



State of California—Health and Human Services Agency
Department of Health Care Services



DATE: January 13, 2023

Medi-Cal Eligibility Division Information Letter No.: I 23-04

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS
ALL COUNTY MEDS LIAISONS ALL CONSORTIA/SAWS PROJECT
MANAGERS

SUBJECT: Medicare Enrollment Date Changes Effective January 1, 2023

The purpose of this Medi-Cal Eligibility Division Information Letter is to provide counties with information related to new enrollment dates for individuals eligible for Medicare.

Background:

In the past, individuals applying for Medicare during General Enrollment had to wait until the following July for their Medicare enrollment to be effective when they had to pay premiums for Part A.

Policy:

Effective January 1, 2023, Medicare Part A enrollment for individuals who do not have free Part A will be effective on the first of the month following their Medicare application during an enrollment period.

Qualified Medicare Beneficiaries (QMBs): Individuals applying for QMB coverage may now apply at any time of the year, and their Medicare enrollment will be effective the month following the month of their Medicare application. Counties must use these timelines when predicting the effective date the Department's Buy-In of Part B premiums and Medicare enrollment of QMB Program eligibility. As soon as the Medi-Cal Eligibility Data System (MEDS) reflects Medi-Cal eligibility and Medicare entitlement, Buy-In will occur for both Part B and Part A. Counties must ensure that applications for QMB during the Medicare General Enrollment period are not held in "pending status" until the following July 1st. Pending status is reflected in the MEDS eligibility status line "891." This is also reflected in the Medicare Status line with a blank space or "0" in Medicare Part A status (first position) for a month that Medicare enrollment is effective.

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Please see the chart below taken from [Medicare.gov](https://www.medicare.gov) that displays the changes for individuals who are at or near 65 years of age.

Part B (and Premium-Part A): Coverage starts based on the month of application for Medicare:

If applying:	Coverage starts:
Before the month the individual turns 65	The month they turn 65 (no change)
The month the individual turns 65	The next month (no change)
1 month after the individuals turns 65	In 2022: 2 months after they sign up Starting January 1, 2023: the next month
2 or 3 months after the individual turns 65	In 2022: 3 months after they sign up Starting January 1, 2023: the next month

Two-Month Wait Periods for Part B: Medicare is also expanding the groups of individuals for whom a two-month wait period is waived. Further research and systems changes will be necessary to make this change. **Please note:** Counties should continue to predict that the Department's Buy-In of Medicare premiums will occur in the 3rd month for individuals eligible in the following aid codes. Further guidance will be published when additional information is available on the systems changes in MEDS.

- 1H, 13, 14, 17, 23, 24, 27, 3N, 30, 34, 35, 36, 37, 38, 6G, 6H, 63, 64, 67

Between January 1 - March 31 each year (General Enrollment Period)

Individuals can sign up between January 1 - March 31 each year. This is called the General Enrollment Period. Currently, coverage starts July 1. Starting January 1, 2023, coverage will start the month after the individual signs up. Individuals might pay a monthly late enrollment penalty, unless they qualify for a Special Enrollment Period. [Get details about the late enrollment penalties.](#) Individuals do not pay late enrollment penalties while on Medi-Cal, but may have to pay these penalties if they lose Medi-Cal coverage.

If individuals have questions about Medicare enrollment periods or whether they might incur penalties if they enroll at certain times, they should be directed to contact the Health Insurance Counseling and Advocacy Program (HICAP) by calling 1-800-434-0222 to locate a HICAP office in their area.

PLEASE NOTE: Counties must continue to refer individuals to the Social Security Administration to apply for Medicare in accordance with Title 22, CCR, Section 50777.

For questions on this issue, please contact Sharyl Shanen-Raya at (916) 345-8066 or by email at Sharyl.Shanen-Raya@dhcs.ca.gov.

Original signed by,

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Health Care Benefits and Eligibility