

JUSTICE IN AGING

FIGHTING SENIOR POVERTY THROUGH LAW

The Qualified Medicare Beneficiary Program—An Update for Advocates (II)



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- All on mute. Use Questions function for substantive questions and for technical concerns.
- Problems with getting on to the webinar? Send an e-mail to trainings@justiceinaging.org.
- Slides and a recording are available at Justice in Aging - Advocates Resources - Trainings: justiceinaging.org/resources-for-advocates/webinars. See also the chat box for this web address.

JUSTICE IN AGING

FIGHTING SENIOR POVERTY THROUGH LAW

Justice in Aging is a national organization that uses the power of law to fight senior poverty by securing access to affordable health care, economic security, and the courts for older adults with limited resources.

Since 1972 we've focused our efforts primarily on populations that have traditionally lacked legal protection such as women, people of color, LGBT individuals, and people with limited English proficiency.

Diversity, Equity, and Inclusion

To achieve Justice in Aging, we must:

- Acknowledge systemic racism and discrimination
- Address the enduring negative effects of racism and differential treatment
- Promote access and equity in economic security, health care, and the courts for our nation's low-income older adults
- Recruit, support, and retain a diverse staff and board, including race, ethnicity, gender, gender identity and presentation, sexual orientation, disability, age, economic class

Today's Topics

QMB enrollment paths

Redeterminations

Advocacy opportunities

Emerging issues

QMB Recap

- Medicaid program
- Benefits:
 - Medicare Part B premium, Part A premium (if needed)
 - Medicare co-insurance, co-pays, deductibles
 - Protection from improper billing
- QMB-plus: full Medicaid and QMB
- QMB-only: qualify for QMB but not other Medicaid benefits



Paths to Enrollment

Polling Question

- In the past year, how often have you seen clients who should have been QMB but had not been screened or enrolled?
 - Frequently
 - Sometimes
 - Infrequently
 - Never

Paths to QMB Enrollment

- Apply for Medicaid (or just for Medicare Savings Programs)
- Apply for Extra Help
- Automatic with SSI eligibility
- Review when losing full Medicaid

Application Issues: Screening

- Has your client been screened for all Medicaid benefits, including MSPs?
 - Gets full Medicaid but not screened for MSPs
 - Doesn't qualify for full Medicaid and no review for MSPs
 - Qualifies for share of cost spenddown but not screened for MSPs
- Is your client fearful of estate recovery? No estate recovery for MSPs

Application Issues: Screening (cont.)

- Screening gaps are often systemic
- Single client issue rarely is the only one
- Raise the problem with your state to investigate the cause
- Tell Justice in Aging

Application Issues: Income and Asset Counting

- You can't spend down to QMB
- State may require full Medicaid application
- Asset verification requirements more demanding than for Part D Extra Help
- Some states do not include dependents in household size

Application Issues: Timing

- In all states: if you have premium-free Part A, you can apply for QMB anytime
 - Benefit will start first day of month following approval date
 - No retro coverage for QMB. SLMB and QI have retro
- In most states (“Part A buy-in” states), even if you do not qualify for free Part A, you can apply anytime
- Asset verification requirements more demanding than for Part D Extra Help

Application Issues: Timing in “Group Payer” States

- 14 states are Group Payer states: AL, AZ, CA, CO, IL, KS, KY, MO, NE, NJ, NM, SC, UT, and VA
- Steps
 - Apply for “conditional” Part A at SSA between Jan. 1—Mar. 31
 - Apply for QMB with state
 - QMB coverage doesn’t start until July 1
- SSA instructions provide a roadmap
- Exception: if in Initial Enrollment Period (newly eligible for Medicare), can get coverage right away

Example: Mrs. Lopez

- Lives in New Jersey, a Group Payer state
- Limited work history—doesn't qualify for free Part A
- Enrolled in Part B
- Assets—\$1,800
- Countable income—\$950/mo.

