

Qualified Medicare Beneficiary

QMB Benefit Plan

What is the QMB Program?

People with Medicare who are in the QMB program are also enrolled in Medicaid and get help with their Medicare premiums and cost-sharing.

What are the Billing Requirements Affecting People in the QMB Program?

Per CMS Medicare providers and suppliers may not bill beneficiaries in the QMB program for Medicare deductibles, coinsurance, or copays, but state Medicaid programs may pay for those costs. Under some circumstances, federal law lets states limit how much they pay providers for Medicare cost-sharing. Even when that's the case, beneficiaries in the QMB program have no legal obligation to pay Medicare providers for Medicare Part A or Part B cost-sharing.

QMB Benefit Plan

QMB: Qualified Medicare Beneficiary – All Inclusive

This benefit plan is part of the Medicare Savings Program (MSP), also known as the "Buy-In" program. A beneficiary must be entitled to Medicare Part A. Under certain income limits, Medicaid pays for Medicare Part B premiums, deductibles and co-insurance. This is an all-inclusive benefit plan.

Medicaid's Responsibility:

Michigan Medicaid will only reimburse providers for services if the service or procedure is a Medicare covered benefit. The provider must report the appropriate Medicare policy and the correct claim filing indicator on the Medicaid claim along with a payment, deductible, copayment, or coinsurance. Medicaid is responsible for deductibles, and coinsurance up to Michigan Medicaid's fee screen amount minus any Medicare payments and secondary payments if applicable. If Medicare denies the service or procedure Medicaid has no responsibility to reimburse the services.

Per the Michigan Medicaid Provider manual Coordination of Benefits Chapter, Section 2.6.B. MEDICARE PART A - For QMBs, if MDHHS is paying a beneficiary's Medicare Part B premium and the beneficiary does not have free Medicare Part A, MDHHS also pays the beneficiary's Medicare Part A premium.

2.6.E. MEDICARE BUY-IN/MEDICARE SAVINGS PROGRAM If a beneficiary is eligible for Medicare but has not enrolled, he can do so at any time throughout the year by applying with SSA. If the beneficiary is unable to pay the Medicare premiums, Medicaid may pay the premiums through a contractual agreement (called the Medicare Buy-In Agreement) with the federal government. However, Medicaid cannot buy-in for the beneficiary until he applies for Medicare and the SSA is aware that he is Medicaid-eligible, and the beneficiary has applied for the Medicare Savings Program through his local MDHHS office. Beneficiaries eligible for Buy-In but who have not enrolled in Medicare can enroll at any time throughout the year by applying with SSA. Medicaid beneficiaries who did not receive automatic enrollment into Medicare Part A and/or Part B or declined coverage should also seek enrollment. Beneficiaries who need to enroll in Medicare can visit their nearest Social Security office for assistance or contact the Michigan Medicare/Medicaid Assistance Program (MMAP) for health benefit information and counseling.

Please contact the Medicaid Provider Support Helpline for Buy-In assistance at 1-800-292-2550.