

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET
P.O. BOX 942732
ACRAMENTO, CA 94234-7320



March 20, 1992

TO: All County Welfare Directors
All County Administrative Officers
All County Program Specialists/Liaison

Letter No.: 92-20

SUBJECT: QMB Outreach

REFERENCE: 91-09, 91-62, 91-118, 91-120

This is to inform you of various outreach programs to provide low income disabled and seniors with information about the Qualified Medicare Beneficiary (QMB) program as a result of June 1991 report, "The Secret Benefits: The Failure to Provide the Medicare Buy-in to Poor Seniors" released by Families, USA.

We were informed in February that on January 3, 1992, the Social Security Administration (SSA) sent a stuffer to SSA recipients with their SSA checks providing information about the Qualified Medicare Beneficiary (QMB) program. This stuffer instructed the recipient to contact the State or local medical assistance, social service office, or welfare office.

In February, the State Department of Health Services (DHS) sent a QMB mailer to approximately 100,000 SSI/SSP recipients who have no Medicare Part A or who purchase it. A copy of this notice was enclosed in All County Welfare Director's Letter No. 91-118.

SSA recently sent DHS a tape containing 17,500 potential QMBs who have enrolled in "conditional" Medicare Part A. Most of these individuals are California SSI/SSP recipients who have not contacted the counties for a QMB determination. We are considering sending them a mailer informing them to contact their local county welfare department.

In late March, the Health Care Financing Administration (HCFA) plans to distribute a QMB brochure (see enclosed) through organizations serving senior citizens. This brochure is intended to reach all 30 million elderly Medicare beneficiaries nationwide who may be entitled to benefits. The 1992 General Enrollment Period deadline is March 31, 1992; therefore, those individuals not already enrolled in Medicare Part A may not benefit from the outreach campaign.

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The brochure will contain a national 800 phone number for these potential QMBs to call for initial information. The potential QMB then will be referred to a state or local number. Counties were previously requested to provide a name, address, and phone number of a contact person for this QMB brochure. Please review the enclosed list for accuracy.

If you have any corrections or questions, please contact Marge Buzdas at (916) 657-0726.

Sincerely,

ORIGINAL SIGNED BY

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

Enclosures

QUALIFIED MEDICARE BENEFICIARY (QMB) CONTACT LIST

- 01 ALAMEDA COUNTY
Social Services Agency
Don Sandri
401 Broadway-3rd Floor
Oakland, CA 94607
(510) 670-6261
- 02 ALPINE COUNTY
Dept. of Social Services
Lorraine Lake
14810 Highway 89, P. O. Box 277
Markleeville, CA 96120
(916) 694-2235
- 03 AMADOR COUNTY
Dept. of Social Services
Emily Daniel
125 Academy Drive
Sutter Creek, CA 95685
(209) 223-6550
- 04 BUTTE COUNTY
Dept. of Social Welfare
Brenda Pilgram
42 County Center Drive
P.O. Box 1649
Oroville, CA 95965
(916) 538-2071
- 05 CALAVERAS COUNTY
Welfare Department
Carol Allen
Govt. Center, Mtn. Ranch Rd.
San Andreas, CA 95249
(209) 754-6444
- 06 COLUSA COUNTY
Dept. of Social Welfare
Nancy Montgomery
251 E. Webster
P. O. Box 370
Colusa, CA 95932
(916) 458-4985
- 07 CONTRA COSTA
Social Services Dept.
Arlene James
40 Douglas Drive
Martinez, CA 94553
(510) 313-1547
- 08 DEL NORTE COUNTY
Welfare Department
Teri Husberg
981 H Street
Crescent City, CA 95531
(707) 464-3191
- 09 EL DORADO COUNTY
Welfare Department
Mary Peterson
2929 Grandview St
P. O. Box 1637
Placerville, CA 95667
(916) 621-6376
- 10 FRESNO COUNTY
Dept. of Social Services
Johnnie Belford
(209) 453-4779 or
Gayle DeLateur
(209) 453-6469
4449 E. Kings Canyon
P.O. Box 1912
Fresno, CA 93750
- 11 GLENN COUNTY
Dept. of Social Services
Patti Blakeman
135 No. Enright
P.O. Box 611
Willows, CA 95988
(916) 934-6514
- 12 HUMBOLDT COUNTY
Dept. of Social Services
Patti Fisher
929 Koster Street
Eureka, CA 95501
(707) 445-6028
- 13 IMPERIAL COUNTY
Department of Social Services
Debbie Nolta
P. O. Box 930
El Centro, CA 92244
(619) 353-1400 Ext. 690
- 14 INYO COUNTY
Dept. of Social Services
Darlene Landis
162A Grove Street
Bishop, CA 93514
(619) 872-1394
- 15 KERN COUNTY
Dept. of Human Services
Karyn Bostick
100 E. California Ave.
Bakersfield, CA 93307
(805) 631-6186
- 16 KINGS COUNTY
Human Services Agency
Dena Borba

