To Reduce Income Levels for Medicaid Buy-In Populations **Part G and J**

Legal Citations:

Summary: This Part directs the Department of Health and Human Services to revise its rules for eligibility for the Medicare Buy-in program to reduce income levels to the minimum federal levels.

Projected Budget Reductions:

Reduces funding to reflect a redistribution of funding and the reduction of resources among the various programs previously funded in the Fund for a Healthy Maine.

Account	SFY 12 Savings	SFY 13 Savings	Savings initiative
020201 - GF	836,743.00	4,462,786.00	LR 2678 A-11
Z01501 FHM Tobacco	156,217.32	833,159.25	LR 2678 A-9
Z01501 FHM Racino	91,746.68	489,315.75	LR 2678 A-9
Z01501 FHM Total	247,964.00	1,322,475.00	LR 2678 A-9

People Affected by Changes:

A portion (20,186) of the current MSP members would lose eligibility for this program. 28,578 will lose coverage for Part B gap coverage for coinsurance and deductible.

Current	MSP	Projected enrollme	ent w/ Federal minimum levels
QMB	55,418	26,840	
SLMB	7,275	12,903	
QI	3,982	6,746	
	66,675	46,489	(difference is 20,186)

Potential State Funds Saved: The Savings in this initiative are only achieved in conjunction with the DEL initiative. If DEL were to remain, any individuals dropped from the MSP would move to DEL and negate any savings in the MSP.

- Loss of MSP means members will pay Medicare part B monthly premium of \$99.90 in 2012.
- Loss of MSP means some will loss the federal low income subsidy assistance for Medicare part D.
- Loss of QMB means some member will have no Medicare gap ("Donut Hole") coverage.

Legal Challenges: It needs to be determined if changing the eligibility levels for this program is in violation of MOE rules under ACA.

	DEL Expenditures by Fund:							
			2006	2007	<u>2008</u>	<u>2009</u>		
010 020201	10A	Drugs for ME's Elderly	814,229.00	1,523,398.00	2,788,244.00	3,982,680.00		
014 020201	10A	Drugs for ME's Elderly	0.00	309,881.00	534,559.00	677,555.00		
014 Z01501	10A	FHM - Drugs for the Elderly and Disabled	7,431,659.00	<u>8,454,444.00</u>	12,069,185.00	11,488,182.00		
		Total DEL Expenditures	8,245,888.00	10,287,723.00	15,391,988.00	16,148,417.00		
	DEL Expenditure Breakout							
			<u>2006</u>	<u>2007</u>	2008	<u>2009</u>		
9	General Operations		0.00	352,959.83	242,275.23	222,397.27		
A	Agency on Aging		0.00	452,769.00	540,360.00	300,000.00		
P	Part B Premiums		0.00	2,874,933.43	9,585,058.05	10,947,812.84		
P	Part D Expenses		0.00	4,313,494.84	2,899,104.59	1,083,273.62		
№	AEPOPS Claims Processing (Goold Health Sy.	stems)	0.00	1,202,542.88	455,242.80	806,813.11		
P	Pharmacy claims		8,227,277.07	1,080,418.26	3,855,245.65	3,801,549.43		
 	(includes, copay, excluded drugs, deductable and gap coverage.)							
	Durable Medical Equipment		18,611.21	10,605.01	60,932.09	32,657.49		
E	Orug Rebates		0.00	0.00	(2,246,230.72)	(1,046,086.85)		
		Total DEL Expenditures	8,245,888.28	10,287,723.25	15,391,987.69	16,148,416.91		

