LIST AND DEFINITION OF DUAL ELIGIBLES (Medicare-Medicaid Enrollees)

Dual Eligibles (Medicare-Medicaid Enrollees) - The following describes the various categories of individuals who, collectively, are known as dual eligibles. Medicare has three sets of basic coverages: Part A, which pays for hospitalization costs; Part B, which pays for physician services, lab and x-ray services, durable medical equipment, and outpatient and other services; and Part D which provides coverage of prescription drug costs. Dual eligibles are individuals who are entitled to Medicare Part A and/or Part B and are eligible for some form of Medicaid benefit.

While minimum federal income and asset limits are specified, as is true for other Medicaid categories of eligibility, States are permitted to make the eligibility criteria more generous. The following definitions are listed per the Federal guidelines, but may be higher in any individual State. The asset limits for QMB, SLMB and QI are indexed and thus change every year; the limits for QDWI are not indexed, and instead they remain constant from year to year.

1. Qualified Medicare Beneficiaries (QMBs) without other Medicaid (QMB Only) - These individuals are entitled to Medicare Part A, have income of 100% Federal poverty level (FPL) or less and resources that do not exceed twice the limit for SSI eligibility, and are not otherwise eligible for full Medicaid. Medicaid pays their Medicare Part A premiums, if any, Medicare Part B premiums, and, to the extent consistent with the Medicaid State plan, Medicare deductibles and coinsurance for Medicare services provided by Medicare providers. The Federal government will pay its cost-share according to the standard Federal medical assistance percentage (FMAP).

2. QMBs with full Medicaid (QMB Plus) - These individuals are entitled to Medicare Part A, have income of less than 75% for individuals and 83% for couples FPL or less and resources that do not exceed twice the limit for SSI eligibility, and are eligible for full Medicaid benefits. Medicaid pays their Medicare Part A premiums, if any, Medicare Part B premiums, and, to the extent consistent with the Medicaid State plan, Medicare deductibles and coinsurance for Medicare services provided by Medicare providers. The Federal government will pay its cost-share according to the standard (FMAP).

3. Specified Low-Income Medicare Beneficiaries (SLMBs) without other Medicaid (SLMB Only) - These individuals are entitled to Medicare Part A, have income of greater than 100% FPL, but less than 120% FPL and resources that do not exceed twice the limit for SSI eligibility, and are not otherwise eligible for Medicaid. Medicaid pays their Medicare Part B premiums only. The Federal government will pay its cost-share according to the standard FMAP.

4. SLMBs with full Medicaid (SLMB Plus) - These individuals are entitled to Medicare Part A, have income of greater than 100% FPL, but less than 120% FPL and resources that do not exceed twice the limit for SSI eligibility, and are not otherwise eligible for Medicaid. Medicaid pays their Medicare Part B premiums only. The Federal government will pay its cost-share according to the standard FMAP.

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1 Dual Eligible Defined- Dual eligible individual, means an individual who is entitled to, or enrolled for, benefits under part A of title XVIII of the Social Security Act, or enrolled for benefits under part B of title XVIII of such Act, and is eligible for medical assistance under a State plan under title XIX of such Act or under such a waiver of such plan.

2 While minimum federal income and asset limits are specified, as is true for other Medicaid categories of eligibility, States are permitted to make the eligibility criteria more generous. This is true for all types of Dual eligibles (QMB, QMB Plus, SLMB, SLMB Plus, QDWI, and QI).
Medicare Part A, have income of greater than 100% FPL, but less than 120% FPL and resources that
do not in exceed twice the limit for SSI eligibility, and are eligible for full Medicaid benefits. Medicaid
pays their Medicare Part B premiums and provides full Medicaid benefits. The Federal government
will pay its cost-share according to the standard FMAP.

5. Qualified Disabled and Working Individuals (QDWIs) - These individuals lost their Medicare
Part A benefits due to their return to work. They are eligible to purchase Medicare Part A benefits,
have income of 200% FPL or less and resources that do not exceed twice the limit for SSI eligibility,
and are not otherwise eligible for Medicaid. Medicaid pays the Medicare Part A premiums only. The
Federal government will pay its cost-share according to the standard Federal medical assistance
percentage (FMAP).