- 1200 South Drive
Hanford, CA 93230
(209) 582-3241 Ext. 2317
- 17 LAKE COUNTY
Dept. of Social Services
Sheila Haas
1220 Martin Street
P.O. Box 190
(707) 995-3422
Lakeport, CA 95453
- 18 LASSEN COUNTY
Dept. of Social Welfare
Nellie Guinn
720 Richmond Road
P. O. Box 1359
Susanville, CA 96130
(916) 257-8311 Ext. 157
- 19 LOS ANGELES COUNTY
Dept. of Public Social Services
General Information Number
P. O. Box 5493
El Monte, CA 91731
(818) 572-5851
- 20 MADERA COUNTY
Dept. of Public Welfare
Nancy Brice
629 E. Yosemite
P. O. Box 569
Madera, CA 93638
(209) 675-7841
- 21 MARIN COUNTY
Dept. of Health & Human Services
Jenny Santellan
3501 Civic Center Br.
P. O. 4160
San Rafael, CA 94913
(415) 499-7089
- 22 MARIPOSA COUNTY
Debbie Smith
Dept. of Human Services
Social Services Division
5186 Highway 49 North
P. O. Box 7
Mariposa, CA 95338
(209) 966-3609
- 23 MENDOCINO COUNTY
Dept. of Social Services
Nancy Naumann
747 South State Street
P. O. Box 1060
Ukiah, CA 95482
(707) 463-2437 Ext. 173
- 24 MERCED COUNTY
Human Services Agency
Edith Rodriquez
P. O. 112
Merced, CA 95641
(209) 385-3000 Ext. 5496
- 25 MODOC COUNTY
Dept. of Social Services
Pat Wood
120 North Main Street
Alturas, CA 96101
(916) 233-3939 Ext. 501
- 26 MONO COUNTY
Dept. of Social Welfare
Frances Thompson
Emigrant Street
Bridgeport, CA 93517
(619) 932-7291
- 27 MONTEREY COUNTY
Dept. of Social Services
General Information Number
1000 S. Main Street, Suite 208
Salinas, CA 93901
(408) 755-8500
- 28 NAPA COUNTY
Dept. of Social Services
Beverly Peterson
2344 Old Sonoma Road
P. O. Box 329
Napa, CA 94559-0329
(707) 253-4379
- 29 NEVADA COUNTY
Dept. of Public Social Services
Cynthia Bryan
950 Maidu Ave
P. O. Box 1210
Nevada City, CA 95959
(916) 265-1340
- 30 ORANGE COUNTY
Social Services Agency
Medi-Cal Officer of the Day
1055 North Main Street. Rm 600
Santa Ana, CA 92701
(714) 939-4000
- 31 PLACER COUNTY
County Welfare Dept.
General Information Number
11519 B Avenue
Auburn, CA 95603
(916) 889-7610

