Unwinding Series: Medicaid Eligibility 101



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Statewide non-profit legal aid dedicated to ensuring access to public health coverage and services



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MONTHLY E-NEWSLETTER

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How Can PHLP Help?

- Answer Medicaid eligibility questions/screen for benefits
- Advice and/or help troubleshooting eligibility problems
 - Includes denials and terminations
 - Representation at appeals
- Advice/help to resolve problems getting health care services or medications
- Advice/help when someone is denied a medication or service her doctor prescribed
 - Can include representation at appeals (Grievances & Fair Hearings)

What We'll Cover Today

- End of Medicaid Continuous Coverage
- Medicaid Eligibility Basics
- Medical Assistance for Workers with Disabilities (MAWD)
- Renewing benefits
- Tips

Medicaid Basics

- Medicaid is called Medical Assistance in PA
- Run by the PA Dept of Human Services (DHS)
- Rules and funding from CMS and DHS
- Medicaid is health insurance for people with limited incomes who fit into certain groups
 - Can be the person's only insurance
 - Can work with other insurance, such as Medicare or employer coverage as their secondary insurance

Medicaid Eligibility Basics

To qualify for Medicaid, the person must:

✓ Meet Citizenship/Immigration Status requirements;

- Children and Pregnant Women-"lawfully present"
- Others-"qualified status" (usually for five years)

✓ Be considered a resident of Pennsylvania;

✓ Fit into covered group/category; <u>and</u>

✓ Meet income and resource guidelines.

Medicaid Eligibility Groups/Categories

- SSI
- People with disabilities
- People age 65+
- Workers with Disabilities (MAWD)
- MAWD- Workers with Job Success
- Adults ages 19-64 (Medicaid Expansion; cannot be on Medicare)
- Children
- Children (up to age 18) with disabilities (PH95 category)
- Pregnant Women
- Women with breast or cervical cancer
- People needing long-term care services and supports (at home/community or in nursing home)
- Emergency Medical Assistance for undocumented immigrants or those documented who have not reached the "5-year bar"

4 Step Analysis for Each Person

- 1. What <u>category</u> does the person fit in?
- 2. What is the person's <u>household size</u>?
- 3. Is the person under the <u>income limit</u> for that category and household size?
- 4. Is the person under any applicable <u>resource</u> <u>limit?</u>

Medicaid Eligibility

- Income limits are different for each category of Medicaid
 - There are different rules for how income is counted and what/whose income is counted
- Resource limits apply to most categories
 - No resource limit for Medicaid Expansion category
 - Not all resources count
 - Some categories do not count resources if minor children live in household

Questions?

Medicaid Eligibility For Adults, Children, and Pregnant Women: Categories with MAGI Income/Household Counting Rules



MAGI Household Size

- For MAGI categories of Medicaid:
- Three sets of rules:
 - 1. Tax filer
 - 2. Tax dependent
 - 3. Non-filers
- Person-by-person determination
 - Based on <u>expected</u> tax filing status

MAGI Income Examples

Counted

- Wages & tips
- Unemployment
 Compensation
- Social Security Benefits
- Pensions
- Dividends & Interest
- Child's income (if required to file taxes)

NOT Counted

- Child Support
- Workers' compensation
- Veterans' benefits
- Scholarship income
- Gifts and inheritances
- Alimony received
 - If finalized after 1/1/2019

Medicaid for Adults (without Medicare)

- Adults ages 19-64
- Income under 138% of FPL; resources not counted
- Cannot qualify for Medicare

	Household of 1	Household of 2	Household of 3
138% FPL (2022) Monthly	\$1677	\$2268	\$2858

Income Limits for 2023

1. Infants & Pregnant Women (220% FPL)

Household Size	Monthly
HH of 1	\$2673
HH of 2*	\$3,616
HH of 3	\$4,558
HH of 4	\$5,500
HH of 5	\$6,443

Income Limits

2. Children ages 1-5 and 6-18

Household Size	Ages 1-5 (162% FPL)	Age 6-18 (138% FPL)
HH of 1	\$1969	\$1677
HH of 2	\$2663	\$2268
HH of 3	\$3357	\$2859
HH of 4	\$4050	\$3450
HH of 5	\$4744	\$4042

Medicaid for Kids with Special Health Needs or Disabilities: PH-95

- Kids in households over income for Medicaid can still be eligible based on health conditions/ disability
- Referred to as PH-95 category of eligibility
- Must provide documentation of child's health condition/s
- CAO first reviews child for eligibility based on household size and income
- Household income not counted in determining Medicaid eligibility for child with disability
- Parents required to apply for SSI for child (but not required to be granted SSI)

Questions?

Medicaid Eligibility For Older Adults, Adults with Disability, or Breast/Cervical Cancer: Non-MAGI Categories



SSI and Medicaid

- Kids and adults who receive any amount of SSI (Supplemental Security Income) automatically receive Medicaid – don't need to apply
- SSI and SSDI are 2 different Social Security benefits. Only SSI equals Medicaid.
- People who lose SSI then lose Medicaid in SSI category, but could be Medicaid eligible in another category.

