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General Fact Sheets
US Department of Labor statistics show that only one-fifth (20%) of working-age people with disabilities were employed on average in 2015 compared to over two-thirds (68%) of people without disabilities. Part of this problem can be attributed to the numerous misconceptions and myths that exist around work and Social Security disability benefits. Here is a list of these common myths, along with responses, which you can use to defuse your clients’ concerns about work and benefits.

**Social Security doesn’t want me to work!**
If this was the case, then Social Security wouldn’t have created special programs and work incentives to help beneficiaries try out work and make their vocational goals come to fruition. For example, Social Security’s Ticket to Work program helps beneficiaries access free employment supports including job preparation and placement. Work incentives can either provide some impact relief on cash benefits or prolong the continuation of both cash and healthcare benefits. Again, how work incentives can help will depend on which benefits you are entitled to. The system may seem complicated in nature, but with accurate information and the right mixture of resources, you will realize work is possible and achievable.

**If I work, I’ll lose my cash benefits!**
Generally speaking, a disability case will not close when someone returns to work. And if it is to ever close, it would not happen for a very long time. As far as cash benefits go, there may or may not be any changes to them. This will depend on the type of benefits received, how much is earned, and/or how much the person has worked after being entitled to those benefits. Regardless of these possible changes, working can have a very positive impact on many aspects of life.

**If I work, I’ll lose my health insurance!**
There are multiple safety nets and special programs called work incentives that were created to specifically protect and prolong your access and eligibility to public healthcare. Although certain public health insurance plans may change due to increases in income, in Massachusetts there are several affordable insurance options to ensure everyone is guaranteed health coverage.

**If I get off benefits, I can never get them again!**
Social Security created an ultimate safety net called Expedited Reinstatement (EXR). This helps quickly reinstate benefits to former beneficiaries who tried working, and for some reason associated with their disability, were unable to continue working or were forced to reduce their hours significantly. Basically, as a result of EXR, these individuals who were at one point self-sufficient, can quickly start getting back their benefits without going through a lengthy application process.
Can I work without losing my Social Security disability benefits?
Generally speaking, you will not lose your cash or your public health insurance benefits when you return to work. They may change, but you will always be better off by working, rather than not. Changes that may occur, if any, will depend on the type of Social Security disability benefits you receive and how much you earn from working.

How can I tell which benefit I receive?
- If you receive Supplemental Security Income (SSI), you will usually receive 2 payments on the first of the month (one is a state payment and the other is a federal payment).
- If you receive Social Security Disability Insurance (SSDI), your cash payment will come on any day but the first.

How will my cash benefits be impacted?
Exactly how your cash benefits will be impacted will depend on whether you receive SSI or SSDI and how much you earn from working.
- If you receive SSI, know that as your work income increases, your SSI monthly cash benefit will decrease. Despite this proportional impact, always remember that you’ll have more available monthly income by working than if you only received SSI.
- If you receive SSDI, know that you have a 9-month Trial Work Period (TWP) where there is no limit to your earnings and you will still get your full SSDI cash benefit throughout.

Once your TWP is complete, Social Security will determine for the next 36 months if you are performing Substantial Gainful Activity (SGA). In general, if you are performing SGA, you will not receive an SSDI monthly payment, and if you are not performing SGA, you will.

What must I do if I get benefits and work?
When you start to work you must do the following:
- Keep all of your paystubs that show how much money you are earning before taxes are taken out (gross earnings);
- Notify your local Social Security office and give them copies of your paystubs at the beginning of every month to avoid any overpayments and to maintain an accurate record;
- Notify any other public agencies from which you receive benefits, i.e. MassHealth, Food Stamps and or Public Housing.

What should I do before I start working?
Before you start working, it is highly recommended that you consult with a Community Work Incentives Coordinator (CWIC), also known as a certified benefits counselor. Their goal is to provide working, or actively seeking, SSI and SSDI beneficiaries with timely and accurate work incentives and benefits analysis. Their goal is to provide the individual with the information needed to feel comfortable taking the next step in advancing their career path and financial well-being.

Where can I get free benefits counseling?
In Massachusetts, there are two programs that provide free CWIC services, Work Without Limits (WWL) Benefits Counseling and Project IMPACT (Individual Members Planning and Accessing Choices Together).
- **WWL Benefits Counseling** provides services to beneficiaries residing in Berkshire, Franklin, Hampden, Hampshire, Middlesex, and Worcester counties. To contact WWL, call 1-877-937-9675.
- **Project IMPACT** provides services to beneficiaries residing in Barnstable, Bristol, Dukes, Essex, Nantucket, Norfolk, Plymouth, and Suffolk counties. To contact Project IMPACT, call 1-800-734-7475.
When discussing work and benefits with consumers, verifying which ones are in the mix is key to leading them in the right direction. Fortunately, there are several ways to formally verify a person’s Social Security, state and public health insurance benefits including the following:

**Social Security Disability Benefits:**
A Benefits Planning Query (BPQY) is a report produced by Social Security that informs Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) beneficiaries about their current benefit status. It contains detailed information about a beneficiary's:
- Disability onset & benefit entitlement dates
- Cash benefit monthly payment amount(s)
- Overpayment balance & any withholdings
- Next continuing disability medical review
- Rep Payee & Authorized Rep status
- Health insurance (Medicare & MassHealth)
- Work history & associated earnings

A beneficiary or someone else on their behalf, e.g. advocate(s), benefits counselors, Rep Payees, Authorized Representatives, and/or service organizations, can request a BPQY either from the local Social Security office, or by calling the national toll free line at 1-800-772-1213. Regardless of who requests the BPQY, it is best practice to reference it as Form SSA-2459.

Beneficiaries, Community Work Incentives Coordinators (CWICs), or certified benefits counselors, can request BPQYs at no charge. For other third parties there is a fee, and they are required to submit 2 Consent for Release of Information forms (Form SSA-3288), filled out and signed by the consumer. These forms can be found here: [www.ssa.gov/forms/ssa-3288.pdf](http://www.ssa.gov/forms/ssa-3288.pdf).

**Public Health Insurance: MassHealth**
MassHealth recipients can verify their active health plan by calling the 24/7 Self-Service Access phone line at 1-888-665-9993. To facilitate this process, have the consumer’s Social Security Number (SSN) or 12-digit MassHealth identification number readily available.

Further, third parties can verify MassHealth benefits by having the consumer give verbal consent via a three-way call to a MassHealth Customer Representative, and/or they can complete and sign a Permission to Share Information form, which grants a person or agency the right to receive information about the individual. The form can be found here: [www.mass.gov/eohhs/docs/masshealth/privacy/psi.pdf](http://www.mass.gov/eohhs/docs/masshealth/privacy/psi.pdf)

**Public Health Insurance: Medicare**
Medicare recipients can access their personal information about benefits and services by registering for Medicare’s free, secure online account portal at [www.mymedicare.gov/](http://www.mymedicare.gov/). When doing so, consumers must provide their Medicare number, the same address Social Security has on record, and the effective dates for Medicare Parts A and B. A confirmation letter will be sent and emailed to the recipient once registered.
In addition to this, Medicare recipients can always call 1-800-633-4227 to verify their benefits. To allow a third party to receive personal information, a Medicare Authorization to Disclose Personal Health Information (www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/CMS10106.pdf) must be signed by the recipient.

**Other Public Benefits: MAP**

Beneficiaries who are the head of the household (individual who signed the original application for benefits) will find that registering for a My Accounts Page (MAP) through the Virtual Gateway is the easiest way to verify their MassHealth coverage and any of their benefits administered by the Department of Transitional Assistance (DTA) including: Supplemental Nutrition Assistance Program (SNAP); Emergency Assistance to Elderly, Disabled and Children (EAEDC); Transitional Aid to Families with Dependent Children (TAFDC); and SSI State Supplement Payment (SSP).

To sign up for a MAP/Virtual Gateway account, visit www.mass.gov/eohhs/consumer/basic-needs/vg/map/.

**Other Public Benefits: DTA Connect**

Beneficiaries who have smart phones, can now download the free DTA Connect mobile application to verify all of their DTA benefits. By simply entering their date of birth and Social Security Number, a beneficiary can get the following:

- Confirmation of processed documents that they sent to their local DTA office, etc.
- A benefits summary that includes monthly benefit amount, next benefit issue date, Electronic Benefit Transfer (EBT) balance, etc.,
- Alerts about their benefits, upcoming appointments and workshops, etc.

**Other Public Benefits: Subsidized Housing**

For a beneficiary to have a better sense of how their housing will be impacted by work, it will be important for them to find out whether they live in housing subsidized by the state, or the federal Department of Housing and Urban Development (HUD).

To confirm which type of housing they reside in, it is best to start by contacting their Leasing Agent at their local housing authority and/or the site manager where they live. A good general rule of thumb though is if a person’s lease or income verification has the words “federal public housing”, “U.S. Department of Housing and Urban Development”, or “HUD”, they probably live in federally-funded housing. If they see words such as “state-assisted housing”, “Department of Housing and Community Development,” or “DHCD”, they probably live in state-funded housing.

For a list of all the Public Housing Authorities in Massachusetts, visit https://portal.hud.gov/hudportal/HUD?src=/program_offices/public_indian_housing/pha/contacts/ma.
This screening tool is intended to guide you when determining which program your client is most likely entitled to. This tool does not guarantee 100% accuracy. It is strongly recommended that you formally verify which Social Security benefits your client receives by requesting a Benefits Planning Query (SSA-2459) from their local Social Security office.
Social Security Reporting Requirements
Fact Sheet 2019

If you work and receive Supplemental Security Income (SSI), Social Security Disability Insurance (SSDI), or both (Dual beneficiary), you must consistently report your gross earnings (earnings before taxes) to your local Social Security office.

When do I have to report?
SSI & Duals: Total gross monthly work earnings, or any other income you received in the previous month, must be reported by the 6th of every month.

SSDI: Unlike SSI, SSDI recipients only have to report total gross monthly earnings from work, but not necessarily every month. It is, however, required that earnings be reported for the first calendar month you work and for any month your total gross monthly earnings exceed $880 in 2019. When reporting, do so once you’ve been paid for all the days in the previous month. To learn how often you should report, contact your local Social Security office.

How can I report my monthly wages?
To choose and utilize one of the reporting options listed below, visit your local Social Security office or call 1-800-772-1213 and notify them that you are working:

SSI Telephone Wage Reporting: This is a toll-free, automated phone system that allows you to report monthly wages over the phone. Remember, you are calling into an automated phone system, so speaking clearly, carefully and in a quiet location is key to making this option successful.

SSI Mobile Wage Reporting: If you have an Apple or Android mobile device, you can download this free smartphone application to report.

My Wage SSDI Paystub Reporting: In order to use this new online tool you will need to open a My Social Security Account by visiting www.ssa.gov. Once created, you will find a link in your profile to report your wages. You will be able to save and print a receipt of what you reported. You will also receive a letter from Social Security within 5 days acknowledging that your report has been processed.

In-Person Delivery (SSI, SSDI or Duals): Any individual can visit their local office to report. It is, however, the most time consuming option, so plan accordingly.

Postal Mailing (SSI, SSDI or Duals): If faxing or office visits are not viable options, beneficiaries can report by sending a letter and copies of their pay-stubs via postal mail. Certified mail is the most reliable form of mailing, but there is a cost to it. If mailed normally, it is recommended you call your local office a week after to confirm they have received and entered your information into their computer system.

Besides wages, what else must I report?
Below is a list of other items that you must report to your local Social Security office immediately:

- Starting or stopping of work
- Significant wage increases or decreases
- Applying for work incentives
- Mailing address or bank account changes
- Medical improvement
- Minor dependent additions (SSDI)
- Living situation or marital status changes (SSI)
- 30-day hospitalizations, incarcerations, or homeless shelter stays (SSI)
- Other income e.g. workers’ compensation, cash gifts, lottery winnings, unemployment benefits, etc. (SSI)

Overall Reporting Best Practices:

- Along with gross earnings, all other items stated above must also be reported via fax, postal mail, or in-person.
- Have your or your Representative Payee’s Social Security Number (SSN) available when reporting.
- Request that Social Security send you a receipt or a formal letter documenting what you reported.
- You must report consistently and on time to avoid overpayments or underpayments.
- When first applying for work incentives, visit your local office and bring appropriate documents i.e. receipts. Thereafter, you may be able to fax or mail required documents to your local office.
- Dual beneficiaries must ensure their earnings have been reported under both of their SSI and SSDI records.
How do overpayments occur?
They may occur when Social Security pays beneficiaries more than they should have been paid. This usually happens as a direct result of Social Security and beneficiary-record discrepancies or from a beneficiary failing to report in an accurate and timely manner.

How will I know I have an overpayment?
When an overpayment is detected, Social Security must mail you or your Representative Payee a Notice of Overpayment prior to withholding any funds from your cash benefits. This dated letter will explain why and how much you have been overpaid. Most importantly, it also informs you about beneficiary repayment options and appeal and waiver rights, which you have 10 days to respond.

If I agree, what are my repayment options?
- For SSDI beneficiaries, Social Security will withhold the full amount of your monthly cash benefit unless you request a lesser withholding amount and they approve it. Withholding usually starts 30 days after the Notice was sent to you.
- For SSI beneficiaries, Social Security will withhold 10% of the maximum federal benefit rate you receive each month (usually the larger of your two monthly SSI payments) unless you request a lower or higher payback rate. Withholding usually starts 60 days after the Notice was sent to you.
- For former SSI beneficiaries that now receive SSDI, Social Security can withhold up to 10% of your SSDI cash benefit to repay your SSI overpayment.
- For former SSI and/or SSDI beneficiaries, any outstanding overpayments can be repaid within 30 days by check or you can contact your local office to set up a monthly installment payback plan.

What if I agree to pay it back, but never do?
If you fail to pay back an overpayment, Social Security will recover those funds from your federal tax return, wages, or future Social Security benefits. This will also be reflected on your credit report.

What if I don’t think I’m at fault or can’t repay it?
If this is the case, you should request a waiver at any time by filing a Request for Waiver of Overpayment Recovery or Change in Repayment Rate (Form SSA-632). In this form you will need to prove that the overpayment is unjust, not your fault and that repaying it would be a financial burden. A meeting with your local office and/or evidence of income and expenses may be requested to support your case.

What if I don’t agree?
If you do not agree with what the Notice of Overpayment states, then you will have 60 days after receiving the letter to file an appeal. Specifically, you must file a Request for Reconsideration (Form SSA-561). All appeals must be in writing and should explain why you think you have not been overpaid or why the amount is incorrect. Social Security will mail a beneficiary a notice of the reconsideration determination. If you do not agree with the decision, know that you can always file a Request for Hearing.

Overpayment Tips & Best Practices:
- Accurate and timely reporting can prevent overpayments and if something is unclear in the Notice of Overpayment, seek help.
- To prevent premature withholdings of your cash benefits, file an appeal or waiver within 10 days of receiving the Notice of Overpayment.
- Forms SSA-561 and SSA-632 are available online at www.ssa.gov/forms/ or at your local office
- Social Security will delay withholding funds until a decision has been made about your appeal or waiver request.
- Regardless of who is at fault, Social Security will usually satisfy a waiver request for overpayments amounting to less than $2,000.
What is a CWIC?
CWICs are certified benefits counselors who can assist individuals receiving Supplemental Security Income (SSI) and/or Social Security Disability Insurance (SSDI), and who are either working or actively seeking employment. Their goal is to provide timely and accurate information about work incentives, as well as benefits analysis and guidance. CWICs provide beneficiaries with the necessary information to feel comfortable in taking the next step on their career path and towards financial well-being.

When is the best time to contact a CWIC?
In order of priority, when a beneficiary is:
- **Employed or self-employed** and has questions or concerns about how their benefits are being affected by their earnings, which includes but is not limited to:
  - Getting a pay raise
  - Increasing or decreasing their hours
  - Receiving a notice of an overpayment
  - Considering employer health insurance
  - Quitting a job due to concerns about loss of benefits
- **Considering a job offer** and needs to make a decision whether or not to accept it
- **Currently and actively seeking work** and going on job interviews

Who do I contact for general questions?
If you are not currently working and are not actively seeking employment, or if you just began thinking about the idea of work and have some general questions about how work earnings could impact your Social Security disability benefits, call the Ticket to Work Help Line at 1-866-968-7842 or 866-833-2967 (TTY), Monday-Friday 8AM-8PM ET.

How are Work Without Limits (WWL) Benefits Counseling services delivered?
Depending on a beneficiary’s employment status, the referral’s priority level (as described in the second section), and whether a situation is deemed urgent or not, CWIC services will be delivered in a variety of ways, including:
- Over-the-phone benefits counseling sessions
- If necessary, in-person counseling sessions
- Written technical reports, i.e. Information and Referral (I&R) Letter or Benefits Summary and Analysis (BS&A)
- General work incentives information in the form of factsheets or other written materials via mail, email or downloaded from our web site

What programs in MA offer CWIC services?
In Massachusetts, there are two programs that provide free CWIC services, WWL Benefits Counseling and Project IMPACT (Individual Members Planning and Accessing Choices Together).
- **WWL Benefits Counseling** provides services to beneficiaries residing in Berkshire, Franklin, Hampden, Hampshire, Middlesex, and Worcester counties. To get in contact with a WWL Benefits Counselor, call 1-877-937-9675.
- **Project IMPACT** provides services to beneficiaries residing in Barnstable, Bristol, Dukes, Essex, Nantucket, Norfolk, Plymouth, and Suffolk counties. To get in contact with a Project IMPACT counselor, call 1-800-734-7475

**CWICs provide free benefits counseling to individuals ages 14 to full retirement age who receive SSI and/or SSDI, and are self-employed or currently and actively seeking employment.**

For more information about Work Without Limits Benefits Counseling contact 1-877-YES-WORK (1-877-937-9675) or visit www.workwithoutlimits.org/benefits-counseling

Reference materials produced and published at U.S. taxpayer expense.
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## Public Benefit Programs

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<th>Benefit Programs</th>
<th>Phone</th>
<th>Website</th>
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<tr>
<td><strong>DTA</strong></td>
<td>Supplement Nutrition Assistance Program (SNAP or Food Stamps); Transitional Aid to Families with Dependent Children (TAFDC); Emergency Aid to the Elderly, Disabled, and Children (EAEDC)</td>
<td>1-877-382-2363</td>
<td><a href="http://www.mass.gov/eohhs/gov/departments/dta/">www.mass.gov/eohhs/gov/departments/dta/</a></td>
</tr>
<tr>
<td><strong>HUD / DHCD</strong></td>
<td>Public Housing Authority properties; Mobile Section 8 Voucher; Supportive Housing Program; HOME Investment Partnerships Program; etc.</td>
<td><a href="http://www.hud.gov/massachusetts">www.hud.gov/massachusetts</a></td>
<td><a href="http://www.mass.gov/hed/economic/eohed/dhcd/">www.mass.gov/hed/economic/eohed/dhcd/</a></td>
</tr>
<tr>
<td><strong>MassHealth</strong></td>
<td>MassHealth Standard; MassHealth CommonHealth; MassHealth Family Assistance; MassHealth CarePLUS</td>
<td>1-800-841-2900</td>
<td><a href="http://www.mass.gov/masshealth">www.mass.gov/masshealth</a></td>
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<tr>
<td><strong>Medicare</strong></td>
<td>Part A (Hospital Insurance); Part B (Medical Insurance); Part C (Medicare Advantage Plans); Part D (Outpatient Prescription Drug Plan)</td>
<td>1-800-633-4227</td>
<td><a href="http://www.mymedicare.gov/">www.mymedicare.gov/</a></td>
</tr>
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<td><strong>Social Security</strong></td>
<td>Supplemental Security Income (SSI); Social Security Disability Insurance (SSDI); Childhood Disability Benefits (CDB)</td>
<td>1-800-772-1213 (V) or 1-800-325-0778 (TTY)</td>
<td><a href="http://www.ssa.gov/">www.ssa.gov/</a></td>
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## Benefits Counseling