32	PLUMAS COUNTY Dept. of Social Services Carol Roberts 270 County Hospital Road P. O. Box 360 Quincy, CA 95971 (916) 283-6350		333 E. Washington P. O. Box 201056 Stockton, CA 95201 (209) 468-1696
33	RIVERSIDE COUNTY Dept. of Public Social Services Gloria Moore 4060 County Circle Drive P. O. Box 7789 Riverside, CA 92513 (714) 358-3262	40	SAN LUIS OBISPO COUNTY Dept. of Social Services Holly Feather 3220 S. Higuera Street P. O. Box 8119 San Luis Obispo, CA 93403-8119 (805) 549-4166
34	SACRAMENTO COUNTY Dept. of Social Services Kathy Seatrix- A920 1725 28th Street Sacramento, CA 95816 (916) 732-9376	41	SAN MATEO COUNTY Dept. of Social Services Jamie Buckmaster 400 Harbor Blvd., Bldg. B Belmont, CA 94002 (415) 595-7566
35	SAN BENITO COUNTY Human Services Agency Alma Villasana 380 San Benito Street Hollister, CA 95023 (408) 637-5336	42	SANTA BARBARA COUNTY Dept. of Social Services Allegra Shiner 234 Camino Del Remedio Santa Barbara, CA 93110 (805) 346-7103
36	SAN BERNARDINO COUNTY Dept. of Public Social Services General Information Number 468 W. 5th Street, 2nd Floor, #420 San Bernardino, CA 92401 Call local Dept. of Social Services	43	SANTA CLARA COUNTY Social Services Agency Terri Perez 1670 Los Plumas Ave., Suite H San Jose, CA 95110 (408) 299-7695
37	SAN DIEGO COUNTY Dept. of Social Services QMB Specialist 7947 Mission Center Court San Diego, CA 92101 (619) 531-5814	44	SANTA CRUZ COUNTY Human Resources Agency Nan Toy 1020 Emeline St P. O. Box 1320 Santa Cruz, CA 95060 (408) 425-2521
38	SAN FRANCISCO COUNTY General Information Number Dept. of Social Services P. O. Box 7988 San Francisco, CA 94120 (415) 557-6050	46	SHASTA COUNTY Dept. of Social Services Karen Boyer 2460 Breslauer Way P. O. Box 6005 Redding, CA 96049 (916) 225-5794
39	SAN JOAQUIN COUNTY Dept. of Public Assistance Linda Calvert	46	SIERRA COUNTY Human Services Lori Wright 195 Front Street P. O. Box 1019 Loyalton, CA 96118 (916) 993-6720

- 47 SISKIYOU COUNTY
Welfare Dept.
Maureen Olson
Court House, Room #4
Yreka, CA 96097
(916) 842-4471
- 48 SOLANO COUNTY
Public Welfare Dept.
For Vallejo & Benica:
355 Tuolumne Street
Vallejo, CA 94590
(707) 553-5359
For all other cities:
240 Travis Court
Suisun, Ca 94585
(707) 421-7700
- 49 SONOMA COUNTY
Social Services Dept.
George Alberigi
2550 Paulin Drive
P. O. Box 1539
Santa Rosa, CA 95402
(707) 527-2139
- 50 STANISLAUS COUNTY
Dept. of Social Services
Dan Sandoval
P. O. Box 42
Modesto, CA 95353
(209) 525-6664
- 51 SUTTER COUNTY
Welfare & Social Services
Pat Evans
190 Garden Highway
P. O. Box 1535
Yuba City, CA 95992-1535
(916) 741-7230
- 52 TEHAMA COUNTY
Dept. of Social Welfare
Bonnie Davis
1135 Lincoln
P. O. Box 1515
Red Bluff, CA 96080
(916) 527-1911
- 53 TRINITY COUNTY
Welfare Dept.
Terry Wilson
101 Court Street/Hwy 299
P. O. Box 218
Weaverville, CA 96093
(916) 623-1266
- 54 TULARE COUNTY
Dept. of Public Social Services
General Information Numbers
100 East Center, P. O. Box 671
Visalia, CA 93279
(209) 733-6000
- 75 West Olive Avenue, P.O. Box 1269
Porterville
(209) 782-4750
- 458 East O'Neal Ave., P.O. Box 1375
Tulare, CA 93275
(209) 685-2600
- 148 South L Street, P.O. Box 985
Dinuba, Ca 93618
(209) 591-5804
- 900 North Sequoia
P.O. Box 670
Lindsay, CA 93247
(209) 562-1377
- 55 TUOLUMNE COUNTY
County Welfare Dept.
Robert Maige
20075 Cedar Road North
Sonora, CA 95370
(209) 533-5746
- 56 VENTURA COUNTY
Public Social Services Agency
General Information Number
1400 Vanguard Drive, Second Floor
Oxnard, CA 93033
(805) 385-8587
- 57 YOLO COUNTY
Dept. of Social Services
Patti Larsen
922 Sacramento Ave.
West Sacramento, CA 95691
(916) 372-2000 Ext. 9708
- 58 YUBA COUNTY
County Welfare Dept.
General Information Number
6000 Lindhurst Ave., #504
P. O. Box 2320
Marysville, CA 95901
(916) 741-6311

