



LOS ANGELES COUNTY COMMISSION ON HIV

**Medicare
Part B
1/25/09 Update**

Information on Medicare Part B Gap Assistance Program

In response to the financial problems facing the State of California, the State's Department of Health Care Services stopped paying Medicare Part B premiums for certain beneficiaries beginning December, 2008. Those impacted by this decision are people who receive both Medicare and Medi-Cal with a share-of-cost over \$500.

Realizing the impact this policy change will have on people with a fixed and limited income, the Commission and the Office of AIDS Programs and Policy (OAPP) established a temporary assistance program that makes food vouchers available to all people who meet the criteria outlined below. **The program, which began in January, will be continued through the month of February.**

Who is eligible for OAPP's Medicare Part B Gap Assistance Program: To qualify, individuals must meet all of the following criteria:

- Resident of Los Angeles County;
- HIV/AIDS diagnosis;
- Currently enrolled in Medicare Part B (Outpatient Medical Coverage);
- Currently enrolled in Medi-Cal;
- Have a monthly Medi-Cal share-of-cost over \$500;
- Ineligible for any other Medicare Part B premium assistance programs.

What type of assistance is available through the OAPP Medicare Part B Gap Assistance Program? Eligible individuals are entitled to a monthly distribution of \$90.00 in food vouchers. People who received assistance in January may apply for a second \$90.00 distribution for the month of February.

What is the application process?

Individuals may contact their case managers for general information and pre-screening. Food vouchers distribution will take place at five agencies throughout the County.

To apply, individuals should be advised to schedule an appointment at one of the following agencies:

- ① **AIDS Project Los Angeles**, 213.201.1600
- ② **AIDS Service Center**, 626.441.8495
- ③ **AltaMed Health Services Corp.**, 323.869.5450
- ④ **CARE Program, St. Mary's Medical Center**, 562.624.4900
- ⑤ **Northeast Valley Healthcare Corp.**, 818.988.6335 x 50705

Applicants will be required to provide the following documentation to demonstrate program eligibility:

- Medicare Card;
- Medi-Cal Card;
- One of the letters sent from the California DHCS or the Social Security Administration (SSA) notifying the individual that their Medicare Part B assistance would be terminated;
- Any additional documentation requested by agency representatives.

Is this an ongoing program or is this one-time-only assistance? Due to funding limitations, the food voucher program will end on February 28, 2009. OAPP and the Commission will continue to attempt to identify alternative solutions and will share any relevant information as it becomes available.

Is this an ongoing program or one-time only assistance? The food voucher pro-gram is designed to provide temporary assistance to help people maintain their Medicare Part B coverage while Office of AIDS Programs and Policy (OAPP) and the Commission on HIV explore other solutions. Information regarding continuation of this program will be available mid- to late-January. An updated version of this information brief will be issued mid-January and will include information regarding the status of the program.

Are there any programs that will pay my Part B premiums? The following details several programs which might help people with their premium and other health care costs:

Medicare Savings Programs: There are three Medicare Savings programs designed to help people of limited resources with their Medicare out-of-pocket costs—including their Part B premiums. Although DHCS has instructed local Medi-Cal offices to screen for eligibility, it is recommended that people take the initiative to apply. To qualify for a Medicare Savings Program, the following criteria must be met:

- Monthly income must be below 135% of the Federal Poverty Level (\$1170 for an individual in 2008).
- Must be eligible for Medi-Cal **or** have assets below \$4,000/individual or \$6,000/couple.
- Must be enrolled in both Medicare Parts A and B.

Applications must be made at the individual's local Medi-Cal office. Specific offices can be located by calling 866.613.3777 or checking the website at <http://dpss.lacounty.gov>.

250% Working Disabled Medi-Cal Program (WDP): WDP is not a premium payment program per se, but DHCS will pay the Part B premium for people who are enrolled in this program. WDP is a Medi-Cal program designed for people who are participating in any type of work activity. Once enrolled in WDP, the individual's share-of-cost is eliminated. Instead, the individual pays a monthly premium based on their monthly earnings. The monthly

premiums range between \$20 - \$250. The WDP does not stipulate any "formal" employment requirements or minimum hourly work requirements. Because people enrolled in WDP qualify for Medi-Cal with no share-of-cost, DHCS will continue to pay the Medicare Part B premiums. In order to apply for the WDP, an individual must contact their assigned Medi-Cal worker. As noted previously, you can find your worker's name/number by calling 866.613.3777.

Medi-Cal Share-of-Cost: DHCS will pay Part B premiums in any month that an individual's out-of-pocket medical expenses equal the amount of their Medi-Cal share-of-cost. In these instances, DHCS will refund the Part B premium amount. The refund will appear in a future Social Security check. Below is a typical scenario:

- Jim's Medi-Cal share-of-cost is \$700.
- Jim undergoes a major dental procedure in December.
- The dental procedure costs \$2000. Joe is responsible for \$700 of the dental bill (his share-of-cost); Medi-Cal pays the remainder of the bill.
- Because Joe incurred his Medi-Cal share-of-cost in December, Medi-Cal will pay his Part B premium in the form of a refund.
- The refund will be added to his monthly Social Security payment in a later month.

Resources:

- California DHCS, 800.952.5294 www.dhs.ca.gov
- Medicare: www.medicare.gov
- SSA, 800.772.1213 www.socialsecurity.gov

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The boxed and shaded areas are new information from the prior Medicare Part B brief