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<tr>
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<th>People Served</th>
<th>Services</th>
<th>Phone</th>
<th>Website</th>
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<tbody>
<tr>
<td><strong>Work without Limits Benefits Counseling/Project IMPACT</strong></td>
<td>SSI, SSDI, SNAP, EAEDC, TAFDC and HUD beneficiaries</td>
<td>Both programs offer free and confidential benefits counseling and analysis on how work income can impact all types of public cash and healthcare benefits</td>
<td>1-877-937-9675</td>
<td><a href="http://www.workwithoutlimits/benefitscounseling">www.workwithoutlimits/benefitscounseling</a></td>
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<tr>
<td><strong>COUNTIES</strong></td>
<td>Berkshire; Franklin; Hampden; Hampshire; Middlesex; Worcester</td>
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<tr>
<td><strong>Project IMPACT Phone</strong></td>
<td>1-800-734-7475</td>
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<tr>
<td><strong>COUNTIES</strong></td>
<td>Barnstable; Bristol; Dukes; Essex; Nantucket; Norfolk; Plymouth; Suffolk</td>
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<tr>
<td><strong>SHINE</strong></td>
<td>Medicare and/or MassHealth members in Massachusetts</td>
<td>Serving the Health Insurance Needs of Everyone (SHINE) provides free public health insurance information, counseling and assistance as well as advice on receiving both public and employer-sponsored health insurance</td>
<td>1-800-AGE-INFO (1-800-243-4636) and press 3</td>
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## Employment Support Programs

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<th>Phone</th>
<th>Website</th>
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<tbody>
<tr>
<td>Employment Services Program</td>
<td>TAFDC beneficiaries</td>
<td>Provides clients with basic skills, education, trainings, occupational skills and support services, such as childcare and transportation</td>
<td>1-877-382-2363</td>
<td></td>
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<tr>
<td>Family Self-Sufficiency Program</td>
<td>HUD Mobile Section 8 Housing Choice Voucher participants</td>
<td>Provides child care, transportation, education, job training, employment counseling, financial literacy, and homeownership counseling, among others services</td>
<td>1-617-573-1150 or your local Public Housing Authority office</td>
<td></td>
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<tr>
<td>One-Stop Career Centers</td>
<td>All Massachusetts residents</td>
<td>Provides job assistance services, including career counselors, attending workshops and short-term training, developing resumes, writing cover letters, and more</td>
<td><a href="http://www.mass.gov/lwd/employment-services/career-services/career-center-services/">www.mass.gov/lwd/employment-services/career-services/career-center-services/</a></td>
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<tr>
<td>Ticket to Work</td>
<td>SSI and SSDI beneficiaries</td>
<td>Provides access to vocational rehabilitation, career counseling, job training, job placement and more</td>
<td>1-866-968-7842 (V) or 1-866-833-2967 (TTY)</td>
<td><a href="http://www.chooseworkttw.net/findhelp/">www.chooseworkttw.net/findhelp/</a></td>
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## Benefits & Legal Advocacy

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<thead>
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<th>People Served</th>
<th>Description</th>
<th>Phone</th>
<th>Website</th>
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<tbody>
<tr>
<td>Health Care For All</td>
<td>All Massachusetts residents</td>
<td>Helps individuals enroll in public health insurance programs, get assistance paying for health insurance, and answers questions about private insurance</td>
<td>1-800-272-4232</td>
<td></td>
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<tr>
<td>MA Office on Disability</td>
<td>All Massachusetts residents with disabilities of all ages</td>
<td>Program ensuring equal participation of all people with disabilities in all aspects of life by advancing legal rights, supportive services, accommodations, etc.</td>
<td><a href="http://www.mass.gov/anf/employment-equal-access-disability">www.mass.gov/anf/employment-equal-access-disability</a></td>
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<td>MassLegal Help</td>
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<td>Online portal connecting individuals to public resources and information that will improve access to justice for low income and disadvantaged populations</td>
<td><a href="http://www.masslegalhelp.org/">www.masslegalhelp.org/</a></td>
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<tr>
<td>Project Bread</td>
<td>All Massachusetts residents</td>
<td>Online portal connecting people to SNAP (Food Stamp) information</td>
<td>1-800-646-8333 (V) or 1-800-377-1292 (TTY)</td>
<td><a href="http://www.gettingfoodstamps.org/">www.gettingfoodstamps.org/</a></td>
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SSI
Fact Sheets
Basics of SSI Eligibility:
SSI (Supplemental Security Income) is a low income, needs-based program. It is intended to supplement income a person may or may not have, to ensure that they are able to cover their basic living expenses, e.g. shelter, food, etc. Additionally, SSI recipients are entitled to Mass-Health Standard, at no cost. To qualify for SSI, an individual must be 65 or older, or under 65 and disabled, and have limited income and resources:
- Single beneficiaries cannot have more than $2,000 in a bank account.
- Married couples, who both receive SSI, cannot have more than $3,000 in a bank account.
- Beneficiaries can own one home and one vehicle.

SSI Payment Factors:
In Massachusetts, SSI beneficiaries usually receive two payments on the 1st of every month, the Federal Benefit and the State Supplement. Monthly payments can vary from month-to-month, due to the following factors which Social Security considers when determining the SSI payment:
- Living Situation (Do they live alone, or live in someone else’s home, or do they have a roommate?)
- Marital Status (Are they married? If so, does the other spouse also get SSI?)
- Earned & Unearned Monthly Income (Did they work, get other cash benefits, or other income?)
- Applicable Work Incentives (Are they eligible for any SSI work incentives?)

SSI Work Incentives:
Social Security created four work incentives for SSI beneficiaries that, if applicable, can reduce the impact countable income normally has on SSI payments when working. These include:

Student Earned Income Exclusion (SEIE):
This is a special exclusion for individuals who are under the age of 22, regularly attending school, and are working. With SEIE, a qualified individual in 2019 can earn up to $1,870 in a month, or a maximum of $7,550, without experiencing any impact on their SSI cash benefits.

Impairment-Related Work Expenses (IRWEs):
If you have reasonable expenses for items and services that are related to your disability, that are necessary for you to work, that you pay for out-of-pocket in the months you are working, and that you are not reimbursed for by another source, then you may be able to get half of these costs reimbursed in your SSI payment, if you apply for IRWEs. A few examples of IRWEs are specialized transportation, assistive technology, prescription copayments, etc.

Blind Work Expenses (BWEs):
If your disability on record with Social Security is statutory blindness, Social Security will fully reimburse you in your SSI payment for related expenses (e.g. service animals, adaptive devices, etc.) and unrelated expenses (e.g. meals consumed during work, transportation, income taxes, etc.), which you incur and which are needed for you to work.

Plan for Achieving Self-Support (PASS):
A PASS allows you to set aside income and/or resources for a specified time to achieve a work goal. A PASS can help you establish or maintain SSI eligibility and can increase your SSI payment amount, while being able to save money to pay for items/services specifically stated in your PASS plan.

SSI & Work - Monthly Calculation:
In order to determine your SSI payment amounts for the month, Social Security does a calculation where they take into consideration the SSI payment factors, as stated previously. Generally, as your countable income increases, your SSI will reduce. This is done by applying two income exclusions:

- General Income Exclusion: $20 of income (earned or unearned) is not counted.
- Earned Income Exclusion: $65 of work income is not counted.

In other words, if you only receive work income for the month, then $85 of that is basically yours, and will not have any impact on your SSI benefits.

After applying the exclusions, Social Security then divides your remaining work income by 2, to determine your countable income. That amount will be subtracted from the maximum SSI cash benefit associated with your living situation, and the difference will be your adjusted SSI payment.

**SSI & Work - Break Even Point**

Beneficiaries whose income increases to the point where their SSI payments reduce to $0 will:

- Continue having an open SSI case for at least another 11 months, and
- Their MassHealth Standard will most likely be protected indefinitely because of a special healthcare work incentive known as Continued Medicaid Eligibility, or 1619(b).

The only instances an SSI case will terminate is when a beneficiary is unable to exhaust any excess resources within 30 days of notification, or if the person does not receive an SSI payment for 12 consecutive months, due to excess income.

**Tips for Reporting to Social Security:**

- Report any new work activity to your local Social Security office in-person or by phone by the 6th of the following month you start working. When doing so, Social Security may give or mail you a Work Activity Report (Form SSA-821) for you to complete. This form will capture basic information about your job. To review this form, visit: www.ssa.gov/forms/ssa-821.pdf.

- SSI recipients have from the 1st to the 6th of every month to report any income they received or earned during the previous month. They can report work income to their local Social Security office by using one of the following methods:
  1. In-person delivery of paystub copies (also necessary if applying for work incentives)
  2. Postal mailing of paystub copies (call local office a week after mailing to confirm they received reported income)
  3. SSI Wage Reporting System 1-866-772-0953 (Social Security permission needed)
  4. SSI Mobile Wage Reporting Application (Social Security permission needed)

- Lastly, inform Social Security immediately about any significant work or life changes, such as increased work hours, job promotions, change of address, change in bank account, change in your living situation, etc.

  *When working, SSI cash benefits will gradually decrease as an individual’s monthly income increases. Regardless, they’ll always have more available monthly income when they work.*
2019 SSI Payment Levels in Massachusetts

### Living Arrangement A - FULL COST OF LIVING

<table>
<thead>
<tr>
<th>Benefit Type</th>
<th>Federal Benefit</th>
<th>State Supplement *</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INDIVIDUAL</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aged</td>
<td>$771.00</td>
<td>$128.82</td>
<td>$899.82</td>
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<tr>
<td>Disabled</td>
<td>$771.00</td>
<td>$114.39</td>
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<tr>
<td>Blind</td>
<td>$771.00</td>
<td>$149.74</td>
<td>$920.74</td>
</tr>
<tr>
<td><strong>MEMBER OF A COUPLE</strong></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Aged</td>
<td>$578.50</td>
<td>$100.86</td>
<td>$679.36</td>
</tr>
<tr>
<td>Disabled</td>
<td>$578.50</td>
<td>$90.03</td>
<td>$668.53</td>
</tr>
<tr>
<td>Blind</td>
<td>$578.50</td>
<td>$342.24</td>
<td>$920.74</td>
</tr>
</tbody>
</table>

### Living Arrangement B - SHARED LIVING

<table>
<thead>
<tr>
<th>Benefit Type</th>
<th>Federal Benefit</th>
<th>State Supplement *</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INDIVIDUAL</strong></td>
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<tr>
<td>Aged</td>
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<tr>
<td>Aged</td>
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<td>$100.86</td>
<td>$679.36</td>
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<tr>
<td>Disabled</td>
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<td>$90.03</td>
<td>$668.53</td>
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<tr>
<td>Blind</td>
<td>$578.50</td>
<td>$342.24</td>
<td>$920.74</td>
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### Living Arrangement C - HOUSEHOLD OF ANOTHER

<table>
<thead>
<tr>
<th>Benefit Type</th>
<th>Federal Benefit</th>
<th>State Supplement *</th>
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<tr>
<td><strong>INDIVIDUAL</strong></td>
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</tr>
<tr>
<td>Aged</td>
<td>$514.00</td>
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<td>$514.00</td>
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<tr>
<td><strong>MEMBER OF A COUPLE</strong></td>
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<tr>
<td>Aged</td>
<td>$385.67</td>
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<td>Blind</td>
<td>$385.67</td>
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### Living Arrangement E - LICENSED REST HOME

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<tr>
<th>BENEFIT TYPE</th>
<th>FEDERAL BENEFIT</th>
<th>STATE SUPPLEMENT *</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INDIVIDUAL</strong></td>
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<td></td>
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<tr>
<td>Aged</td>
<td>$771.00</td>
<td>$293.00</td>
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<tr>
<td>Blind</td>
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<td>$920.74</td>
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<tr>
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<td></td>
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<tr>
<td>Aged</td>
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<td>$485.50</td>
<td>$1064.00</td>
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<td>Disabled</td>
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<td>$485.50</td>
<td>$1064.00</td>
</tr>
<tr>
<td>Blind</td>
<td>$578.50</td>
<td>$342.24</td>
<td>$920.74</td>
</tr>
</tbody>
</table>

* Effective 4/1/12, Massachusetts assumed state administration of the SSI state supplement. This means that the state determines the state supplement amount and provides the payment separately. For more information see [http://www.mass.gov/eohhs/consumer/basic-needs/financial/ssp.html](http://www.mass.gov/eohhs/consumer/basic-needs/financial/ssp.html)

### Living Arrangement F - RESIDENT OF A TITLE XIX FACILITY WHERE MEDICAID PAYS MORE THAN 50% OF COST OF CARE

<table>
<thead>
<tr>
<th>BENEFIT TYPE</th>
<th>FEDERAL BENEFIT</th>
<th>STATE SUPPLEMENT *</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INDIVIDUAL</strong></td>
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<tr>
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<td>$42.80</td>
<td>$72.80</td>
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<tr>
<td>Blind</td>
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<td>Aged</td>
<td>$30.00</td>
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<tr>
<td>Disabled</td>
<td>$30.00</td>
<td>$42.80</td>
<td>$72.80</td>
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<tr>
<td>Blind</td>
<td>$30.00</td>
<td>$42.80</td>
<td>$72.80</td>
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### Living Arrangement G - ASSISTED LIVING

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<thead>
<tr>
<th>BENEFIT TYPE</th>
<th>FEDERAL BENEFIT</th>
<th>STATE SUPPLEMENT *</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INDIVIDUAL</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aged</td>
<td>$771.00</td>
<td>$454.00</td>
<td>$1225.00</td>
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<tr>
<td>Disabled</td>
<td>$771.00</td>
<td>$454.00</td>
<td>$1225.00</td>
</tr>
<tr>
<td>Blind</td>
<td>$771.00</td>
<td>$454.00</td>
<td>$1225.00</td>
</tr>
<tr>
<td><strong>MEMBER OF A COUPLE</strong></td>
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<td></td>
</tr>
<tr>
<td>Aged</td>
<td>$578.50</td>
<td>$340.50</td>
<td>$919.00</td>
</tr>
<tr>
<td>Disabled</td>
<td>$578.50</td>
<td>$340.50</td>
<td>$919.00</td>
</tr>
<tr>
<td>Blind</td>
<td>$578.50</td>
<td>$340.50</td>
<td>$919.00</td>
</tr>
</tbody>
</table>

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# 2019 SSI and SSDI Threshold Amounts

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SSI Resource Limit</strong></td>
<td>$2000.00 (individual) $3000 (couple)</td>
</tr>
<tr>
<td><strong>SSI Federal Benefit Rate</strong></td>
<td>$771.00 (individual) $1157.00 (elig. couple)</td>
</tr>
<tr>
<td><strong>SSI Child Allocation</strong></td>
<td>$386.00</td>
</tr>
<tr>
<td><strong>SSI Student Earned Income Exclusion</strong></td>
<td>$1870.00/month up to $7550.00/year</td>
</tr>
<tr>
<td><strong>Value of 1/3 Reduction (reduction in FBR applied when individual/couple lives throughout a month in another person's household and receives both food and shelter from others living in the household)</strong></td>
<td>$257.00 (individual) $385.67 (elig. couple)</td>
</tr>
<tr>
<td><strong>Substantial Gainful Activity - Disabled</strong></td>
<td>$1220.00/month</td>
</tr>
<tr>
<td><strong>Substantial Gainful Activity - Blind</strong></td>
<td>$2040.00/month</td>
</tr>
<tr>
<td><strong>SSDI Trial Work Month Threshold</strong></td>
<td>$880.00</td>
</tr>
<tr>
<td><strong>Cost of 1 Quarter of Coverage for Earning Insured Status</strong></td>
<td>$1360.00 ($5440/year for 4 QC)</td>
</tr>
<tr>
<td><strong>Maximum Monthly Social Security Retirement Benefit (at full retirement age)</strong></td>
<td>$2788.00</td>
</tr>
<tr>
<td><strong>Maximum Taxable Earnings (amount of earnings subject to FICA taxes to fund Social Security Retirement, Disability and Survivors benefits)</strong></td>
<td>$128,400</td>
</tr>
<tr>
<td><strong>Medicare Part B Premium</strong></td>
<td>Std premium is $135.50. Higher for those w/income over $85,000. See Medicare.gov for details.</td>
</tr>
</tbody>
</table>
How can SEIE help you?
If you receive Supplemental Security Income (SSI), are under age 22, and regularly attending school, you can work and make a significant amount of money without having your SSI cash benefits reduced. This is due to the SEIE work incentive.

How does SEIE work?
Social Security considers you to be ‘regularly attending school’ if you take one or more courses of study and attend classes:
- In a college or university, for at least 8 hours a week; or
- In grades 7-12, for at least 12 hours a week; or
- In a training course to prepare for employment, for at least 12 hours a week (15 hours a week if the course involves shop practice); or
- For less time than indicated above, if for reasons beyond the student’s control, such as illness.

Note: If you are home schooled because of a disability, you may be considered ‘regularly attending school by:
- Studying a course or courses given by a school (grades 7-12), college, university, or government agency; or
- Having a home visitor or tutor who teaches you.

How can you apply for SEIE?
If you feel you meet the qualifications described above, then you and/or your Representative Payee should speak to an SSI Claims Representative at your local Social Security office and ask if you are eligible for SEIE. It is highly recommended you bring a formal letter from your school to facilitate this process.

How does SEIE work?
In 2019, if you qualify for SEIE, you can earn up to the maximum of $1,870 in gross monthly earnings, or the yearly maximum of $7,550, without seeing an impact in your SSI cash benefits. You likely will only see an impact in your SSI if you ever earn above the monthly SEIE maximum, or if you earn over the yearly SEIE maximum before the end of the year. The figures above are usually adjusted every year, based on the cost-of-living.

What else must you do when you work?
You must report new work activity to your local Social Security office, as well your monthly income by the 6th of every month. Mail copies of your paystubs, or use the SSI Phone Wage Reporting System (1-866-772-0953) or the SSI Mobile Wage Reporting application to report your income. Whichever way you choose, always request a receipt for what you reported. Lastly, when applying for SEIE, it is recommended you go to your local Social Security office in person.

SEIE helps working students who receive SSI to earn income while attending school, to keep more of their SSI cash benefit, and to improve their employment outcomes. A Community Work Incentives Coordinator can help you understand the SEIE process and eligibility criteria.
Impairment-Related Work Expenses (IRWEs) & SSI Benefits
Fact Sheet 2019

What are IRWEs?
IRWEs are SSI and SSDI work incentives that are applied differently to each Social Security disability program. They consist of items or services that are:
- Purchased by a working beneficiary,
- Not reimbursed by a third party,
- Directly or indirectly related to their disability,
- Needed for them to work successfully, and
- Considered reasonable in terms of cost.

Some examples of IRWE expenses are Attendant Care services, prosthesis, transportation costs, medical devices, work-related equipment, adaptive equipment, medications and therapies. For more examples, reference Social Security’s 2018 Red Book (www.ssa.gov/redbook/documents/TheRedBook2018.pdf) and www.ssa.gov/redbook/newfor2019.htm

What is the SSI advantage of using IRWEs?
If your IRWEs are approved by Social Security, then half the cost of each expense will be reimbursed in your monthly SSI payment. If you have any expensive IRWEs, i.e., hearing aids or a wheelchair, the cost can be prorated over the lifetime of the item purchased. Essentially, an IRWE reduces the full impact, or reduction, work income would normally have on your SSI monthly cash benefits.

