



SENIOR HEALTH NEWS

The Pennsylvania Health Law Project

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Final Regulations Released on Personal Care Homes

In early November, the Department of Public Welfare released final-form regulations on personal care homes. Personal care homes, also commonly referred to as assisted living residences, have been regulated by the state for many years. However, the existing regulations are outdated in that they do not reflect the current needs of residents or the care they require. These newly released regulations will replace the existing regulations.

The new regulations result from years of stakeholder meetings and public discussions. Some critical improvements for residents are included in the new regulations. Staff and administrator training requirements have been strengthened. Discharge criteria are articulated. The resident-home contract is more detailed. And, services will be more individualized.

In many areas, however, consumers and advocates believe that the regulations fall short and do not do enough to protect the health, safety, and well-being of personal care home residents. For example, all existing staff and administrators will be grandfathered in, and thus viewed as meeting the new training requirements. Also, individual needs will not be assessed for over two weeks, meaning

residents can get well settled before ever knowing how or whether their needs will be met and how much meeting their needs will cost.

All in all, however, the final regulation package reflects compromise. It takes the protection of resident health, safety, and well-being forward from where it is now. And, when one looks at the findings contained in the White Paper the Pennsylvania Health Law Project released in October 2002, it is clear that any improvement is greatly needed. A number of PHLP's clients are supporting the regulations.

The regulations must be approved by the Independent Regulatory Review Committee (IRRC). Additionally, the House Health and Human Services Committee and the Senate Health and Welfare Committee will be making recommendations on whether the IRRC should approve or reject the final form regulations. All three committees encourage public comments at this time. Please contact us at (800)274-3258 if you need information on how to share your opinions.



Do you know seniors with Medicare and Medical Assistance who have trouble understanding their rights?

The Pennsylvania Health Law Project

Then this training is for you! In January 2005, the organization that has always provided free assistance in determining and establishing Medicaid eligibility, will now offer free trainings in Bucks, Chester, Delaware, Montgomery, and Philadelphia counties to social services staff working with seniors.

Trainings are being scheduled now starting in January 2005! Contact Jennifer Nix at (800)274-3258 or jnix@phlp.org to come train your staff on

- ? Accessing medical services for people who are dual eligible
- ? Billing problems for people who are dual eligible
- ? Eligibility for other programs

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Legislative Session Ends without Assisted Living Law

Senate Bill 136 and House Bill 420 both died with the end of the legislative session in November. Both bills proposed to create a licensure status for Assisted Living Facilities (which are now licensed as personal care homes).

This is the third legislative session (each one is 2 years long) in which several bills on Assisted Living have been introduced but not passed.

Assisted Living is viewed as an important consumer option on the continuum of long term care. Considered as an option between nursing homes and personal care homes, assisted living residences would provide greater level of services than personal care homes but in more residential, home-like settings than nursing homes.

In 1999, the Intra-governmental Council on Long Term Care produced a report on assisted living that supported the need for state licensure and regulation of this option. Another legislative session ended, however, without this concept being adopted into law.

Stay tuned to the 2005-2006 legislative session and we will report on whether the legislators turn their attention to assisted living for a fourth session.

QI-1 Program Reauthorized

The QI-1 ("Qualified Individual—1") Program is one of the three Medicare Savings Programs available to persons on Medicare to help them afford the costs of Medicare. Over 11,000 Pennsylvanians each year currently take advantage of this program, getting help with their Medicare Part B monthly premium. And, many more are eligible to receive this benefit but are not enrolled.

In 2005, this monthly premium will be \$78.20. Receiving assistance with this monthly payment will save persons on Medicare over \$938 this year.

The program was set to expire in November but has been reauthorized until September 2005. While most legislators support this program, it has yet to be made a permanent program. The good news, however, is does keep getting reauthorized so Pennsylvania's lower-income persons on Medicare get to keep benefiting from QI-1.

If you would like more information about Pennsylvania's Medicare Saving Programs or think you might be eligible to participate, please call our toll-free helpline at (800) 274-3258.

New Medical Assistance Application Form for Persons on Medicare

In the coming months, the Department of Public Welfare will be rolling out a new and improved short application form for persons on Medicare. The application form has been revised based on recommendations of the Pennsylvania Campaign for Affordable Health Care, a coalition of organizations led by the Pennsylvania Health Law Project.

The new application form includes information the consumer can keep to understand and remember the program for which they applied. It also includes simpler questions and explanations of how to answer the questions. Introductions to what the application is for and how to apply for persons who do not speak or read English are now being included on the front of the application in several other languages.

