



*Helping Older Persons With
Legal & Long-Term Care
Problems*

Medicare Savings Programs

1. What Are The Medicare Savings Programs?

The programs are referred to as Medicare Savings Programs (formerly “buy-ins”) and assist certain Medicare eligible individuals with some of the costs of health care. The Ohio Department of Job and Family Services (ODJFS) administers the following premium assistance programs:

- A. Qualified Medicare Beneficiary (QMB)
- B. Specified Low-Income Medicare Beneficiaries (SLMB)
- C. Qualified Individuals-1 (QI-1)
- D. Qualified Working Disabled Individuals (QWDI)

2. Who May Be Eligible?

- A. Individuals age 65 or older who are U.S. citizens or aliens lawfully admitted who are permanent residents, and who have resided in the U.S. continuously for five years preceding the month of application. All applicants must participate in Medicare Part A, and
- B. Be eligible for Medicare Part B or if under 65 years of age:
 - 1.) be receiving Social Security Disability Benefits for 24 consecutive months or
 - 2.) be Medicare Part A eligible because of chronic renal disease.

3. What Are The Financial Requirements To Be Eligible?

The ODJFS uses the same methodologies as in Medicaid to determine if an individual meets the income and resource standards. Income eligibility requirements are based on the federal poverty level which is adjusted annually. New income standards are effective each April. The Cost of Living Adjustments (COLA) are not counted in January, February and March of each year in determining eligibility during those months. The premium assistance program standards are:

	<u>Individual</u>	<u>Couple</u>
1) QMB	\$ 851	\$1141
2) SLMB	\$ 1021	\$1369
3) QI-1	\$1149	\$1540
4) QWDI	\$1702	\$2282

Income cannot be “spent-down” to gain eligibility. Applicants may be dually eligible for a premium assistance program and other Medicaid programs. When determining income eligibility, Medicaid deductions and adjustments (i.e., disregards, income exemptions and deeming) are made to gross income. The premium assistance programs use the resource standard of \$4,000 for the individual and \$6,000 for a couple.

4. What Are The Application Rules?

Applications must be filed with your County Ohio Department of Job and Family Services (CDJFS). You will receive a special card after eligibility is determined; however, the card is valid for only one year. You must reapply once a year to maintain eligibility. You may request an application by telephoning your CDJFS and there is no face-to-face interview requirement.

5. What Are The QMB Benefits?

- A. Payment of Medicare Part B premium, \$93.50 and
- B. Payments for Medicare out of pocket expenses such as deductibles and the 20% of Medicare covered services provided by Medicaid participating providers. QMB is similar to a Medicare Supplemental “Med-Supp” or “Gap-Filler” Insurance.
- C. QMB is effective the first day of the month following the month eligibility is determined and authorized. There is no retroactive QMB eligibility.

6. What Are The SLMB Benefits?

- A. Payment of the Medicare Part B premium, \$93.50, only.
- B. SLMB does not pay any portion of the Medicare coinsurance or deductibles.
- C. SLMB takes effect the month of application provided all eligibility requirements are met. Unlike QMB, SLMB may be retroactive and available for up to three months prior to the month of application. The applicant must meet all eligibility criteria in each of the three months.

7. What Is The Qualified Individual (QI) Program?

The QI-1 program is 100% federally funded on a yearly basis. Eligibility is determined on a first-come first-served basis until all of the State's allocated slots are taken for the calendar year. Each calendar year a new application must be filed and eligibility is determined again.

8. What Are The QI Benefits?

A QI-1 is a Medicare eligible individual who is eligible for payment of his/her Medicare Part B premium only. Eligibility is effective the month of application. Retroactive QI-1 is available for up to 3 months prior to the month of application but not prior to January 1 of each year. All eligibility requirements must be met in each of these months. An individual cannot be dually eligible for QI-1 and other Medicaid programs unless eligible for "Delayed Spend-down" Medicaid or uses the "Pay-In Spend-down" Medicaid option.

9. Who Are Qualified Working Disabled Individuals (QWDI)?

These individuals have lost Social Security disability benefits due to earnings in excess of the substantial gainful activity (SGA) level of \$900 monthly; however, they are permitted to enroll for Medicare Part A. Certain QWDIs are provided Medicaid only for the purpose of paying the Medicare Part A premium.

10. What If I Am Denied Eligibility Or Terminated?

You may appeal to ODJFS by requesting a state hearing within 90 days from the mailing date day on the notice of denial or termination. In a termination of benefits case, if you request the state hearing within 10 days from the date on the mailing notice the department will not terminate your benefits before a state hearing decision is issued. If your benefits are not granted or restored at a state hearing you may file a "paper" appeal with the Appeals Council, Office of Legal Services, Ohio Department of Jobs and Family Services in Columbus, Ohio within 15 calendar days from the date the state hearing decision is issued. You may request your benefits not end until the Appeals Council issues a decision; however, whether your request is granted or not is discretionary.

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Pro Seniors' Legal Hotline for Older Ohioans provides free legal information and advice by toll-free telephone to all residents of Ohio age 60 or older. If you have a concern that cannot be resolved over the phone, then the hotline will try to match you with an attorney who will handle your problem at a fee you can afford.

In southwest Ohio, Pro Seniors' staff attorneys and long-term care ombudsmen handle matters that private attorneys do not, such as nursing facility, adult care facility, home care, Medicare, Medicaid, Social Security, protective services, insurance and landlord/tenant problems.

This pamphlet provides general information and not legal advice. The law is complex and changes frequently. Before you apply this information to a particular situation, call Pro Seniors' free Legal Hotline or consult an attorney in elder law.

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