

People with Intellectual and Developmental Disabilities (IDD) Who Have Medicaid and Private Health Insurance

1. Can an individual with IDD have both private health insurance and Medicaid?

Yes, an individual can be enrolled in a private health insurance plan and NJ FamilyCare, the New Jersey Medicaid program. Individuals with IDD who are age 18 and older often have Medicaid and private health insurance through their parents' group health insurance, usually through an employer.

2. Why is it important for an individual with IDD, who has private health insurance, to also have Medicaid?

Accessing Division of Developmental Disabilities (DDD) services at age 21 requires an individual with IDD to have Medicaid.* The best way for an individual with IDD to receive Medicaid is often by applying for Supplemental Security Income (SSI) at age 18. If the individual with IDD is eligible for SSI, they will automatically be eligible for Medicaid.

3. Is there any downside to having private health insurance and Medicaid?

No, a person's private health insurance is not negatively impacted by having Medicaid. In most cases, the private health insurer is the "primary payer" and Medicaid is the "payer of last resort."

4. Are there additional benefits through Medicaid, not covered by private health insurance?

Medicaid covers some services and supplies not covered by private health insurance. Examples include incontinence supplies and personal care assistance services for people with IDD that require help with activities of daily living, such as eating, bathing, toileting, dressing, etc.

5. If individuals have both private health insurance and Medicaid, will they lose access to the doctors they have seen through the parent's private insurance coverage?

When individuals with IDD receive Medicaid, in addition to their private health insurance, they will not lose access to any of the doctors they have seen through their private health insurance coverage.

*Occasionally, the parent of an individual with IDD has retired, become disabled, or died before their child's 18th birthday. It is then likely that the child has been receiving a Social Security Disability (SSD) benefit from the parent's work record before they could have applied for SSI. DDD recognizes these individuals are often not able to qualify for SSI or Medicaid. There is a process to document this situation, which allows the individual with IDD to be eligible for DDD Services. Please email cgriffin@arcnj.org for further information.



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6. How do I ensure my healthcare providers know I am dually covered?

You should bring all health insurance identification cards when you visit a doctor, hospital, pharmacy, lab, or other provider. In showing your private insurance and Medicaid ID cards, you should not be held responsible for most payments, but you may still have a co-pay or need to pay a portion of the remaining bill.

7. What should I know about the New Jersey Medicaid system?

In New Jersey, the Medicaid system is known as NJ FamilyCare. Everyone who has Medicaid is required to be enrolled with a Medicaid managed care organization (MCO), otherwise known as an HMO or health plan. Currently, there are 5 Medicaid MCO health plans in New Jersey:

- 1. Aetna Better Health of New Jersey**
- 2. Wellpoint**
- 3. Horizon NJ Health**
- 4. United Healthcare Community Plan**
- 5. Fidelis Care**

Within a couple of weeks of being eligible for Medicaid, an individual will need to select a Medicaid MCO, or, if a selection is not made quickly, the person will be auto-assigned. However, if they want to switch to another MCO, they may do so without any penalty by calling 1-800-701-0710. For further information, please visit the NJ FamilyCare website:

njfamilycare.dhs.state.nj.us/choos.aspx

8. Can a person with IDD remain on a parent's group health insurance after the age of 26?

All young adults can continue to be covered on their parents' private group health insurance until the age of 26. But, when young adults have a disability, they may be able to remain on their parent's fully insured group health plan after age 26. To qualify for continuation of the parent's private group health insurance, the young adult child must be incapable of self-sustaining employment by reason of the disability and must remain chiefly dependent on the parent(s) for support and maintenance. Proof of incapacity must be furnished to the health insurance plan before the date on which the dependent coverage would normally end. It is suggested that the parent contact the health insurance administrator at their place of employment at least a few months prior to their child's 26th birthday to obtain the proper forms and submit the necessary documentation in a timely manner.

If you have questions, please contact **Connor Griffin, Director of Health Care Advocacy**, at cgriffin@arcnj.org.