

**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

GIS ***05 MA/013***

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

Qualified Medicare Beneficiaries (QMBs)

The A/R must:

1. be entitled to benefits under Part A of Medicare;
2. have income equal to or less than 100% of the federal poverty level; and
3. 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.

If the A/R meets the above three 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;
2. have income between 100% - 120% of the federal poverty level; and
3. 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.

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

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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.

If the A/R meets the above five criteria s/he is eligible for Medicaid payment of the Medicare Part A premium, not the Medicare Part B premium.

Qualifying Individuals – 1 (QI-1s)

The A/R must:

1. have Part A of Medicare;
2. have income between 120% - 135% 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, which in **2005 is \$78.29** per month. Each state has been given a capped allocation to fund these premium payments.

Note: See page 120.3 for a chart displaying the Medicaid Levels and Federal Poverty Levels.

The A/R can either be eligible for the Medicare Savings Program or apply his/her income/resources, in excess of the appropriate Medically Needy level (See page 114) to the cost of medical care and services, spending down to become eligible for Medicaid coverage. At the time of application, the applicant is encouraged to make a choice. The advantages and disadvantages of both

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programs are fully explained. An A/R may switch between spenddown and Medicare Savings Program; however, in the interest of accuracy and administrative efficiency, the A/R is encouraged to select one of the two programs.