- Par.1. Material Transmitted and Purpose Transmitted with this Manual Letter are changes to Service Chapter 510-05-60
- Par. 2. **Effective Date** Changes included in this manual letter are effective on or after August 1,2023 unless otherwise indicated.

#### Policy Chapter 510-05-60

- 1. Reorganized and replaced sections 510-05-60-05 and 510-05-60-10
- 2. Medicare Part B-ID has been added to the coverages under the Medicare Savings Program

# **General Information (Medicare Premium Assistance)** Program) 510-05-60-05

<u>Individuals entitled to enroll in Medicare need to apply for Medicare through</u> Social Security if they have not done so. The following are individuals who need to apply for Medicare with Social Security

- Individuals turning 65
- Individuals who have been disabled for 24 months
- Individuals with End Stage Renal Disease (ESRD)
- Individuals with (ALS) (Lou Gehrig's disease)

All individuals eligible for Medicare should be tested to determine if Medicaid can pay the Medicare Premium.

Note: Medicare is not an earned right benefit. A Medicaid application or coverage cannot be denied for failure to apply for Medicare.

If the individual has applied for Medicare and has either Medicare Part A, Conditional Medicare Part A or Medicare Part B, they do not need to go to Social Security to apply again.

• A Medicare coverage start date will need to be added as of the date North Dakota can pay the Medicare premium for Medicare Part B or Part A. See job aid for Medicare details screen.

There are two ways an individual can receive assistance with their Medicare premiums and Medicare costs.

## 1. Medicare Savings Programs (MSP)

- Is the primary coverage for individuals with free Medicare Part A or premium Medicare Part A.
- MSP is available to assist with Medicare premiums and costs sharing for people with limited income and assets.
- The program includes coverage of Qualified Medicare Beneficiaries, Specified Low-income Medicare Beneficiaries (SLMB), Qualifying Individuals (QI), Qualified Disabled Working Individuals (QDWI) and Medicare Part B-ID.
- Individuals eligible for MSP should not have their coverage closed unless:
  - They are over income; or
  - They are over assets; or
  - They are QI and requesting Medicaid coverage; or
  - o They become eligible for Medicaid and have coverage as Part B-ID. The Part B-ID coverage needs to close.

**Note:** An individual cannot voluntarily terminate from the Premium Assistance Program

**Note:** Medicaid should not be automatically closed when an individual becomes eligible for QMB or SLMB. They may have services not covered under Medicare that can be paid by Medicaid.

## 2. SSI Buy-in program

 SSI income eligible individuals who are eligible for Medicare Part B only.

**Note:** An individual cannot be covered under SSI Buy-In and Medicare Savings Programs for the same time.

# **Medicare Premium Assistance Program-Individuals Covered and** Benefits 510-05-60-10

(N.D.A.C. Sections 75-02-02.1-22(1) and 75-02-02.1-10)

#### SSI Buy-in

This coverage is for individuals who have SSI income and Medicare Part B only

# Medicare Savings Program (MSP)

- 1. Qualified Medicare Beneficiaries (QMB) eligible individuals must have Medicare Part A and meet the following conditions:
  - Are entitled to payment of Medicare Part B, and/or
  - Payment of premium Part A for individuals who:
    - 1. Are over 65 eligible for SSI income (with no Medicare Part A); or
    - 2. Lose SSI income and are no longer eligible for SSI buy-in; or

- 3. Have requested North Dakota Medicaid to pay the Medicare Part A premium; or
- 4. Have Medicare Part A coverage because another state was paying the premium for Part A and the individual is now a resident of North Dakota; or
- 5. Are over 65 not eligible for SSI buy-in (no SSI income), do not have free Medicare Part A or have any means to pay (no income or very low income) for Medicare Part A or Part B premiums; or
  - <u>a.</u> Will need to apply for "Conditional Medicare Part A" through Social Security if they have not already done so.
- Are entitled to Medicare cost sharing benefits beginning the month following the month the individual is determined eligible.
  - Example 1-Application received March 29<sup>th</sup>. Eligibility processed in the system on May 1<sup>st</sup>. Individual is determined eligible for the month of March with QMB coverage starting April 1<sup>st</sup> (the month after the month the individual is determined eligible).
  - Example 2-Application received February 15<sup>th</sup>. Individual is requesting three prior months. The application is processed March 1<sup>st</sup>. The individual is eligible for QMB in February, with QMB coverage starting March 1<sup>st</sup> (the month after the month the individual is determined eligible). The individual is within the income level for QMB in the three prior months however, eligibility for QMB cannot be established for the three prior months.
- Individuals ongoing eligible for Medicaid, who become eligible for Medicare, QMB can start the month Medicare starts if the individual is eligible for QMB in the month prior to the month Medicare starts.

