



Briefing

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Medicare Savings Programs

What are the Medicare Savings Programs?

Medicare Savings Programs (MSPs), also known as Medicare Buy-In programs, are state programs that assist you with paying your Medicare costs. These costs include premiums, deductibles, coinsurance charges, and copayments for Part A and B. There are three main programs*, each with different benefits and eligibility requirements:

MSP	What does it cover?	What is the income limit?	What is the asset limit?
Qualified Medicare Beneficiary (QMB)	Parts A and B premiums Parts A and B cost-sharing (deductibles, copayments, and coinsurances)	Individual: \$1,061 Couple: \$1,430	Individual: \$7,730 Couple: \$11,600
Specified Low-income Medicare Beneficiary (SLMB)	Part B premium	Individual: \$1,269 Couple: \$1,711	Individual: \$7,730 Couple: \$11,600
Qualifying Individual (QI)	Part B premium	Individual: \$1,426 Couple: \$1,923	Individual: \$7,730 Couple: \$11,600

*Qualified Disabled Working Individual (QDWI) is the fourth MSP, which is available to some adults under the age of 65 who work and have a disabling impairment. Contact your State Health Insurance Assistance Program (SHIP) by calling 877-839-2675 or visiting www.shiptacenter.org to learn more.

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The income and asset limits listed above are the baseline federal income and asset limits for each MSP. Most states use these limits, but some states have different guidelines. For example, Alaska, Connecticut, the District of Columbia (DC), Hawaii, and Maine have higher income limits. Alabama, Arizona, Connecticut, Delaware, DC, Mississippi, New York, and Vermont do not apply asset limits. **You should consider applying for the MSP even if you are over the limits**, because some income and assets are not counted toward the limits.

How can I apply for an MSP?

To apply for an MSP, you will need to apply to your local Medicaid office or other state agency that receives MSP applications. You or a State Health Insurance Assistance Program (SHIP) counselor can contact the local Medicaid office to learn how to apply. Some state's applications can be submitted online, while others are submitted through the mail. You will usually need to send in documentation with the application, such as copies of your Social Security card, Medicare card, birth certificate, and/or proof of income and assets.

Once you apply for an MSP, you should hear back from your Medicaid office within about 45 days. If you do not receive a notice, follow up with the office where you applied. If you are approved for the MSP, it can take up to three months for your benefits to start. You will be reimbursed for any premiums you paid during those months.

To enroll in the MSP, contact your SHIP by calling 877-839-2675 or visiting www.shiptacenter.org.

What other benefits, rights, and protections come with the MSP?

- ♥ **If you enroll in an MSP, you will automatically get Extra Help**, the federal program that helps pay your Medicare prescription drug (Part D) plan costs.
- ♥ **The MSP allows you to enroll in Part B outside of the regular enrollment periods.** If you missed your Initial Enrollment Period to enroll in Part B, the MSP will allow you to enroll in Part B during any time of the year.
- ♥ **If you have a Part B late enrollment penalty (LEP), the MSP will eliminate it.** Additionally, if you have a Part A LEP and qualify for QMB, QMB will eliminate your Part A LEP.
- ♥ **If you are enrolled in QMB, providers who accept Original Medicare or who are in network for your Medicare Advantage Plan cannot bill you for any Medicare cost-sharing.** This includes deductibles, copayments, and coinsurances for all Medicare covered services. If you have QMB and your provider bills you for services, let them know that you have QMB and should not be billed. If you continue to have problems, call 1-800-MEDICARE.
- ♥ **Remember that the MSP is available to all people with Medicare who qualify, not just those who are enrolled in certain private plans.**