6. Qualifying Individuals (QI) -
There is an annual cap on the amount of money available, which may limit the number of individuals
in the group. These individuals are entitled to Medicare Part A, have income of at least 120% FPL, but
less than 135% FPL, resources that do not exceed twice the limit for SSI eligibility, and are not
otherwise eligible for Medicaid. Medicaid pays their Medicare Part B premiums only. The Federal
government will pay its cost-share according to the standard Federal medical assistance percentage
(FMAP) at 100%.

7. Medicaid-Only Dual Eligibles (Non QMB, SLMB, QDWI, QI) -
These individuals are entitled to Medicare Part A and/or Part B and are eligible for full Medicaid
benefits. They are not eligible for Medicaid as a QMB, SLMB, QDWI, QI Typically, these individuals
need to spend down to qualify for Medicaid or fall into a Medicaid eligibility poverty group that
exceeds the limits listed above. Medicaid provides full Medicaid benefits and pays for Medicaid
services provided by Medicaid providers, but Medicaid will only pay for services also covered by
Medicare if the Medicaid payment rate is higher than the amount paid by Medicare, and, within this
limit, will only pay to the extent necessary to pay the beneficiary's Medicare cost sharing liability.
Payment by Medicaid of Medicare Part B premiums is a State option; however, States may not receive
FFP for Medicaid services also covered by Medicare Part B for certain individuals who could have
been covered under Medicare Part B had they been enrolled. The Federal government will pay its cost-
share according to the standard Federal medical assistance percentage (FMAP).

Revised September 29, 2011
Medicaid Programs to Assist Low-Income Medicare Beneficiaries

While minimum federal income and asset limits are specified, as is true for other Medicaid categories of eligibility, States are permitted to make the eligibility criteria more generous. The following definitions are listed per the Federal guidelines, but may be higher in any individual State. The asset limits for QMB, SLMB and QI are indexed and thus change every year: the limits for QDWI are not indexed, and instead they remain constant from year to year.

<table>
<thead>
<tr>
<th>Program</th>
<th>Income Limits (% of Federal Poverty Level)</th>
<th>Resource Limits&lt;sup&gt;3&lt;/sup&gt; (Individual/Couple)</th>
<th>Funding Source</th>
<th>Benefits Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>QMB</td>
<td>Up to 100% FPL</td>
<td>$6,880/ $10,020</td>
<td>Medicaid funded entitlement</td>
<td>Medicare Part A premiums&lt;br&gt;Medicare Part B premiums&lt;br&gt;State may pay deductibles, coinsurance and provide full Medicaid benefits depending on the State plan.</td>
</tr>
<tr>
<td>QMB Plus</td>
<td>Incomes less than 75% FPL for individuals and 83% for couples.</td>
<td>$2000/ $3000*</td>
<td>Medicaid funded entitlement</td>
<td>Full Medicaid benefits, as well as QMB benefits described above.</td>
</tr>
<tr>
<td>SLMB</td>
<td>Incomes between 100 and 120 percent of the FPL</td>
<td>$6,880/ $10,020</td>
<td>Medicaid funded entitlement.</td>
<td>Medicare Part B premiums only.</td>
</tr>
<tr>
<td>QDWI</td>
<td>Incomes at or below 200% FPL</td>
<td>$4000/$6000</td>
<td>Medicaid funded entitlement.</td>
<td>Assistance with Medicare Part A premiums.</td>
</tr>
<tr>
<td>QI</td>
<td>120-135% FPL</td>
<td>$6,880/$10,020</td>
<td>Federally funded.</td>
<td>Medicaid pays Part B premiums.</td>
</tr>
</tbody>
</table>

*Section 209(b) States may use more restrictive eligibility requirements for full Medicaid benefits, as long as they are no more restrictive than those in effect in the State’s Medicaid plan as of 01/01/72.
**State are not required to pay for Medicare coinsurance if the Medicaid payment rates for a given service are sufficiently lower than Medicare payment rates.

<sup>3</sup>The asset limits for QMB, SLMB and QI are indexed and thus change annually; the limits for QDWI are not indexed, and instead they remain constant from year to year. For more information on the annual Federal Poverty Limits, please see: https://secure.ssa.gov/apps10/poms_nsf/lnx/0600815024

The federal asset limits allow for an additional $1500 per person for burial expenses.