HCFA



Department of
Health & Human
Services

FACT SHEET

Health Care
Financing
Administration

QUALIFIED MEDICARE BENEFICIARY PROGRAM

The Law

The Qualified Medicare Beneficiary (QMB) Program was enacted as a mandatory program by Congress as part of the Medicare Catastrophic Coverage Act of 1988. Although the Act was later repealed, the QMB Program was retained and is codified in the Social Security Act as Section 1902(a)(10)(E) and Section 1905(p).

Medicare and the QMB Program

The Medicare program is a Federal health insurance program for people 65 or older and certain younger disabled people. It has two parts—Hospital Insurance (Part A) and Supplementary Medical Insurance (Part B). Beneficiaries are responsible for premiums, deductibles and copayments. Under the QMB Program, State Medicaid programs are required to pay these cost-sharing expenses for certain elderly and disabled persons with low-incomes and very limited assets.

Qualifications

Generally, to qualify for the QMB program in 1992 an individual must:

- be entitled to Medicare Hospital Insurance (Part A);
- have an annual income at or below the national poverty guidelines of \$6,810 (\$9,190 for a couple), except in Alaska and Hawaii. The limits for Alaska are \$8,500 for one person and \$11,480 for a couple. The limits for Hawaii are \$7,830 for one person and \$10,570 for a couple. Income includes Social Security benefits, pensions and wages. Interest payments and dividends can also count as income.
- not have resources such as bank accounts, stocks, and bonds, in excess of \$4,000 for one person or \$6,000 for a couple. When resources are considered, a personal home, one automobile, burial plots, home furnishings, personal jewelry and life insurance usually are not counted.

Filing An Application

Individuals who think they qualify for assistance under the QMB program should file an application for Medicaid at a State, county or municipal office—not a Federal office—that serves people on Medicaid. Those who think they might qualify for assistance but do not have Medicare Part A, should also contact a Social Security Administration office and inquire about filing an application for Part A. The respective States make the final determination as to who qualifies and will receive assistance under the QMB program. Applicants who are rejected have a right to appeal and are guaranteed a hearing.

