



AGED, BLIND, AND DISABLED MEDICAID 201-6 Montana Medicaid for Workers with Disabilities (MWD)

Supersedes: MA 201-6 (10/01/2018)

Reference: 42 USC 1396a(a)(10)(A)(ii)(XIII); MCA 53-6-113(6), 53-6-131(13), 53-6-195; ARM 37.82.101, 37.82.1002-1007

Overview: Working disabled Medicaid clients may qualify for the Montana Medicaid for Workers with Disabilities (MWD) program by paying a cost share fee.

Coverage is limited to individuals who:

1. Meet all Medicaid non-financial requirements,
2. Are currently considered disabled, or would be considered disabled under Social Security Act criteria if not for their current work activities, or for whom a disability determination under SSA criteria is not required due to being aged (65+);
3. Are age 16 or older,
4. Are employed or self-employed, as defined in this policy,
5. Are within the MWD program resource limits (CMA 001 General Resource Limits) (Asset transfer evaluations apply to MWD Waiver);

NOTE: Retirement accounts the aged/disabled worker owns are excluded only for MWD eligibility,

6. Have countable income at or below 250% of federal poverty level,

NOTE: Parental deeming and spousal impoverishment rules do not apply to MWD Waiver eligibility.

7. Are not residing in residential medical institutions, and
8. Pay a monthly cost share fee, which is based on only the aged/disabled worker's income. For married individuals see cost share fee information below.

NOTE: MWD clients who attest to being enrolled in a tribe are exempt from cost share fees. (The client must answer Indian Enrollment questions.)

WORK ACTIVITIES:

To qualify for MWD, the aged/disabled worker must have performed paid work, or be expected to perform paid work in the benefit month. An individual is considered to be working in any month in which the individual works or is expected to work.

An individual is not disqualified simply because they do not receive pay in a month; pay may be received the following month. If employment activities or work were performed in the benefit month, the individual may qualify for MWD.

The individual is not considered employed in a month they did not perform work, even if they received pay for a prior month's work. **NOTE:** For MWD purposes, employed is defined as engaging in work with the expectation of receiving pay, either as an employee or through self-employment. An individual is only considered employed if both Medicare and social security taxes are withheld from their pay. For self-employed individuals, they must pay both Medicare and social security taxes on their self-employment income.

An employed individual must provide proof of legal employment by documenting:

- FICA and other employment-related tax withholding from pay,
- Worker's compensation insurance coverage, and
- They are paid, per State labor regulations, for work activities performed.

Self-employment must be validated as a legitimate legal business through documentation of:

- Material participation in the business,
- Proof of regular and on-going business transactions,
- Business is registered with the Secretary of State,
- A current business license,
- Filing self-employment tax documents,
- Property and/or accounts in the business's name, and
- A profit motivation.

Corporations, LLCs, partnerships, and passive business ownership are not self-employment (CMA 503-1 Self-Employment Income). Income paid to corporate shareholders, LLCs, etc. is unearned income. However, individuals who are corporate employees, and whom the corporation pays wages with appropriate withholding, may be considered employed.

COST SHARE FEES:

Medicaid coverage is issued to an eligible MWD client for any benefit month the cost share fee is paid. Cost share fees are based on only the aged/disabled worker's income. MWD eligible clients who are married, and whose spouse does not qualify for MWD, have their cost share determined based on only their net countable income (the spouse's income is NOT included). If both spouses qualify for MWD, the cost share fee is based on their combined net countable income.

A cost share fee is not the same as a spend down. A cost share fee cannot be reduced by applying medical expenses such as health insurance premiums, copays or other out-of-pocket medical costs.

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