What are best practices when applying for IRWEs?
- When considering if an item or service is an IRWE, go for it – you have nothing to lose!
- Prior to working, it is highly recommended you consult with a Social Security Claims Representative about your potential IRWEs.
- Always apply for IRWEs in person at your local Social Security office.
- Submit copies of your receipts for each IRWE you are applying for.
- Provide an explanation as to how each expense meets the IRWE criteria, previously stated.
- In some cases, you may need to bring a doctor’s note justifying why you need the service and/or item you have purchased as a result of your disability.

What can you do if your IRWE is denied?
If Social Security denies your application for a particular IRWE, know that you have the right to request an appeal within 10 business days after receiving a formal notification from Social Security about their decision.

A Community Work Incentive Coordinator can help you identify expenses that may qualify as IRWEs. Ultimately, Social Security determines which expenses meet the IRWE criteria.
**IMPAIRMENT RELATED WORK EXPENSE REQUEST**

This request should accompany wage reports made to the Social Security Administration if you are a beneficiary receiving a Social Security or SSI disability benefit, or Medicaid under the 1619(b) provisions. You should include receipts, and proof of wages or your self-employment tax returns.

**Note:** Please do not use this form if you are a blind individual who only receives SSI benefits.

<table>
<thead>
<tr>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Period Worked:</td>
</tr>
<tr>
<td>Beneficiary Name:</td>
</tr>
<tr>
<td>Rep Payee (if applicable):</td>
</tr>
<tr>
<td>Social Security Number:</td>
</tr>
<tr>
<td>SSN on which payment is made (if different):</td>
</tr>
<tr>
<td>Type of Benefits Received:</td>
</tr>
<tr>
<td>☐ SSI</td>
</tr>
<tr>
<td>☐ Title II Disability benefit (SSDI, CDB, DWB)</td>
</tr>
</tbody>
</table>

This is a request that the items described below be deducted as Impairment Related Work Expenses when you consider the work activity I am reporting. The items listed below meet the following requirements:

- They are necessary for my work activity or self-employment
- They were paid by me, and not reimbursed by another source
- They were not deducted as a business expense; and
- They relate to an impairment being treated by a health-care provider
- For each expense, I will attach a receipt. I will be happy to provide additional documentation, if requested.

List of expenses for this report period that appear on my attached pay stubs:

**Note:** You can include monthly expenses for months when you worked, or you can include the cost of durable goods, either the down-payment, the monthly payment, or the total cost, depending on how you paid for the item. Durable expenses may be pro-rated over a 12-month period.

<table>
<thead>
<tr>
<th>Date of Payment</th>
<th>Amount of Expense</th>
<th>Impairment to Which Cost is Related</th>
<th>Healthcare Provider Name and Type (Example: Dr. Smith, Chiropractor)</th>
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</thead>
<tbody>
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</tr>
</tbody>
</table>

Thank you for your consideration of this request.

Beneficiary or payee signature:
Blind Work Expenses (BWEs)
Fact Sheet 2019

What are BWEs?
A Blind Work Expense (BWE) is an SSI work incentive available to working individuals who receive SSI due to statutory blindness. Specifically, BWEs are out-of-pocket expenses that individuals incur to be able to work successfully. Unlike other SSI work incentives, BWEs do not have to be related to an individual’s statutory blindness.

How can BWEs help you?
Social Security will not count any work income that you have used to pay for BWEs when they determine your new monthly SSI payment. This results in you receiving a higher SSI payment than you otherwise would receive.

What are some examples of BWEs?
- Guide dog related expenses i.e. food, veterinary services, etc.
- Public or alternative transportation costs to and from work e.g. taxi services, Uber, etc.
- Mileage usage of, or vehicle modifications to, an individual’s car
- Professional association dues, unions dues, licenses, and/or mandatory pension contributions
- Federal, state, and local income taxes, as well as Social Security taxes
- Visual/sensory aids or Braille translations
- Meals consumed during work hours

How do BWEs work?
When Social Security calculates your new SSI payment due to work earnings, they will apply income exclusions, including a $20 General Income Exclusion and a $65 Earned Income Exclusion. After applying these exclusions, they will count half of your remaining earned income to the SSI monthly calculation, unless you have any approved BWEs. If so, then these BWEs are deducted from that portion of your earned income, which will effectively reduce the overall impact on your SSI cash benefits.

Note: You must keep track and report BWEs to Social Security when you report your earnings each month. If a specific BWE expense occurs monthly, you should report and verify this with your local Social Security office every 12 months.

A Blind Work Expense is a work incentive for individuals receiving SSI cash benefits due to statutory blindness and who earn income.
What is Expedited Reinstatement (EXR)?
EXR is the ultimate safety net that former Social Security Disability Insurance (SSDI) and/or Supplemental Security Income (SSI) recipients may use to have their benefits reinstated.

In other words, through EXR you do not have to reapply for benefits and there is no waiting period to get your former cash and health insurance benefits reinstated, once Social Security has determined that you qualify for EXR.

How can I qualify for EXR as a former SSI recipient?
If you are a former SSI recipient, you must meet the following conditions to qualify for EXR:

- Your SSI case must have been terminated due to 12 consecutive months of excess work and/or a combination of work and unearned income i.e. cash gifts, other public cash benefits, etc.;
- As a result of your excess income, you must also no longer qualify for Extended Medicaid coverage, also referred to as 1619 (b), which is a work incentive that preserves MassHealth Standard due to excess work and/or work and unearned income;
- You can no longer perform Substantial Gainful Activity (SGA) due to your disability, or because of a disability-related medical condition. In 2019, monthly gross earnings that equal or exceed $1,220 is considered SGA;
- Your EXR request must be made within 5 years (60 months) from the month your claim was closed. Exceptions are made to this rule, however, if the individual provides good cause i.e. not being notified that their case was terminated. Note: You may request EXR in the same month that you stop earning SGA.

How does EXR work for former SSI recipients?
Starting the month after you apply for EXR, you will be eligible for up to 6 months of provisional cash benefits and public health insurance (MassHealth Standard) benefits, while Social Security is reviewing the continuation of your original disability. Note: If you perform SGA during this 6-month period, your provisional benefits will stop.

What if my EXR request is denied?
If denied, your provisional benefits will not be considered as an overpayment. Therefore, you do not have to pay anything back. Also, you can appeal Social Security’s decision within 10 business days of receiving official notification of their EXR decision.

What if my EXR request is approved?
If approved, your disability benefits will be officially reinstated and you will begin your Initial Reinstatement Period (IRP).

Your IRP will conclude after receiving 24 cash benefit payments. During an individual's IRP, SSI beneficiaries will receive a payment during any month they do not have excess income.

What are the benefits of EXR?
- To qualify for EXR, you only have to meet the medical standard instead of both medical and vocational standards;
- You get up to 6 months of temporary cash and health insurance benefits, while Social Security is making an EXR decision;
- Once SSI cash benefits and MassHealth Standard are reinstated under EXR, then you can also take advantage of any SSI-related work incentives. To learn more about these incentives, reference the SSI Benefits & Related Work Incentives Fact Sheet at www.workwithoutlimits.org/benefits-counseling
**SSI & Self-Employment**  
**Fact Sheet 2019**

**What does Social Security consider?**
Social Security must determine whether a beneficiary is engaging in self-employment. Social Security’s general policy when determining the existence of a trade or business is to consider the following:

- Is there a good-faith intention of making a profit or producing income?
- Is there continuity of operations, repetition of transactions, or regularity of activities?
- Are the functions being performed considered to be a regular occupation or profession?
- Does the individual portray themselves as being engaged in the selling of goods or services?

**What should you consider?**

**Business feasibility:** How do you know that your business idea will work? Have you done any test marketing or have you talked to knowledgeable people about whether or not your business idea has a reasonable chance for success?

**Financial start-up:** Do you know how much it will cost to start your business? Do you have any ideas about how to get the money you think you will need, or do you know where you can get assistance with start-up funds? This can be arranged through Vocational Rehabilitation, Workforce Investment Act agencies, or Social Security (such as with a Plan to Achieve Self-Support - PASS).

**Business plan development:** If you plan to apply for a loan, submit a PASS, or to ask the State Vocational Rehabilitation Agency for funds, you will probably need a formal, written business plan. Can you write this document yourself, or will you need help?

**Legal business structure:** Will your business be a corporation, partnership, Limited Liability Company (LLC), or sole proprietorship? Business structure decisions are important because it affects how Social Security looks at any income your business generates, as well as how taxes are assessed. Each local Social Security office has a Work Incentive Liaison who can help you understand your business.

**Accounting & bookkeeping:** Being self-employed requires that you keep track of business income and expenses. Do you plan to do your own bookkeeping and accounting, or will you use the services of a professional? Have you looked into the cost of accounting software or the services of a bookkeeper/accountant? Will you need training to perform your own accounting? Will you use a cost or an accrual accounting method to track revenues and expenses? These two methods make a difference in determining your Net Earnings from Self Employment (NESE) for Social Security purposes.

**Self-employment tax implications:** When you are self-employed you need to ensure you are filing the appropriate forms with the Internal Revenue Service. This may be completing quarterly returns, and completing a Schedule C or Schedule C-SE for the business each year. Also, you are still responsible for making contributions to the Federal Insurance Contribution Act (FICA) and all self-employment tax payments, so completing the appropriate forms is essential.

**Licenses, permits or other legal requirements:** Will your business require any licenses or permits in order for you to operate legally? Do you know what paperwork needs to be filed to meet federal, state and local tax requirements?

**Accommodations you might need to operate your business successfully:** Have you thought about what services and supports you might need to accommodate your disability as you manage your business? If you need services or supports because of your disability, do you know where to get help arranging and paying for these services or supports?

**Other Considerations:** If you receive other state or federal assistance, you will need to understand the impact of self-employment on these benefits and entitlements as well. The Small Business Administration can offer valuable advice regarding your business venture, finance and accounting procedures, and other important issues that will help you in making your self-employment venture successful.

**How are self-employment earnings calculated?**
When assessing how much you are earning in self-employment, Social Security counts Net Earnings from Self Employment (NESE). NESE is calculated by deducting business expenses from gross revenues, and then multiplying the difference by 0.9235. The result is the portion of your net earnings counted as income from self-employment, which is then divided across the 12 months.

It is highly recommended that at the start of every calendar year, you work with Social Security to project your annual NESE, and that you file your taxes soon after the end of the year to know what your actual NESE was for the previous year.

How does NESE impact your SSI payment?
Once your annual NESE projection is determined, your monthly SSI payments for the remainder of the year will be adjusted based on this figure. And once you have filed your taxes for the previous year and report your actual NESE figure to Social Security, they will then compare your projections to your actuals to determine whether you may have incurred an overpayment or an underpayment in your monthly SSI payments. Like taxes, it may be best to overestimate your NESE projections to avoid an overpayment.

When calculating the amount of your SSI payment every month, Social Security always applies a couple of exclusions amounting to $85, and thereafter they will count less than half of your NESE and will reduce your SSI payment by $1 for every $2. In other words, although less than half of your NESE will impact your monthly SSI payment, you still must be sure to remember the income you received from your business.

How can SSI work incentives help?
SSI recipients need to be aware of several important work incentives that, if applicable, can reduce the impact countable income normally has on an individual’s SSI payment. These include:

Property Essential to Self-Supports (PESS):
PESS excludes some resources that are essential to your means of self-support, when your eligibility for SSI is determined.

Social Security does not count property that you use in a trade or business. To use PESS, inform Social Security of these types of resources.

Student Earned Income Exclusion (SEIE):
This is a special exclusion for individuals who are under the age of 22, regularly attending school, and earning income. With SEIE, a qualified individual can earn up to $1,870 in a month, or a maximum of $7,550, without experiencing any impact on their SSI payment.

Impairment-Related Work Expenses (IRWEs):
In some limited circumstances, this work incentive may help you during self-employment, if you have reasonable expenses for items and services that are related to your disability, that are necessary for you to work, that you pay out-of-pocket in the months you are working, and that are not reimbursed by another source. A good example of an IRWE deduction, if you are self-employed and working from home, would be modifications to your home that you are not able to deduct as a business expense. If an IRWE is approved by Social Security, half of the cost will be reimbursed in your SSI payment.

Blind Work Expenses (BWEs):
If your primary disability on record with Social Security is blindness, Social Security will not count any earned income that you use to meet expenses, which are necessary to allow you to work, when deciding your SSI eligibility and payment amount. This includes taxes that you pay for your business. If a BWE is approved by Social Security, the full cost of the expense will be reimbursed in your SSI payment.

Plan for Achieving Self-Support (PASS):
A PASS allows you to set aside income and/or resources for a specified time toward a work goal. A PASS can help you establish or maintain SSI eligibility and can increase your SSI payment amount. A PASS, with a self-employment work goal, must include a business plan.
Transition: SSI Disability to SSI Elderly
Fact Sheet 2019

What happens when an individual reaches age 65 when receiving SSI Disability?
When an individual with a disability is receiving Supplemental Security Income (SSI) and turns 65, they have a choice to make. They can either have their SSI disability benefit switch to SSI Elderly, or they can choose to stay on SSI Disabled. There are pros and cons for each. Whether choosing either SSI Elderly or SSI Disabled, they will continue to receive a monthly SSI cash benefit, based on living situation and marital status. Also, they must apply for and accept all other cash benefits if eligible, such as:
• Social Security Early Retirement (age 62)
• Disabled Widow(er)s Benefits (age 50)
• Widow(er)s Benefits (age 60)
• Spousal Benefits (age 62)

What are the eligibility requirements for SSI Elderly?
An individual must be 65 and have limited income and resources:
▪ Single beneficiaries cannot have more than $2,000 in resources.
▪ Married couples, who both receive SSI, cannot have more than $3,000 in resources.
▪ Beneficiaries can own one home and one vehicle.

Should an individual notify Social Security when turning 65?
Yes. They must let Social Security know which category of SSI they wish to have, otherwise Social Security will automatically switch SSI Disability benefits to SSI Elderly benefits.

If choosing SSI Elderly, will the cash benefits received be the same as SSI Disability?
The Federal Benefit Rate will stay the same, however, the State Supplement Payment will likely increase (Click here). Or to review the SSI Payment Levels in Massachusetts under the ‘Aged’ category:
https://onlinetraining.umassmed.edu/ssipayment2019/

What happens when an individual chooses SSI Disabled and works?
• They will still be subject to continuing medical reviews, regardless of work status.
• The same SSI and Work calculation will be used to determine the new monthly SSI payment. For further explanation, see the SSI Benefits & Related Work Incentives fact sheet.
• Work incentives, such as Impairment Related Work Expenses (IRWEs), Blind Work Expenses (BWEs), and Plan to Achieve Self Support (PASS), are available.
• Eligibility for MassHealth protections under 1619(b) continues.

What happens when an individual chooses SSI Elderly and works?
• Continuing medical reviews will stop, regardless of work status.
• The same SSI and Work calculation will be used to determine the new monthly SSI payment.

For more information about Work Without Limits Benefits Counseling contact
1-877-YES-WORK (1-877-937-9675) or visit www.workwithoutlimits.org/benefits-counseling

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Transition: SSI Disability to SSI Elderly
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• Work Incentives are not available, with the exception of a PASS approved prior to age 65.

What will happen to public health insurance when an individual turns 65?
MassHealth Standard coverage will continue under SSI Elderly, however, work may impact eligibility. Should this occur, MassHealth CommonHealth is available. In addition to MassHealth, an individual may become eligible for Medicare. If so, MassHealth could possibly provide Medicare premium assistance.

What needs to be reported to Social Security?
Report your gross monthly earnings by the 6th of every month. Additionally, report significant work or life changes, such as quitting a job, increased work hours, job promotions, change of address, change in bank account, change in living situation, etc.

For more information on SSI:
https://www.ssa.gov/ssi/text-understanding-ssi.htm

A Community Work Incentives Coordinator (CWIC) can help you understand the transition from SSI Disability to SSI Elderly.
Basics of SSDI Eligibility & Work:
- SSDI (Social Security Disability Insurance) cash benefits are paid to beneficiaries who have been determined to be disabled by Social Security.
- Monthly cash benefit amounts are based on the years a person has worked and paid towards Social Security and Medicare taxes.
- Generally, SSDI monthly cash benefits are paid on any other day besides the first of the month.
- SSDI is an “all or nothing program” where, depending on your earnings, you can receive all of your monthly SSDI cash benefit or nothing.

Extended Period of Eligibility (EPE):
- This next work incentive phase automatically begins in the month following your final (9th) TWP month and it lasts for 36 consecutive months, whether you are working or not.
- During this 3-year safety net, Social Security will compare your gross monthly earnings and work pattern to a monthly threshold referred to as Substantial Gainful Activity (SGA), $1,220 or $2,040 if you are blind in 2019. *Other SGA disabled and blind annual figures on page 2.
- This is how it generally works: if you gross at or above SGA, you will not be entitled to your SSDI payment for that month, and if you gross below SGA, you will be. There is one exception to this rule, however, which is the first month you make over SGA during EPE – this is known as your Cessation month and the following two months are known as your Grace Period months. During these three months, you will still be entitled to your SSDI payments, even though you were technically over SGA the first month.
- You can use additional work incentives, e.g. Impairment-Related Work Expenses, Income Averaging, Special Conditions, Employer Subsidies, and Unsuccessful Work Attempts, during EPE if you qualify for them. If so, these incentives could lower your countable gross monthly earnings below SGA, effectively making you eligible for a monthly cash benefit.
- If your earnings ever fall below SGA during EPE, you do not have to reapply for SSDI to get your cash benefits back. All you need to do is notify Social Security office that your earnings are below SGA.

SSDI Phases & Work Incentives:
Several work incentives exist under the SSDI program, which are designed to encourage individuals to work and become self-sufficient. The following are 3 different time periods, or phases, to keep in mind when you work and receive SSDI:

Trial Work Period (TWP):
- This work incentive phase allows you to make an unlimited amount of money for 9 months, while receiving your full SSDI cash benefit throughout.
- In 2019, if you gross $880 or more in a month, then you will use 1 of your 9 TWP months, and in any months you earn below $880 it will not count as a TWP month. *Other TWP annual figures available on page 2.
- Your TWP will be considered complete if you have used 9 TWP months within a 5-year window.
- The duration of a TWP varies from person to person; some never start, some never finish, others finish after 9 months, and others take anywhere from 9 months to 5 years.
Post-Extended Period of Eligibility:
▪ After your EPE is complete, Social Security will continue to compare your gross monthly earnings to that year’s SGA monthly threshold.
▪ If your Cessation and Grace Period months occurred during your EPE, then your SSDI case will be terminated the first time you are at or above SGA, after your EPE.
▪ If this did not occur during your EPE, you will be entitled to a Cessation month and a Grace Period the first time you gross at or above SGA, after your EPE has ended. Thereafter, if you continue earning over SGA, your case will close.

Work & Medicare:
If you start working and earn enough to begin your Trial Work Period (TWP), know that your Medicare will be preserved throughout. If you ever complete your TWP, also know that you will have Medicare for at least another 93 months after, due to a special work incentive called the Extended Period of Medicare Coverage (EPMC).

Note: SSDI beneficiaries can continue using EPMC so long as they pay their Medicare premiums and continue to meet Social Security’s disability standards. Social Security is the only agency that can give you a definitive date of when your Medicare eligibility will stop. Therefore, it is recommended you make an inquiry about this to your local Social Security office shortly after you finish your TWP.