- The individual does not need to apply for MSP, the worker will process an Ex parte review and add MSP.
- o Example-Henry is eligible for Medicaid since May 2020. He becomes eligible for Medicare July 2022. Henry is determined eligible for OMB in June 2022 with OMB coverage starting July 2022.
- 2. Specified Low-Income Medicare Beneficiaries eligible individuals must have Medicare Part A and meet the following conditions:
  - Are entitled only to payment of their Medicare Part B premium
  - Eligibility may be established for as many as three calendar months prior to the month in which the application was received or the date SSA received the Low-Income Subsidy application.
    - o If the individual only has Medicare Part A, Part B can be added with a coverage start date of when ND can pay the Part B premium.
- 3. **Qualifying Individuals (QI)** eligible individuals must have Medicare Part A and meet the following conditions:
  - Are entitled to only payment of their Medicare Part B premium.
  - Eligibility may be established for as many as three calendar months prior to the month in which the application was received or the date the SSA received the Low-Income Subsidy application.
  - Cannot be in receipt of any other Medicaid coverages for the same time period.
    - o A QI individual can request coverage for the other Medicaid benefits, and eligibility can be established, only if the QI individual repays the Medicare premium(s) payment received

for the month(s) the other Medicaid benefits are needed. Medicaid benefits can only be authorized after the Medicare premium(s) payment have been repaid.

o When a recipient needs to repay Medicare premiums, a check or money order can be made payable to the "Dept of Health & Human Services" and collected by the Zone. The Zone office must forward the check or money order to the Finance Division of the ND Dept of Health & Human Services with a completed Medicaid credit form, SFN 828. A copy of the form can be found at 05-100-05.

**Note:** Each year the federal government allocates a set amount of funds that can be used to provide coverage for OI individuals. In the event the allocation for North Dakota is exhausted in any given year, current recipients remain eligible, but additional person(s) cannot be added.

- 4. Qualified Disabled Working Individuals (QDWI) eligible individuals must meet the following conditions.
  - Are entitled to payment of Medicare Part A premium only.
  - Individuals who are:
    - Under 65 years old,
    - Working,
    - Lost their premium-free Medicare Part A due to returning to work,
    - Are receiving medical assistance and meet the income and resource limits.
  - Coverage for QDWI began July 1,1990

**Note:** SPACES is not set up to accommodate this coverage in the system. Any inquiries for this coverage, send request to DHHS Medicaid Policy hccpolicy@nd.gov with ODWI in the subject line.

#### 5. Part B-ID eligible individuals must meet the following conditions:

- Are entitled to coverage for Medicare Part B-ID premium only.
- Have been in receipt of Medicare coverage under Medicare End Stage Renal Disease (ESRD) entitlement which is ending 36 months after a successful transplant.
- Cannot have any other coverage under Medicaid.
- Coverage for this group began January 1, 2023

**Note:** Social Security determines if an individual is eligible for Medicare

Part B-ID

Note: SPACES is not set up to accommodate this coverage in the system. Any inquiries for this coverage, send requests to DHHS Medicaid Policy unit at hccpolicy@nd.gov with Part B-ID in the subject line.

# **General Information (Medicare Premium Assistance Program) 510-05-60-05**

Individuals need to apply for Medicare through Social Security if they have not already done so. If the individual has applied for Medicare and has either Medicare Part A or Medicare Part B, they do not need to go to Social Security to apply again.

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There are two ways an individual can receive assistance with their Medicare premiums and Medicare costs.

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- 1.—The SSI Buy In program is for SSI individuals who may qualify for assistance with their Medicare Part B premiums.
- 2.—The Medicare Savings Programs (MSP) is the primary coverage for individuals with free Medicare Part A or requesting Medicaid to pay the Medicare Part A premium. MSP is available to assist with Medicare premiums and costs for people with limited income and assets. These programs include coverage of Qualified Medicare Beneficiaries (QMB), Specified Low income Medicare Beneficiaries (SLMB), and Qualifying Individuals(QI).

# **Individuals Covered and Benefits 510-05-60-10**

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Individuals who are in receipt of SSI income and have Medicare Part B only will be determined eligible under the SSI Buy In program. Individuals in receipt of SSI or SSI/SSA who have free Medicare Part A and Part B or have requested Medicaid to pay the Medicare Part A, will be processed under the Medicare Savings Program (MSP). An individual cannot be covered under SSI Buy In and Medicare Savings Programs for the same time period. The Medicare Savings program is the primary coverage for individuals who could qualify under both programs.

