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How are Medicare and Medicaid Different?

Medicare	Medicaid
National program that is consistent across the country	Statewide programs that vary among states
Administered by the Federal government CMS	Administered by state governments: Ohio Dept. of Medicaid Dept. of Job & Family Services
Eligibility based on age, disability, or End-Stage Renal Disease (ESRD)	Eligibility based on need; financial and non-financial requirements
Nation's primary payer of inpatient hospital services to the elderly and people with ESRD	Nation's primary public payer of acute health, mental health, and long-term care services



Dual Eligible Beneficiary

- Dual eligible means eligible for Medicare and Medicaid
 - You may receive payment by Medicaid of your
 - Part A and/or Part B premiums
 - Other Medicare cost-sharing
 - Coverage of certain services not covered under Medicare



Mandatory Medicaid State Plan Benefits

- Physician services
- Laboratory & X-ray
- Inpatient hospital
- Outpatient hospital
- Early Periodic Screening & Diagnostic Testing
- Family planning
- Rural and Federally-qualified health centers
- Freestanding birth center services
- Nursing facility services for adults
- Home health
- Cost sharing for Dual Eligibles
- Transportation to medical care
- Tobacco cessation



Optional Medicaid State Plan Benefits

- Dental services
- Prescription drugs
- Therapies – PT/OT/Speech/Audiology
- Prosthetic devices, optometry services, glasses
- Podiatry services
- Case management
- Clinic services
- Hospice
- Intermediate Care Facility for the Mentally Retarded
- Psychiatric Residential Treatment Facility for <21
- Other diagnostic, screening, preventative & rehabilitative services
- Special services in waivers and demonstrations



Medicaid Eligibility Groups

- Medicaid eligibility is based on the most closely associated cash assistance program
- SSI related groups
 - Aged
 - Blind
 - disabled
- AFDC related groups
 - Children
 - Pregnant women
 - Families with dependent children



Non-Financial Requirements

- State resident
- Citizen or qualified alien
- Must have Social Security number
- Assignment of rights to medical support and payment



Non-Financial Categorical Requirements

- Majority of all Medicaid eligibility groups consist of individuals who are:
 - Pregnant
 - Under age 21 (children)
 - Aged, blind, or disabled
 - A parent or caretaker of a child
- Must also satisfy financial and non-financial requirements



Financial Requirements

- Divided into two broad areas
 - Income requirements
 - Resource requirements
- Rules for counting income and resources vary
 - From state-to-state
 - From 'group'-to-'group'
- Special Rules
 - Those who live in nursing homes
 - Disabled children living at home

What is Income?

- Anything that could purchase food or shelter
- 2015 Guidelines:
 - \$663 Single
 - \$1,120 Married Couple
- Two types
 - Earned income
 - Wages and salary
 - Compensation for work
 - Unearned income
 - Social Security Disability Insurance
 - Retirement benefits
 - Interest and dividends



What are Resources?

- 2013 Resource Guidelines
 - \$1,500 Single
 - \$2,250 Married
- Cash
- Anything owned that can be converted to cash
- Liquid resources
 - Savings accounts
 - Stocks and bonds
 - Other assets that could be cashed
- Real estate (other than the person's home)



Aged, Blind, Disabled

- Apply if you are aged, blind, or disabled and
 - Eligible for Medicare with limited income and resources
 - Have limited income and resources
 - Are terminally ill and want to get hospice services
 - Live in a nursing home with limited income and resources
 - Need nursing home care (may get community care services)



Medicare Savings Programs

- Help from Medicaid to pay Medicare premiums
 - For people with limited income and resources
 - May also pay Medicare deductibles and coinsurance



