

**INCOME
FEDERAL POVERTY LEVELS**

MEDICARE SAVINGS PROGRAM

Policy: Certain A/Rs who receive Medicare may be eligible for Medicaid to pay the Medicare premium, coinsurance and deductible amounts.

References: SSL Sect. 367-a (3)a
GISs 08 MA/016
05 MA/013

Interpretation: A person may not spend down income to become eligible for the Medicare Savings Program. However, an individual who is income eligible for the Qualified Medicare Beneficiary (QMB) program may chose instead to use their Medicare premium that they are paying, as a medical expense in order to spend down to full Medicaid eligibility. At the time of application, such individuals should be given the choice between enrollment in the QMB program which would pay their Part B premium, coinsurance and deductibles, OR to pay their own premium and qualify for full Medicaid benefits.

It is possible to qualify for the QMB or Specified low Income Medicare Beneficiary (SLIMB) program and also spend down to Medicaid. In this instance the Medicare premium would be paid on their behalf and would not be used in the spenddown calculation. Medical expenses other than the Medicare premium would be used to meet the spenddown obligation.

Eligibility for the MSPs must be determined even if an applicant does not indicate that he or she is applying for the MSP on the LDSS-2919 or the DOH-4328.

There are four groups that are eligible for payment or part-payment of Medicare premiums, coinsurance and deductibles.

NOTE: See **REFERENCE MEDICALLY NEEDY INCOME AND FEDERAL POVERTY LEVELS** for a chart displaying the Medicaid Levels and Federal Poverty Levels.

**INCOME
FEDERAL POVERTY LEVELS**

MEDICARE SAVINGS PROGRAM

Qualified Medicare Beneficiaries (QMBs)

The A/R must:

1. be entitled to benefits under Part A of Medicare; and
2. have income equal to or less than 100% of the federal poverty level.

If the A/R meets the above criteria, s/he is eligible for Medicaid payment of the Medicare Part A and B premiums, coinsurance and deductible amounts.

Specified Low-Income Medicare Beneficiaries (SLIMBs)

The A/R must:

1. have Part A of Medicare; and
2. have income greater than 100% but less than 120% of the federal poverty level.

If the A/R meets the above criteria s/he is eligible for Medicaid payment of the Medicare Part B premiums.

Qualified Disabled and Working Individuals (QDWIs)

The A/R must:

1. have lost Part A benefits because of return to work;
2. be a disabled worker less than 65 years of age;
3. have income equal to or less than 200% of the federal poverty level;
4. have resources not in excess of twice the SSI limit; therefore, resources cannot exceed \$4,000 for a household of one or \$6,000 for a household of two; and
5. not be otherwise eligible for Medicaid.