Medicaid for Seniors (Healthy Horizons)

- People 65 years and older are a category of Medicaid eligibility
 - Age 65 <u>or</u> disabled
- At or below 100% FPL (after disregards)
- Resources for applicants with a dependent child under 21 in HH are not counted

Household Size	Monthly Income Limit (100% FPL)	Resource Limit
HH of 1	\$1215	\$2000 (single)
HH of 2	\$1643	\$3000 (married)

Medicaid for People with Disabilities

- Same income and resource limit as for seniors (previous slide)
- Disabled by:
 - Receiving SSDI or -
 - Medical documentation of health/ disabling condition Medical documentation from letter from doctor, or doc completing Health Sustaining Medication form <u>Health Sustaining Medication form</u>, or <u>Employability</u> <u>Assessment form</u>

Breast and Cervical Cancer Prevention Treatment

Household Size	Income Limit	Resource Limit
HH of 1	None	None

• Requires:

- Diagnosis of breast or cervical cancer
- Uninsured (no creditable coverage)
- Under age 65
- Separate application (PA 600B)

Questions?

Medical Assistance for Workers with Disabilities (MAWD)

What is MAWD?

- MAWD is a category of Medical Assistance
 - Medical Assistance for Workers with Disabilities
- It provides full Medical Assistance benefits the same adult benefit package that most adults on Medicaid receive
- It can be someone's only insurance or a secondary coverage
- It is the only category of Medicaid that requires someone to pay a monthly premium

MAWD Eligibility Basics

- Age 16-64 MAWD ends at age 65
- Have a disability or chronic health condition
 - If on SSDI, automatically meet disability standard
 - If not on SSDI, must verify disability/chronic health condition with medical documentation
 - **Note**: Applying for SSI/SSDI is **<u>not</u>** required for MAWD
- Must be doing some paid work every month
- Meet income and resource limits
- Monthly premium 5% of individual's income (after deductions)

MAWD Work Requirement

- No minimum # of hours required but must be working at least one a month
- No minimum earnings requirement wages must be reasonable for the work being done
- Job can be formal <u>or</u> informal
- Must prove earnings by either
 - A paystub or earnings statement from employer, or
 - A written statement from person they are working for verifying their work, hours and earnings; employer should sign, date and include phone number

MAWD Income Limits

Income limit: 250% FPL after disregards

Household Size	Monthly	Annual
HH of 1	\$3,038	\$36,456 (approx)
HH of 2 (only if spouse)	\$4,109	\$49,308 (approx)

- Significant earned income disregards apply
- Resource limit: \$10,000 (whether single or married)
- Only applicant's income is used to determine the monthly premium

MAWD – Workers with Job Success

- New category of MAWD eff. January 2022
- To meet criteria, must first be on MAWD for 12 consecutive months, then...
- If income exceeds the MAWD limit, can earn up to 600% of federal poverty level (FPL)
- Resources initially must be less than \$10,000
- After approved for MAWD Workers with Job Success, there is NO resource limit
- Premium for Workers with Job Success is 7.5% of countable income

Medicaid for HCBS (i.e. Waiver Programs)

- Must meet clinical eligibility criteria
- Different clinical criteria for difference waivers (i.e NFCE, ICF-ORC, Autism diagnoses...)
- Income limit for 2023 \$2742/mth (only income of the applicant is counted)
- Resource limit \$8000 (count resources of applicant and spouse but spousal impoverishment rules apply)
- Resources not counted if applicant lives with dependents under age 21

Questions?

Medicaid for Immigrants

Immigration Status Overview

For Medicaid – two standards:

- "Lawfully Present" Immigrants
 - Standard for:
 - Children
 - Pregnant Women
 - Adults (GA-related MA categories)
- "Qualified" Immigrants
 - Plus 5-year bar for most immigrants
 - Narrower than "lawfully present"
 - LPR/Green card holders
 - Standard for:
 - Adults

The Five-Year Bar

- The 5-year bar is the waiting period that runs from the date the person obtains "qualified" status
- Certain individuals are not subject to the 5-year bar and may receive federally funded MA, IF, all other conditions of eligibility are met:
 - 1. Lawfully present children under age 21
 - 2. Lawfully present pregnant women, through 60-day postpartum period
 - 3. Refugees
 - 4. Asylees

See MAEH 322.312

"Lawfully Present"

- "Lawfully present" immigrant children under the age of 21 and pregnant women are not subject to the 5-year bar
- Considered "lawfully present" if:
 - They are a qualified non-citizen
 - A non-citizen in temporary resident status
 - Is currently under Temporary Protected Status (TPS)
 - A comprehensive list can be found in MAEH 322.32

Emergency Medical Assistance (EMA)