Medicare Savings Program	Eligibility	Helps Pay Your
Qualified Medicare Beneficiary (QMB)	<ul style="list-style-type: none"> ▪ Eligible for Medicare Part A ▪ Income not exceeding 100% FPL ▪ Resources not exceeding the full LIS subsidy resource level <ul style="list-style-type: none"> – For 2015: \$7,280 individual/\$10,930 married couple living together with no other dependents ▪ Effective the first of the month after QMB eligibility is determined ▪ Eligibility cannot be retroactive 	Part A and Part B premiums, deductibles, co-insurance, and copays
Specified Low-income Medicare Beneficiary (SLMB)	<ul style="list-style-type: none"> ▪ Eligible for Medicare Part A ▪ Income at least 100%, but not exceeding 120% of FPL ▪ Resources not exceeding the full LIS subsidy resource level <ul style="list-style-type: none"> – For 2014 \$7,280 individual/\$10,930 married couple living together with no other dependents ▪ Eligibility begins immediately and can be retroactive up to three months 	Part B premium



Medicare Savings Program	Eligibility	Helps Pay Your
Qualified Individual (QI)	<ul style="list-style-type: none"> ▪ Eligible for Medicare Part A ▪ Income at least 120% but does not exceed 135% FPL ▪ Resources not exceeding the full LIS subsidy resource level <ul style="list-style-type: none"> – For 2014 \$7,280 for an individual/\$10,930 married couple living together with no other dependents ▪ Eligibility begins immediately and can be retroactive up to three months 	Part B premium
Qualified Disabled and Working Individual (QDWI)	<ul style="list-style-type: none"> ▪ Entitled to Medicare Part A because of a loss of disability-based Part A due to earnings exceeding Substantial Gainful Activity (SGA) ▪ Income not higher than 200% FPL ▪ Resources not exceeding twice maximum for SSI <ul style="list-style-type: none"> – For 2010: \$4,000 for an individual/\$6,000 married couple living together with no other dependents ▪ Cannot be otherwise eligible for Medicaid 	Part A premium



Overview of the Children's Health Insurance Program (CHIP)

- Title XXI of the Social Security Act
- Part of the Balanced Budget Act of 1997
- Covers America's uninsured children
- Joint Federal and state financing
 - Federal Medical Assistance Percentages (FMAP)
- Administered by each state
- State option to design program



Chip Program

- Provides health insurance for children
- Up to age 19 and those not already insured
- Must meet other requirements
- Federal/state partnership
- States set own guidelines within federal rules



Counseling Example

- The following slide has an example of a some questions someone might ask during a counseling session.
- Listen to the counseling example and think of other topics that might come up during the session
- What tools do you have to help this client?



Counseling Example

- Listen to the following example counseling session.
- Sandra recently enrolled in Medicaid with a spend down. She needs help understanding how it works with Medicare



Counseling Example

- Here are some follow-up issues to discuss with Steve?
 - How do Medicare and Medicaid coordinate?
 - If it's a Medicare covered service, Medicare pays first, and Medicaid would pay secondary. Medicaid is always the payer of last resort.
 - Will being on Medicaid impact his prescription drug coverage?
 - No, his drugs are still covered under Medicare Part D. Since she is a dual eligible, he can change Part D plans anytime.



Quiz

Please answer the following questions. You may use any resource material you have available, including your training manual.

You will have two attempts to complete the quiz. If you do not successfully complete the quiz, please call the OSHIP hotline at 1-800-686-1578 for further instruction. Good luck!

Which of the following is NOT a Medicare Savings Program?

- A) Qualified Medicare Beneficiary (QMB)
- B) Specified Low-Income Medicare Beneficiary (SLMB)
- C) Certified Medicare Beneficiary (CMB)
- D) Qualified Medicare Beneficiary (QI)



Ohio Medicaid is administered by:

- A) The Ohio Department of Insurance
- B) The Ohio Department of Medicaid
- C) The Ohio Department of Health
- D) The Ohio Department of Aging



These Medicare Savings Programs pay the Medicare Part B premium:

- A) Qualified Medicare Beneficiary (QMB)
- B) Specified Low-Income Medicare Beneficiary (SLMB)
- C) Qualified Individual (QI)
- D) All of the above



Dual Eligible means eligible for both Medicare and Medicaid.

- A) True
- B) False



This Medicare Savings Program acts like a free Medicare supplement policy:

- A) Qualified Medicare Beneficiary (QMB)
- B) Specified Low-Income Medicare Beneficiary (SLMB)
- C) Qualified Individual (QI)