- more -

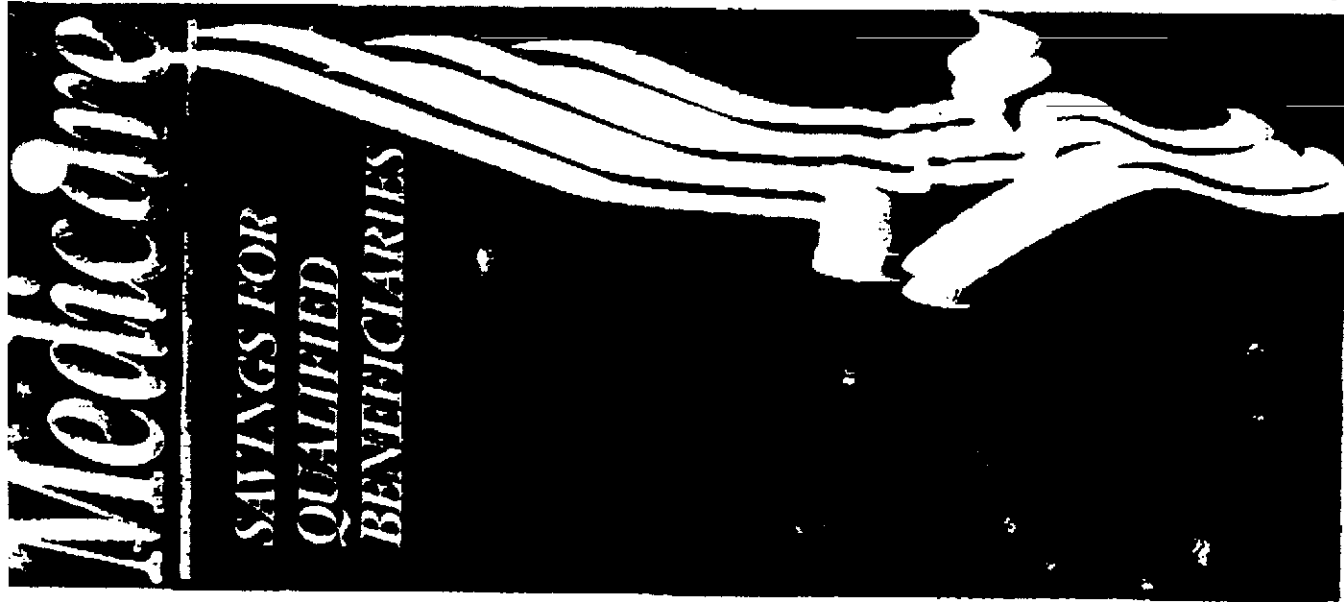
State Medicaid Office Telephone Numbers

Persons who need the telephone number for their State Medicaid office can call 1-800-638-6833. This is a hotline maintained by the Health Care Financing Administration (HCFA) to provide the public with information about the Medicare program. HCFA administers the Medicare program and the Federal portion of the Medicaid program.

Medicare Expenses Covered by the QMB Program

Beneficiaries who qualify for the QMB program do not have to pay the following Medicare expenses:

- The Medicare Hospital Insurance (Part A) monthly premium if one is required. The monthly premium is \$192 per month in 1992. Most people are entitled to Part A based on their or their spouse's employment and do not have to pay the premium. Individuals must pay for Part A if they or their spouse did not work in Medicare-covered employment or did not work long enough (generally 10 years) to get premium-free benefits. Among other things, Part A pays for care in a hospital and skilled nursing facility. It does not pay doctor bills.
- The Part A deductible, which is \$652 per benefit period in 1992. The deductible is an amount a beneficiary must pay before Medicare starts paying. Medicare pays all other hospital costs for the first 60 days of each benefit period.
- The Part A daily coinsurance amount for hospital stays lasting more than 60 days. The daily coinsurance amount in 1992 is \$163 for days 61 through 90 and \$326 for each of the 60 lifetime reserve days a beneficiary uses when more than 90 days of hospital care are needed in a benefit period.
- The Part A daily coinsurance amount for covered care in a skilled nursing facility. The daily coinsurance amount in 1992 is \$81.50 for days 21 through 100 in each benefit period. The first 20 days of covered care in each benefit period are fully covered by Medicare.
- The Medicare Medical Insurance (Part B) monthly premium of \$31.80 in 1992. Part B helps pay for the services of doctors, other health care providers, and various medical services and supplies not covered by Part A.
- The Part B annual deductible of \$100.
- The Part B coinsurance for all physician and other Part B charges above the \$100 annual deductible. Coinsurance is the share of doctor and other medical bills that Medicare beneficiaries are required to pay. It is usually 20% of the Medicare approved amount for a service.

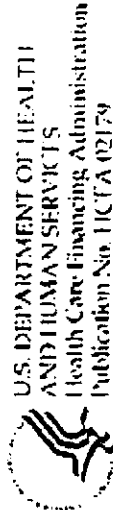


If you apply for assistance under the QMB program and are turned down, you have a right to appeal and are guaranteed a hearing. You file an appeal at the place you first applied. If you need assistance or advice, you may want to contact your State Agency on Aging. Assistance also may be available from the Legal Aid or Legal Services office in your State. These offices serve people below the poverty line who need legal help. The service is free to those who qualify. The telephone numbers for all State offices can be found in the telephone directory under "State Government." Again, if you need the telephone number for your State Medicaid office, call:

1-800-638-6833

For further information

For more information about the Medicare program, please refer to *The Medicare Handbook*. Free copies are available from any Social Security office.



deductible. The deductible, \$652 per benefit period in 1992, is an amount Medicare beneficiaries must pay before Medicare starts paying. Medicare pays all other hospital costs for the first 60 days of each benefit period.

