



Medicare Savings Programs

What is the Qualified Medicare Beneficiary (QMB) Program?

Medicare refers to the Qualified Medicare Beneficiary (QMB) group as a “Medicare Savings Program.” Under the QMB program, Medicaid only pays Medicare premiums, deductibles, and coinsurance for persons who are qualified Medicare beneficiaries. This saves you money.

Who is a Qualified Medicare Beneficiary?

You could be eligible as a qualified Medicare beneficiary if you:

- Are 65 or older, blind or disabled and eligible to get Medicare Part A benefits.
- Have resources less than \$7,280 for a single person or \$10,930 for a couple.
- Have income at or below 100% of the federal poverty level.

What if my income or resources are too high for QMB?

If your total countable income or resources are higher than the QMB limits, there are other programs you may qualify for:

- **Medically Needy:** Ask the DHS office about Medically Needy if you have lots of medical bills and not enough money to pay the bills. If you get Medically Needy, you will need to pay your medical bills up to the spenddown or deductible.
- **SLMB (Specified Low Income Medicare Beneficiary) or E-SLMB (Expanded Specified Low Income Medicare Beneficiary):** SLMB and E-SLMB will only pay your Medicare Part B premium. The income limit is over 100% but less than 135% of the federal poverty level.

What medical services are covered?

Under the QMB program, you get limited Medicaid coverage. This means Medicaid will pay only for the Medicare premiums, deductibles, and co-insurance for medical services covered by Medicare.

Do I need to pay anything for medical services?

Medicaid covers the cost of medically necessary services, such as physicians, dentists, hospitals, prescribed drugs that are not paid by Medicare drug plans, ambulance services, and eyeglasses. These services plus limits on them are explained in “*Your Guide to Medicaid*,” which is on the internet at:

http://www.dhs.state.ia.us/policyanalysis/PolicyManualPages/Manual_Documents/Forms/Comm20.pdf

or you can call your DHS worker to get a copy of the brochure.

How are payments made?

After you qualify for the QMB program you will get a Medical Assistance Eligibility Card. Carry your card with you and show it to the medical provider every time you request service. Your card may not be used by people other than the individual listed on the card. If you lose your card, contact your local DHS office or Member Services at **1-800-338-8366** (If you live in the Des Moines area, call **515-256-4606**).

The medical provider will bill the Medicaid program. Payment for Medicare deductibles and co-insurance will be sent directly to the provider. Medicaid will pay for Medicare Part A and Part B premiums.