MEDICAID POLICY INFORMATION SHEET

Policy Analyst: Bridg	et Heffron				
Phone Number:	Public Comment	\square	Final		
Brief description of					
The purpose of this approved State Plan for Medicare, as a cor	policy is to streamlin Amendment requiring	applica Medicai	ISP enrollment process and i tion for Medicare, for those wh d.		
To solve long-term populations of eligible	•	ocess, v	vhich required manual enrollr	nent of many	
Budget implication: ☐ budget neutral ☐ will cost MDHHS ☐ will save MDHHS	\$ 2 million, and is bu \$	udgeted	in current appropriation		
Is this policy change mandated per federal requirements?					
Yes - the approved state plan must be followed for the Medicaid program.					
Does policy have operational implications on other parts of MDHHS?					
Does policy have operational implications on other departments?					
no					
Summary of input: controversial acceptable to mos limited public interes	o .				
Supporting Docume	ntation:				
	• —	⊠ No nied	Public Notice Required: If yes, Submission Date:	Yes 🛭 No	

1/18 Policy Info Sheet

DRAFT FOR PUBLIC							
COMMENT							
Michigan Department of							
Health and Human Services	Project Number: 234	6-Eligibility	Date: November 6, 2023				
	cember 11, 2023	0-Liigibility	Date. November 0, 2023				
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Direct Comments To: Bridget Heffron							
Address:							
	fronb@michigan.gov						
Phone: Fax:							
Policy Subject: Medicare Savings Program Eligibility							
Affected Programs: Medicare Savings Program							
Affected Frograms. Medicare Savings Frogram							
Distribution: Bridges Eligibility Manual (BEM) Holders							
Summary: The purpose of this policy is to streamline the MSP enrollment process and							
implement the approved State Plan Amendment requiring application for Medicare, for those							
who may qualify for Medicare, as a condition of eligibility for Medicaid.							
Purpose: To solve long-term problems with the process, which required manual enrollment of							
many populations of eligible individuals.							
Cost Implications: about \$2 million in GF							
Potential Hearings & Appeal Is	esuas: Few if any as the	se chades w	ill enroll more eligible				
individuals in MSP and in Medica	•	se chages w	ill efficili fflore eligible				
marriagale in Mer and in Meales							
State Blan Amendment Benuined: Vee No No No Dublic Notice Benuined: Vee No No No							
State Plan Amendment Required: Yes \square No \boxtimes Public Notice Required: Yes \square No \boxtimes If yes, date submitted:							
	<u> </u>						
Tribal Notification: Yes 🗌 N	o 🛛 - Date:						
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Comment001 Revised 6/16

Proposed Policy Draft

Michigan Department of Health and Human Services Behavioral & Physical Health and Aging Services Administration

Distribution: Bridges Eligibility Manual Holders

Issued: May 1, 2024 (Proposed)

Subject: Medicare Savings Program Eligibility

Effective: June 1, 2024 (Proposed)

Programs Affected: Medicare Savings Program

This bulletin announces changes to Medicaid eligibility policy. The changes will allow for automatic enrollment in the Medicare Savings Program (MSP) for several Medicaid beneficiaries that have previously been processed through manual enrollment in the MSP.

Many Medicare beneficiaries are also enrolled in full-coverage Medicaid. These beneficiaries are known as dual eligibles. The state Medicaid program, through the MSP, pays the Medicare part A and B premiums for these beneficiaries by "buying in" the premium payment for an eligible individual. Sometimes the MSP is referred to as the "buy-in" program. The state Medicaid program and federal Medicare program coordinate the MSP program in Michigan. Currently there are several categories of potentially eligible individuals who require manual review of eligibility and enrollment in MSP.

This bulletin also announces implementation of the Medicaid State Plan requirement that an applicant or recipient for Medicaid, who is potentially eligible for Medicare, must apply for Medicare as a condition of eligibility for Medicaid.

Enrollment in Medicare will allow the State of Michigan to pay the part A and or B premiums for the dual-eligible individual. Failure to apply for Medicare will cause denial of Medicaid coverage. Applicants who apply but are not found eligible for Medicare will still be potentially eligible for Medicaid. These changes will ensure the Medicaid program enrolls persons into MSP who do not fall into automatic enrollment and who are, or can be, enrolled in Medicare.