Tips for Reporting to Social Security:
▪ Report any new work activity to your local Social Security office by the 10th of the month, following the month you start working. They may give or mail you a Work Activity Report (Form SSA-821) for you to complete. This form will capture basic information about your job. To review this form, visit: www.ssa.gov/forms/ssa-821.pdf.
▪ At the beginning of every month (once you receive the paycheck reflecting your last work days for the month you are reporting for), submit copies of your paystubs or your employer’s monthly direct deposit payroll report to your local Social Security office by postal mail, online, or in person. Some offices may accept faxes. If you choose to mail in your paystubs, be sure to call the Social Security office 1-2 weeks after to confirm they received your reported earnings and that they have been entered into the system.
▪ Note: Report earnings from hours you physically worked - paid vacation/sick days do not need to be reported – and make sure you obtain a receipt from Social Security confirming you did in fact report your earnings.
▪ Track the hours and earnings you work every day so you know where you stand with respect to the TWP or SGA thresholds.
▪ Lastly, inform Social Security immediately about any significant work or life changes such as increased work hours, job promotions, changes of address, changes in bank account, etc.

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What is TWP?
The TWP is the first work incentive available to all SSDI beneficiaries who return to work for the first time after entitlement. The TWP is a phase where beneficiaries can try out work and make an unlimited amount of money for at least 9 months, without having to worry about losing their monthly cash benefit. In other words, a beneficiary can earn thousands of dollars or more in a month, and still receive their full SSDI cash payment.

How does the TWP work?
A TWP will begin the first time Social Security determines you are performing ‘services.’ This consists of you either grossing at or above the TWP monthly threshold, $880 in 2019, or if you are self-employed and work over 80 hours in a single month. A TWP is considered complete when you have used 9 accumulative TWP months within a 5-year window, while satisfying either of the aforementioned conditions. *Other TWP annual figures available in proceeding chart.

What are considered ‘services’?
When determining if work activity is considered “services” for TWP purposes, Social Security is only concerned with services that are paid for work performed. Therefore, sick time nor vacation time count as earnings.

Work activity performed without pay, as part of a therapeutic program, training, or self-care, would not be considered services. Some work that results in payments, such as work done through the VA CWT program, also may not represent ‘services’. Determinations of what does and does not count as “services” are ultimately made by Social Security.

How long does a TWP typically last?
The duration of a TWP can vary from person to person, as TWP usage relates to their earnings; some never start the TWP, some never finish, others finish after 9 months, and others take anywhere from 9 months to 5 years.

What occurs when a TWP ends?
When the end of your TWP is approaching, Social Security may perform a work activity review of your case. To facilitate this, they will send you a Work Activity Report (Form SSA-821) to capture any significant work activity changes. To review this form, visit: www.ssa.gov/forms/ssa-821.pdf.

During the month following your final TWP month, you will automatically enter into the second SSDI work incentive phase known as the Extended Period of Eligibility (EPE). This phase lasts for 36 consecutive months regardless if there are any changes to your work status.

What should you do during your TWP?
You should track the hours and earnings you work every day so you know where you stand with respect to the TWP monthly threshold. Dedicating a calendar to record daily earnings is an effective tracking mechanism. Further, report your gross monthly earnings by the 10th of every month.

Annual TWP Monthly Thresholds

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TWP is a work incentive which helps SSDI beneficiaries continue to receive cash benefits and health insurance, once work begins. SSDI beneficiaries are entitled to only one TWP per SSDI claim.
What is EPE?
EPE is the second work incentive available that provides an additional three years (36 months) of protection to an SSDI beneficiary’s case. It begins the month after your Trial Work Period (TWP) ends and continues for the next 36 months, whether you are working or not working.

What are the general rules of EPE?
During each month of your EPE, Social Security will evaluate whether your countable gross earnings are at or above Substantial Gainful Activity (SGA). In 2019, SGA is $1,220 per month or $2,040 for individuals who are statutorily blind. *Other SGA annual figures available on page 2.

Generally, if your earnings fall below SGA, you will be entitled to an SSDI payment for that month, and for the months your earnings are at or above SGA, you will not be entitled to a payment.

Is there an exception to this rule?
Yes. The one exception to this rule is the first month Social Security detects you are consistently at or above SGA. This month is your Cessation month and the next two months, regardless of SGA, is your Grace Period. You will still be entitled to SSDI payments for all three months. Thereafter, the general rule applies for the rest of your EPE.

What happens after your EPE has ended?
This will depend on how much you are earning and whether or not you have already used your Cessation and Grace period months during EPE.

Scenario 1:
If you have already used your Cessation and Grace Period months during EPE and you continue making over SGA after your EPE, then your SSDI case will most likely be closed the first month you gross over SGA after your EPE.

Scenario 2:
If you have already used your Cessation and Grace Period months during EPE, but continuously gross under SGA after your EPE, then you could continue receiving SSDI payments until you have reached your Social Security full retirement age.

Scenario 3:
If you have not used your Cessation and Grace Period months during EPE, then you will be entitled to both if you ever gross over SGA after your EPE. Again, your SSDI case will close when you make SGA after your Cessation and Grace Period months. Conversely, your case will remain open if you never make SGA after your Cessation and Grace Period.

Scenario 4:
If you never make over SGA during or after your EPE, then you could continue receiving SSDI payments until you have reached your Social Security full retirement age.

What other incentives can I use during EPE?
When Social Security makes SGA determinations during and after EPE, there are a few work incentives (described below) that, if applicable, may help reduce your countable earnings below the SGA
level. In other words, they may make you eligible for an SSDI payment even though your gross monthly earnings are technically over SGA, and they can help preserve SSDI eligibility after your EPE.

**Impairment-Related Work Expenses (IRWEs):** If you incur costs that are in/directly related to your disability and needed for you to work successfully, then the full cost of these expenses may be deducted from your countable earnings.

**Employer Subsidies:** Are reasonable accommodations that employers willingly pay for and provide to an individual with a disability. It usually costs more than the actual value of the services rendered by the individual. It is not provided to other employees in the same position, or paid for by a third-party.

**Special Conditions:** Are a type of subsidy where work-related items and/or services are paid for by a third party, not by the employer or the individual.

**Income Averaging:** If you are a seasonal worker or your hours fluctuate greatly, Social Security may average your annual work earnings and distribute them over the year; therefore, possibly lowering your countable earnings in the months you actually worked.

**Unsuccessful Work Attempts (UWAs):** If you were earning SGA, but within 6 months your earnings fell below SGA due to your disability (whether you stopped working or reduced your hours), Social Security can declare this job as a UWA. When this happens, Social Security will not count any of the income from that job. It is like the job never happened!

**What should you do during & after your EPE?**
Track the hours and earnings you work every day so you know where you stand with respect to SGA. Dedicating a calendar to record daily earnings is an effective tracking mechanism. Further, report your gross monthly earnings by the 10th of every month.

*Annual SGA monthly thresholds available below:

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The Extended Period of Eligibility allows for continued eligibility of SSDI benefits after an individual has completed their Trial Work Period.
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<td>2019</td>
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<td>$2,040</td>
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Impairment-Related Work Expenses (IRWEs) & SSDI Benefits
Fact Sheet 2019

What are IRWEs?
IRWEs are SSI and SSDI work incentives that are applied differently to each Social Security disability program. They consist of items or services that are:
- Purchased by a working beneficiary,
- Not reimbursed by a third party,
- Directly or indirectly related to their disability,
- Needed for them to work successfully, and
- Considered reasonable in terms of cost.


What is the SSDI advantage of using IRWEs?
Approved IRWEs are applied to the Substantial Gainful Activity (SGA) determination conducted by Social Security every month during and after the Extended Period of Eligibility. Normally, if your gross monthly earnings exceed the SGA threshold, $1,220 in 2019, you will not be entitled to an SSDI payment for that month. However, since the costs of IRWEs are deducted from gross earnings, then there is a possibility your countable earnings will fall below the SGA threshold, making you entitled to an SSDI payment. All of this will depend on how much your gross monthly earnings have exceeded the SGA threshold and how much you have in IRWEs.

What are best practices when applying for IRWEs?
- When considering if an item or service is an IRWE, go for it – you have nothing to lose!
- Prior to working, it is highly recommended you consult with a Social Security Claims Representative about your potential IRWEs.
- Always apply for IRWEs in person at your local Social Security office.
- Submit copies of your receipts for each IRWE you are applying for.
- Provide an explanation as to how each expense meets the IRWE criteria previously stated.
- In some cases, you may need to bring a doctor’s note, justifying why you need the service and/or item you have purchased as a result of your disability.

What can you do if your IRWE is denied?
If Social Security denies your application for a particular IRWE, know that you have the right to request an appeal within 10 business days after receiving a formal notification from Social Security about their decision.

A Community Work Incentive Coordinator can help you identify expenses that may qualify as IRWEs. Ultimately, Social Security determines what is considered an IRWE.
**IMPAIRMENT RELATED WORK EXPENSE REQUEST**

This request should accompany wage reports made to the Social Security Administration if you are a beneficiary receiving a Social Security or SSI disability benefit, or Medicaid under the 1619(b) provisions. You should include receipts, and proof of wages or your self-employment tax returns.

**Note:** Please do not use this form if you are a blind individual who only receives SSI benefits.

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<th>Date:</th>
<th>Period Worked:</th>
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<th>SSN on which payment is made (if different):</th>
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<tr>
<th>Type of Benefits Received:</th>
<th>☐ SSI</th>
<th>☐ Title II Disability benefit (SSDI, CDB, DWB)</th>
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This is a request that the items described below be deducted as Impairment Related Work Expenses when you consider the work activity I am reporting. The items listed below meet the following requirements:

- They are necessary for my work activity or self-employment
- They were paid by me, and not reimbursed by another source
- They were not deducted as a business expense; and
- They relate to an impairment being treated by a health-care provider
- For each expense, I will attach a receipt. I will be happy to provide additional documentation, if requested.

List of expenses for this report period that appear on my attached pay stubs:

**Note:** You can include monthly expenses for months when you worked, or you can include the cost of durable goods, either the down-payment, the monthly payment, or the total cost, depending on how you paid for the item. Durable expenses may be pro-rated over a 12-month period.

<table>
<thead>
<tr>
<th>Date of Payment</th>
<th>Amount of Expense</th>
<th>Impairment to Which Cost is Related</th>
<th>Healthcare Provider Name and Type (Example: Dr. Smith, Chiropractor)</th>
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Thank you for your consideration of this request.

Beneficiary or payee signature:
**Special Conditions**

**Fact Sheet 2019**

**What does Social Security consider when you receive SSDI and work?**
When a Social Security Disability Insurance (SSDI) beneficiary works and has completed their Trial Work Period (TWP), Social Security will compare their gross monthly earnings (before taxes) and work pattern, to a monthly threshold referred to as Substantial Gainful Activity (SGA). In 2019, that amount is $1,220 or $2,040 if you are blind. The SGA amount usually changes annually. This is how it generally works: If you gross at or above SGA, you will not be entitled to your SSDI payment for that month, however, if you gross below SGA, you will be entitled to your SSDI payment.

**What are Special Conditions?**
Special Conditions are work incentives that Social Security can use when determining if a person is performing SGA. They are a type of subsidy where work-related items and/or services are paid for by a third party, not by the employer or the individual. They are not provided to other employees in the same position.

**How can Special Conditions help me?**
The value of these items and/or services are deducted from your gross monthly earnings, possibly making you eligible for an SSDI payment, even though you are earning over SGA.

**Who can qualify for Special Conditions?**
An SSDI beneficiary who receives on-the-job support, such as job coaching, specialized transportation, and/or adaptive equipment paid by a state agency, would likely qualify.

**When can Special Conditions be used?**
Special Conditions can only be used once you have completed your TWP and earn SGA.

**How are Special Conditions approved?**
In order to obtain approval, an individual and their employer must complete the Employee Work Activity Questionnaire (Form SSA-3033) to help Social Security determine the nature and value of the Special Condition. A link to this form can be found at [www.ssa.gov/forms/ssa-3033.pdf](http://www.ssa.gov/forms/ssa-3033.pdf).

**Note:** Social Security reviews Special Conditions every year.

**How is the value of Special Conditions determined?**
The dollar value is calculated by multiplying the individual’s hourly pay rate, by the number of hours the Special Condition is used by the individual. Again, if the value of the Special Condition reduces the individual’s new countable gross monthly earnings below SGA, then the individual will be entitled to their cash benefit for that month.

**Special Condition Example:**
Christine works and grosses $1,240 a month. She receives job-coaching support for 10 hours each month, which is paid by the Massachusetts Rehabilitation Commission. Since this support is provided by a third-party, it can be considered a Special Condition. The value of the Special Condition equals Christine’s hourly rate, multiplied by the number of hours she is coached each month. This equals $120 ($12 X 10 hours). This amount is deducted from her gross monthly earnings of $1,240, which brings her countable income to $1,120. Her countable earnings are now below SGA; therefore, she is entitled to her SSDI payment for that month.

**A Community Work Incentives Coordinator can help you understand the process of Special Conditions and the impact of work on your SSDI benefits.**
What does Social Security take into consideration when you work?
When a Social Security Disability Insurance (SSDI) beneficiary works and has completed their Trial Work Period (TWP), Social Security will compare their gross monthly earnings (before taxes) and work pattern, to a monthly threshold referred to as Substantial Gainful Activity (SGA). In 2019, that amount is $1,220 or $2,040 if you are blind. The SGA amount will usually change annually. This is how it generally works: If you gross at or above SGA, you will not be entitled to your SSDI payment for that month, however, if you gross below SGA, you will be entitled to your SSDI payment.

What is an Employer Subsidy?
An Employer Subsidy is a work incentive that Social Security can use when determining if a person is performing SGA. It is a reasonable accommodation that employers willingly pay for and provide to an individual with a disability. It usually costs more than the actual value of the services rendered by the individual. It is not provided to other employees in the same position, or paid for by a third-party.

How can an Employer Subsidy help me?
Each month Social Security deducts the value of your subsidy from your countable gross monthly earnings. If this deduction reduces your countable earnings below SGA, then you will be entitled to a cash benefit payment for that month.

Who can qualify for an Employer Subsidy?
An SSDI beneficiary who receives accommodations at work, such as extra supervision, special assistance, additional breaks, and/or a modified work routine or tasks, would likely qualify for an Employer Subsidy.

When can an Employer Subsidy be used?
An Employer Subsidy can only be used once you have completed your TWP and earn SGA.

How is an Employer Subsidy approved?
In order to obtain approval, an individual and their employer must complete the Employee Work Activity Questionnaire (Form SSA-3033) to help Social Security determine the nature and value of the Employer Subsidy. This form can be found at: www.ssa.gov/forms/ssa-3033.pdf.

Note: Social Security reviews Employer Subsidies annually.

How is the value of an Employer Subsidy determined?
The dollar value of an Employer Subsidy is based on a percentage of the individual’s actual work productivity. Each month Social Security deducts the value of the subsidy from an individual’s countable gross monthly earnings. If this deduction reduces countable earnings below SGA, then the individual will be entitled to their cash benefit payment for that month.

A Community Work Incentives Coordinator can help you understand the process of Employer Subsidies and the impact of work on your Social Security disability benefits.
What does Social Security consider when you receive SSDI and work?
When a Social Security Disability Insurance (SSDI) beneficiary works and has completed their Trial Work Period (TWP), Social Security will compare their gross monthly earnings (before taxes) and work pattern, to a monthly threshold referred to as Substantial Gainful Activity (SGA). In 2019, that amount is $1,220 or $2,040 if you are blind. The SGA amount usually changes annually. This is how it generally works: If you gross at or above SGA, you will not be entitled to your SSDI payment for that month, however, if you gross below SGA, you will be entitled to your SSDI payment.

What is Income Averaging?
Income Averaging is a tool that Social Security uses with SSDI beneficiaries who are self-employed or whose monthly earnings fluctuate greatly. When determining whether work income is SGA, Social Security will use your average monthly earnings, rather than a month-to-month comparison.

How does it work and how can it help me?
Social Security will add your countable earnings within the review period they establish, and then divide by the number of months worked during the review period, which equals your average monthly earnings. Consequently, if your earnings fall below SGA, your cash benefits will continue.

Income Averaging Example:
In 2019, John worked a temporary part-time job and his earnings fluctuated during the 12 months he was employed. He previously completed his TWP. The following chart shows John’s actual gross monthly earnings that he reported to his local Social Security office:

<table>
<thead>
<tr>
<th>Month</th>
<th>Earnings</th>
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<tbody>
<tr>
<td>Jan.</td>
<td>$ 850</td>
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<tr>
<td>Mar.</td>
<td>$ 0</td>
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<tr>
<td>May</td>
<td>$1,220</td>
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<td>July</td>
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<td>Sept.</td>
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<td>June</td>
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<td>Aug.</td>
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<td>Oct.</td>
<td>$1,000</td>
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<td>Dec.</td>
<td>$1,500</td>
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- Total 12-Month Period Earnings: $11,220
- Average 12-Month Period Monthly Earnings: $1,122 ($11,220 ÷ 10 months of gross earnings)

Since SGA in 2019 is $1,220, John is found not to be performing SGA, even though 5 of the 12 months were at or above the SGA amount for 2019.

Can I request Income Averaging?
Yes. If you know your earnings will fluctuate greatly, it is highly recommended that you discuss this work incentive with your local Social Security Claims Representative when reporting your work activity for the first time. In addition to this, you should consistently report your gross monthly earnings to ensure Social Security has current and accurate information about your case. Ultimately, reporting and/or income averaging can help prevent overpayments.

When can Income Averaging be used?
Income Averaging can only be used once you have completed your TWP. Note: Income Averaging cannot be used if your SSDI payment had previously stopped due to earning SGA.

For more information about Work Without Limits Benefits Counseling contact 1-877-YES-WORK (1-877-937-9675) or visit www.workwithoutlimits.org/benefits-counseling
What does Social Security consider when you receive SSDI and work?
When a Social Security Disability Insurance (SSDI) beneficiary works and has completed their Trial Work Period (TWP), Social Security will compare their gross monthly earnings (before taxes) and work pattern, to a monthly threshold referred to as Substantial Gainful Activity (SGA). In 2019, that amount is $1,220 or $2,040 if you are blind. The SGA amount usually changes annually. This is how it generally works: If you gross at or above SGA, you will not be entitled to your SSDI payment for that month, however, if you gross below SGA, you will be entitled to your SSDI payment.

What is UWA?
UWA is a work incentive Social Security can use when determining if a person is performing SGA. UWA can be considered when a person earns SGA, but is not able to earn SGA for more than 6 months, due to their disability or removal of a special condition (e.g. job coach, extra supervision, etc.).

How can UWA help me?
If you were earning SGA, but within 6 months your earnings fell below SGA due to your disability (whether you stopped working or reduced your hours), Social Security can declare this job as a UWA. When this happens, Social Security will not count any of the income from that job. It is like the job never happened! In other words, UWAs can delay your case from closing and you will likely be paid back for the months you did not receive payments, under the established UWA timeframe.

When can UWA be declared?
UWA can only be declared once you have completed your TWP. Note: UWA cannot be used if your SSDI payment had previously been stopped due to earning SGA.

Can UWA be used more than once?
Yes, as long as the job lasted fewer than 6 months and ended due to your disability. Note: If the job lasted three months or less, then Social Security may not need proof that you stopped working due to your disabling condition.

