



OPERATIONAL MEMO

Title: Automatic Enrollment of QMB For Medicare Part A and SSI Eligible Members	Topic: Eligibility Policy
Audience: Eligibility Sites, Eligibility Technicians and Supervisors, County Departments of Human/Social Services	Sub-Topic: Income & Resource Eligibility
Supersedes Number: N/A	Division: Eligibility Policy
Effective Date: Oct. 1, 2024	Office: Medicaid Operations Office
Expiration Date: Oct. 1, 2026	Program Area: Eligibility Policy
Key Words: SSI, QMB, Medicare, Auto, Autoenrollment, Enrollment, Eligibility, Disability	
Legal Authority: 42 CFR 435.909(b)(1)	
Memo Author: Nancy Brenes	
Operational Memo Number: HCPF OM 24-042	
Issue Date: August 30, 2024	
Approved By: Marivel Klueckman	

HCPF Memo Series can be accessed online: <https://www.colorado.gov/hcpf/memo-series>

Purpose and Audience:

The purpose of this memo is for the Department of Health Care Policy & Financing (the Department) to provide guidance to Eligibility Sites (County Departments of Human/Social Services, Medical Assistance and Eligibility Application Partner sites) regarding eligibility and enrollment changes coming to the Qualified Medicare Beneficiary (QMB) Program.

Information:

Based on new Federal regulation 42 CFR 435.909(b)(1) dated 11/17/2023, States are to deem individuals enrolled in the mandatory SSI group who have premium-free Medicare Part A as eligible for the QMB program. The Department has implemented this change to the enrollment process for SSI eligible members to the QMB program. QMB can be added as a primary or secondary aid code if the primary aid code allows QMB as a secondary aid code. No further income or resource verifications are necessary.

This change will be effective 10/01/2024 when all members will be reviewed for eligibility; if a member is part of the mandatory SSI group (regardless of receiving funds or appeal status) and receiving premium-free Medicare Part A, they will be automatically enrolled into the QMB Program. Eligibility will start on November 1, 2024 as QMB starts the first of the month following the eligibility determination.

Though the QMB program does not allow retroactive coverage, some member's coverage may initiate prior to 10/1/2024 depending on factors associated to their disability determination date, SSI mandatory or premium-free part A begin date and others. The retroactive coverage span will run back a maximum of 36 months. The Centers for Medicare & Medicaid Services (CMS) has included this retroactive coverage as part of the Federal guidance.

If eligibility to the mandatory SSI group and premium-free Medicare Part A were to discontinue, the eligibility to the QMB program will also discontinue. The member will be reviewed for other program eligibility before being discontinued from the QMB program.

Action To Be Taken:

CBMS will have indicators to identify members that were enrolled in the QMB program due to this change. On the medical assistance individual eligibility tab in the wrap up queue there will be an iNOA that reads: Client has been auto-enrolled into QMB due to Medicare part A and SSI eligibility. There will also be a case comment that reads: Client has been auto enrolled in QMB with (eligibility begin date) due to Medicare part A and SSI eligibility.

The Colorado Benefits Management System (CBMS) will run a mass update on all active cases. Certain cases may be flagged to not run and automatically update in the mass update. These cases require a manual review. Eligibility sites are to work through the cases found in their Eligibility Site's exception reports found in Cognos or their County Dashboard.

For more information on these changes, Eligibility Sites may reference the CBMS August Build Summary.

Definition(s):

None

Attachment(s):

None

HCPF Contact:

hcpf_medicaid.eligibility@state.co.us