

Medicare Savings Programs and the Face-to-Face Requirement:

Goal: To eliminate the face-to-face interview requirement for individuals applying for Medicare Savings Programs

Overview of the MSP benefit:

- The Medicare Savings Program (MSP) consists of 3 individual programs: QMB, SLMB, and QI-1. Eligibility is based on monthly income. All 3 programs pay the full cost of the Medicare Part B premium (\$93.50 in 2007). Unlike SLMB and QI-1, QMB also covers the Medicare coinsurance and deductible when visiting a provider who accepts both Medicare and Medicaid.
- While SLMB and QMB are entitlement programs funded by a combination of federal, state, and local funding, QI-1 is a 100% federally-funded block grant.
- Enrollment into an MSP automatically enrolls individuals in the Low-Income Subsidy, also known as "Extra Help"—a federal entitlement program that significantly lowers Part D copay, premium, and deductible costs. In New York State, the elimination of an asset test for QI-1 has allowed many beneficiaries with assets above the modest Extra Help limit (\$11,710 for individuals, \$23,410 for couples) to benefit from the program.
- MSP-eligible individuals must apply for the benefit in-person at the local Department of Social Services (Medicaid office).

Federal Requirements:

There are no federal requirements for face to face interviews for Medicare Savings Program applicants.

NY State law:

N.Y. Soc. Serv. Law § 366-a (2007):

Applications for assistance; investigations; reconsideration

1. Any person requesting medical assistance may make application therefore in person, through another in his behalf or by mail to the social services official of the county, city or town, or to the service officer of the city or town in which the applicant resides or is found. In addition, in the case of a person who is sixty-five years of age or older and is a patient in a state hospital for tuberculosis or for the mentally disabled, applications may be made to the department or to a social services official designated as the agent of the department.

Notwithstanding any provision of law to the contrary, in accordance with department regulations, when an application is made by mail, a personal interview shall be conducted with the applicant or with the person who made application in his behalf when the applicant cannot be interviewed due to his physical or mental condition.



NYSDOH regulations:

18 N.Y. C.R.R. 360-2.2(d)(2)(f)(1) explains, "The social services district must conduct a personal interview with anyone applying for MA or for recertification of MA, except as provided in paragraphs (2) and (3) of this subdivision. If the applicant/recipient cannot be interviewed due to his/her physical or mental condition, the person who applied on his/her behalf must be interviewed. The district must conduct the interview before making any decision concerning an applicant's/recipient's eligibility for MA."

Why people are reluctant to apply for MSP at the local Medicaid office:

The face-to-face interview involves many obstacles for older adults and people with disabilities. Applicants must be able to navigate the following:

- Limited mobility. Many applicants are unable to visit the Medicaid office in-person and do not have a family member or advocate to go on their behalf
- Limited access to transportation. Many applicants are unable to drive, lack access to alternative private transportation, and/or may have difficulty using public transportation
- Long waiting periods (usually between 1-4 hours) to see a caseworker
- Limited office hours
- Negative past experiences at the Medicaid office
- Undesirable stigma of getting a benefit from the Medicaid office

Benefits to the State and Individual:

- Easing the application process for older adults and people with disabilities—many of whom are vulnerable to an increasingly complex, precarious healthcare system
- · Increased enrollment into a traditionally underutilized benefit
- Expanded access to Extra Help
- Maximizing use of federal funds in the State
- Reduced administrative costs may allow the State to allocate resources toward reaching out to underserved and hard-to-reach populations