Can I request UWA?
Yes. If Social Security decides that your SSDI is ending due to earning SGA. You can also appeal the decision and request your job be re-evaluated and declared UWA. Remember, this job must have lasted no more than 6 months and stopped due to your disabling condition. You will have to provide Social Security with proof that you ended the job or were forced to reduce your earnings to below SGA, due to your disability. Social Security will also contact your employer for confirmation.

A Community Work Incentives Coordinator can help you understand UWAs and the impact it can have on your SSDI benefits.
What is Expedited Reinstatement (EXR)?
EXR is the ultimate safety net that former Social Security Disability Insurance (SSDI) and/or Supplemental Security Income (SSI) recipients may use to have their benefits reinstated.
In other words, through EXR you do not have to reapply for benefits and there is no waiting period to get your former cash and health insurance benefits reinstated once Social Security has determined that you qualify for EXR.

Can other SSDI-related programs use EXR?
Yes. Since Childhood Disability Benefits (CDB) and Disabled Widow(er)’s Benefits (DBW) fall under the same category of Social Security benefits as SSDI, former beneficiaries of either program can take advantage of EXR by satisfying the same conditions that former SSDI beneficiaries must meet.

How can I qualify for EXR as a former SSDI, recipient?
If you are a former SSDI recipient, you must meet the following conditions to qualify for EXR:
- Your SSDI case must have been terminated due to you performing Substantial Gainful Activity (SGA) after your Extended Period of Eligibility (EPE). In 2019, monthly gross earnings that equal or exceed $1,220 is considered SGA;
- You can now no longer perform SGA due to your disability, or because of a disability-related medical condition;
- Your EXR request must be made within 5 years (60 months) from the month your claim was closed. Exceptions are made to this rule, however, if the individual provides good cause i.e. not being notified that their case was terminated. Note: You may request EXR in the same month that you stop earning SGA.

How does EXR work for former SSDI recipients?
Starting the month after you apply for EXR, you will be eligible for up to 6 months of provisional cash benefits (excludes minor dependent benefits) and public health insurance (Medicare) benefits, while Social Security is reviewing the continuation of your original disability.

Note: If you perform SGA during this 6-month period, your provisional benefits will stop.

What if my EXR request is denied?
If denied, your provisional benefits will not be considered as an overpayment. Therefore, you do not have to pay anything back. Also, you can appeal Social Security’s EXR decision within 10 business days of receiving official notification.

Note: If you continue receiving Medicare under the Extended Period of Medicare Coverage (EPMC) and you are denied EXR as a result of medical improvement, then your Medicare coverage will stop. In order to use EPMC for as long as possible, you must continue having the same disabling condition as when you initially applied.

What if my EXR request is approved?
If approved, your disability benefits will be officially reinstated and you will begin your Initial Reinstatement Period (IRP). Your IRP will conclude after receiving 24 cash benefit payments. During an individual’s IRP, SSDI recipients will receive a cash benefit during months they are not performing SGA.

What are the benefits of EXR?
- To qualify for EXR, you only have to meet the medical standard instead of both medical and vocational standards
- You get up to 6 months of temporary cash and health insurance benefits, while Social Security is making an EXR decision;
- If you are approved for EXR, there is no additional 5-month waiting period as you experienced when you initially applied for SSDI or DWB;
- You will be entitled to a full set of SSDI work incentives (Trial Work Period, Extended Period of Eligibility, etc.) once your IRP is considered complete. To learn more about these incentives, reference the SSDI Benefits & Related Work Incentives Fact Sheet at www.workwithoutlimits.org/benefitscounseling.

Reference materials produced and published at U.S. taxpayer expense.
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What does Social Security consider?
Social Security must determine whether a beneficiary is engaging in self-employment. Social Security’s general policy when determining the existence of a trade or business is to consider the following:

- Is there a good-faith intention of making a profit or producing income?
- Is there continuity of operations, repetition of transactions, or regularity of activities?
- Are the functions being performed a regular occupation or profession?
- Does the individual portray themselves as being engaged in the selling of goods or services?

What should you consider?

**Business feasibility:** How do you know that your business idea will work? Have you done any test marketing or have you talked to knowledgeable people about whether or not your business idea has a reasonable chance for success?

**Financial start-up:** Do you know how much it will cost to start your business? Do you have any ideas about how to get the money you think you will need or do you know where you can get assistance with start-up funds? This can be arranged through Vocational Rehabilitation, Workforce Investment Act agencies, or Social Security (such as with a Plan to Achieve Self-Support, or PASS).

**Business plan development:** If you plan to apply for a loan, submit a PASS, or to ask the State Vocational Rehabilitation Agency for funds, you will probably need a formal, written business plan. Can you write this document yourself, or will you need help?

**Legal business structure:** Will your business be a corporation, partnership, Limited Liability Company (LLC), or sole proprietorship? Business structure decisions are important because it affects how Social Security looks at any income your business generates, as well as how taxes are assessed. Each local Social Security office has a Work Incentive Liaison who can help you understand your business.

**Accounting & bookkeeping:** Being self-employed requires that you keep track of business income and expenses. Do you plan to do your own bookkeeping and accounting, or will you use the services of a professional? Have you looked into the cost of accounting software or the services of a bookkeeper/accountant? Will you need training to perform your own accounting? Will you use a cost or an accrual accounting method to track revenues and expenses? These two methods make a difference in determining your Net Earnings from Self Employment (NESE) for Social Security purposes.

**Self-employment tax implications:** When you are self-employed you need to ensure you are filing the appropriate forms with the Internal Revenue Service. This may be completing quarterly returns, and completing a Schedule C or Schedule C-SE for the business each year. Also, you are still responsible for making contributions to the Federal Insurance Contribution Act (FICA) and all self-employment tax payments, so completing the appropriate forms is essential.

**Licenses, permits or other legal requirements:** Will your business require any licenses or permits for you to operate legally? Do you know what paperwork needs to be filed to meet federal, state and local tax requirements?

**Accommodations you might need to operate your business successfully:** Have you thought about what services and supports you might need to accommodate your disability as you manage your business? If you need services or supports because of your disability, do you know where to get help arranging and paying for these services or supports?

**Other Considerations:** If you receive other state or federal assistance, you will need to understand the impact of self-employment on these benefits and entitlements as well. The Small Business Administration can offer valuable advice regarding your business venture, finance and accounting procedures, and other important issues that will help you in making your self-employment venture successful.
How are monthly earnings calculated?
When your business venture begins, you must notify your local Social Security office. Unlike regular employment, they will count Net Earnings from Self Employment (NESE) and not gross earnings. NESE is calculated by deducting business expenses from gross revenues, and then multiplying the difference by 0.9235. The result is your countable annual earnings, which will then be equally divided among 12 months of the year. Since NESE usually is not calculated until you have filed your taxes, it is very important you track work hours, revenues, and expenses. After your first year in business, NESE projections for the next year are usually based on previous year’s actual figures.

How can SSDI work incentives help?
When an SSDI beneficiary is employed or self-employed for the first time after being entitled to SSDI, they have the following set of work incentives available to them that prolong the continuation of their SSDI cash benefit while they earn income:

**Trial Work Period (TWP):** This incentive allows self-employed SSDI beneficiaries to earn unlimited income for 9 months, while still getting their SSDI payment for those months. A TWP month is used if the beneficiary has worked 80 hours or more for their business, or if their monthly NESE has exceeded the TWP monthly threshold, $880 in 2019. TWP is considered complete if determined you have used 9 TWP months within a 5-year window. The duration of a TWP varies from person to person - some never start, some never finish, others finish after 9 months, and others take a few years.

**Extended Period of Eligibility (EPE):** This is a 36-month period immediately following the TWP, in which Social Security will determine if your earnings are over Substantial Gainful Activity (SGA), which is $1,220 in 2019, $2,040 if you are blind. Generally, when your monthly NESE has been determined to have exceeded SGA, you will not be entitled to your SSDI payment for that month, and vice versa. When determining if you have made SGA, Social Security will consider the value of your business activities, as well as market conditions, investments, services of others who help you, and your profit distribution. Here are some other work incentives that could potentially help lower your NESE below SGA:

- **Unincurred Business Expenses:** If there is business support given to you at no cost (e.g., Vocational Rehabilitation pays for services or equipment you need in self-employment), the cost of this support is deducted from your net earnings in determining when you have reached SGA.

- **Unpaid Help:** If you receive help from friends, relatives, professionals, or others in performing business-related tasks, and they are not paid for this assistance, the fair labor cost of this assistance is deducted from your net earnings in determining whether you have reached SGA.

- **Impairment-Related Work Expenses (IRWEs):** If you have out of pocket expenses for items and services that are related to your disability and are necessary for you to work, and that are not reimbursed by another source, you can use these expenses as an IRWE. IRWEs can help you to keep your NESE below the SGA level. This work incentive may apply to you in some limited circumstances, if you are unable to claim these items as a business expense.

**Plan for Achieving Self Support (PASS):** Is an incentive that allows you to set aside income and/or resources to achieve a work goal, including self-employment. A PASS Plan with a self-employment work goal must also include a business plan. It is recommended you consider developing a PASS prior to starting your business.

For SSDI beneficiaries who engage in self-employment, Social Security offers some work incentives that can be useful in starting and maintaining a business. These work incentives were also designed to help individuals reach self-sufficiency. For more information, contact a Community Work Incentives Coordinator or your local Social Security Office.
Transition: Social Security Disability Insurance (SSDI) to Retirement
Fact Sheet 2019

When will I start receiving Social Security Retirement if I’m on SSDI?
You will receive this once you reach your full retirement age, which is based on the year you were born:
- Born before 1937: Age 65 years
- 1938: 65 years/2 months
- 1939: 65 years/4 months
- 1940: 65 years/6 months
- 1941: 65 years/8 months
- 1942: 65 years/10 months
- 1943 through 1954: Age 66 years
- 1955: 66 years/2 months
- 1956: 66 years/4 months
- 1957: 66 years/6 months
- 1958: 66 years/8 months
- 1959: 66 years/10 months
- 1960 and later: Age 67 years

Note: SSDI recipients do not have the option of deferring their Retirement to age 70.

Will my monthly cash benefits change?
Maybe. If you worked while receiving SSDI, your benefit amount may increase when you retire. Regardless, know that your monthly cash benefit will not be less than your current SSDI cash benefit.

Do I need to notify Social Security about retiring?
No. Social Security will switch your SSDI benefit to a Retirement benefit once you reach your full retirement age.

Can I take early retirement?
Yes. At age 62 individuals may apply for a reduced Retirement Insurance Benefit. A person on SSDI may want to consider applying for early retirement when SSDI:
- Stops due to medical recovery
- Stops due to employment
- Payments are reduced due to Workers’ Compensation

What happens when I apply for early retirement and go to work?
Retirement work rules differ from SSDI work rules. Consult with Social Security about these differences.

What happens when I reach full retirement age and go to work?
- You will not be subject to continuing medical reviews.
- Work income will not impact your Retirement cash benefits
- Work Incentives such as Trial Work Period, Extended Period of Eligibility, and Impairment Related Work Expenses cannot be used; the only exception is the Plan to Achieve Self-Support (PASS), if approved before turning 65.

What will happen if I reach full retirement age and receive a Childhood Disability Benefit (CDB)?
Nothing. There is no way to qualify for Retirement benefits based on a parent’s work record. Therefore, you will continue getting your CDB cash benefits and the same SSDI work rules will continue to apply.

What will happen if I reach full retirement age and receive a Disabled Widow(er)’s Benefit (DWB)?
DWB will convert automatically to Social Security Widow(er)’s Insurance Benefit (WIB). You will receive your WIB without any limit on your earnings. Previous DWB work rules and continuing medical reviews will no longer apply. You will no longer be able to participate in the Ticket to Work program. The only work incentive you can continue using is a PASS, if it was approved prior to age 65. The earliest a widow or widower can start receiving WIB is based on age. Please see: https://www.ssa.gov/planners/survivors/1945s.html

For more information on Social Security Retirement:
https://www.ssa.gov/retire/

A Community Work Incentives Coordinator (CWIC) can help you understand the transition from SSDI to Social Security Retirement.

For more information about Work Without Limits Benefits Counseling contact
1-877-YES-WORK (1-877-937-9675) or visit www.workwithoutlimits.org/benefits-counseling

Reference materials produced and published at U.S. taxpayer expense.
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Childhood Disability Benefits (CDB)
Fact Sheet 2019

What is CDB and who is eligible?
Social Security has an additional benefit called Childhood Disability Benefits, formerly known as Disabled Adult Child (DAC). This is for unmarried individuals who are 18 and older, who acquired a disability prior to age 22, and whose parent(s) is receiving Social Security Retirement, Social Security Disability Insurance (SSDI), or is deceased.

What benefits can I receive under CDB?
As with SSDI, CDB beneficiaries will receive monthly cash benefits and are eligible for Medicare after 24 months of entitlement. While waiting for Medicare, the beneficiary is encouraged to apply for MassHealth.

What does ‘technical entitlement’ mean?
If the parent’s Retirement or SSDI cash benefit is too low, the CDB beneficiary will only be eligible for Medicare. This is referred to as being ‘technically entitled.’

What happens when I work and get CDB?
CDB falls under the same umbrella as SSDI. Therefore, you will be entitled to the same work incentives as an SSDI beneficiary, including Trial Work Period (TWP) and Extended Period of Eligibility (EPE).

To learn more about these and other work incentives, reference the SSDI Benefits & Related Work Incentives Fact Sheet at www.workwithoutlimits.org/benefitscounseling.

Note: CDB beneficiaries must report work activity and wages to Social Security, regardless if they are considered ‘technically entitled’ or not.

Special CDB Circumstances
- Marriage can cause the loss of CDB benefits
- Some CDB beneficiaries may also receive SSDI based on their own work history
- Some CDB beneficiaries may also receive Supplemental Security Income (SSI) benefits based on financial need

For more information on CDB:
- www.ssa.gov/planners/disability/dqualify10.html

A Community Work Incentives Coordinator can help you understand CDB and how work can impact these benefits.
Public Health
Fact Sheets
What is MassHealth?
It is the Massachusetts Medicaid program that offers a wide range of health coverage for people with disabilities. MassHealth can be used as a stand-alone health plan or with another health plan, such as employer-sponsored health insurance or Medicare.

Which MassHealth plan comes with SSI?
In Massachusetts, anyone who is entitled to Supplemental Security Income (SSI) is automatically eligible for MassHealth Standard.

What MassHealth options do SSI recipients have if their cash benefits reduce to $0?
Massachusetts SSI recipients have the following options to continue MassHealth coverage when countable earnings reduce SSI cash benefits to $0.

Option 1: 1619(b) Continued Medicaid in MA
To qualify for 1619(b), a beneficiary’s SSI monthly cash benefit must have been reduced to $0 as a result of work income. Social Security also considers whether the beneficiary still:
- Meets the SSI disability standard and all SSI non-disability requirements i.e., SSI asset limit
- Needs Medicaid in order to work, and
- Has insufficient income to replace SSI, Medicaid and any publicly funded attendant care services

Individuals can go back and forth between SSI cash eligibility and 1619(b) Continued Medicaid without limit and without having to reapply for MassHealth Standard, provided they continue to meet SSI asset limits and have insufficient income. For 1619(b) purposes, Social Security considers insufficient income to be when a beneficiary grosses less than $40,333 in a year or $41,182, if they are statutorily blind.

Option 2: MassHealth CommonHealth
This plan, which essentially provides the same health coverage as MassHealth Standard, is a good option for those ineligible for 1619(b). Unlike MassHealth Standard, CommonHealth has no asset test or upper income limit. To be eligible for this health plan, an individual who is 19 or older must:
- Meet the Social Security disability standard
- Have gross family income over 138% of the Federal Poverty Level (FPL), $1,388 per month for a single individual or $1,868 per month for a family of two, and
- Work an average of 40 hours per month, or 240 in a 6-month period, or meet a one-time deductible
- Pay a monthly premium, if their family income is equal to or greater than 150% FPL ($1,508 per month for a single individual, $2,030 per month for a family of two), and
- Pay a lesser supplemental premium if the individual has other insurance, e.g. Medicare or employer-sponsored health insurance, and has family income equal to or greater than 155% FPL.

Again, monthly premium amounts are relative to family income and family size. In 2017, the monthly premium for a single individual whose income is equal to 150% FPL is $15 per month; however, if their income were to exceed 200% FPL, $2,010 per month for a single individual, then their monthly premium would increase to $40 per month.

Those who choose MassHealth CommonHealth over 1619(b) Continued Medicaid, must understand that they may be giving up the ability to get SSI cash benefits again without having to reapply.

A Community Work Incentives Coordinator can help you understand your MassHealth options when you receive SSI and work.

For more information about Work Without Limits Benefits Counseling contact
1-877-YES-WORK (1-877-937-9675) or visit www.workwithoutlimits.org/benefits-counseling

Reference materials produced and published at U.S. taxpayer expense.
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What is Medicare?
It is a four-part federal health insurance program that provides coverage for individuals age 65 or older; under age 65, who have a disability, and have received 24 months of SSDI; or of any age with End-Stage Renal Disease (ESRD) (requiring dialysis or a kidney transplant) or Amyotrophic Lateral Sclerosis (ALS, also known as Lou Gehrig’s disease).

What are the 4 parts of Medicare?
**Part A (Hospital Insurance)** helps cover inpatient hospital care, some skilled nursing facility care, hospice care, and limited home health care. It is premium-free for most people, but copays and deductibles apply.

**Part B (Medical Insurance)** helps pay for doctor visits, outpatient care, some preventive services, and other care not covered by Part A, e.g., durable medical equipment, physical and occupational therapy, and speech-language pathology services. There is a monthly premium for Part B. If an SSDI beneficiary qualifies for MassHealth Standard, then MassHealth will cover this premium. If not, the individual will pay the following premium in 2019:

- $109 if you started Medicare in or before 2015
- $124 if you started Medicare in 2016
- $134 if you started Medicare in 2017 or 2018
- $135.50 if you started Medicare in 2019

Other beneficiaries may even pay a greater premium due to having a higher adjusted gross income. Regardless, this premium is usually deducted automatically from monthly SSDI cash benefits or it can be paid by the individual. Part B also has copays and deductibles.

**Part C (Medicare Advantage Plans)** is optional coverage for Medicare recipients who have Parts A and B. It provides supplemental coverage through Medicare approved private insurance companies, e.g. Health Maintenance Organizations (HMOs) and Preferred Provider Organizations (PPOs). These plans must offer the same coverage as original Medicare, but are also permitted to offer additional benefits, such as dental and vision care. Usually, there is an additional cost for Part C coverage.

**PART D (Prescription Drug Plan)** provides prescription drug benefits through various private insurance companies. Monthly premiums apply. Coverage and premium amounts vary by state, by company, and by the amount of coverage offered. If an individual is enrolled in a Part D Benchmark Plan and receives some form of MassHealth, they may be entitled to full or partial help with their Part D premiums, deductibles and copays.

**Does help exist to pay for Medicare costs?**
Yes. In 2019, individuals or couples whose monthly income falls below $1,397 or $1,894, respectively, may qualify for Medicare Part B premium help under the MassHealth Buy-In program. If you feel you might be eligible for this program, contact MassHealth at 1-800-841-2900.
How is Medicare impacted when you work and receive SSDI?
If you start working and earn enough to begin your Trial Work Period (TWP), know that your Medicare will be preserved throughout. If you ever complete your TWP, you will have Medicare for at least another 93 months after, due to a special work incentive called the Extended Period of Medicare Coverage (EPMC).

Note: SSDI beneficiaries can continue using EPMC so long as they pay their Medicare premiums and continue to meet Social Security’s disability standards. Social Security is the only agency that can give you a definitive date of when your Medicare eligibility will stop. Therefore, it is recommended you make an inquiry about this to your local Social Security office shortly after you finish your TWP.

