$674	\$674	\$2429.33	150% FPL of earned income	All unearned income above SSI federal benefit rate (\$674 in 2009), plus \$20-\$40/month depending on FPL category of earned income, with a cap of \$500 per month; \$20-\$40 maximum with no unearned income based on FPL category of earned income	Must provide evidence of earnings satisfactory to Health and Human Services Commission; must verify annually that last-quarter earnings equaled that of the SSA qualifying quarter	None

Table C.1 (Continued)

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
Utah	June 2001	BBA	Up to 250% FPL (includes spousal income)	\$15,000 (includes spousal resources)	\$931	\$931	\$698	\$2,491.00	100% FPL	100%–110% FPL: 5% premium 110%–120% FPL: 10% premium Over 120% FPL: 15% premium	For wage employment, must demonstrate that FICA taxes are being paid  For self-employment, must have a tax return or business plan	None
Vermont	January 2000	BBA	Two-part test for family income: (1) income less than 250% FPL and (2) income does not exceed either Medicaid's protected income level for one or the SSI/AABD payment level for two, whichever is higher, after disregarding the earnings, SSDI benefits, and any veteran's disability benefits	\$5,000 (individual) \$6,000 (couple)  Disregards assets accumulated from earnings since enrollment	\$916	n.a.	\$726	\$3,084	n.a.	Premium eliminated in June 2004	Must document earnings via FICA tax payments, self-employment Contributions Act tax payments, or a written business plan supported by a third-party investor or funding source	None

Table C.1 (Continued)

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
Virginia	January 2007	Ticket Act Basic	Up to 80% FPL (includes spousal income)	\$2,000 (individual) \$3,000 (couple)	80% for ABD	Medically needy income limit is divided into three locality groupings and is based on a percentage of the old AFDC income limits (not a percentage of poverty). The income limits are:  \$280.79 per month for a single-person household in Group I  \$323.99 per month for a single-person household in Group II  \$421.18 per month for a single-person household in Group III	\$674 (2009 FBR)	\$2,540 (\$30,478/year)	n.a.	No premiums charged at this time	Must receive minimum wage or the prevailing wage/"going rate" in the community and must provide documentation that payroll taxes are withheld  Self-employment must be documented through a federal income tax return or business records  The individual's signed allegation is acceptable if no other evidence can be obtained	May remain in Medicaid Works for up to six months as long as required premium payments are made, if person cannot maintain employment due to illness or unavoidable job loss



Table C.1 (Continued)

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
Washington	January 2002	Ticket Act Basic and Medical Improvement	220% FPL (includes spousal income) <sup>a</sup>	No limit	\$698	n.a.	\$698 (ranges from \$698.54 to \$897.77 depending on the federal minimum income level)	\$2,400	\$65 earned income and/or \$623 unearned income	The lesser of (1) 7.5% total income or (2) a total of the following: 50% unearned income above MNIL plus 5% total unearned income plus 2.5% earned income after deducting \$65	May remain enrolled through current certification period if job loss is due to (1) health crisis or (2) involuntary job dismissal and participant intends to return to work; participant must continue to pay the monthly premium based on remaining income	NR
West Virginia	May 2004	Ticket Act Basic and Medical Improvement	Up to 250% FPL, unearned income must be equal to or less than SSI benefit plus \$20 (excludes spousal income)	\$2,000 (\$5,000 liquid asset exclusion)	\$200	n.a.	\$674	\$2,248	Must pay a minimum premium of \$15	3.5% of monthly gross income with a \$15 minimum amount  Must also pay an enrollment fee of \$50, which includes the first month's premium	Must be employed and earning at least the federal minimum wage  Not required to show that income or FICA taxes are being paid  May verify earned income with a letter from an employer or a pay stub	May remain in program for up to six months after an involuntary loss of employment if participant continues to pay premiums and show proof of job-search efforts

Table C.1 (Continued)

	Implementation Date	Federal Authority	Income Eligibility	Individual Asset Limit	Medically Needy Income Limit (Monthly)	Income Standard for Poverty-Level Medicaid (Monthly)	SSI Benefit (Combined Federal and State) (Monthly)	1619(b) Income Threshold (Monthly)	Premium Threshold	Premium Structure	Income Verification Requirements	Work-Stoppage Protection
Wisconsin	March 2000	BBA	Up to 250% FPL (includes spousal income)	\$15,000 (excludes spousal resources)	\$592	n.a.	\$757	\$2,622 (for 2011)	150% FPL	Equal to the sum of (1) 3% of an individual's earned income and (2) 100% of unearned income minus certain needs and expenses and other disregards; if the second calculation is less than \$25, this component of the premium is \$0	Required to either work or participate in an employment counseling program, which one can do for up to a year  Not required to demonstrate that income and FICA taxes are being paid	May remain in program for up to six months if unable to work due to health problems
Wyoming	July 2002	Ticket Act Basic	\$2,022 (applicant's gross countable income only)	None	n.a.	n.a.	\$674	n.a.	All participants pay a premium	7.5 % of gross monthly income, less a \$50 deduction from unearned income	Must be employed; no requirement to earn a certain amount of income or work a minimum number of hours each month  Must provide verification of employment	None

Source: 2010–2011 MIG State Policy Questionnaire.

n.a. = not applicable; NR = no response.

<sup>a</sup>Federal poverty guidelines for Alaska are higher than those for the 48 contiguous states.

<sup>b</sup>Alaska provides Medicaid coverage to people with disabilities receiving only the SSI supplement who have countable income up to \$1,156 per month.

<sup>c</sup>Massachusetts covers working and nonworking people with disabilities with incomes at or below 133 percent of the FPL with no asset test through its Section 1115 demonstration waiver.

<sup>d</sup>Massachusetts is unique in that rather than have a medically needy or spend-down program as many other states do, all persons with disabilities who are not eligible for the working benefit plan of CommonHealth (the state's Buy-In program) are eligible for the nonworking benefit plan, which requires that participants meet a one-time deductible to receive coverage.

<sup>e</sup>In Nebraska, the applicant's unearned income is disregarded if he or she is in an SSDI trial work period.

<sup>f</sup>New Jersey does not collect premiums because the revenue would be insufficient to offset the administrative costs.

<sup>g</sup>New Mexico waives its work requirement for SSDI recipients in the two-year waiting period for Medicare.

<sup>h</sup>In Oregon, only the participant's income is counted if spousal income is less than half of the SSI standard.

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