

MIPPA Question and Answer Document

1. Is this a new program? If so, what is it called?

No, this is NOT a new program. It is a new process. Beginning March 1, 2010, the CAOs began receiving a weekly file on the Office of Income Maintenance (OIM) server with information sent by the Social Security Administration (SSA) on individuals who have applied for the Low Income Subsidy (LIS) to help with payment of Part D regardless of whether they are eligible or ineligible for LIS. The individuals indicated on the LIS application they want to apply for MSP.

The CAOs review and/or authorize for the Medicare Savings Program (MSP) also known as Buy-In based on the information provided by SSA.

2. If the household is known to the system but not active, should we be deselecting the other members?

Only authorize the individual who is listed in the file.

3. If a case is active with a spouse as payment name, do we change the payment name to the person identified eligible for the program?

No, follow the normal authorization process.

4. The list indicated an individual was single, but we know the person is married. Do we use what we know or change it according to the memo?

Use the information known to CIS.

5. Are we to enter TPLs for the cases that are not buy-in only? The instructions state to transmit off that screen.

If insurance information is known for an individual authorized PG 00, enter the information on the TPL screen.

6. How often are the renewals and who is to process them?

CAO will process renewals as any other case. Refer to MAH 376, Renewal.

7. What are the reporting requirements?

Once the case has been authorized, it is treated as any other case. Follow the requirements in MAH 370, Reporting Changes.

8. Can individuals "opt out" and are there any penalties?

The individuals have indicated they want MSP in the LIS application. Yes,

they can “opt out” with no penalties.

9. Was OIM given any income or resource limits which the SSA is using? If, yes, why is this information not in the file?

Yes. SSA sends the individuals' information regardless of whether they are eligible or ineligible for LIS. We use the information SSA provides to process these applications. CAOs are to verify the information at renewal or any case maintenance.

The income and resource information is on the file from SSA. The procedures in OPS100203 were developed to minimize the impact to the CAOs.

In the event of an appeal the CAO can contact: ra-pwmippa@state.pa.us

10. If it is known there are resources and income, do we change the screens to N as instructed in the OPS? What do we do if we try to open a designated category and it fails due to income?

Use the information known to CIS to process the application.
Please see Medicaid Operations Memorandum 100203, specifically the following:

NOTE: If the individual(s) is/are active in a SNAP household, the CAO will be advised which of the three categories to enter, but will allow the system to determine eligibility using the existing income/resource information in CIS and allow the system to generate the appropriate notice.

11. Is resource eligibility waived?

No, resource eligibility is not waived. Individuals who are included on the CAO weekly file from SSA have had their resources reviewed using SSA's resource criteria.

If resources are not recorded in CIS because the individual is eligible for expanded categorical eligibility in SNAP **but** the CAO is aware of resources, the resources must be entered on CIS and an eligibility/ineligibility determination made.

12. What will the notices look like?

The notices are found on DocuShare in the folder named “MIPPA Notices”:
<http://docushare.dpw.lcl/docushare/dsweb/oimforms/docushare/dsweb/HomePage>

13. Will the preprinted notices include resource or income information from SSA?

The pre-printed notices do not include resource or income information.

14. How are the income fields on page two of the Notices (Series PA 162 MPG, MT-5, MT-7, MI-1, and MI-2) to be completed?

The income fields on page two are to be left blank.

15. In the event of an appeal, who handles the appeal? Are these rejections/denials subject to the appeal provisions in Supplemental Handbook 870.11?

The CAO handles appeals. Ensure that narratives reflect this is a MIPPA application. If the individual appeals a rejection, the CAO should contact the individual and schedule a pre-hearing conference to discuss the rejection. If the CAO becomes aware of additional information which indicates the individual is eligible for MSP, the CAO can authorize the benefits.

These cases are treated as any other case and are subject to the provisions listed in Supplemental Handbook 870.11.

