

Explanation of the Excess Income Program

If your monthly income is over the Medicaid level, you may still get help with your medical bills. This letter explains how to do that. The amount your income is over the Medicaid level is called excess income. The Notice of Decision letter you received tells you the amount of your excess income. Once you have medical bills at least equal to your excess income (spenddown or surplus) which is like a deductible, Medicaid will pay your medical bills for the rest of the month.

How to get Medicaid through the Excess Income Program

First, you must be under age 21, age 65 or older, certified blind or certified disabled, pregnant or a parent of a child under age 21. This allows you to become eligible for Medicaid even though your monthly income is too high. You can spenddown to the Medicaid level in one of two ways:

1. *Outpatient Care and Services (One Month Eligibility)*

If you need outpatient care, in a hospital, clinic or doctor's office, prescription drugs or medical supplies, you may be able to get help with these bills. If you have medical bills that are equal to or more than your monthly excess income, you can get Medicaid outpatient services for one month. The Excess Income Program can provide outpatient coverage for one month at a time.

First, you need to tell your local Department of Social Services that you want to be in the Excess Income Program. You must then bring in or send your medical bills to your local Department of Social Services when they at least equal your excess income amount. These bills can be paid or unpaid. You will need to do this each month you need outpatient care.

You may be able to get long-term care services like adult day health care, personal care services and the Assisted Living Program. Your social services worker will be able to tell you if you are eligible for these services.

Or

2. *Inpatient/Hospital Care and Services (Six Months Eligibility)*

If you need hospital care or need help paying your hospital bills, you may be able to get Medicaid inpatient services, in addition to the outpatient care described above. You must have medical bills that are at least equal to your monthly excess income amount for six months. These bills can be paid or unpaid. They can also be for medical services other than hospital care.

Once your medical bills at least equal your excess income amount for six months, you must bring or send these bills to your local Department of Social Services. You will then receive Medicaid for six months.

Pay-In Option If you do not have medical bills but you need medical care, there is another option called the Pay-In Program. You can pay your monthly excess income amount for any month to your local Department of Social Services. You should only do this if you need services in that month. Ask your social services worker about this option.

Once You Enroll in the Excess Income Program

- Each month you need Medicaid services, bring in, send, or fax (if available in your county) your medical bills to your local Department of Social Services. Only send these bills when they are equal to or more than the amount of your excess income.
- You should make doctors' appointments or fill prescriptions early in the month. This will help you meet your excess income amount faster. Once you reach your excess income amount, Medicaid will pay for covered services for the rest of the month.

Bills You Can Use Toward Your Excess Income

- You may use bills from a doctor or other medical provider who does not take Medicaid.

Important Note: *Once you have enough bills to meet your excess income for any month, Medicaid will only pay medical bills in that month from a doctor, pharmacist, or other provider who is in the New York State Medicaid program. You need to see if your doctor or other medical provider is enrolled in Medicaid so your bills can be paid. You cannot use bills from a non-Medicaid provider until the next month when you need to meet your excess income again.*

- You can use any part of a bill that Medicare or private insurance does not pay. You cannot use a bill that Medicare or private insurance will pay in full.
- Bills may be for medical care given to you, your spouse, or your children who are under 21 years old. If you provide medical support for a child not living with you, you may be able to use the child's bills. Medical bills for your parent(s) may also be used toward meeting your monthly excess if you are under 21 and live with your parent(s).
- You can use unpaid medical bills from prior months to meet your current monthly excess income. Once you use a bill to meet your excess income, you cannot use it again.

You can also use the following bills to meet your excess income amount:

- The cost of transportation to get to and from medical appointments (in most cases);
- Medical bills or payments made to therapists, nurses, personal care attendants and home health aides (as ordered by a doctor);
- Prescription drug bills;
- Payments made for surgical supplies, medical equipment, prosthetic devices, hearing aids and eyeglasses (as ordered by a doctor); and
- Any bills paid by public programs of the State or county like the Elderly Pharmaceutical Insurance Program (EPIC) or the AIDS Drug Assistance Program (ADAP), in addition to your copayments.

In addition, you can use medical bills that the Medicaid program does not cover like:

- Chiropractor services and other non-covered medical services;
- Co-payments you are charged when you receive certain Medicaid services;
- Some over-the-counter drugs and medical supplies such as bandages. You can use these to meet your spenddown if your doctor has ordered them. Bills for cosmetics and other non-medical items are not allowed; and
- Any out-of-pocket costs associated with the Medicare Prescription Drug Program such as premiums, co-payments and deductibles.

**If you have questions, please contact your county's Department of Social Services.
Or for more information go to http://nyhealth.gov/health_care/medicaid/**

Regulations require that you immediately notify your county's Department of Social Services of any changes in need, income, resources (if you are age 65 or older, certified blind or certified disabled), living arrangements and address.