- You will not have to pay the Part A daily coinsurance amount for hospital stays lasting more than 60 days. The daily coinsurance amount in 1992 is \$163 for days 61 through 90 and \$326 for each of your 60 lifetime reserve days you use when more than 90 days of hospital care are needed in a benefit period.
- You will not have to pay the Part A daily coinsurance amount for covered care in a skilled nursing facility. The daily coinsurance amount in 1992 is \$81.50 for days 21 through 100 in each benefit period. The first 20 days of covered care in each benefit period are fully covered by Medicare.
- You will not have to pay the Medicare Medical Insurance (Part B) monthly premium. The premium is \$31.80 per month in 1992. Part B helps pay for the services of doctors, other health care providers, and various medical services and supplies not covered by Part A.
- You will not have to pay the Part B annual deductible of \$100.
- You will not have to pay the Part B coinsurance for all physician and other Part B charges above the \$100 annual deductible. Coinsurance is the share of doctor and other medical bills that Medicare beneficiaries are required to pay. It is usually 20% of the Medicare approved amount for a service.

YOUR SAVINGS AND YOU

If you are elderly and poor or disabled and poor, the State might pay some or all of your Medicare expenses.

Federal law requires that State Medicaid programs pay Medicare costs for certain elderly and disabled persons with low-incomes and very limited assets. You might qualify for this assistance even if you did not work long enough to be covered by Medicare.

What this means is that you may not have to pay any money out of your own pocket for Medicare's premiums, deductibles and coinsurance. You could save hundreds, if not thousands, of dollars each year.

How do I qualify?

The rules for this financial assistance may vary from State to State but, in general terms, you must meet the following requirements to qualify:

- You must be entitled to Medicare Hospital Insurance (Part A).
- Your annual income must be at or below the national poverty guidelines of \$6,810 for one person or \$9,190 for a couple (except for Alaska and Hawaii). This is an average of \$567.50 per month for one person or \$765.84 per month for a couple. If you live in Alaska, the limits are \$8,500 for one person and \$11,480 for a couple. The limits for Hawaii are \$7,800 for one person and \$10,570 for a couple. Income includes Social Security benefits, pensions and wages. Interest payments and dividends can also count as income.

- Your resources such as bank accounts, stocks, and bonds, cannot exceed \$4,000 for one person or \$6,000 for a couple. Some things—like the home you live in, one automobile, burial plots, home furnishings, personal jewelry and life insurance—usually don't count as resources.

Where should I apply?

If you think you qualify for this assistance, you should file an application for Medicaid at a State or local office—not a Federal office—that serves people on Medicaid. If you need the telephone number for your State Medicaid office, call 1-800-638-6833. Give the operator the name of your State and explain that you want the Medicaid telephone number so you can get information about the "Qualified Medicare Beneficiary" program. That office or any other office closer to your home that takes Medicaid applications can help you. If you think you qualify for this assistance but do not have Medicare Part A, you should also contact a Social Security Administration office. You may need to file an application for Part A.

What do I ask for?

When you contact the State or local Medicaid office, ask about the Qualified Medicare Beneficiary program or the "Medicare Buy-In" program. It is also sometimes called the "QMB" program for short. Explain that you think you qualify for help in paying your Medicare costs and you want to know when and where you can file a Medicaid application.

What should I bring with me?

When you file an application with a State or local Medicaid office, be prepared to answer questions about your income and property holdings. After filing the application, you may be required to go through a face-to-face interview with a Medicaid caseworker. At that time, you will be asked questions about your application. You will be expected to have copies of documents like bank statements, property deeds, and insurance policies that show the value of the resources you own. Verification of your income and assets will be important in determining your eligibility for the QMB program.

Medicare costs you will not have to pay

If you qualify for the QMB program, all of your Medicare expenses will be covered. This means:

- You will not have to pay the Medicare Hospital Insurance (Part A) monthly premium if one is required. The Part A monthly premium in 1992 is \$192. Most people are entitled to Part A based on their or their spouse's employment and do not have to pay the premium. You must pay for Part A if you or your spouse did not work in Medicare-covered employment or did not work long enough (generally 10 years) to get premium-free benefits. Among other things, Part A pays for care in a hospital and skilled nursing facility. It does not pay doctor bills.