



What if my DCF notice says my Medicaid is ending, but I am disabled?

With the end of the pandemic-related moratorium on Medicaid terminations, hundreds of thousands of Florida Medicaid recipients have received (or will receive) notice that their coverage is ending. As this [video](#) explains, the vast majority of those losing Medicaid eligibility are adults in a “family-related” Medicaid coverage group. This includes low-income parents and caregivers who are being terminated because the [income limit](#) for that coverage group is very low and they are now [over income](#), or because they no longer have a [minor child](#). Youth [age 19-20](#) are also being terminated because they have the same very low income limit as parents/caregivers.

However, some adults losing “family-related” coverage may still be eligible for Medicaid if they are disabled. In certain circumstances, you may be able to stay on Medicaid while your disability application is pending.

1. What is the standard for disability, and how do I apply for benefits? A qualifying disability must prevent you from working for at least 12 months or be expected to result in death. You can find more information about Supplemental Security Income ([SSI](#)) and Social Security Disability Insurance (SSDI) and how to apply on the Social Security Administration (SSA) [website](#). If you think you have a qualifying disability, you must apply for disability benefits with the SSA and let DCF know.

2. How do I let DCF know that I have applied for disability? You can report your disability application to DCF when renewing your Medicaid application. If you do not need to renew your application, you can still report your SSA disability application in your ACCESS account. Once logged into your account, select “Report My Changes” at the top of the screen, then select “Someone had a change in disability status” on the next screen.

3. Can I stay on Medicaid if SSA has denied my disability application? You can stay on Medicaid in certain circumstances (described in paragraph 4), and if you appeal before the end of your Medicaid as described in paragraph 6. DCF uses the same criteria as SSA to determine disability for Medicaid eligibility. Thus, if you have already applied for disability benefits with SSA and have been denied, DCF’s general position is that it does not need to do an independent disability determination and your Medicaid will be terminated. BUT THERE ARE EXCEPTIONS.

4. What are the exceptions requiring DCF to make an independent disability determination? The exceptions include:

- (i) You have a disabling condition **different from or in addition** to what was considered by SSA,

(ii) You received an SSA determination **more than 12 months ago**, but your disabling condition has changed or deteriorated and you have not reapplied to SSA for a redetermination, or

(iii) You received an SSA determination **less than 12 months ago**, but your disabling condition has changed or deteriorated and

A. You applied to SSA for reconsideration or reopening of its denial, and SSA refused to consider the new allegations, or

B. You no longer meet other SSI criteria, such as income or assets.¹

5. What should I do if I meet an exception? If you think you meet one of the exceptions, you should **inform DCF and file an appeal of your Medicaid termination**. When reporting a change in your ACCESS account, you will be asked to complete the screen titled “Disability Details.” However, the screen does not include prompts for each of the exceptions discussed above in paragraph 4. If you need help explaining your exception to DCF, you should contact your local legal aid program for assistance ([this link](#) has program contact information).

6. If I have a new disability application, or meet an exception after having been denied, can I appeal my Medicaid termination as a parent/caregiver or 19/20-year-old and stay on Medicaid? Yes. If you submit your hearing request **before** the date the notice says Medicaid benefits will end, coverage will continue at least until the hearing decision. ([This link](#) has more information). For example, you receive a notice dated July 20, 2023 stating that your Medicaid is ending on July 31, 2023 because you no longer have a minor child. However, you believe you meet the income requirement for [SSI-related Medicaid](#) and have a qualifying disability. If you apply for disability and file your appeal before July 31, your Medicaid should continue at least through your appeal.

7. What if I don’t appeal before the date that Medicaid ends? You can still submit a hearing request after your benefits end, **up to 90 days after the date at the top of the notice** (not the date the benefits ended). Your benefits will end on the date stated in the notice but will be reinstated if you win the appeal. It is important to file an appeal if you incur medical bills. The only way to ensure reimbursement is if you successfully appeal.

8. How can I get advice or assistance with my appeal? You can contact a legal aid program in your area ([this link](#) has program contact information). Or you can submit this [online form](#) and send a copy of your Medicaid termination notice and latest SSA denial notice to the Florida Health Justice Project at help@floridahealthjustice.org.

¹ 42 C.F.R. § 435.541(c)(4)(i)-(iii); See also ESS Manual Sections 1440.1204-1205.