Mrs. Lopez

1. Goes to SSA on August 3. Is told to come back Jan.1—Mar. 31. Returns Feb. 5 and applies for “conditional” Part A and Part B.
2. Asks for a screenshot of the application.
3. Goes to her state Medicaid office on Feb. 6 and applies for QMB.
4. Her application is approved Feb. 20.
5. Her QMB coverage begins Jul. 1.

Application Issues: Timing

- Two month lag in SSA taking Part B premiums from Social Security check
- Longer lag if any bumps or if state does not transfer files frequently enough
- Possible lag in LIS as well

Prepare your client!

Automatic Enrollment if SSI Eligible: Issues

- Almost all SSI recipients should qualify for QMB as well as full Medicaid.
- Medicaid enrollment route may bypass case worker
- Screening may not be complete
- Check on client's QMB status

Note: many SSI recipients don't have premium-free Part A. QMB benefits are important!

LIS → MSP: MIPPA Process

- Individual applies for LIS (Extra Help). SSA verifies info, makes decision
- SSA sends name, application date and verified info to the state, whether or not LIS approved
- State must send application to beneficiary
 - Can prepopulate with info from SSA
 - Can accept verified information
- LIS application date is used for state application

LIS → MSP: Issues

Should an individual apply for LIS and MSP together or apply for LIS first and wait?

- Many advocate and counselors routinely urge applying together
- Some issues with maintaining app date and attaching to verified info

What works in your state?



Redeterminations

Review When Losing Full Medicaid

- Lose expansion Medicaid when turn 65
 - Client must supply asset info
 - Income counting different from MAGI
- Lose Medicaid because of change in income or assets or loss of eligibility for a waiver program

Does your state do a full review of MSP eligibility?

Redetermination Foul-ups

- State computer systems errors leading to problems.
 - Georgia: Didn't send redetermination notices when due then sent two or three years worth all at once
 - Rhode Island: Multiple problems
 - GA and RI both have the same computer system



Advocacy Opportunities

Be On the Lookout for Systems Issues

- Systemic problems often come to light through one example
- Tell the state and tell us
- “Glitches” are rarely one-off events

If you see something, say something!

Advocate With Your State for QMB Simplification

- Prepopulated applications for people referred through LIS
- MSP-only applications
- Become a Part A buy-in state

Advocate With Your State for QMB Expansion

- Remove asset test
- Raise income limits
 - Coordinate with Marketplace subsidy level
 - Coordinate with expansion Medicaid level (138% FPL)
- Coordinate with Part D LIS counting: no counting of in-kind income, no counting of cash value of modest life insurance; accept burial set aside without documentation



Emerging Issues

QMB-Only's in D-SNPs

- Core role of D-SNPs is to help dual eligible navigate Medicare and Medicaid benefits
- QMB only's have no Medicaid benefits other than premium and co-insurance protection
- They get billing protection in any Medicare Advantage plan
- Is D-SNP enrollment a good idea for your client?
 - Often little benefit
 - Sometimes useful supplemental benefits

D-SNP Look-Alikes

- Regular Medicare Advantage plans. High Part D deductibles, high out of pocket limits. Only appeal to eligibles. Heavily marketed.
- Not regulated as D-SNPs. No state contract, no requirement to coordinate Medicaid benefits.

D-SNP Look-Alikes (cont.)

- In 35 states. Biggest enrollment in CA and FL. More next year?
- Can divert duals from genuinely integrated products

Read our issue brief!

Additional Resources

- JusticeinAging.org
- National Center for Law & Elder Rights: ncler.acl.gov
- NCOA, MSP Eligibility chart www.ncoa.org/wp-content/uploads/medicare-savings-programs-coverage-and-eligibility.pdf
- Justice in Aging, SSA Clarifies Handling of Medicare Part A Conditional Applications, www.justiceinaging.org/wp-content/uploads/2018/08/SSA-Clarifies-Handling-of-Medicare-Part-A-Conditional-Applications.pdf

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