

Medicaid programs other than ICP and LTC waiver

by Heidi M. Brown

Many people do not realize that Florida has many different Medicaid programs. In fact, there are Medicaid programs, other than the ICP (aka nursing home Medicaid), SMMC-LTC (LTC waiver) and hospice that will be of interest to elderly clients, such as:

Medicaid for Aged and Disabled (MEDS-AD or Community Medicaid)

This program pays for medical assistance for doctors, hospitals, prescriptions, physical therapy, occupational therapy and short-term stays in a rehab facility.

- Requirements: Single individuals can only have \$874 per month in gross income and \$5,000 in countable assets. Married couples can only have \$1,178 per month in gross income and \$6,000 in countable assets. If the individual needs long-term care in a rehabilitative facility or skilled nursing facility (SNF), then the individual must meet the requirements of ICP.

Medicare Savings programs

- Qualified Medicare Beneficiary (QMB) – will pay for an individual's Medicare Part A and Part B premiums, Medicare deductibles and Medicare co-insurance.
 - » Requirements: Single individuals can only have \$992 per month in gross income and \$7,280 in countable assets. Married couples can only have \$1,339 per month in gross income and \$10,930 in countable assets.
- Qualifying Individuals 1 (QI 1) – will pay for an individual's Medicare Part B premiums.
 - » Requirements: Single individuals can only have \$1,341 per month in gross income and \$7,280 in countable assets.

Married couples can only have \$1,808 per month in gross income and \$10,930 in countable assets.

- Special Low-Income Medicare Beneficiary (SLMB) – pays for an individual's Medicare Part B premiums.
 - » Requirements: Single individuals can only have \$1,191 per month in gross income and \$7,280 in countable assets. Married couples can only have \$1,606 per month in gross income and \$10,930 in countable assets.
- Extra Help aka Low-Income Subsidy – pays for an individual's Medicare Part D (prescription drug plan) premium and the annual deductible. It also pays for prescription coverage during the "doughnut hole" gap period. The individual's co-pays are \$3.30 for generic drugs and \$8.25 for brand-name drugs.
 - » Requirements: Single individuals can only have yearly income of \$17,820 and \$13,640 in countable assets. Married couples can only have yearly income of \$24,030 and \$27,250 in countable assets. The individual must already be enrolled in Medicare A and Medicare B.
 - » Note: Individuals who are eligible for QMB, QI 1, SLMB, ICP and Home and Community Based Service (HCBS) waivers are automatically eligible for Extra Help Medicare Part D plans.
 - » Qualified Disabled and Working Individuals (QDWI) program – pays for Medicare Part A premiums for people under age 65 who lost their

premium-free Medicare Part A when they returned to work.

- Requirements: Single individuals can only have \$1,985 in gross monthly income and \$4,000 in countable assets. Married couples can only have \$2,678 in gross monthly income and \$6,000 in countable assets.

Medically Needy aka Share of Cost program

This program is for individuals whose income is too high to qualify for other Medicaid programs, but who have high medical bills. Each month the individual has a share of cost, similar to a deductible, that must be met before Medicaid will cover the medical bills. Each month, the share of cost resets and the individual must start over again. After the share of cost is met, the individual is entitled to full community Medicaid benefits for that month only. The share of cost is equal to the individual's gross income minus \$180 per month and minus \$20 per month of a general income disregard. So, if the individual's gross income is \$1,200 per month, then the share of cost is \$1,020 per month. The individual must pay \$1,020 per month in medical expenses before Medicaid will start paying. Or another way to view it is that the individual is only allowed \$200 per month to pay non-medical bills.

- Requirements: Single individuals can only have \$5,000 in countable assets. Married couples can only have \$6,000 in countable assets.
- To meet the share of cost, the individual can submit:
 - » Unpaid medical bills;
 - » Medical bills paid within the last three months by the individual;

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- » Health insurance premiums;
 - » Co-pays for medical bills;
 - » Medical services, if prescribed by a doctor; and
 - » Transportation for medical care.
- The individual cannot use the following to meet the share of cost:
 - » Premiums for insurance policies that pay money to the individual for hospitalization (e.g., AFLAC); and
 - » OTC medical supplies, such as bandages, cough syrup, aspirin.

Program of All-Inclusive Care for the Elderly (PACE)

This program provides home and community-based services and medical care for individuals who are in need of nursing facility care. The program will meet the individual's medical needs and long-term care needs. PACE provides and pays for doctor's visits; hospital stays; case

management; supplies such as incontinence pads; prescriptions; medical care; caregiver support; in-home health aides; and physical, occupational and speech therapies. PACE will also pay for skilled rehabilitation, respite care, nursing homes and assisted living facilities. PACE offers adult day care and activities in the PACE facility. In addition, PACE provides transportation to and from its facility. Unfortunately, PACE is only in certain counties, i.e., Charlotte, Collier, Lee, Miami-Dade, Palm Beach and Pinellas.

- Requirements: The individual must be at least 55 years or older and disabled or 65 years or older. The individual must select the PACE provider to be the Medicare and Medicaid provider. Thus, the individual must see the PACE physicians. The financial requirements are similar to the ICP and HCBS waiver programs. The single individual can only have countable assets of \$2,000 and \$2,205 in gross monthly income. For a married couple, the applicant can only have \$2,000 in countable assets and the community spouse can only have \$120,900 in

countable assets. There is no limit to the gross monthly income for the community spouse. If both spouses are on PACE, they can only have \$3,000 in countable assets.

So, the next time you counsel a client who is not yet ready for either a nursing home or an assisted living facility, double check to see if he or she might be eligible for and interested in one of these lesser-known Medicaid programs.



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