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If the individual loses SSI, they will need to be processed under the Medicare Savings Program. If eligible for QMB, the Medicare Part A will need to be added effective the month QMB eligibility starts.

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Individuals over 65 who are eligible for SSI and are not eligible for free Medicare Part A can request North Dakota Medicaid pay the Medicare Part A premium for them. The individual will need to be eligible for MSP/QMB to cover their Medicare Part A premiums. If the individual has applied for Medicare and has Medicare Part B, enter the Medicare Part A start date on the MEPO screen. Medicare Part A start date will be the date the state can start paying the Medicare Part A. This is based on when the individual is eligible for QMB. The individual will not need to apply for Medicare Part A at Social Security. If the individual does not have Medicare, refer them to Social Security to apply for Medicare.

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Individuals over 65 who have no eligibility for SSI and are not eligible for free Medicare Part A can apply for Medicare Savings Program-Qualified Medicare Beneficiaries (QMB) to cover their Medicare premiums. The individual will need to apply for Medicare at Social Security. They will need to request Medicare Part A "conditional enrollment". Conditional enrollment allows an individual to apply for premium Medicare Part A at SSA on the condition he or she only wants the coverage if the state approves their QMB application. Medicare Part A start date will be the date the state can start paying the Medicare Part A.

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Individuals eligible for Medicare Savings Program should not have their Medicare Savings Program coverage closed unless:

- They are over income or
- They are over assets or
- They are QI 1 and requesting Medicaid coverage.

**Note:** An Individual cannot voluntarily terminate form the Premium Assistance Program.

Medicaid should not be automatically closed when an individual becomes eligible for QMB or SLMB. They may have services not covered under Medicare that can be paid by Medicaid.

Individuals must have Medicare Part A to be eligible under the following Medicare Savings Program coverages.

- 1.—Qualified Medicare Beneficiaries (QMB) are entitled to payment of Medicare Part B. QMB can also pay Medicare Part A if the individual does not have free Part A. QMB eligible individuals are entitled only to Medicare cost sharing benefits beginning in the month following the month in which the individual is determined eligible.
  - Application received March 29th. Eligibility worker processes the application on May 1st. The eligibility worker determines the client is eligible for QMB starting with March, QMB will begin April 1st. (the month after the month the individual is determined eligible)

Application received February 15th and individual is requesting three prior months. The eligibility worker processes the application on March 1st. The eligibility worker determines the client is eligible for QMB starting with February, QMB will begin March 1st. (the month after the month the individual is determined eligible) The individual falls within the income level for QMB in the three prior months, however eligibility for QMB cannot be established for the three prior months.

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- Ongoing eligible Medicaid recipients who become eligible for Medicare, QMB can start the month Medicare starts if the individual is eligible for QMB-
  - •—The individual does not need to apply for MSP, the worker will process a review on the case.
- 2.—Specified Low Income Medicare Beneficiaries (SLMB) are entitled only to payment of their Medicare Part B premium. Eligibility may be established for as many as three calendar months prior to the month in which the application was received or the date the Social Security Administration received the Low Income Subsidy application.
- 3. Qualifying Individuals (QI) are entitled only to payment of their Medicare Part B premium. Eligibility may be established for as many as three calendar months prior to the month in which the application was received or the date the Social Security Administration received the Low Income Subsidy application. A review of eligibility is required in December of each year to establish continued eligibility for the coming year.

Qualifying Individuals cannot be in receipt of any other Medicaid benefits for the same time period. A Qualifying Individual can request coverage for other Medicaid benefits, and eligibility can be established, only if the Qualifying Individual repays the Medicare cost sharing benefits received for the month(s) the other Medicaid benefits are needed. Medicaid benefits can only be authorized after the Medicare cost sharing benefits have been repaid.

When a recipient needs to repay Medicare cost sharing benefits, a check or money order can be made payable to the "North Dakota Department of Human Services" and collected by the county agency. The county agency must forward the check or money order to the Finance Division of the North Dakota Department of Human Services with a completed Medicaid credit form, <u>SFN 828</u>. A copy of the form can be found at 05–100–55.

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Each year the federal government allocates a set amount of funds that can be used to provide coverage for Qualifying Individuals. In the event that the allocation for this state is exhausted in any given year, current recipients remain eligible, but additional persons cannot be added.

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4. Qualified Disabled Working Individuals (QDWI) are entitled to payment of their Medicare Part A premium only. To be eligible the individual needs to be under 65 years old, working, has lost their premium free Medicare Part A due to returning to work, are receiving medical assistance and meet the income and resource limits. (The eligibility determination for this group will temporarily be done by the Medicaid Eligibility Division of the North Dakota Department of Human Services.) Coverage for this group began July 1, 1990.