

DEPARTMENT OF HEALTH SERVICES

714/744 P Street
P.O. Box 942732
Sacramento, CA 94234-7320
(16) 657-2941



October 22, 1999

TO: All County Welfare Directors
All County Administrative Officer
All County Medi-Cal Program Specialists/Liaison
All County Public Health Directors
All County Mental Health Directors
All County QMB/SLMB/QI Coordinators

99-53

**KAISER PERMANENTE LETTER SENT TO PLAN ENROLLEES MAY CAUSE
INCREASED APPLICATIONS AT COUNTY WELFARE DEPARTMENTS
FOR QUALIFIED MEDICARE BENEFICIARIES/SPECIFIED LOW-INCOME MEDICARE
BENEFICIARIES/QUALIFYING INDIVIDUALS (QMBs/SLMBs/QIs)**

This is to notify the counties of a letter sent to Medicare beneficiaries enrolled in the Kaiser Permanente Medicare Plus Choice Plan that may cause an increase in QMB, SLMB, and QI inquiries or applications at the local county welfare departments.

On August 28, 1999, Kaiser Permanente sent the enclosed letter to 27,515 Kaiser Permanente Medicare Plus Choice Plan enrollees in California. This letter includes a brief summary of Medicaid benefits that may be available to enrollees as well as the income and property limitations to qualify for such programs. The information in the letter, however, inaccurately indicates that the QMB/SLMB/QI programs may provide additional prescription or drug and dental coverage. Individuals will qualify for this additional coverage only if they also apply and meet the eligibility requirements for full-scope Medi-Cal.

This letter refers interested enrollees to an enrollment specialist provided by Kaiser Permanente, who will pre-screen for potential QMB/SLMB/QI eligibility and/or answer questions regarding these programs. The letter also provides telephone numbers for the Kaiser Permanente Ombudsman and State Health Insurance Assistance Program for questions regarding Medicare and health insurance. It is our understanding that the enrollment specialist will refer potential QMBs/SLMBs/QIs to the local county welfare departments to apply. Therefore, counties may see an increase in individuals applying for these programs. Please provide any potential eligibles with a copy of the MC-14A QMB/SLMB/QI mail-in application form and any necessary assistance. If appropriate, refer potential beneficiaries to the QMB/SLMB/QI county coordinators listed on the back of the MC-14A.

All County Welfare Directors
All County Administrative Ofdficers
All County Medi-Cal Program Specialists/Liaison
All County Public Health Directors
All County Mental Health Directors
All County QMB/SLMB/QI Coordinators
Page 2

If you have any questions regarding this letter, please contact Vicki Partington at (916) 654-5909, or Cecilia Kelley at (916) 657-0168 of my staff.

ORIGINAL SIGNED BY
GLENDA ARELLANO for
Angeline Mrva, Chief
Medi-Cal Eligibility Branch

Enclosure



MRN: [REDACTED]
HIC: [REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

|||||

August 28, 1999

Dear Member:

A recent study by Families USA* found that over 3 million eligible Medicare beneficiaries nationally are not enrolled in Medicaid programs which can save them hundreds of dollars in Medicare premiums each year. Kaiser Permanente is trying to reach out to our Medicare members who may qualify for such programs. If you qualify, these programs are at no cost to you and may include some or all of the following benefits:

- You save \$45.50 a month (Medicaid pays for your Medicare Part B premium**)
- Additional prescription drug coverage
- Additional dental coverage

In order to qualify, you must have Medicare Part A and meet the following program guidelines on income and the value of things you own:

1. Your total monthly income, including retirement income, veteran's benefits, Social Security income, interest and dividends, cannot exceed about \$1,200 for one person or \$1,600 for a couple.
2. Your assets, such as bank accounts, stocks and bonds, and other types of savings cannot exceed \$4,000 for one person or \$6,000 for a couple.

If you think you qualify, or if you want to speak with an enrollment specialist from our affiliate, NCO Financial System, Inc. regarding your eligibility, please call 1-800-865-4681. For advice on your rights as a Medicare beneficiary, please call our Ombudsman Hotline at 1-888-334-3111. For all other additional information, you may also contact the State Health Insurance Assistance Program at 1-800-434-0222.

We look forward to serving you.

Yours sincerely,

N. Richardson

Nicholas A. Richardson
National Director
Kaiser Permanente Medicare Programs

*You may obtain a copy of the Families USA article by calling them at (202) 628-3030 and requesting their Publication #98-10. Families USA is an advocacy and research organization dedicated to the interests of the Medicare population.

**Except for Q1-2 program where Medicaid pays only about \$2 of your Medicare Part B premium