

Commonwealth of Massachusetts Executive Office of Health and Human Services Division of Medical Assistance

600 Washington Street Boston, MA 02111 www.mass.gov/dma

> MassHealth Eligibility Letter 98 January 1, 2003

TO: Division Staff

FROM: Wendy E. Warring, Commissioner

RE: Elimination of Qualifying Individual-2 (QI-2) Payments

This letter transmits revised regulations that eliminate the Qualifying Individual-2 (QI-2) payments. The federal government authorized the QI-2 program from 1998 to 2002 and required states to provide assistance with the payment of Medicare Part B premiums. The program will end on December 31, 2002.

These emergency regulations are effective January 1, 2003.

MANUAL UPKEEP

<u>Insert</u>	<u>Remove</u>	Trans. By
519.011	519.011	E.L. 73

Trans. by E.L. 98

MASSHEALTH COVERAGE TYPES

COVERAGE TYPES Chapter 519
Rev. 01/01/03 Page 519.011

- (c) have a countable income amount (including the income of the spouse with whom he or she lives) that is equal to or greater than 120 percent of the federal poverty level and less than 135 percent of the federal poverty level; and
- (d) have countable assets of \$4,000 or less for an individual, or \$6,000 or less for a married couple living together.
- (2) <u>Benefits</u>. The Division pays the entire Medicare Part B premium, in accordance with section 1933 of the Social Security Act (42 U.S.C. § 1396u-3), for members who meet the requirements of 130 CMR 519.011(B) and have a countable income amount that is less than 135 percent of the federal poverty level. Such payments are made through the state Medicare Buy-In process.

(3) Eligibility Coverage Period.

- (a) MassHealth Buy-In coverage, in accordance with 130 CMR 519.011(B), begins with the month of application. Coverage may be retroactive up to three months before the month of application provided:
 - (i) the retroactive date does not extend into a calendar year in which the expenditure cap described at 130 CMR 519.011(B)(4) has been met;
 - (ii) the retroactive date is not earlier than October 1, 1998; and
 - (iii) the applicant was not receiving MassHealth during the retroactive period.
- (b) Once determined eligible, a member who continues to meet the requirements of 130 CMR 519.011(B) is eligible for the balance of the calendar year. Such members are not adversely impacted by the provisions of 130 CMR 519.011(B)(4).

(4) Cap on Expenditures.

(a) The Division does not extend eligibility to individuals who meet the requirements of 130 CMR 519.011(B), if the Division estimates the amount of assistance provided to these members during the calendar year will exceed the state's allocation, as described in section 1933 of the Social Security Act.