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Joint Committee on Legislative Ethics

THE MARYLAND HOUSE OF DELEGATES

ANNAPOLIS, MARYLAND 21401

Testimony in Support of HB 430 Employed Individuals With Disabilities Program - Upper Age Limit - Prohibition

Good afternoon, Madame Chair Peña-Melnyk, and honorable members of the Health and Government Operations committee. Thank you for the opportunity to present **HB 430 - Employed Individuals With Disabilities Program - Upper Age Limit - Prohibition**.

This bill will provide opportunities and predictability for a full life for our residents who are very disabled and face more challenges than most of us can ever imagine. This bill adjusts the financial eligibility for those in the Employed Individual with Disabilities (EID) program by removing the age cap.

Last year I learned about the EID program, and I am grateful that it exists in our state. It is administered by the Maryland Department of Health (MDH) and is a Medicaid “buy-in” program for individuals with disabilities who are currently working and would not be eligible for Medicaid due to income, but do not make more than \$75,000. It covers medical services for those who do not have any other insurance, or it can supplement services that a private insurer does not cover. Those who have Medicare as part of their Social Security Supplemental Security Income (SSI), can save as much as \$12,000 a year in premiums as part of EID.

The current eligibility criteria for EID include the following:

- Be between 16 and 65 years of age.
- Be working for wages and paying Maryland taxes.
- Have a disability that meets Social Security medical criteria.
 - The law defines disability as the inability to engage in any substantial gainful activity (SGA) by reason of any medically determinable physical or mental impairment(s) which can be expected to result in death, or which has lasted or can be expected to last for a continuous period of not less than 12 months. [Part I - General Information \(ssa.gov\)](#)
- Be a citizen of the U.S. or a non-citizen who meets immigration status requirements.
- Live in Maryland
- Have less than \$10,000 in resources on hand
- Be employed and have evidence of paying taxes.

This program is a great resource to these residents, and they depend on the services they receive for help with their activities of daily living to thrive and participate in their communities. However, under current policies they lose these services once they turn 65, even if they are still working.

This bill seeks to remove the age to assure that these individuals could live their full lives—and be productive members of our communities--for as long as physically possible.

I met with advocates and representatives from the Maryland Department of Health over the intersession. Together we looked at how eliminating the age cap affected the fiscal liability for the program in other states. Based on the experiences in New Jersey and Connecticut, MDH estimated that approximately 400 current participants in EID would continue after turning 65 and would cost the state between \$1 and 1.3M more in FY, assuming all of the potential individuals continued.

Given our current fiscal situation, that would be a hard number to justify. However, it is important to consider the long-term impact. If all 400 individuals are forced to pay out-of-pocket for their essential services, they will soon be forced to stop working, spend down their assets and go into nursing homes, paid for by Medicaid. The average cost of a nursing home is \$100,000. That would be a cost of \$40M, \$20 for the state and \$20M for the feds. That will necessitate even more draconian budget cuts, or dramatic revenue increases.

I would suggest that it is ultimately in the state's best interest to continue to provide the services that are not included in Medicare, with a premium from the EID participants.

I expect to continue to have conversations over the intersession to consider options to resolve this issue that would be equitable to other Medicaid recipients. I am grateful for their recognition of the problem and their willingness to work on solutions.

Once again, I am before you asking for your support of some of our vulnerable residents. Please listen to the stories of those affected with an open mind and an open heart and honor their courage, resilience, and determination to be full participants in our communities. I humbly ask for your favorable consideration of this bill.