These improvements will help consumers navigate the system and obtain the services for which they are eligible. We will share more about the roll out of these applications (which is expected to begin in the new year) as it happens.

Medicare Drug Discount Card Program: Apply now to get \$1200 credit to help with prescription drug costs.

The Medicare Drug Discount Card Program has been in effect since June 2004 and will last until the end of December 2005. This voluntary program allows Medicare consumers who do not also have drug coverage through Medical Assistance (MA) to enroll in a card to get discounted prices on their prescription drugs. There are 50 cards available in PA, but consumers in certain Medicare managed care plans may only be allowed to enroll in their plan's card. Consumers can only choose one Medicare-approved drug discount card at a time and each card covers different drugs and offers different discounts, so comparing and contrasting the cards is important. The cards can cost up to \$30 per year. There is a \$600 per year credit available to consumers who qualify.

Consumers can get \$1200 in credit if they apply before the end of 2004!

In order to qualify for the \$600 year credit, consumers must:

- Have gross annual income below \$12,569 per year for an individual or \$16,862 for a married couple in 2004 (These income limits will change in February 2005); AND
- Not have outpatient drug coverage through any of the following sources:
 - o TRICARE for Life (military health insurance)



- o FEHBP (health insurance for Federal Employees or retirees)
- o Other group sponsored health insurance

Consumers who qualify for this credit and who have not yet applied to the program will get \$1200 if the drug card sponsor receives their application by December 31, 2004. Consumers who qualify for the credit will get their Medicare-approved drug discount card for free. Finally, consumers who already have the credit can carry over any unused credit from 2004 into 2005. Call the PA Health Law Project to learn more about this credit and how to apply!

Consumers who have a Medicare drug discount card can change cards now

Medicare's Annual Coordinated Election Period is going on now and will end December 31, 2004. Consumers who have already enrolled into the Medicare drug discount card program and who want to change cards can do so at this time. In order to change cards, consumers apply to the new card and will be automatically disenrolled from their current card once they are accepted into the new card. Those who change cards will be allowed to carry over any unused credit to their new card. Their new card will be effective January 1, 2005. Consumers will not be able to change cards in 2005. Anyone who has an "exclusive" Medicare-approved drug discount card (through their Medicare managed care plan) will not be allowed to change cards.

"Facilitated" enrollment for consumers in the Medicare Savings Program (MSP)

Individuals enrolled in the Medicare Savings Program (MSP) receive help from the State's MA program to pay their Medicare Part B premium. This program is also referred to as "Medicare Buy-in." Medicare beneficiaries enrolled in the MSP but who had not yet enrolled in the drug discount card program were enrolled into a card and the \$600 credit in October 2004. These consumers should have

received an enrollment kit by the card sponsor that explains this "facilitated" process by the end of October. The cards were effective November 1, 2004, but consumers had to call to activate the \$600 credit. The enrollment kits explain:

- How to activate the card;
- How to use the card; and
- How to refuse the card or choose a different card.

If you are not sure whether you were enrolled into a card and the credit or if you have questions about the "facilitated" enrollment, call the PA Health Law Project.



Problems Accessing Services for Persons on Medicare and Medical Assistance

Many consumers who have Medicare also qualify for Medical Assistance. Even though these two insurances together should provide exceptionally comprehensive coverage for consumers, consumers often have difficulty getting everything they need. Accessing services when you have both coverages can be very complicated.

Do you or someone you work with have Medicare and Medical Assistance? Are they having problems accessing services? Let us know! We are trying to find out what kinds of problems people with both Medicare and Medical Assistance face when trying to accessing medical services. Please e-mail us with the problems you see most at jnix@phlp.org.

Open Enrollment Period for Medicare Part B Begins in January!

The open enrollment period for Medicare Part B is from January 1 until March 31. If you did not enroll during your 7-month initial enrollment period (the 3 months before you turn 65 and the 4 months after you turn 65), you can still enroll in Part B. If you enroll during the open enrollment between January 1, 2005 and March 31, 2005, your Part B benefits will begin on July 1, 2005. If you are eligible for Part B but have not enrolled and want to enroll this year, you should contact Social Security at 1-800-772-1213.

Remember! Those who have delayed enrollment will have to pay the regular monthly premium (currently \$78.20) plus an additional 10% of the premium (\$7.82) for each full year that they delayed enrollment. Some people are eligible for the state to pay the entire Part B premium (including penalties for delay). To be eligible, the senior's income must be lower than \$1,406 and have resources lower than \$4000 for a single individual per year. For more information on programs to cover the Medicare Part B premium or for help applying, call the Pennsylvania Health Law Project at 1-800-274-3258.



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