Other Public Health Insurance Resources:
- **Health Care for All:** This is a Massachusetts nonprofit advocacy organization working to create a health care system that provides comprehensive, affordable, accessible, and culturally competent care to everyone, especially the most vulnerable among us. To get in touch with them, call 1-800-272-4232.

- **SHINE (Serving the Health Information Needs of Everyone):** This is a state health insurance assistance program that provides free health insurance information, counseling and assistance to Massachusetts residents with Medicare, and their caregivers.


- **Medicare Advocacy Project (MAP):** This is a project that operates from legal aid offices across Massachusetts, assisting elders and persons with disabilities in obtaining the Medicare and Medicare-related health insurance coverage to which they are entitled. MAP advocates represent Medicare beneficiaries with individual issues and in groups to address policy issues. The following legal services programs provide MAP services:
  - **Community Legal Aid**
    405 Main Street, 4th Floor
    Worcester, MA 01608
    Toll Free: 1-800-649-3718
  - **Greater Boston Legal Services**
    197 Friend Street
    Boston, MA 02114
    Toll Free: 1-800-323-3205
  - **South Coastal Counties Legal Service**
    Toll Free: 1-800-244-9023

Community Work Incentives Coordinators can help you understand how Medicare coverage applies to you and whether you may be eligible to receive help paying for certain Medicare costs. Call Medicare at 1-800-633-4227 or visit [www.medicare.gov](http://www.medicare.gov/).
MassHealth, the Massachusetts state Medicaid program, offers the following comprehensive health plans for people with disabilities:

- MassHealth Standard
- MassHealth CommonHealth for the Working
- MassHealth CommonHealth for the Non-Working

The plan an individual qualifies for will depend on their employment status, as well as household earned and unearned income. Any of these MassHealth plans may be used alone or combined with other plans, i.e., Medicare or private health insurance. In some cases, MassHealth will cover items and services that other health plans will not, e.g. personal care attendants, specialized wheel chairs, etc. MassHealth may also pay for private insurance premiums and copays.

**MassHealth Standard: Who is eligible?**
Adults age 19 through 64 who:
- Have a disability determined by Social Security, Massachusetts Commission for the Blind (MCB), or MassHealth, and
- Have a total household income at or below 138% of the Federal Poverty Level (FPL), which currently is $1,438 for a single individual.

*There is no monthly premium with this plan.*

**MassHealth CommonHealth for the Working: Who is eligible?**
Adults age 19 or older who:
- Have a disability determined by Social Security, MCB or MassHealth and;
- Have a total household income more than 138% FPL, or $1,438 for a single individual
- Is employed at least 40 hours per month, or who has been employed at least 240 hours in the six-month period immediately preceding the month of application to MassHealth or eligibility review.

**MassHealth CommonHealth for the Non-Working: Who is eligible?**
Adults age 19 through 64 who:
- Have a disability determined by Social Security, MCB or MassHealth, and
- Have a total household income more than 138% FPL or $1,438 for a single individual.

If an individual is unemployed or employed less than specified by the CommonHealth for the Working rules, a one-time deductible will apply. Generally, the deductible is calculated by taking one month’s total income and subtracting $542.00 (for an individual), then multiplying the remainder by 6. For applicants in this situation, MassHealth determines and gives them a 6-month period for them to meet the deductible with paid or unpaid medical bills, or costs associated with their medical needs.

Note: Medical costs paid for by another insurer cannot be used toward this spend-down.

*There is a sliding-scale monthly premium for MassHealth CommonHealth Working or Non-Working members with a household income at or above 150% FPL.*

**For more information on MassHealth Plans:** Visit [http://www.mass.gov/masshealth](http://www.mass.gov/masshealth).

**For information on how to apply:**
Call MassHealth Customer Service at 1-800-841-2900. Upon receipt of your application, MassHealth will make a decision within 10 business days. At that time MassHealth will enroll, deny or request more information from you. It is important to complete the application, make sure it is signed, and provide any necessary documentation.

*SSI recipients automatically get MassHealth Standard. SSDI recipients receive Medicare after 2 years of eligibility and usually apply for MassHealth while they are waiting.*
## MassHealth CommonHealth Premium Formula Charts

### CommonHealth Full Premium Formula Chart
*Young Adults & Adults Above 150% FPL & Children above 300% FPL*

<table>
<thead>
<tr>
<th>Base Premium</th>
<th>Additional Premium Cost</th>
<th>Range of Monthly Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Above 150% FPL – Start at $15</td>
<td>Add $5 for each additional 10% FPL until 200% FPL</td>
<td>$15-$35</td>
</tr>
<tr>
<td>Above 200% FPL – Start at $40</td>
<td>Add $8 for each additional 10% FPL until 400% FPL</td>
<td>$40-$192</td>
</tr>
<tr>
<td>Above 400% FPL – Start at $202</td>
<td>Add $10 for each additional 10% FPL until 600% FPL</td>
<td>$202-$392</td>
</tr>
<tr>
<td>Above 600% FPL – Start at $404</td>
<td>Add $12 for each additional 10% FPL until 800% FPL</td>
<td>$404-$632</td>
</tr>
<tr>
<td>Above 800% FPL – Start at $646</td>
<td>Add $14 for each additional 10% FPL until 1,000% FPL</td>
<td>$646-$912</td>
</tr>
<tr>
<td>Above 1,000% FPL – Start at $928</td>
<td>Add $16 for each additional 10% FPL</td>
<td>$928 + Greater</td>
</tr>
</tbody>
</table>

### CommonHealth Supplemental Premium Formula Chart

<table>
<thead>
<tr>
<th>% of FPL</th>
<th>Premium Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Above 150% to 200%</td>
<td>60% of full premium</td>
</tr>
<tr>
<td>Above 200% to 400%</td>
<td>65% of full premium</td>
</tr>
<tr>
<td>Above 400% to 600%</td>
<td>70% of full premium</td>
</tr>
<tr>
<td>Above 600% to 800%</td>
<td>75% of full premium</td>
</tr>
<tr>
<td>Above 800% to 1,000%</td>
<td>80% of full premium</td>
</tr>
<tr>
<td>Above 1,000%</td>
<td>85% of full premium</td>
</tr>
</tbody>
</table>

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For more information about Work Without Limits Benefits Counseling contact 1-877-YES-WORK (1-877-937-9675) or visit www.workwithoutlimits.org/benefits-counseling
<table>
<thead>
<tr>
<th>Population/Program</th>
<th>Seniors (MassHealth Standard)</th>
<th>Adults under 65 (MassHealth Standard or MassHealth CarePlus)</th>
<th>Children &amp; Young Adults under Age 21 (MassHealth Standard) Full Health Safety Net</th>
<th>Pregnant women &amp; infants (MH Standard); HIV+ individuals (MassHealth Family Assistance)</th>
<th>MassHealth Family Assistance (Children under 19); Small Business Premium Assistance, Partial Health Safety Net with a deductible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not MAGI</td>
<td>100% (plus $20 mo. disregard)</td>
<td>133%+ 5%</td>
<td>150%+5%</td>
<td>200%+5%</td>
<td>300%+5%</td>
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<td>$1,388</td>
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<td>$542.35</td>
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<td>Each addtl.</td>
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<td>$85.16</td>
<td>$482</td>
<td>$111.24</td>
<td>$541</td>
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</table>

For people under 65 in MassHealth, Children's Medical Security Plan (CMSP) & Health Safety Net (HSN), eligibility is based on current monthly Modified Adjusted Gross Income (MAGI); programs that use the new 5% of poverty level income deduction are shown in this table as 5% FPL higher e.g. the 133% standard is shown as 138%. Monthly amounts are based on the Office of Medicaid 2016 Desk Guide; weekly amounts were calculated by dividing monthly amounts by 4.333.

Add the fetus to the family size of pregnant women in MassHealth & HSN.

For Seniors, eligibility is based on countable monthly income after deductions and there is an asset test, and the $20 per monthly standard disregard is added to the 100% FPL standard in this table; the 5% MAGI deduction does not apply.

The Senior deductible income standard is $522 per mo. for an individual; $650 per mo. for a couple.

The income standard for an institutionalized individual is $72.80 per month.

Massachusetts Law Reform Institute, www.mlri.org, February 28, 2017
### MassHealth & Other Health Programs: Upper Income Levels

<table>
<thead>
<tr>
<th>Population/Program</th>
<th>Persons with breast/cervical cancer (MassHealth Standard)</th>
<th>Children under 19 (CMSP-subsidized)</th>
<th>Plan Type 1</th>
<th>Plan Type 2A</th>
<th>Plan Type 2B</th>
<th>Plan Type 3A</th>
<th>Plan Type 3B</th>
<th>Qualified Health Plans with Premium Tax Credits</th>
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<tr>
<td><strong>Percent of poverty</strong></td>
<td>250% + 5%</td>
<td>400% + 5%</td>
<td>100%</td>
<td>150%</td>
<td>200%</td>
<td>250%</td>
<td>300%</td>
<td>400%</td>
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<td><strong>Family Size</strong></td>
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<td>Monthly</td>
<td>Weekly</td>
<td>Annual</td>
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<td>$6,240</td>
<td>$8,320</td>
<td>$10,400</td>
<td>$12,480</td>
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For ConnectorCare & Qualified Health Plans with Premium Tax Credits, eligibility is based on expected annual MAGI income with no 5% of poverty level income deduction. 2016 FPL levels are used until the next open enrollment in the fall of 2017.

Children with income over 405% of the poverty level can buy-in to the Children's Medical Security Program (CMSP) at full cost.

There is no income upper limit or deductible for disabled children or disabled working adults in CommonHealth.

The CommonHealth deductible income standard for nonworking adults is $542 per mo. for one person & $670 for a couple.

The upper income level for PACE and other home & community based waiver programs is $2,205 monthly in 2017.

The 2017 poverty levels were published in the Jan. 31, 2017 Federal Register, 82 Fed. Reg 8831.


Massachusetts Law Reform Institute, www.mlri.org, February 28, 2017 page 2 of 2
Massachusetts Family Voices is a state chapter of the Family Voices, a national, grassroots organization, of parents and their professional partners that speak out on behalf of children and youth with special health care needs.

What we do:

⇒ Provide information, resources and support about MassHealth and other public benefits.
⇒ Advocate for improved systems of care for children & youth with special health care needs
⇒ Develop opportunities to partner with health care professionals

Want to connect with other parents?
Join our listserv to learn about resources and information, ask questions and hear from the collective expertise of our diverse membership.

E-mail massfv@fcsn.org to learn more or to request an invitation to en'list'.
The Premium Assistance program is computerized. If your checks stop coming, it’s not because your benefit ended or was cancelled. It’s because something literally “did not compute” and you should call the program to have your case reviewed. Some common reasons for interruption of benefits are:

- Families do not keep current with their MassHealth Eligibility Reviews. It’s important to fill out these forms and return them within 45 days or the premium assistance benefit will stop.
- There was a change in the family’s employer-based insurance, either because you changed jobs or your employer changed health insurance carriers. It is important to report private insurance changes to the Premium Assistance Program.

To receive an application for the MassHealth Standard/CommonHealth Premium Assistance Program, or for more information, call the program at 1-800-862-4840 and press 1. Be sure to say you are calling about the MassHealth Standard/CommonHealth Premium Assistance Program for a family member with a disability.

### Eligibility Criteria

In order to be eligible for Premium Assistance:

1. You must have at least one family member on MassHealth Standard or MassHealth CommonHealth.
2. You must pay the premiums for your private health insurance out-of-pocket (if your employer pays your health care premiums, you are not eligible for this benefit).
3. Your private insurance must offer the Commonwealth of Massachusetts required benefits. These include payment for: early intervention; mental health (this includes inpatient and outpatient, as well as substance abuse treatment); hospice; other inpatient and outpatient services; physician, surgical, laboratory, radiological and maternity services; durable medical equipment; home health care services; ambulance transport; and special formulas for people who need low protein foods.
4. Family Income is NOT taken into account for program eligibility. There is no assets test for this program.

### Financial Benefit

The maximum benefit per eligible family member is $660/month. However, variables such as company size, the cost of your private insurance premiums, your monthly CommonHealth 1 premiums and if you have COBRA 2 all affect the amount of Premium Assistance your family receives.

[Note 1: If you have a child with a disability that is eligible for CommonHealth, but the CommonHealth premiums are more expensive than your out-of-pocket costs, you should factor in the Premium Assistance benefit before you make a decision.]

[Note 2: COBRA (The Consolidated Omnibus Budget Reconciliation Act of 1986) provides a way for some employees to temporarily (generally 18 months) purchase health insurance at group rates if they have lost their jobs, or lost insurance benefits due to a decrease in work hours. For more information about COBRA, visit www.dol.gov/ebsa/faqs/faq_consumer_cobra.html.]

### If Your Benefit Stops

The Premium Assistance program is computerized. If your checks stop coming, it’s not because your benefit ended or was cancelled. It’s because something literally “did not compute” and you should call the program to have your case reviewed. Some common reasons for interruption of benefits are:

- Families do not keep current with their MassHealth Eligibility Reviews. It’s important to fill out these forms and return them within 45 days or the premium assistance benefit will stop.
- There was a change in the family’s employer-based insurance, either because you changed jobs or your employer changed health insurance carriers. It is important to report private insurance changes to the Premium Assistance Program.

### How to Apply

To receive an application for the MassHealth Standard/CommonHealth Premium Assistance Program, or for more information, call the program at 1-800-862-4840 and press 1. Be sure to say you are calling about the MassHealth Standard/CommonHealth Premium Assistance Program for a family member with a disability.
What are DDS HCBS MassHealth Waivers?
In Massachusetts, Home and Community Based Services (HCBS) waivers allow MassHealth to provide services and supports to Department of Developmental Services (DDS) consumers living in their homes or in other community-based settings. For example, group homes, adult foster homes or assisted living facilities.

The purpose of the waiver is to provide an alternative for DDS consumers needing long-term assistance, who choose to live in the community rather than in an institution or a nursing facility.

What are the non-financial eligibility requirements?
To qualify, the consumer must:
- Be eligible for DDS services
- Have MassHealth Standard
- Be 22 years of age or older
- Be eligible for Intermediate Care Facility for Individuals with an Intellectual Disability
- Be willing to receive services in the community, and
- Get DDS approval for waiver services.

What are the financial eligibility requirements?
To qualify, the consumer must also have:
- Countable assets worth $2,000 or less and
- Countable income less than or equal to three times the Supplemental Security Income (SSI) Federal Benefit Rate, which in 2019 is $2,313.

What are the HCBS Adult Waivers offered in Massachusetts?
- The Adult Supports Waiver
- The Community Living Waiver
- The Intensive Supports Waiver

What services do HCBS Waivers offer?
Massachusetts offers a variety of unlimited services under an HCBS Waiver program. Programs can provide a combination of standard medical services and non-medical services, including but not limited to, case management, transportation, home health aide, personal care, adult day health services, rehabilitation (both day and residential), respite care, etc. For a complete list of all services offered, visit www.mass.gov/eohhs/docs/dmr/hcsis/hcbs-brief.pdf.
Career Goals
Fact Sheets
What is the ABLE Act?
The ABLE Act allows an individual with a disability to set aside money in a tax advantaged account to be used to help meet qualified disability expenses.

Who is eligible for an ABLE account?
Anyone who has a disability and was diagnosed prior to age 26 is eligible to set up and use an ABLE account. In addition, a person must meet Social Security’s criteria for disability, but does not have to be collecting Social Security disability benefits to be eligible.

What are the advantages of an ABLE account?
Money placed in an ABLE account is tax free.

- Annual maximum contribution: $15,000
- Maximum account balance: $400,000

Note: Up to $100,000 of the account will not be considered an asset for SSI (Supplemental Security Income), or other income-based welfare programs. This means a significant amount of money can be set aside without jeopardizing eligibility for public benefits.

What can the money in an ABLE account be used for?
ABLE funds can be used to pay for qualified disability expenses, including but not limited to education, housing, transportation, employment training and support, assistive technology, personal support services, healthcare expenses, financial management, and administrative services.

Who can contribute to an ABLE account?
The ABLE account can be funded by anyone, including family members, friends, and the individual with a disability.

How to set up an ABLE account?
In Massachusetts, the ABLE account is offered by the Massachusetts Educational Financial Authority (MEFA) and administered by Fidelity Investments. They are also referred to as Attainable Savings Plans. To learn more about these Plans/Accounts, visit https://www.fidelity.com/able/attainable/overview.

Note: It takes roughly 15 minutes to apply for an ABLE account online, and it can be opened with no minimum deposit.
The Attainable Savings Plan℠ provides individuals with a disability, and their families, a tax advantaged way to save for qualified disability expenses while helping to avoid impacts to disability benefits. A person can own an Attainable account if they have a significant disability which occurred prior to reaching their 26th birthday.

**ATTAINABLE SAVINGS PLAN FEATURES AND BENEFITS**

- **Managed by Fidelity Investments** and supported by Attainable Savings Plan specialists (available 8am-9pm Monday – Friday)
- **A selection of eight investment portfolios** providing a range of investment choice to support differing saving and investment objectives
- **Simplified** money movement including electronic contributions and withdrawals from or to a bank account or other Fidelity accounts
- **Available option to open a Fidelity® Cash Management Account** (FCMA) for withdrawals from the Attainable Account. The FCMA has no monthly fees, debit card, reimbursement of ATM fees, free checkwriting, and free Fidelity Billpay.
- **Low minimum to open account** ($50) & low minimum account balance ($30)
- **$30 annual account fee** with investment portfolios fees ranging from 0.57% to 0.94% of assets depending on portfolio selected

**FOR MORE INFORMATION**

- **PLEASE VISIT US AT**
  www.fidelity.com/attainable
- **CALL US AT**
  1-844-458-2253 (TTY/TTD: 800-544-0118)
1. Contributions to an Attainable account are not tax deductible and are limited to $14,000 per year (which may increase in the future). Once in the account, money is invested and can grow tax-deferred. No Federal or Massachusetts taxes are owed on a withdrawal, including the earnings, if the withdrawal is spent on a qualified disability expense.

Qualified disability expenses are any expenses for the benefit of the account owner in maintaining or improving his or her health, independence, or quality of life.

A balance of $100,000 or less in an Attainable account does not impact Federal Supplemental Security Income benefits. Medicaid benefits are not impacted regardless of balance level.

2. For more on what constitutes a significant disability visit the Attainable Savings Plan web page or visit the social security administration web site.

3. All Fidelity ATM withdrawal fees will be waived for your Fidelity® Cash Management Account. In addition, your account will automatically be reimbursed for all ATM fees charged by other institutions while using a Fidelity Visa® Gold Check Card linked to your account, at any ATM displaying the Visa®, Plus® or Star® logos. The reimbursement will be credited to your Fidelity Cash Management Account the same day the ATM fee is debited from the account. Please note, there is a foreign transaction fee of one percent that is not waived, which will be included in the amount charged to your account. The Fidelity Visa® Gold Check Card is issued by PNC Bank, NA and administered by BNY Mellon Investment Servicing Trust Company, which are not affiliated with Fidelity Investments. The third-party trademarks appearing herein are the property of their respective owners.

The Fidelity Cash Management Account is a brokerage account designed for spending and cash management. It is not intended to serve as your main account for securities trading. Customers interested in securities trading should consider a Fidelity Account®.

The Attainable Savings Plan is offered by the Massachusetts Educational Financing Authority and managed by Fidelity Investments

Qualified ABLE Programs offered by other states may provide state tax benefits to their residents or taxpayers that are not available through the Attainable Savings Plan. If you are not a resident of Massachusetts, you should consider whether your home state offers its residents or taxpayers state tax advantages or benefits for investing in your home state's qualified ABLE program before making an investment in the Attainable Savings Plan.

