

Policy Clarifications

Long-Term Care - All

PMN-20929-489

Submitted: March 28, 2022

Agency: CAOs

Subject: Procedure for entering Medicare Part B Premiums on Living Independence for the Elderly (LIFE) Waiver Cases when the Recipient Resides in a Long-Term Care (LTC) Facility

- Question:**
1. What is the correct procedure for entering a Medicare Part B premium on a LIFE Waiver case for a recipient who resides in a LTC facility?
 2. How does the County Assistance Office (CAO) correct an incorrectly coded Medicare Part B premium on a LIFE Waiver case for a recipient who resides in a LTC facility?

Response By: Division of Health Services

Date: 6/13/2022

1. As explained in the [LIFE Issues Desk Guide](#), when a LIFE Waiver recipient residing in a LTC facility is responsible for their Medicare Part B premium, the premium must be designated as medical expense code “96-Medicare B-LIFE program” on the Medical Expense screen. This will ensure the correct payment is issued to the LIFE provider and that the correct cost of care is determined.
2. If the Medicare Part B expense code “12-Medicare Part B Premium” is entered on a LIFE case in which the individual is in a facility and is responsible for the payment of their Medicare Part B premium, the CAO must:
 - Access maintenance mode in the Electronic Client Information System and select “Expense Questions” on the left-hand navigation menu.
 - Select “Yes” for the medical expenses and click “Next”.
 - End date the expense screen associated with the incorrectly coded Medicare Part B premium.

The CAO will add the Medicare Part B expense with the correct code:

- Click the “Add More” button while on the Medical Expense screen to add a new medical expense.
- Add the monthly Medicare Part B premium expense using code “96-Medicare B-LIFE program”.
- Enter MCV code “N-Not covered by MA”.
- Enter the correct amount in the “Self-Paid Amount” field because it is a paid expense.
- Click “Next” to save the changes.
- Execute eligibility and commit the case.

NOTE: For any retroactive months in which the incorrect Medicare B code was used, the CAO will have to:

- Manually calculate the cost of care.
- Manually edit the 902Z TPL.
- Issue a corrected manual PA 162 to the individual, their representatives, the Office of Long-Term Living, and the LIFE Provider.