If the CAO needs information for the appeal or pre-hearing conference from the file SSA has provided, the CAO can send an information request to ra-pwmippa@state.pa.us.

16. If an individual requests retroactive coverage does the CAO base the determination on the information given from SSA? Must the individual fill out an application?

The CAO cannot automatically authorize retroactive Buy-In based on the information from SSA because this eligibility process was not implemented until 1/1/10 and the increased resource limits became effective 1/1/10. This means that an individual who is eligible using the new limits may have not been eligible prior to the increase. In addition, the CAO may not have information for the individual for the retroactive period.

If an individual requests retroactive coverage, the CAO should collect the information needed to make the determination. If the CAO becomes aware of information that impacts current eligibility, the CAO should act on the information just as they would for any other individual.

If the request for retroactive Buy-In occurs within 60 days of the CAO receipt of the buy in "application" from SSA, the CAO should process the request without another application form.

All actions should be documented in the case narrative.

17. Is the retroactive period established by the date the CAO receives the MIPPA file or by the date the individual actually filed the request for "Extra Help" with

the Medicare Part D premiums? Is there a limit to the amount of time an individual has to request the retroactive payment?

The retroactive period is established by the date the individual actually filed the request for "Extra Help" with the Medicare D premiums.

The individual can request retroactive payment at any time. The retroactive period begins the first day of the third month prior to the date the individual filed a LIS application with SSA. The individual must meet Buy-In eligibility in the retroactive period to be opened for retroactive Buy-In.

18. May we accept the MSP Model Application that is found on the SSA website (http://www.ssa.gov/prescriptionhelp/cms_pubs.htm) as an application for MSP?

Yes. Effective immediately the CAOs may accept the MSP Model Application as an application for MSP. MSP is also known as Buy-In. Buy-In is the process by which the state pays Medicare premiums for eligible individuals. The purpose of the Buy-In program is to transfer medical costs from the MA program to the federally funded Medicare program and to provide help with Medicare costs for low-income individuals who are above the eligibility limits for Medical Assistance.

The date the CAO receives the Model application is considered the date of application. The CAO may need to contact the individual for additional information that has not been provided on the Model Application.

The CAO is to follow normal MSP procedures when processing these applications. Do not confuse using the Model Application with the procedures outlined in OPS100203.

19. Are these individuals subject to MA overpayments in the event benefits are authorized erroneously as the CAO has no access to income/resource information?

Before the first renewal, if the CAO discovers and verifies that an individual has income or resources that cause him/her to be ineligible, action should be taken to close the case, but the CAO will **not** process an overpayment.

If after the first renewal the CAO discovers and verifies that an individual has income or resources that cause him/her to be ineligible, action should be taken to close the case **and** process an overpayment.

All actions should be documented in the case narrative.

20. There have been cases we have opened for MSP based on information from SSA and then later we receive an IEVS hit and the income is over the limit. Why does this happen?

In some cases the income will appear to be over the limit for the designated category. This could be because of additional household members.

Question #7 on the LIS application is as follows: Not counting your spouse if you are married, how many other relatives live in your household and receive at least one-half of their financial support from you or your spouse? We count relatives related to you by blood, marriage or adoption. SSA includes additional individuals on the file but does not identify them.

Effective February 22, 2011, the MSP Eligible file and the Cash/MA file will include additional household members if the individual has indicated any on the LIS application and the individual appears to be eligible. It will be necessary to know who these household members are, their relationship to the individual/s applying for MSP, their name, date of birth, social security number and income in order to determine eligibility for MSP.

Procedure when there are additional household members:

1. If the individual is known to CIS and there is a phone number available, the CAO will:
 - a. Contact the individual by phone.
 - b. Determine who lives in the household and how they are related to the individual.
 - c. Explain that children under age 21 may be included in the determination. In addition, explain that if an individual is included, their income is included, verified and counted as well.
 - d. Send a PA 253 along with the contact letter (attached) requesting the social security number, proof of income, age and citizenship if the individual wants to include additional household members in the determination.

