

Medicare, Social Security Disability Insurance (SSDI) & Work

Rhode Island Fact Sheet 2025

What is Medicare?

Medicare 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 healthcare. 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, speech-language pathology services). There is a monthly premium for Part B (\$185.00 in 2025); Part B also has copays and deductibles. The premium is automatically deducted from the beneficiary's SSDI cash benefit.

Does help exist to pay for Medicare Part B?

Yes.

- The Medicaid agency will cover this premium, if an SSDI beneficiary qualifies for Automatic Medicaid under SSI.
- A Medicare Savings Program (MSP) is a Medicaid-administered program available to those with limited income and assets.

The following MSPs pay the Part B premium:

Qualified Individual (QI)

- Pays Part B premium **only**.
- Must have Medicare Part A to be eligible
- Cannot be eligible for both QI and other Medicaid programs.

Qualified Medicare Beneficiary (QMB)

- Pays Part A and/or B premium
- Pays co-insurance and deductibles
- Can also be eligible for other Medicaid programs

Specified Low-Income Medicare Beneficiary (SLMB)

- Pays Part B premium **only**.
- Must have Medicare Part A to be eligible
- Can also be eligible for other Medicaid programs

Note: SSDI beneficiaries are eligible for Part A at no cost.

Part C (Medicare Advantage Plans) is optional coverage for Medicare beneficiaries 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.

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Does help exist to pay for Medicare Part D?

Yes. If you are enrolled in Medicaid, Supplemental Security Income (SSI), or a Medicare Savings Program (MSP), you automatically qualify for the Extra Help Program (also called the Part D Low-Income Subsidy), regardless of whether you meet Extra Help's eligibility requirements. If an SSDI beneficiary is enrolled in a Part D Benchmark Plan, they may be entitled to full or partial help with their Part D premiums, deductibles and copays.

Note: Beneficiaries who aren't automatically eligible can apply for Extra Help. In 2024, the income limit is *below* \$1,903 a month for individuals (\$2,575 a month for couples). The asset limit is *up to* \$17,220 for individuals (\$34,360 for couples).

- For additional information: [Medicare Part D Extra Help Income and Resource Limits](#)

How is Medicare impacted when working and receiving SSDI?

If the SSDI beneficiary begins working and earns enough to begin their Trial Work Period (TWP), their Medicare will be preserved throughout. After the TWP ends, Medicare will continue for at least another 93 months. This is due to a special work incentive called the Extended Period of Medicare Coverage (EPMC).

Note: EPMC will continue as long as SSDI beneficiaries pay their Medicare premiums and meet Social Security's disability standards. Social Security is the only agency that can give a definitive date of when Medicare eligibility will stop. Contact the local Social Security office shortly after TWP ends, for more information.

Other Public Health Insurance Resources:

Medicare Rights Center is a national, nonprofit consumer service organization that works to ensure access to affordable health care for older adults and people with disabilities through counseling and advocacy. (Phone number: 800-333-4114)

SHIP (State Health Insurance Assistance Programs): Provides free health insurance information, counseling and assistance.

To schedule an appointment with a SHIP counselor call: 1-401-462-3000 Website: [Medicare Counseling | Office of Healthy Aging](#)

Medicare Contact Information:

1-800-633-4227 or visit www.medicare.gov/

Community Work Incentives Coordinators can help with understanding how Medicare coverage applies to you, and whether you may be eligible to receive help paying for certain Medicare costs.

For more information about
Work Without Limits

Benefits Counseling
call toll-free

1-877-YES-WORK
(1-877-937-9675)

or visit WorkWithoutLimits.org