Units of the Portfolios are municipal fund securities and are subject to market fluctuation and volatility. You may have a gain or loss when you sell your Units.

Please carefully consider the Attainable Savings Plan's investment objectives, risks, charges, and expenses before investing. For this and other information, contact Fidelity for a free Disclosure Document or view one online. Read it carefully before you invest or send money.

Fidelity Brokerage Services LLC, Member NYSE, SIPC, 900 Salem Street, Smithfield, RI 02917
800956.1.0

mefa
Massachusetts Educational Financing Authority

Fidelity
Information on using an Attainable account
(From Fidelity.com .... https://www.fidelity.com/able/attainable/using-your-account)

Managing your Attainable account with Fidelity

Contributing to your Attainable account
Once an account has been established for an eligible individual, anyone can contribute. Contributions to the account made by any person (the account beneficiary, family, or friends) use after-tax dollars and are not tax deductible. Contributions can be made by check, an electronic funds transfer from a bank or other outside account, or a transfer from another Fidelity account using the transfer tool at Fidelity.com.

Aggregate annual contributions to an Attainable account may not exceed the federal annual gift-tax exclusion amount, which is currently $14,000 but may change in the future.

Withdrawing from your Attainable Savings Plan℠ account

Only you (the designated beneficiary/eligible individual or the person with signature authority (PSA), if applicable) can make withdrawals from your Attainable account. You can withdraw money from your Attainable account a few ways:

- Most simply, by transferring funds from your Attainable account electronically to another Fidelity account or to an outside bank account; we have an easy-to-use transfer tool that can help
- You can call an Attainable account specialist to request a check or fill out a withdrawal form and submit it to us
- By opening a Fidelity Cash Management Account once your Attainable account has been funded. Use your Fidelity Cash Management Account features like a debit card, fee-free ATMs, and free checkwriting to manage your disability-related expenses.

Investment allocations

When you open your Attainable account, you identify the portfolio(s) where you want new deposits to be invested. You can change this investment direction for new deposits at any time. However, for money already invested in the account, you may only move that money between portfolios in the account twice per calendar year and may also do so upon change of the account owner/designated beneficiary. See FAQ for more information on designated beneficiary changes. To make an investment change, please call a representative.

FAQs
Tax Benefits

- What are the tax benefits of having an Attainable Savings PlanSM account?
  The tax benefits may be significant. When you contribute money to an Attainable account, the money is invested in investment portfolios and may grow over time. No federal income tax will be owed on withdrawals, including any earnings, if the money is used for qualified disability expenses.

- Are contributions federally tax deductible?
  No, contributions are not federally tax deductible.

- Is there a state tax deduction for my Attainable Savings PlanSM contributions?
  Massachusetts does not currently offer a state tax deduction for contributions to an ABLE plan. If you reside in a state other than Massachusetts, the state may offer tax deductions or other tax benefits for its specific ABLE plan or for contributions to any ABLE plan (such as the Attainable plan). Be sure to check with your tax advisor.

Disability Benefit Considerations

- Can money in my Attainable account impact my Social Security benefits?
  The Social Security Administration (SSA) has provided general guidance on this topic. The money in your Attainable account will not usually impact your eligibility for Supplemental Security Income benefits; however, any account balance over $100,000 will be counted as a resource of the designated beneficiary and could result in the suspension of your SSI benefits. For more information on withdrawals, please see the FAQ if I make a withdrawal from my Attainable account, do I need to spend the money right away so as not to impact Supplemental Security Income (SSI) benefits? Also, for more detailed information, please review the Attainable Disclosure Document (PDF).

- Can money in my ABLE account impact my Medicaid benefits?
  Medicaid benefits are not impacted by money invested in an Attainable account, regardless of balance level. Please refer to the Attainable Disclosure Document (PDF) for a more detailed discussion related to Medicaid benefits or contact your home state’s benefits agency to get information on your specific situation.

- What about other disability benefit programs; can my Attainable account balance impact my benefits from them?
  The Social Security Administration has provided general guidance on the impact an Attainable account may have on eligibility for a designated beneficiary or eligible individual for other disability benefit programs. Please see the Attainable Disclosure Document (PDF) for specific details. Also, for more information on your state’s disability programs, please contact your state benefits agency or a qualified benefits advisor.

- What is the Medicaid Recapture provision?
  Upon the death of the account owner/beneficiary, any state may file a claim against unexpended amounts in an Attainable account. For example, the claim could be for the amount
of total Medicaid assistance paid out for the account owner’s benefit after the establishment of the Attainable Savings Plan® account. Payments for all outstanding qualified disability expenses, including funeral expenses, are paid before any such Medicaid claim. Also, the amount payable is reduced by the amount of all premiums paid by or on behalf of the account owner/beneficiary to a Medicaid Buy-In program under that state’s Medicaid plan. Check with a qualified legal advisor to determine your state’s Medicaid policies and procedures.

**Eligibility and Account Registration**

- **Do I need to provide proof of disability?**
  The Attainable Savings Plan® doesn’t require you to submit documentation regarding the disability, but the IRS or Social Security Administration reserves the right to request this documentation and thus you must retain proof in your personal records. You will be required to certify and attest on the Attainable account application that you meet and with comply with the eligibility requirements as set forth under IRC Section 529A, including the annual recertification requirements.

- **If the account is for a child, or someone who is otherwise unable to manage the account, who is the account owner?**
  In all circumstances, the eligible individual, also known as the designated beneficiary, is the account owner. A person with signature authority (PSA) can establish and control an ABLE account for a designated beneficiary who is a minor child, is otherwise incapable or has chosen not to manage the account. The PSA must be the designated beneficiary’s parent, legal guardian, or agent acting under Power of Attorney (POA). The PSA has full control and authority over the account and must use the account for the benefit of the designated beneficiary. If the PSA is a guardian or has POA, additional documentation will be required to be submitted at account opening. If there is a PSA on the account, the designated beneficiary/eligible individual cannot act on the account.

- **Can I have more than one ABLE account; for example, an Attainable account as well as an ABLE account with a different state plan?**
  No, an eligible individual may only have one ABLE account, such as the Attainable Savings Plan®. However, if you are the parent, guardian, or Power of Attorney (POA) of more than one qualified individual, each of them would be eligible for a separate ABLE account.

- **Do I need to be a resident of a certain state to open an Attainable account?**
  No. While the Attainable Savings Plan® is offered by the Massachusetts Educational Financing Authority (MEFA) and is the Massachusetts ABLE Plan, the Attainable Plan is offered to any eligible U.S. resident regardless of state of residence. The Attainable Plan does not charge different fees and expenses based on state of residence. The qualified ABLE programs offered by your home state may offer its residents or taxpayers state tax advantages or other benefits. Additionally, some states offer residents state tax incentives for investing in any qualified ABLE program. You should consider the state tax advantages and benefits offered by your home state, including those available for investing in your home state’s qualified ABLE program, before making an investment in the Attainable Plan.
Limits on the account

- How much money can be contributed to an ABLE account?
  Annual contributions may not exceed the federal gift tax exclusion limit, which is $14,000 as of 2017. An existing account balance can grow without limitation, but you can’t make additional contributions once the account balance reaches $400,000 (as of 2017). Fidelity automatically prevents excess contributions from being accepted.

- How often can I change my investments?
  You may reallocate previously invested money among portfolios in your Attainable account twice per calendar year and upon changing the account owner (See our FAQ Can I transfer my Attainable account to another person?). You may direct future contributions to different portfolios at any time. To make an investment exchange, you can call a representative or complete and mail a form.

- Is there a minimum balance or minimum amount to open an Attainable account?
  You may open an Attainable account with as little as a $50 deposit. You must maintain at least $30 in the account. We reserve the right to close accounts with balances below this level and disburse any remaining balance to the account owner.

Spending from an Attainable account

- What are "qualified disability expenses"?
  Qualified disability expenses are any expenses for the benefit of the account owner in maintaining or improving his or her health, independence, or quality of life. These expenses include, but are not limited to, education, housing, transportation, employment, training and support, assistive technologies and related services, personal support services, or health and basic living expenses.

- Do I have to prove I spent the money on a qualified expense?
  No explanation is needed to withdraw money from your Attainable account. However, the IRS may ask you to verify that the money was used for a qualified expense, so you should keep records detailing how you’re spending that money.

- What if I do not spend the withdrawal on a qualified disability expense?
  This would be considered a non-qualified withdrawal, and taxes, as well as a potential 10% federal penalty tax, may be owed on earnings associated with the withdrawal. Non-qualified withdrawals may also impact disability benefits.

- If I make a withdrawal from my Attainable account, do I need to spend the money right away so as not to impact Supplemental Security Income (SSI) benefits?
  The Social Security Administration has stated that for many qualified disability expenses, you don’t need to spend the money in the same month in which you withdraw it from your Attainable account. If you choose to do that, you must maintain the Attainable account while the withdrawal is not spent, be able to identify the money, and intend to use the money for a qualified disability expense.
However, for **housing related expenses**, you must spend the money on the housing expense in the **same calendar month** in which you withdraw it from your Attainable account. If these conditions aren’t met, the withdrawal may be counted as a resource and could impact SSI benefits.

After the money has been withdrawn (but before it’s spent), you can maintain the money in separate account such as a personal checking account or a Fidelity Cash Management Account.

**Fidelity Cash Management Account**

- **How could I use a Fidelity Cash Management Account with my Attainable Savings Plan℠?** Consider opening a Fidelity Cash Management Account to use with your Attainable account. You can transfer money online to your Fidelity Cash Management Account and use all of its features to manage your qualified disability expenses. Visit this page for more information about Fidelity Cash Management Accounts. Once you transfer money from your Attainable account to a cash management account (as with a personal bank account), it’s no longer part of the Attainable plan.

- **What features does a Fidelity Cash Management Account provide that I may find useful?** Transferring funds to your Fidelity Cash Management Account is the fastest way to get access to money invested in an Attainable account. Withdrawals from an Attainable account made prior to market close will be available in your cash management account the following day. Transfers to an outside bank may take an extra day or two. You can transfer money from your Attainable account to your Fidelity Cash Management Account online.
  - A debit card is available to make purchases and access to cash easier.
    - ATM-fee reimbursement
    - No annual debit card fee
    - Receive text alerts for debit card purchases
    - Leverage payment services such as ApplePay®
  - Joint account ownership is an option
  - Leverage Fidelity’s BillPay® service
  - Checkwriting with no additional fees
  - Works with third-party services as well as Fidelity Full View® to track and categorize expenditures
  - Monthly statements showing expenditures and deposits

**Account maintenance and transfers**

- **If the eligible individual is not permanently disabled, does the disability need to be recertified?** If the account owner is not permanently disabled, federal law requires that they submit an annual recertification to the Attainable Plan stating that he or she continues to meet the eligible criteria required to own an Attainable account. You will be notified separately about how to recertify online.

- **How do I transfer my ABLE account from another plan to the Attainable plan?** While you can only have one ABLE account per eligible individual, you can move the assets in one ABLE plan to another one with no tax consequences. You would first open the new
Attainable account and then transfer the assets to move the money from your old ABLE account to your Attainable account. Per federal law, you may rollover assets in an ABLE account once per 12 months for the same designated beneficiary/eligible individual.

- Can I transfer my Attainable account to another person?
  Yes, you may transfer all or part of the money from your Attainable account to another person's ABLE account, with no tax consequences, provided that person is eligible for an ABLE account and is a sibling to the original account owner. This includes brother, sister, stepbrother, stepsister, half-brother, and half-sister.

- What happens when the account owner turns 18?
  If you have been managing your child's account or if you are the person with signature authority (PSA) on an account, you can choose to turn it over to the account owner if that step is appropriate for your situation.

- What happens if the account owner passes away?
  If the account owner passes away, the remaining assets in the account are passed on to the owner's estate.

The Attainable Savings Plan is offered by the Massachusetts Educational Financing Authority and managed by Fidelity Investments.

Qualified ABLE Programs offered by other states may provide state tax benefits to their residents or taxpayers that are not available through the Attainable Savings Plan. If you are not a resident of Massachusetts, you should consider whether your home state offers its residents or taxpayers state tax advantages or benefits for investing in your home state's qualified ABLE program before making an investment in the Attainable Savings Plan.

Units of the Portfolios are municipal fund securities and are subject to market fluctuation and volatility. You may have a gain or loss when you sell your Units.

Please carefully consider the Attainable Savings Plan's investment objectives, risks, charges, and expenses before investing. For this and other information, contact Fidelity for a free Disclosure Document or view one online. Read it carefully before you invest or send money.
Individual Development Account (IDA)
Fact Sheet 2019

What is an IDA?
An IDA is a special savings account for families with low income. They help individuals save a portion of their work earnings for purchasing their first home, for post-secondary education, or for starting a small business. IDAs are special accounts where the person’s contributions are matched $1 for $1 or even more, depending on the participating organization.

Who is eligible for IDAs?
Most organizations will limit applicants to those individuals whose income level is 200% or less of the Federal Poverty Income level. IDAs are offered through programs that involve partnerships between local non-profit organizations and financial institutions (banks or credit unions). IDA opportunities may be available through the Department of Transitional Assistance (DTA), non-profits granted federal monies that are specifically designated for IDA development, or through for-profit organizations.

What is the eligibility criteria?
Many IDA programs require that all or part of an individual’s savings come from work earnings. Eligibility criteria can vary depending on the program sponsor and their funding sources. Criteria can include, but is not limited to, credit history, credit score, and assets.

Note: Your credit history and/or score could prevent you from qualifying.

How does this work?
A participant will open an IDA account with a partnering financial institution and will make deposits according to the IDA agreement.

Note: Public cash benefits are not considered work earnings, and cannot be used to fund an IDA.

Can an IDA impact my public benefits?
No. IDA individual deposits, matching contributions, and any interest earned will not impact Social Security or DTA eligibility and/or cash benefits.

Where can I find an IDA program near me?
The IDA Directory (https://cfed.org/programs/idas/directory_search/) allows you to locate IDA providers in your area. Either use the map or enter the agency name, city, state or zip code to see a list of programs matching your search criteria.

A Community Work Incentives Coordinator (CWIC) can help you understand IDAs to determine if they are right for you.
Plan to Achieve Self-Support (PASS)
Fact Sheet 2019

What is a PASS?
A PASS is a Supplemental Security Income (SSI) work incentive that Social Security developed to help beneficiaries work. It allows people with disabilities or individuals who are blind to set aside resources and/or income with minimal to no negative impact on their Social Security benefits. An approved PASS allows a beneficiary to use those resources and/or income toward achieving a work goal and becoming self-sufficient or independent of benefits.

Social Security Disability Insurance (SSDI) recipients who are interested in PASS usually set aside enough resources and/or income to qualify for SSI, so they can eventually apply for a PASS.

How can a PASS help you?
Money that is saved in a PASS can be used towards paying expenses associated with your employment goal. Here are some common costs:
- Education, certifications, and licensing
- Vocational training or evaluation
- Job-related equipment and supplies
- Transportation-related expenses
- Start-up costs for equipment/services

How can you apply for a PASS?
Beneficiaries can request a PASS plan application (Form SSA-545) at their local Social Security office or they can locate one on Social Security’s website: www.socialsecurity.gov/forms/ssa-545.pdf. In completing the application, a beneficiary is asked to describe the steps needed to reach their employment goal, according to the specific guidelines and requirements that apply to PASS plans.

What must an individual have or what must they do when applying for a PASS?
An individual must:
- Have a feasible and realistic work goal
- Have a specific savings/spending plan for work-related items or services and explain how it is related to their employment goal
- Have a clear, identifiable accounting of the funds to be set aside in their PASS account
- Follow the PASS plan as agreed with Social Security

What happens once a PASS is written?
A representative in the Social Security office will ensure the PASS has been completed properly, or they will request additional information. Once the PASS is considered complete, it will be sent to a regional PASS Cadre or Specialist who will review the plan and make a final decision as to whether it will be approved. Beneficiaries can appeal denial decisions.

What happens after your PASS is approved?
After a PASS is approved, the PASS Cadre will contact the beneficiary periodically to ensure they are following their plan. As part of this review, PASS Cadres will request receipts for PASS-related expenses, which the beneficiary has incurred. A PASS plan does not require an end date, but will be completed when the goal of the PASS is achieved. Lastly, if necessary, an amendment can be made to a PASS, as long as it is approved by the PASS Cadre.

A Community Work Incentives Coordinator (CWIC) can help you understand the process of a PASS plan and whether this work incentive is right for you. They can also support you in the process of writing your plan.
How does SSI work for children under 18?
Supplemental Security Income (SSI) for a child is based on their disability, as well as their parent’s income and assets. In order to qualify, a child’s disability must significantly limit their activities and must have lasted or be expected to last at least 1 year, or is expected to result in death.

What happens when I turn 18?
If you receive SSI as a child and wish to continue receiving it as an adult, you must qualify under the adult medical standards. Note: Only your income and assets will be considered.

What are the steps of the Age-18 Redetermination process?
1. Before your 19th birthday, Social Security should send you a letter requesting you participate in the Age-18 Redetermination process. If not, it is recommended you initiate this process with your local Social Security office.
2. Social Security will require you to attend an initial eligibility interview to gather information about your disability and how it impacts your ability to work.
3. You must gather medical and school information and provide it to your local Social Security office, so it can be reviewed by the state agency that determines eligibility for SSI.
4. You may be required to attend a medical consultation for additional information.
5. You will be notified by mail regarding the decision of your redetermination.

What are the possible outcomes? You can be found eligible for SSI as an adult. Your cash benefits will continue, however, the amount may change based on your living situation and marital status. Also, you will automatically receive MassHealth Standard.

- You can be denied, but you will be entitled to two more cash payments following the date of the decision letter.
- Your benefits can continue under Section 301.

What is Section 301?
Section 301 is a special provision that continues SSI for individuals denied under the Age-18 Redetermination, who have a goal for self-sufficiency, and have an active:

- Individual Education Plan (IEP), or
- Individualized Plan for Employment (IPE) with a State Vocational Rehabilitation program, or
- Individual Work Plan (IWP) with an Employment Network, or are
- Receiving other employment support services.

If granted, you will keep your benefits until you graduate from the program, or start working.

Additional Points to Consider:
- Do you still need help managing your SSI?
  - If so, visit www.ssa.gov/payee/.
- Do you have an academic and/or career goal?
  - If so, reference the SSI Benefits & Related Work Incentives Fact Sheet at www.workwithoutlimits.org/benefitscounseling
Did you know student loan discharges exist?

If you have a total and permanent disability, it may be possible for you to have your federal student loan discharged. Total and permanent disability is defined as the inability to work and earn money because of an illness or injury that is expected to continue indefinitely, or to result in death. If you qualify for a federal student loan discharge, you will be released from all obligations to repay it.

How does a loan discharge work?

If you are determined to be totally and permanently disabled based on a physician’s certification, your loan will be conditionally discharged for up to three years. This conditional discharge period begins on the date you became totally and permanently disabled, as certified by your physician.

During this conditional discharge period, you do not have to make any payments on your loan(s). To qualify for a final discharge due to total and permanent disability, you must meet the following requirements during the conditional discharge period:

- Your earnings from employment must not exceed the poverty line amount for a family of two; and
- You must not receive any additional loans under the Federal Family Education Loan, Direct Stafford Loan, or Federal Perkins Loan programs.

