

Medicare Savings Program Medicare Buy In Process



If you live in Connecticut and are eligible for Medicare Part A but can't afford the monthly premium, there's a program that can help. You may be able to get free Part A through the Part A Buy-In process.

Part A is Medicare hospital insurance. Part A pays for stays at hospitals and skilled nursing facilities. Most people get it automatically when they turn 65 years old or have received Social Security Disability Insurance for two years.

It's usually free, but people age 65 or older who don't have 10 years of work experience must pay a monthly fee (called a premium) for Part A.

If you're approved for the Part A Buy-In, you'll get help paying for Part A. You'll also get help paying for certain doctors' visits and prescription drugs. Even people who don't have Medicare yet can apply for the Buy-In, as long as they're eligible for Medicare.

To qualify for the Medicare Part A Buy-In, you must:

- be at least 65 years of age
- currently live in the United States
- be a U.S. citizen
- if you aren't a U.S. citizen, you must be a lawful permanent resident (have a green card) and have lived in the United States at least 5 years in a row before applying
- have income no higher than \$2,245.04 per month (\$3,032.07 for a couple) effective March 2020
- **and** have or be in the process of getting Medicare Part B. Part B is insurance for outpatient care, such as doctors' visits.

Note: You can qualify for the Part A Buy-In even if you have Medicaid.

If you're accepted for the Part A Buy-In, you'll get:

- **Medicare Part A** (hospital insurance)
- **Medicare Part B** (medical insurance) - You can enroll in Part B and have your Part B premiums paid for by the state. See the guide on the following pages.
- **Medicare Part D** (prescription drug insurance)
- help paying for Parts A and B through the **Qualified Medicare Beneficiary (QMB)** program
- help paying for Part D through the **Extra Help** program (Low Income Subsidy)

Note: You may already be in some of the programs listed above. You can still apply for the Part A Buy-In.

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This project was supported, in part by grant numbers 1802CTMIDR-01 and 90SAPG068-01-02 from the U.S. Administration for Community Living, Department of Health and Human Services Washington, D.C. 20201.

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Basic Steps to the Part A Buy-In

1. Enroll in Medicare Part B and conditional Part A at your local Social Security office.

Because you're getting the Medicare Part A Buy-In, you can enroll in conditional Part A and Part B any time during the year. It's called **conditional Part A** because you only get Part A when you enroll in the Qualified Medicare Beneficiary program (QMB). QMB is a program that helps you pay for Medicare Parts A and B.

If you already have Part B, skip to Step 2. You know you have Part B if you have a red, white and blue Medicare card that says "Medical (Part B)."

2. Go to your local Medicaid (Department of Social Services) office with proof that you have Part B* and:

- Get screened for the Medicare Part A Buy-In; **and**
- Apply for the Qualified Medicare Beneficiary program (QMB).

You can use your Medicare card or your receipt from the Social Security office to prove you have Part B.

***Individuals can also receive assistance with this process from CHOICES.**

3. You will automatically get Extra Help (also referred to as the Low Income Subsidy).

When you get QMB, you also get Extra Help. Extra Help is a federal government program that pays most of the costs of Part D drug coverage. If you do not have a plan already, you can show your letter from the Department of Social Services of your eligibility for the QMB program to your pharmacist, as "best available evidence" that you are entitled to Extra Help. Your pharmacist can enroll you into a temporary Medicare Part D plan called LINET. This will allow the pharmacist to give you medications at lower co-pays (in 2021: \$9.20 for brand drugs and \$3.70 for generic drugs). You will get a letter explaining your options from the federal government. We suggest you contact CHOICES for help in selecting a Medicare Part D plan. If you have not enrolled in a Medicare Part D plan within two months, the federal government will enroll you in one, but it might not meet your needs.

4. Mark your calendar to recertify your QMB in about 9 months.

You need to fill out the forms to renew your QMB every year to keep getting help paying for Medicare. If you have Medicaid, you should recertify for QMB at the same time you recertify for Medicaid each year. If you don't get the renewal forms in the mail, contact the Department of Social Services benefit line at 1-855-626-6632. You may be automatically renewed through a "passive renewal" process. If that is the case, you will receive a letter telling you this happened. **See the attached packet for a detailed guide to the Medicare Part A Buy-In. It tells you where to go and what to do. It also tells you what paperwork to bring to the Social Security and Medicaid offices.**

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See the attached packet for a detailed guide to the Medicare Part A Buy-In. It tells you where to go and what to do. It also tells you what paperwork to bring to the Social Security and Medicaid offices.