- If an individual's immigration status restricts their MA eligibility, they may qualify for EMA (Emergency Medical Assistance)
- Must meet normal requirements for Medicaid (except immigration status)
- Must have a serious medical condition
 - "Emergency Medical Condition" or EMC
 - Coverage option for undocumented immigrants
 - Labor & delivery considered EMC pregnancy (non-high risk) is not

Emergency Medical Condition (EMC)

- The medical provider fills out an Emergency Medical Condition Form to be submitted with general Medicaid application
- A condition that, in the absence of immediate medical attention, could reasonably be expected to result in one of the following:
 - 1) Placing the patient's health in serious jeopardy
 - 2) Serious impairment to bodily functions
 - 3) Serious dysfunction of a bodily organ or part

Questions?

Applying & Renewing Coverage

How to Apply

- **Online:** COMPASS <u>www.compass.state.pa.us</u>
- **By phone**: 866-550-4355
- **By mail:** Paper application ("any form a good form")
- **In person:** @ County Assistance Office

When: Anytime

If Application is Denied...

- Appeal
 - In writing keep a copy, submit in a way that allows for proof of mailing/delivery
 - 30 days from date on denial notice; 15 days to get continued benefits!
- Request Reconsideration
 - If application was denied, individual can ask the CAO to reconsider
 - Request within 60 days of the date of denial
 - Make the request in writing or by talking to caseworker/supervisor at the CAO
 - This works best if eligibility rules were not followed, all categories not reviewed, or if all documentation was not provided

Renewing Medicaid Eligibility

- People on Medicaid must report changes
 - Income, resources, household, address, etc by 10th of the month after change
 - Submit written verification of change or call DHS Customer Service Center at 1-877-395-8930 (in Philadelphia, call 215-560-7226)
 - If don't report change, could result in overpayment
- Each year, CAO must review eligibility for Medicaid
 - Renewal packet sent to address on file with deadline
 - COMPASS notification
 - If renewal not completed, benefits will end
 - Some categories require semi-annual review of eligibility (i.e., MAWD)
 - Help clients prepare for the end of the Medicaid continuous coverage!

Application/Renewal Tips

- Keep copy of information submitted and records of phone calls (dates and who talked to)
- Put name and record number (or SSN) on each page that is submitted
- Individuals can add representatives to case file (should get copy of paperwork and can talk to CAO/DHS Customer Service Center staff)
- Can ask CAO for help if not able to get all the information needed to submit for eligibility/renewal

Questions?

Non-Medicaid Coverage and Subsidies

Children's Health Insurance Program (CHIP)

- Created for children over income for Medicaid and without disabilities
- They must be otherwise uninsured to be eligible for CHIP (unlike Medicaid where kids can have commercial insurance and Medicaid)
- CHIP includes Free CHIP, Low-Cost CHIP and Full-Cost CHIP
 - Individuals who do not qualify for free or low-cost CHIP can buy CHIP at-cost

2023 CHIP Income & Resource Limits

Household Size	Free CHIP	Low-Cost CHIP
HH 2	\$3,501	\$5,243
HH 3	\$4,413	\$6,609
HH 4	\$5,325	\$7,975

Note:

- Resources are not counted for CHIP
- Use MAGI rules for counting income and household size

Pennie: State-Based Marketplace

- Income-based subsidized premiums. Reduced cost-sharing for some
- Most people substantively ineligible for MA sent to Pennie automatically (Not people on Medicare)
- Open to lawfully present immigrant's ineligible for MA
- Enroll within 120 days of losing MA (60 days for retro coverage)
 - Only applies during Unwinding
 - MA coverage loss date = date MA managed care plan coverage ends

Households with income ≤ 150% FPL can apply to Pennie at any time (for now): <u>www.pennie.com</u>

Where To Call for Info/Help

- DHS Customer Service Center: 1-877-395-8930
- County Assistance Office (CAO): MA Ombudsman, Managers, Human Services Program Specialists
- PA MEDI (formerly APPRISE): 1-800-783-7067
 - PA MEDI in Allegheny County: 412-661-1438
 - If working with a consumer on Medicare who needs help applying for programs to help with health care costs and/or needs help with their Medicare coverage/benefits
- PHLP Helpline (Intake): 1-800-274-3258

Questions?

Upcoming webinars in this series

- Medicaid Appeals, Reconsideration, and Troubleshooting Coverage Denials April 11, 2023, 10:00 AM – <u>Register here</u>
- Revisiting MAWD & Introducing Workers with Job Success April 20, 2023, 11:00 AM – <u>Register here</u>
- Dual Eligibles & Medicare Savings Programs May 17, 2023, 11:00 AM – <u>Register here</u>

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Thank you!

With questions or for help:

- Janice Meinert <u>jmeinert@phlp.org</u>
- Catharine Arranz <u>carranz@phlp.org</u>
- PHLP's Helpline: 1-800-274-3258



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