^{**}This data is through 2009.**

Medicare Savings Plan (MSP)/Drugs for the Elderly (DEL) Comparison

	MSP - Current MSP Proposal		DEL - Current	DEL Proposal	
		The proposal will not affect	The purpose of the DEL	The proposal would	
Overview	Assists the elderly (over 65)			eliminate the "wrap"	
	and disabled with their	the benefits offered through	program was to assist some	· -	
	Medicare part B premium	the MSP, however it would	elderly with their drug cost.	coverage for DEL members.	
	and cost share. Individuals	change who is eligible.	Prior to Part D, the	(Wrap coverage includes	
	who are MSP eligible also	:	Department paid 80% of a	deductibles, co-pays,	
	receive free part D under	Maine currently has income	members drug cost. The	premiums and excluded	
	the federal governments	levels higher than federal	member paid the difference	drugs.)	
	low income subsidy	guidelines.	out of pocket. With the		
	program (LIS).		implementation of Medicare		
		This proposal would roll	Part D the benefit continued		
	The buy-in groups are	back these levels to those	to assist with drug cost, but		
	mandated under the	set by federal regulation.	instead of straight cost the		
	Federal Medicaid Program,		Department pays Part D		
	and members must be		premiums, the "Donut		
	Medicare eligible to		Hole"; the cost of drugs that		
	participate.		are between the \$1,500 and		
	participate.		\$3,000 gap in coverage in		
			the Medicare Drug Benefit,		
		•	excluded drug cost and		
			copay's This is called the		
			wrap benefit.		
			Wrap Benefic		
•	,		In 2007 when the MSP		
			program expanded, it reduced		
			the cost of the DEL program.		
			The savings achieved were		
			shifted to pay the state portion		
			of the Part B premiums.		
Covered Populations	Qualified Medicare	QMB	Individuals must be age 62 or	The proposal does not	
-	Beneficiary (QMB)	100% of FPL	older, or be 18 or older and	change eligibility criteria or	
and Eligibility	150% of FPL	(\$908 per month)	receiving SSI disability.	the groups who receive DEL	
•	(\$1,362 per month)	(4, 5 5 F 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		Wrap benefits.	
	(#1,502 per moner)	SLMB	To qualify, a member's gross		
•	Specified Low Income	120% FPL	monthly income must be less		
	Medicare Beneficiary	(\$1,089 per month)	than 185% of the FPL, or		
	(SLMB)	(\$2,000 per monary	\$1,679 per month.		
	170% of FPL	QI	Recipients are:		
	(\$1,543 per month)	135% FPL	recipione arei		
	(#1,545 per monur)	(\$1,226 per month)	DEL Qualified Members.		
	Onalified Individuals (OT)	(41,220 per monini)		l '	
	Qualified Individuals (QI)	This proposal will bring the	MSP Members who receive		
	185% of FPL	eligibility income requirements	DEL wrap benefits.		
	(\$1,679 per month)	to federal guidelines.	^		
		Lo jeuei ai guideimes.	Dual Eligible Members who		
			receive DEL wrap benefits.		

r	MSP - Current	MSP Proposal	DEL – Current	DEL Proposal
Benefits	Benefits vary by enrollment group. QMB - Payment of Medicare Part A and Part B premiums and payment for Medicare coinsurance and deductibles. SLMB - Provides for payment of Medicare Part B premiums only. QI - Provides payment for Medicare part B Premiums only. (QI is 100% federally funded.)	Benefits vary by enrollment group. QMB - Payment of Medicare Part A and Part B premiums and payment for Medicare coinsurance and deductibles. SLMB - Provides for payment of Medicare Part B premiums only. QI - Provides payment for Medicare part B Premiums only. (QI is 100% federally funded.)	Members receive wrap benefits as follows: MSP members have coverage for excluded drugs and coverage for copayment. DEL enrollees have their Medicare Part D premium paid for, copay coverage, part D deductable coverage, excluded drugs, and "Donut Hole" coverage.	Under the proposal, wrap coverage for the DEL, MSP and Duals would be eliminated.
Enrollment	QMB: 55,418 SLMB: 7,275 QI: 3,982	QMB: 26,840 SLMB: 12,903 QI: 6,746	DEL: 4,200 MSP: 43,729 Dual: 47,344	No change in enrollment numbers. 78,368 members would have their wrap benefit reduced or eliminated.