Step-by-Step Guide to the Part A Buy-In

Use this guide when you apply for the Medicare Part A Buy-In. Just follow these simple steps to get help paying for Medicare Part A (hospital insurance) and Medicare Part B (medical insurance).

Be sure to follow the steps in the correct order and use the materials in this packet. When you're done, you'll also have Medicare Part D prescription drug insurance and you'll get help paying for Part D through the Extra Help program.

If you're not sure whether you qualify for the Buy-In, read the first page in this packet.

Before you start

As you follow these steps, remember to keep good notes. Write down all important information such as:

- the name and phone number of the person helping you (counselor/friend/family)
- names and phone numbers of Social Security and Medicaid staff who help you
- dates when you go to the Social Security and Medicaid offices

1. First you must have Medicare Part B. If you don't have Part B, apply for it and conditional Part A at the Social Security office.

If you already have Part B, skip to Step 2 on the other side of this page.

Before you go to the Social Security office, collect these materials:

- Proof of date of birth (passport, birth certificate or state ID)
- Proof of all types of income, earned and unearned (recent pay stubs, pension statements, tax returns, proof of Social Security benefits)
- Proof of U.S. citizenship or lawful residence (passport, permanent resident card, or U.S. birth certificate)
- Copy of Social Security card
- Letter #1 from this packet

While you're at the Social Security Office:

- Ask to enroll in conditional Part A and Medicare Part B
- Show the representative Letter #1 from this packet
- Get a copy of your Application for Supplemental Medical Insurance. (Supplemental Medical Insurance (SMI) is another name for Part B.)

Don't leave the Social Security office until you have applied for conditional Part A and Part B. You should get a receipt or a "screen shot" of your enrollment. In four to six weeks, you'll get a red, white, and blue Medicare card in the mail that says "Medical (Part B)."

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2. Once you have Part B, go to the Medicaid office to be screened for the Medicare Part A Buy-In. You can also attach your proof to the MSP application if you are applying by mail or attach this proof if you are applying online at www.connect.ct.gov. Apply for the Medicare Savings Program called QMB. Please make sure your name on the application is listed in the same way as it is listed with Social Security or on your Medicare card.

Bring these materials to the Medicaid Department of Social Services office:

- Proof that you have Part B (your Medicare card or a copy of your Part B enrollment receipt)
- Proof of address (your license, state client ID or a bill)
- Copy of Social Security card
- Proof of all forms of income, earned and unearned (recent pay stubs, pension statements, Social Security statements or tax returns)
- Letter #2 from this packet

While at the Medicaid Department of Social Services office:

- Ask to be screened for the Medicare Part A Buy-In and to apply for QMB
- Show the Medicaid staff person Letter #2 from this packet
- Get proof of your application for QMB and the Medicare Part A Buy-In

Don't leave the office until you've completed your application for both QMB and the Part A Buy-In.

3. You'll automatically get Extra Help.

When you're approved for QMB, you'll get Extra Help. Extra Help is a government program that pays most of the costs of Medicare Part D drug coverage. You must have a Part D drug plan with Extra Help. You'll be enrolled in a Part D plan within a few months unless you choose one yourself or already have one. You'll get a letter in the mail that explains your options.

4. Mark your calendar.

In about nine months, you'll get a form in the mail to recertify for QMB. **Some people will get a letter in the mail that they have been renewed by DSS. If you get one of these letters, you only need to fill out the renewal if your finances or address has changed. Others will be sent a form and told they must sent in a renewal form. If you don't fill out your renewal, you'll lose QMB and will have to pay for Medicare Parts A and B yourself.**

If you don't get the form in the mail, call the DSS Benefits Center at 1-855-626-6632.

