

DEPARTMENT OF HEALTH SERVICES

4/744 P STREET
D. BOX 942732
SACRAMENTO, CA 94234-7320



February 26, 1993

TO: All County Welfare Directors
All County Administrative Officers
All County Medi-Cal Program Specialist/Liaisons

Letter No.: 93-13

SUBJECT: January 1993 QMB Mailer

ACWDL: 92-79, Electronic Mail #93016

The purpose of this letter is to inform you that the Health Care Financing Administration (HCFA) will send a mailer in early February to approximately 106,000 persons in California who are currently receiving Supplemental Security Income (SSI). This mailer will provide information about the Qualified Medicare Beneficiary (QMB) program and include a form similar to the Social Security Administration (SSA) 795 form which we have recently instructed counties to replace with the new MC 176 QMB-3 form. Enclosed is a sample of the message. We have been told that the March 31st deadline (open enrollment period) may be extended until April 1993 for persons receiving this notice.

Counties should continue to use the new MC 176 QMB-3 form or their modified form to refer QMB applicants to the local SSA office during the January through March open enrollment period or any initial enrollment period since our experience in the past has shown that many applicants are unable to correctly complete and mail the SSA 795 form timely, e.g., applicants are unable to furnish their correct Medicare HIC number, or they have an illegible signature.

We realize that some counties still have pending and active QMBs on MEDS who have not been successfully "bought in" for Part A and/or B. We will be sending Medi-Cal Specialists/Liaisons lists of those pending and active QMBs who should be terminated from MEDS in the near future. There are also some QMBs who are receiving QMB benefits who are still in pending status on MEDS. These persons will show a "2" in both the Medicare Part A and B fields. These will be automatically converted to active status in the near future. Counties will be provided with a list of these individuals to update their systems.

We are sorry for any inconvenience that this may cause; however, we were not aware of this until recently. If you have any questions, please contact Marge Buzdas at (916) 657-0726.

Sincerely,

ORIGINAL SIGNED BY

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

AN IMPORTANT MESSAGE FROM MEDICARE ABOUT THE QMB PROGRAM

Dear Medicare Beneficiary:

You may be eligible for additional Medicaid benefits. This letter explains why, and what you need to do to find out whether you qualify.

Our records show that your Part B Medicare premiums are paid by your State Medicaid agency. Even if you are already receiving Medicaid, you may be eligible for additional Medicaid benefits under the qualified Medicare beneficiary program which is known as QMB. Being classified as a QMB by your State could provide additional benefits which are not covered by Medicaid.

To become a QMB, you must meet two requirements:

- 1) You must have limited income and resources; and
- 2) You must sign up for Part A Medicare benefits.

Because you get Supplemental Security Income, we believe you probably meet the first requirement. But you must sign up for Part A Medicare benefits to qualify for the QMB program. If you want this benefit you need to:

- 1) Sign the enclosed form and return it to the:

Social Security Administration
P.O. Box 5740
Chicago, Illinois 60680

YOU MUST MAIL THIS FORM BEFORE MARCH 31, 1993; AND

- 2) Contact your local office of the CALIFORNIA DEPARTMENT OF SOCIAL SERVICES and explain that you want information about the qualified Medicare beneficiary program. If you cannot find a local office telephone number, you may call the Medicare Hotline at 1-800-638-6833 for the number.

If the Medicaid office decides you qualify for the QMB benefit, the Social Security Administration will process your Part A Medicare application and send you information about your coverage.

If you have any questions about this letter or want to know more about Part A Medicare, call the Social Security Administration's toll-free number, 1-800-772-1213. The hours of operation during business days are from 7 a.m. to 7 p.m. Eastern Standard Time.