
QUALIFIED MEDICARE BENEFICIARIES - B
REVISED 12/03/2018 – CHANGE NO. 06-18

I. QUALIFIED MEDICARE BENEFICIARIES - B

An applicant who is enrolled in Medicare Part A, and has income greater than 100% and equal to or less than 120% of poverty is eligible for the state to buy-in payment of the Medicare Part B premium. Buy-in is effective the month of authorization with “B” Medicaid classification. No additional benefits are provided under this program. No Medicaid card will be issued to beneficiaries authorized for MQB-B. The beneficiary may meet the eligibility requirements for both MAABD and MQB-B.

II. MQB-B ELIGIBILITY REQUIREMENTS

A. Meet all Financial/Non-financial eligibility requirements.

B. Medicare

Enrolled in Medicare Part A and has an RSDI claim number or Railroad Retirement number. Verify Medicare coverage by checking one of the following:

1. OVS
2. For Railroad Retirement benefit verification, contact the Railroad Retirement Board at 1-800-808-0772, or online at <https://www.rrb.gov> and select “Benefit Online Services.”
3. The Medicare Card
4. Bendex (Part B is SMI entitlement and Part A is HIB entitlement)
5. Medicare EOB (Explanation of Benefits)
6. Inmates of public institutions are not eligible for Medicare.

C. Ineligible for MQB-Q

Meets all MQB-Q financial eligibility criteria, except that; income exceeds 100% federal poverty limit (FPL).

D. Income

1. Must have countable monthly income greater than 100% and not to exceed 120% of the federal poverty limit.

2. Refer to [MA-2260, Financial Eligibility Requirements-PLA](#), for current MQB-B income levels.
3. Refer to [MA-2260.V, MQB Family Size Budgeting](#), if the income exceeds 120% of the federal poverty limit.

E. Resources

Refer to [MA-2260, Financial Eligibility Requirements-PLA](#), for current resource levels.

III MQB-B SPECIAL PROGRAM REQUIREMENTS

A. Limited Coverage

1. MQB-B pays only the Medicare Part B premium.
2. MQB-B beneficiaries do not receive a Medicaid card.
3. MQB-B beneficiaries do not qualify for Non-Emergency Medical Transportation.

B. Dual Eligibility

1. A beneficiary may be dually eligible for MAABD and MQB-B.
2. A beneficiary must be evaluated for all other Medicaid programs for which they may be qualify.

C. Processing Requirements

1. The application processing time standard is 45 days.
2. If the applicant will not be enrolled and covered by Medicare Part A and Part B by the application processing standard, deny the MQB-B application according to procedures in [MA-2300, Application](#).
 - a. An applicant who is eligible for premium-free Part A, but does not enroll during his enrollment period, can enroll only during the months of January through March of each year.
 - b. Medicare Part A coverage is effective July 1st of the enrollment year.
2. If the applicant will be covered by Medicare Part A and Part B prior to the processing deadline, the case may be authorized effective with the month of Part A coverage.

D. Disposition

If the applicant is eligible, approve MQB-B. Use the [DMA-5002](#) or the [DMA-5002S](#), to notify the applicant/beneficiary (a/b).

E. Classification

The classification is “B”, even if dually eligible.

F. Certification Period

1. The certification period begins with the month of application.
2. The certification period is 12 months.

G. Authorization

Authorize effective the month of application if all eligibility criteria are met. For recertification, authorization begins the first month of the new certification period if all eligibility criteria are met.

H. Retroactive Period

Unlike MQB-Q coverage, coverage for Medicare Part B only (MQB-B) can be authorized retroactively for three months prior to the month of application. Always provide retroactive MQB-B coverage if the applicant meets eligibility criteria and is not already covered under MAABD.

Medical need is not an issue for MQB-B retroactive coverage. It is a requirement for MAABD.

I. Cost of Living Allowance (COLA)

1. Exclude the monthly amount of the RSDI COLA from countable income in determining eligibility for January, February, and March of each year. Use the prior December amount to determine eligibility for January through March. Effective April 1st begin counting the increased RSDI benefit that was effective in January.
2. When the COLA increase is greater than the Federal Poverty Level, some Medicaid beneficiaries may lose eligibility or move to deductible status. In this situation, the most recent COLA must be disregarded in determining continued eligibility. If the individual remains eligible when the SSA COLA is disregarded, the disregard continues until the beneficiary loses Medicaid eligibility or becomes eligible without the disregard.

J. Recertification

1. Apply the ex-parte process prior to the end of the certification period.
2. Verify the following eligibility factors at every recertification:
 - a. Medicare entitlement
 - a. Living Arrangement
 - b. Reserve
 - c. Income