Note: You cannot qualify for a loan discharge based on a condition that existed before the loan was made, unless a doctor certifies that your condition substantially deteriorated after you obtained the loan.

What happens if I stop meeting the conditional discharge period requirements?

If you do not continue to meet these requirements at any time during, or at the end of, the conditional discharge period, your loan(s) will be taken out of conditional discharge status and you must resume making payments on your loans.

How can I find out if I qualify for federal student loan forgiveness, cancellation, or discharge?

For more information on qualifying for any loan options stated above, review your promissory note, Borrower’s Rights and Responsibilities Statement, and contact your loan holder. For:

- Federal Perkins Loans, check with the school that gave you the loan, or with the school’s loan servicing agent;
- Direct Stafford Loans, contact the Direct Loan Servicing Center at 1-800-848-0979, or 1-800-848-0983 (TTY), or visit this website at: [https://studentaid.ed.gov/sa/](https://studentaid.ed.gov/sa/);
- Federal Family Education Loans (FFEL), contact your lender or the loan servicing agent.

The information contained in this factsheet comes from the U.S. Department of Education’s Federal Student Aid website: [https://studentaid.ed.gov/sa/](https://studentaid.ed.gov/sa/).
What are some available programs to help me achieve my career goals?

- Achieving a Better Life Experience Act (ABLE)
- Individual Development Accounts (IDA)
- Plan to Achieve Self-Support (PASS)
- Ticket to Work

What are the basics of PASS?
The ultimate goal is to be independent of public benefits. PASS may be used by both SSI (Supplemental Security Income) and SSDI (Social Security Disability Insurance) recipients. Individuals can save money to pay for items/services that will help them achieve vocational goals. In addition, public benefits will not be impacted by PASS savings.

Expenses can include, but are not limited to, the following:

- Education and vocational training
- Start-up business costs
- Car, laptop, etc.

What are the basics of IDAs?
These are matched savings accounts that help those who are low income to save toward the purchase of a lifelong asset. Savings in an IDA are matched. This means that for every dollar saved, another dollar (or more) is deposited. IDAs can be used to buy a house, pay for education and job training, or to start a small business.

What are the basics of Ticket to Work?
This is the only Social Security work incentive that does not require beneficiaries (age 18 to 64) to work. Free employment services can be accessed from State Vocational Rehabilitation and Social Security approved Employment Networks. An individual can choose to work with the organization that best meets their needs. Participants are exempt from medical reviews, as long as they are making timely progress toward their vocational goal.

For more information on these programs:

- PASS: [www.ssa.gov/disabilityresearch/wi/pass.htm](http://www.ssa.gov/disabilityresearch/wi/pass.htm)
- ABLE: [www.fidelity.com/able/attainable/overview](http://www.fidelity.com/able/attainable/overview)
- IDA: [https://cfed.org/programs/idas](https://cfed.org/programs/idas)
- Ticket to Work: [www.yourtickettowork.com](http://www.yourtickettowork.com)
What is Social Security’s Ticket to Work (Ticket) program?

It is a voluntary program available to Supplemental Security Income (SSI) and/or Social Security Disability Insurance (SSDI) beneficiaries ages 18 through 64. This program promotes financial independence and self-sufficiency by offering individuals with disabilities more choices when seeking services and supports to gain and maintain employment.

How can the Ticket help me?

To participate in this program, you must first assign your Ticket to an approved agency in order to obtain free employment support services. Services include, but are not limited to: education, vocational training, benefits counseling, career counseling, job readiness, job placement, and ongoing support services. You will also be protected from a Continuing Disability Review (CDR), while making timely progress with your work or educational goals.

Where can I assign my ‘Ticket’?

You can assign your Ticket to any Social Security approved Employment Network (EN) or State Vocational Rehabilitation (VR) agency of your choice. In Massachusetts, the two state VR agencies are the MA Rehabilitation Commission and the MA Commission for the Blind. You can locate an Employment network at: www.choosework.net

How does the Ticket work?

While participating in the program, you must meet specific work goals and deadlines:

- The first 24 months your Ticket is assigned, there is no work requirement. You are expected to comply with your Individual Work Plan (IWP) or Individualized Plan for Employment (IPE).
- During months 25-36, you must have gross monthly earnings at or above Substantial Gainful Activity (SGA) for 3 of the 12 months.
- Months 37-48, you must have gross monthly earnings over SGA for 6 of the 12 months. **Note:** During the first 48 months, you can apply available work incentives.
- Months 49 to 60, you must have gross monthly earnings that render you independent of SSI and/or SSDI benefits.

Will my participation in the Ticket program impact my public cash benefits or healthcare?

No. However, earned wages will impact everything.

For more information on the Ticket to Work program, visit: https://www.ssa.gov/work/overview.html

A Community Work Incentives Coordinator (CWIC) can help you understand the Ticket to Work program.
Other Public Benefits Fact Sheet
How can HUD EID help you?
The Department of Housing and Urban Development (HUD) has a work incentive called the Earned Income Disregard (EID), also known as Earned Income Disallowance, which applies to people in certain types of housing. If you qualify for EID, Local Housing Authorities (LHA) will disregard all, or a portion of your earnings from employment, when calculating your rent over a 24-month period.

How do you know if you are EID eligible?
To know if EID applies to you, you must first verify what type of HUD-subsidized housing you receive. You may be eligible if you live in one of the following:

- LHA operated public housing
- Section 8 Housing Choice Voucher Program (but not project-based Section 8)
- The Supportive Housing Program (Section 811 housing for elderly and persons with disabilities)
- The Home Investment Partnerships Program
- The Housing Opportunities to Persons with AIDS Program (HOPWA)

For the purpose of this work incentive, you must have been unemployed or averaging less than 10 hours of work per week at minimum wage, during the 12 months before your new job.

How does EID work?
If you satisfy the housing subsidy requirement and the employment requirement prior to your new job, then HUD will disregard 100% of your wages during the first 12 months of your new employment, and 50% during the second 12 months of your employment.

Can EID be used more than once?
No. EID can only be used once in a person’s lifetime. Therefore, in order to take full advantage of EID, it is highly recommended you work throughout the 24-month EID period.

What if I live in DHCD funded housing?
The Massachusetts Department of Housing and Community Development (DHCD) also honors EID. However, in order to qualify for EID as an SSI beneficiary, your cash benefits must have been reduced because of your increased work income. To qualify for EID as an SSDI beneficiary, you must have completed your Trial Work Period and be earning $1,220 or more in gross monthly earnings (in 2019), likely causing the suspension of your SSDI cash benefits.

EID allows individuals living in certain types of subsidized housing to work without experiencing an immediate increase in rent. A Community Work Incentives Coordinator can help you determine if EID applies to you.
EARNED INCOME DISALLOWANCE
ELIGIBILITY QUESTIONNAIRE

Organization: ________________________________
Processed By: ________________________________
Reviewed By: ________________________________
Date: ________________________________
Family/Tenant Name: ________________________________
Unit: ________________________________

Answer the following questions to determine if a family or tenant qualifies for the Earned Income Disallowance (EID):

PART ONE
1. Has the family experienced an increase in wages as a result of employment?
   YES ☐ NO ☐

   If yes, what is date the family first experienced an increase in income attributable to employment?
   ________________________________

2. Is the person who is experiencing the increase in income a resident of public housing?
   YES ☐ NO ☐

3. Does the person who is experiencing the increase have a disability AND live in housing subsidized through one of the following: the Housing Choice Voucher Program, HOME Investment Partnership Program, Housing Opportunities for Persons with Aids (HOPWA), or the Supportive Housing Program?
   YES ☐ NO ☐

   Indicate which program: ________________________________

If the answer to ALL of the above questions is no, the family/tenant does not qualify for EID.

If the answer to question 1 above is YES and the answer to EITHER question 2 or 3 above is YES, proceed to Part Two:

PART TWO
1. Prior to the new employment or increase in income, was the family member/tenant unemployed for the past 12 months or longer?
   YES ☐ NO ☐

2. Prior to the new employment or increase in income, did the family member/tenant earn less than $________ (enter the higher of Federal, State, or local minimum wage) X 500 = ___________ in the past year?
   YES ☐ NO ☐
If yes, please indicate amount: __________________________________________

3. Did the family member/tenant experience an increase in wages while participating in an economic self-sufficiency or other job training program?

☐ YES  ☐ NO

If yes, please indicate which type of program:

☐ Job training
☐ Workfare
☐ Basic skills training
☐ On-the-job training
☐ Work placement
☐ Apprenticeship
☐ Employment counseling
☐ Financial or household management
☐ Substance abuse treatment
☐ Mental health treatment
☐ English proficiency
☐ Other: __________________________________________

4. Is the family member/tenant currently receiving cash assistance, benefits or services under any State program for TANF?

☐ YES  ☐ NO

If yes, please indicate program: __________________________________________

5. Did the family member/tenant receive cash assistance, benefits or services under any State program for TANF worth at least $500.00 within the 6 months immediately prior to the new employment or increase in income (including one-time payments, wage subsidies, and transportation assistance)?

☐ YES  ☐ NO

If yes, please indicate approximate value: _________________________________

If the answer to any one of the above questions in Part Two is YES, the family/tenant qualifies for the EID. If not, the family/tenant does not qualify.
Family Self-Sufficiency (FSS)
Fact Sheet 2019

What is the FSS Program?
FSS is a program that enables individuals and families living in Housing and Urban Development (HUD) funded subsidized housing to increase their earned income and reduce their dependency on public benefits. FSS does this by providing resources to participating families to assist them in successfully achieving employment and financial goals.

Who is eligible for the FSS program?
The FSS Program is open to Public Housing Authority (PHA) residents, individuals eligible for the Housing Choice Voucher Program Section 8 or the Section 8 Project-Based Voucher programs. Native American Housing Assistance and Self Determination Act (NAHASDA) program participants are also eligible.

How does FSS Work?
Families who wish to participate in FSS must develop an Individual Training and Services Plan (ITSP) or contract, which details the steps and supports necessary for them to be successful. The PHA will assign an FSS Coordinator to work with the family to develop the Plan and provide ongoing case management.

If approved, PHA will setup an interest-bearing escrow account which families must contribute to, and which can only be accessed according to the conditions and goals stated in the Plan. This ‘savings’ account is managed by a third party; in this case, it is the PHA.

How is my FSS account funded?
Any increase in your family’s rent due to work income will be deposited by the PHA into your escrow account.

How do I enroll in the FSS program?
To enroll, speak with your PHA’s FSS Coordinator. If you live in Project-Based Section 8 housing, contact your property manager.

Note: In order to participate, you must be actively seeking work or be employed. Other requirements may vary from PHA to PHA.

What services are available under FSS?
The FSS Coordinator assists participants in obtaining a number of services including counseling, child care, work-related transportation, education, job training, financial literacy, and home ownership, to name a few. Note: Services are often provided by a third-party, rather than the PHA.

What can happen if I fail to complete the FSS?
If you do not meet your goals stated in your Plan, then the money in your escrow account will be returned to the PHA.

Can I get housing after I complete my FSS?
The objective of FSS is to reduce dependency on subsidized housing. However, once you complete the FSS program, you can remain in public housing, as long as you are eligible.
Supplemental Nutrition Assistance Program (SNAP)  
Fact Sheet 2019

How can SNAP help me?  
SNAP (formerly known as Food Stamps) is administered through the Department of Transitional Assistance (DTA) for people to buy and eat nutritious food. Eligibility for SNAP benefits depends on household income and size.

Who qualifies for SNAP benefits?  
Massachusetts residents who have a bank balance under $2,001, or under $3,001, if they live with a person who is age 60 or above, or is disabled. They must also have an annual household income (before taxes) below the following amounts*:

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Max Annual Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$19,908</td>
</tr>
<tr>
<td>2</td>
<td>$26,796</td>
</tr>
<tr>
<td>3</td>
<td>$33,696</td>
</tr>
</tbody>
</table>

* www.fns.usda.gov/snap/eligibility#Income

Am I eligible for SNAP and how can I apply?  
Visit the links below to find out if you will qualify:
- www.masslegalservices.org/SNAPCalculator
- www.gettingsnap.org/snapcalculator.php

If you qualify, then you can apply in person at your local DTA office, or when applying for Supplemental Security Income (SSI) at your local Social Security office, or online, if you are submitting a new application, or by mail, or fax. To learn more, visit: www.mass.gov/eohhs/gov/departments/food-assistance.html.

What is the max SNAP monthly benefit?  
SNAP allotments are based on earned and unearned income including Social Security cash benefits, child support, as well as household size and expenses e.g. medical, childcare and utilities. There are several deductions, such as the homeless and standard deductions, that can also be applied to the SNAP calculation to determine monthly benefits. The following is a chart* that shows the maximum monthly SNAP allotment based on household size:

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Max SNAP Allotment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$192</td>
</tr>
<tr>
<td>2</td>
<td>$352</td>
</tr>
<tr>
<td>3</td>
<td>$504</td>
</tr>
</tbody>
</table>

* www.fns.usda.gov/snap/fact-sheet-resources-income-and-benefits

Will work impact my SNAP benefits?  
Yes. Your SNAP allotment will be impacted, since total household income is considered in the SNAP calculation, and would be subject to a reduction in benefits.

Do I have to report my work income?  
Yes. Report any income changes immediately to DTA to avoid overpayments, which you must pay back to the state. Failure to report work activity within 30 days of your start date could result in suspension of benefits for 6 months.

How can I verify my SNAP benefits?  
Contact your local DTA office or download the free DTA Connect mobile app. Once subscribed, simply log in with your Social Security Number and date of birth to see information about your SNAP benefits.

For more info on SNAP, visit or call:
- www.mass.gov/snap
- DTA Assistance Line 1-877-382-2363

A Community Work Incentives Coordinator can help you understand SNAP and how work can impact these benefits.
How can EAEDC help me?
EAEDC is a program administered by the Department of Transitional Assistance (DTA) that provides cash and medical assistance to certain categories of needy individuals in Massachusetts.

Who qualifies for EAEDC?
To be eligible for EAEDC you must be:
- Physically or mentally disabled, or
- Aged 65 or older, or
- Caring for a disabled individual who would otherwise be institutionalized, and
- Have countable assets worth less than $250.

The disability standards for EAEDC are not as strict as Social Security. They include having a condition that lasts at least 60 days and being unable to support yourself through work.

How much are EAEDC monthly benefits?
To be eligible for an EAEDC monthly benefit, your countable monthly income must be less than what you are entitled to, which is based largely on your living situation and marital status. The chart* below shows some common examples of different types of EAEDC monthly cash benefits, based on living situation and marital status:

<table>
<thead>
<tr>
<th>Types of EAEDC Beneficiaries</th>
<th>Max Benefit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single person (with shelter costs)</td>
<td>$303.70</td>
</tr>
<tr>
<td>Each person in a married couple</td>
<td>$202.50</td>
</tr>
<tr>
<td>Homeless person</td>
<td>$92.80</td>
</tr>
<tr>
<td>Person in a rest home</td>
<td>$72.80</td>
</tr>
</tbody>
</table>

* www.masslegalhelp.org/eaedc

What kind of income doesn’t impact EAEDC?
Some income will not impact your EAEDC monthly benefits, such as housing subsidies, most cash gifts, fuel assistance and the income of anyone who lives with you, if you are not married.

Are there other benefits tied to EAEDC?
Yes. Once approved for EAEDC, you will receive MassHealth coverage as well as SNAP (Supplemental Nutrition Assistance Program) benefits, formerly known as Food Stamps.

How can I apply for EAEDC benefits?
You can apply at your local DTA office. You must sign the application at that time. If eligible, your benefits will begin from the date you signed.

Will work impact my EAEDC benefits?
Yes. To figure out your monthly cash benefits, DTA will first determine what your gross monthly income (before taxes) is, based on whether you are paid weekly or biweekly. Once determined, DTA will disregard the first $90 of your gross monthly income; then any earnings over that will reduce your EAEDC benefits $1 for every $1 you earned from work, for the month.

Note: If you have dependent care costs for a disabled adult or child, you can deduct these, up to a maximum of $175 per month from your work income.

Do I have to report my work income?
Yes. Report any income changes immediately to DTA to avoid overpayments, which you must pay back to the state. This is critical, so you don’t jeopardize your eligibility for future benefits, should you need them.

For more info on EAEDC, visit or call:
- DTA Assistance Line 1-877-382-2363
How can TAFDC help me?
TAFDC is a program administered by the Department of Transitional Assistance (DTA) that offers temporary cash benefits to families or pregnant women who have little or no assets or income. Besides this, TAFDC beneficiaries are also granted annual clothing allowances for children, free childcare and work-related transportation, as well as access to programs, such as English for Employment and Graduate Equivalency Diploma.

Who qualifies for TAFDC benefits?
You must have little or no income, be a resident of Massachusetts and live with your child or live with and take care of a child related to you, or be at least 5 months pregnant. **Note:** If you are working when you apply, $200 of your gross earnings will be excluded when determining eligibility. You must also be a US citizen or an eligible noncitizen. **Note:** If your immigration status prevents you from getting TAFDC, your children may still be eligible.

How much are TAFDC monthly benefits?
TAFDC monthly cash benefits are based on how many people live in your household, your monthly household gross income (before taxes), and whether or not you have a housing subsidy (see TAFDC cash benefit chart below*). **Note:** Cash benefits may be lower than the figures below, if others in your household also receive income.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Housing Income Limit</th>
<th>Subsidy Cash Benefits</th>
<th>Private Household Income Limit</th>
<th>Cash Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$699.30</td>
<td>$378</td>
<td>$773.30</td>
<td>$418</td>
</tr>
<tr>
<td>2</td>
<td>$884.30</td>
<td>$478</td>
<td>$958.30</td>
<td>$518</td>
</tr>
<tr>
<td>3</td>
<td>$1,069.30</td>
<td>$578</td>
<td>$1,143.30</td>
<td>$618</td>
</tr>
<tr>
<td>4</td>
<td>$1,245.05</td>
<td>$673</td>
<td>$1,319.05</td>
<td>$713</td>
</tr>
</tbody>
</table>

* [www.masslegalhelp.org/income-benefits/tafdc/advocacy-guide/part4/q82-how-much-will-you-get-each-month](http://www.masslegalhelp.org/income-benefits/tafdc/advocacy-guide/part4/q82-how-much-will-you-get-each-month)

Is there a time limit to my cash benefits?
Yes. In a five-year period you can only get a total of 24 months of TAFDC benefits, unless you are receiving benefits because of health problems, disability, domestic violence, or pregnancy.

What is the TAFDC work requirement?
Participants may be required to perform a work-related activity in order to qualify for TAFDC. The work requirement depends on the age of your youngest child who lives with you and does not fall under the ‘Family Cap’ rules. Visit the links below to learn more about this.

How can I meet the work requirement?
The work requirement is met as long as you are either working, going to school, participating in a vocational program and/or an internship, searching for a home, or doing community service.

Will work impact my TAFDC benefits?
Yes. TAFDC has a gross monthly income limit for eligibility. If you exceed those limits due to work earnings and/or other income you receive for the month, then you will not be entitled to a cash benefit.

Do I have to report my work income?
Yes. Report all income changes immediately to DTA. Doing so will help you avoid unnecessary overpayments that you must pay back. This is critical, so you don’t jeopardize your eligibility for future benefits, should you need them.

For more info on TAFDC, visit or call:
- [www.mass.gov/dta/assistance](http://www.mass.gov/dta/assistance)
- [www.masslegalhelp.org/income-benefits/welfare](http://www.masslegalhelp.org/income-benefits/welfare)
- DTA Assistance Line 1-877-382-2363

A Community Work Incentives Coordinator can help you understand TAFDC benefits and the impact of work on them.