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SAMPLE LETTER #1

Date: _____

Social Security Office

Dear Sir/Madam:

I would like to enroll in Supplemental Medical Insurance (SMI) (Medicare Part B) and conditional Part A so I can be considered as a potential **Part A Buy-In/QMB** applicant. Once I have enrolled in SMI and conditional Part A, I will file for QMB and the Part A Buy-in at the Department of Social Services. Below, please find the citation from the SSA Program Operations Manual System (POMS) which explains how I am eligible to enroll in SMI outside of the General Enrollment Period at any time throughout the year.

I would like to have my SMI enrollment request processed and I need a copy of my application to take with me to the Department of Social Services as proof that I have filed for SMI.

Thank you very much for your assistance. Please call the State Unit on Aging CHOICES program at 1-866-218-6631 for more information.

EM-08071 REV Processing Instructions - Premium HI for Individuals in Part A Buy-In States who do not have Medicare Part B – POMS Instructions Will Follow Shortly 8/11/2008 HI 00801.134, HI 00801.138, HI 00801.139, HI 00801.140, HI 00815.023, SM 00850.355, SM 00850.700, SM 03040.025

In Part A buy-in states, some low income individuals that appear eligible for Medicare Part A and Part B buy-in as qualified Medicare beneficiaries (QMB) are experiencing difficulty enrolling in Part B at their local Social Security offices. QMB's are individuals who are eligible for Medicaid payment of their Medicare premiums, deductibles, and coinsurance. The confusion seems to occur with individuals who want to file for Premium Part A, do not have Part B, and are outside of an enrollment period.

If an individual contacts the field office (FO) and appears to meet the QMB eligibility requirements, resides in a Part A buy-in State, wishes to file for Premium Part A, and does not have Part B, the individual may file an application for Part B and conditional enrollment in Premium Part A. Since the individual resides in a Part A buy-in State, the application does not have to be filed in an enrollment period; it may be filed at any time. Beneficiaries are allowed to complete the conditional application process if they owe Medicare premiums.

Currently, MCS will not accept a Part B and conditional Part A enrollment filed outside of an enrollment period for an individual who resides in a Part A Buy-in State. MCS will generate exception message number 20604 – Check BIC M Decision Status – SMI Application Not in Enrollment Period. To address this exception, the FO needs to input the claim into MCS and then prepare an A101/EF101 for the Part B and conditional Part A award when the exception is received. Provide a screen shot of the enrollment to the beneficiary as proof of conditional enrollment for the QMB program.

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NOTE:

Refer the individual to the appropriate State office to file for QMB benefits. Emphasize the importance of promptly contacting the State. The individual may be billed for Part B premiums until state buy-in begins.

If the enrollee does not contact the State and does not pay the Part B premiums when billed, Part B will terminate for nonpayment of premiums (HI 00820.035). Conditional Premium Part A will not generate a bill.

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SAMPLE LETTER #2

Date: _____

Department of Social Services

Dear Sir/Madam:

I am now enrolled in Medicare Part B. I would like to be assessed for the **Medicare Part A Buy-In** and file a QMB application. Below, please find the citation referencing this process from the Connecticut CHOICES program. I currently meet all of the state's requirements listed in this document as follows:

- I am either an SSI cash recipient or my income is below 211% of the FPL;
- I currently reside in the U.S. and am a U.S. citizen or, if not a U.S. citizen, I have am a permanent U.S. resident having lived continuously in the U.S.
- I am age 65 or older;
- I am enrolled in Part B; and
- I have a Medicare number

Thank you very much for assistance. Please call the State Unit on Aging CHOICES program at 1-866-218-6631 for more information.

SUBJECT: Medicare Part A Buy-In

There are some individuals who are eligible for Medicare Part B, but do not have enough work quarters to qualify for free Medicare Part A. For those individuals who have Medicare Part B and meet the income and resource requirements of the Qualified Medicare Beneficiary Program (QMB), states may purchase Part A coverage on their behalf.

Under the Part A buy-in, individuals obtain Part A coverage when the local district approves them for QMB and accretes them to the Part A Buy-in system. Individuals accreted by the State to the Part A buy-in will appear on your buy-in list and will be coded as a QMB. You will be able to identify such individuals as they will have a "63" accretion code.

Such individuals:

- Are age 65 or over;
- have Part B coverage;
- have a Medicare number;
- have income below 211% Federal Poverty Level

Districts must determine if the individual qualifies for Part A buy-in based on the criteria listed above.

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