2. If no phone number is available the CAO will:
 - a. Send a letter (Attachment Letter; see below) and a PA 253 requesting the individual identify the additional household members and how they are related. The letter will include who must and may be included. In addition, the letter will explain that if an extra individual is included their income is included, verified and counted as well.
3. After the information has been returned, make the eligibility determination for MSP, send the appropriate notice, and enter appropriate narrative.

NOTE: The PA 253 is on DocuShare.

(Attachment Letter)

Dear _____,

You are receiving this letter because the Social Security Administration, SSA, gave us information that you were interested in Pennsylvania determining your eligibility for Medicare Buy-In based on your application for extra help with your Medicare Part D costs. Medicare Buy-In is a program that helps Medicare beneficiaries with limited income and assets pay their Medicare Part A and/or Part B premium.

In order to see if you are eligible for Medicare Buy-In we have to count you, your income, your spouse and his/her income and your unborn child if you or your spouse is pregnant. If you want us to, we can include your natural or adoptive child or stepchild if the child is under age 21. We have to count his/her income too. We can also include a child under age 21 and his/her income if you have custody and are taking care of the child.

SSA has told us there is/are _____ individual/s in your household not including your spouse (if you indicated you have a spouse). Please contact this office at xxx-xxx-xxxx and/or return the information requested on the enclosed PA 253 by _____ to let us know who this/these individual/s is/are and how they are related to you. For any children under age 21, please include the name, date of birth, social security number, citizenship status and income of each individual.

If we do not hear from you by _____, we will send you a letter telling you are not eligible for Medicare Buy-In.

Sincerely,

IMCW

May 2, 2011

Narratives for Additional HH Members:

1. MSP Eligible file indicates that _____ is eligible for _____ category. Income appears to be over the limits for the indicated category. Additional HH members are found in the file. Letter and 253 requesting information about the additional HH members has been sent with a return date of _____.
2. MSP Eligible file indicates that _____ is eligible for _____ category. Income appears to be over the limits for the indicated category. Additional HH members are found in the file. IMCW has spoken with _____ on _____. HH member/s is/are individual/s that must be or may be included in the Standard Filing Unit. Letter and 253 have been sent requesting information about the additional HH members with a return date of _____.
3. Information returned on additional HH members on _____. Eligibility determination using additional HH members for MSP done. Individual eligible for _____.
4. Information returned on additional HH members on _____. Eligibility determination for MSP done. Individual eligible for _____.
5. Information returned on additional HH members on _____. Eligibility determination using additional HH members for MSP done. Individual is ineligible.
6. Information not returned. No contact from individual. Individual is not eligible based on limited information provided by SSA. Application rejected.

21. OPS100203 instructs the CAO to use the subsidy application date found on the weekly file that contains information sent by SSA on individuals who have applied for Extra Help with Medicare Prescription Drug Plan Costs when determining eligibility for MSP. Should the CAOs continue to use the subsidy application date?

A change has been made to the weekly file. The subsidy effective date has been added to the weekly file and is to the right of the subsidy application date.

Effective February 22, 2011, the CAO is to use the subsidy effective date when authorizing MSP.

The CAO will continue to use the subsidy application date when processing rejections for MSP.

No action is to be taken on cases authorized prior to February 22, 2011.

22. What process should the CAO follow when there is incomplete address information on the weekly file from SSA?

Occasionally the weekly file from SSA will contain incomplete address information.

Contact PW, MIPPA (ra-pwmippa@state.pa.us) to request a complete address. If the complete address cannot be verified, the CAO is to authorize or reject MSP appropriately based upon the information in the SSA file using the CAO address.

The CAO is to maintain a copy of the manual MIPPA notice in the record.

When information from IEVS or another source shows an address, the CAO should change the address in CIS and the MIPPA notice should be re-sent to the corrected address and copy kept in record.