

# MEDICAID ALERT

---

January 10, 2018

## Corrected Mailing Regarding Medicare Requirement

The December 13<sup>th</sup>, 2017 Medicare Enrollment Alert posted in MARC described the processes being put in place by the State of New York to help ensure that all Medicaid applicants and recipients who appear to be eligible for Medicare apply for this benefit. One aspect of this process is a notice sent using the New York State Client Notice System (CNS) to current Medicaid recipients aged 65 and over who appear to be eligible for Medicare but have not yet enrolled. This notice informs them of the Medicare requirement and gives them a date for responding with proof they have applied.

The mailing to the first cohort of these clients was sent on December 18, 2017 with a response due back to HRA by January 15, 2018. This mailing mistakenly informed consumers that they were no longer eligible for Medical Assistance. Because of this error, New York State sent a new notice to these clients on January 5, 2018 advising them of the error as well as a new corrected notice regarding the Medicare requirement. The timeframe for response has been extended until February 7, 2018. Samples of the corrected notices are attached.

As a reminder, if an A/R or the A/Rs legal representative requires additional time to meet the documentation requirement, additional time will be allowed. For Medicaid only clients, client representatives should submit MAP 3062(c) to the Undercare Processing Division to request more time for their clients. Alternatively, consumers or their representatives can call the HRA Medicaid Helpline (888-692-6116) to request additional time.

PLEASE SHARE THIS ALERT WITH ALL APPROPRIATE STAFF

## CNS Paragraph Form

Date: 01.02.2018

Program Area	03	(01=PA, 02=FS, 03=MA, 04=HP)
Paragraph Number	S0036	
Version Number	00001	
Effective Date	2018	
Title	Over 65, Request to Apply for Medicare	
Comment	manual revision/one time use (January 2018)	
Reason Code	MCB	

Name Client I.D. #

Our records indicate that you are 65 years of age or older and do not have MEDICARE. When you turn age 65, you are required to apply for MEDICARE as a condition of eligibility for Medicaid.

**In order to continue to be eligible for benefits under the Medicaid program, you must apply for MEDICARE coverage if it is available to you.**

You **must** apply by calling the Social Security Administration at 1-800-772-1213 or by applying on-line at: <https://www.ssa.gov/medicare/>.

You have until **February 7<sup>th</sup>, 2018** to apply for Medicare and send us proof that you applied.

Proof can be:

- Your award or denial letter from the Social Security Administration, **OR**
- Your online confirmation letter stating that you have applied for MEDICARE with the Social Security Administration
- A copy of your Medicare card

Proof should be returned in the self-addressed stamped envelope included with this letter.

or

Mail copy to the address listed below

**What is the difference between MEDICARE and Medicaid?**

- **MEDICARE** is a federal program that gives you health care coverage if you are 65 or older regardless of your income. You may now be entitled to additional medical benefits through the MEDICARE program.
- **Medicaid** is a State-run program that covers medical expenses for people with low or limited incomes.

When a person has both MEDICARE and Medicaid, MEDICARE pays first and Medicaid pays second. Individuals with MEDICARE also have more medical providers to choose from.

**There are Medicaid programs that may help you with your MEDICARE premium costs and prescription drug costs.**

The MEDICARE Savings Program (MSP) helps pay the MEDICARE premiums. If you are eligible for the MEDICARE Savings Program, Medicaid will pay the cost of your MEDICARE premiums. This program has higher income levels than the Medicaid program and, also has no resource test. To find out if Medicaid can pay your MEDICARE premiums, contact the NY State of Health or your local Department of Social Services. If you live in New York City you can call 311 to find an office near you.

- The MEDICARE Prescription Drug Program (Medicare Part D) is the part of MEDICARE that provides prescription drug coverage. If you are determined eligible for MEDICARE, you will receive more information from the Centers for MEDICARE and Medicaid Services (CMS) about what you need to do to join the MEDICARE Prescription Drug Program (Part D), how MEDICARE will help pay for your drug costs, and what other steps you will need to take. It is very important that you keep this information and read it carefully. If you have any questions regarding MEDICARE, call 1-800-633-4227. For free, personalized counseling regarding your MEDICARE plan choices and benefits, call The Health Insurance Information Counseling and Assistance Program (HIICAP) at 1-800-701-0501.

**Apply for MEDICARE Today**

This notice is based on Section 366 (2)(b)(1) of the Social Services Law.

~S/

Nombre

No. del I.D. del Cliente

Nuestros registros indican que tiene 65 años de edad o más y que no tiene MEDICARE. Cuando cumpla 65 años, debe solicitar MEDICARE como condición de elegibilidad para recibir Medicaid.

**Para seguir siendo elegible para recibir los beneficios conforme al programa de Medicaid, debe solicitar la cobertura de MEDICARE si está disponible para usted.**

Para realizar la solicitud **debe** llamar a la Administración de Seguro Social al 1-800-772-1213, o realizar la solicitud en línea accediendo a: <https://www.ssa.gov/medicare/>.

Tiene tiempo hasta el **7 de febrero, 2018** para solicitar Medicare y enviarnos un comprobante de su solicitud.

El comprobante puede ser:

- Su carta de adjudicación o denegación de la Administración de Seguro Social, **O**
- Su carta de confirmación en línea que indique que usted ha solicitado MEDICARE ante la Administración de Seguro Social
- Una copia de sus Tarjeta de Medicare

Debe enviar el comprobante en el sobre prefranqueado con el domicilio del destinatario que se incluye con esta carta.

Or

**copia por correo a la dirección indicada a continuación o Fax al 212 896-5654**

**HRA/FIA Special Projects Center  
Cooper Station  
PO BOX 982  
New York NY 10211-1072**

### **¿Cuál es la diferencia entre MEDICARE y Medicaid?**

- **MEDICARE** es un programa federal que le proporciona cobertura de atención médica si tiene 65 años o más, independientemente de sus ingresos. Es posible que ahora tenga derecho a recibir beneficios médicos adicionales a través del programa de MEDICARE.
- **Medicaid** es un programa dirigido por el estado que cubre los gastos médicos para las personas con ingresos bajos o limitados.

Cuando una persona tiene MEDICARE y Medicaid, MEDICARE paga primero y Medicaid paga en segundo lugar. Los individuos con MEDICARE también tienen más proveedores médicos para elegir.

**Existen programas de Medicaid que pueden ayudarle con los costos de sus primas de MEDICARE y con los costos de sus medicamentos recetados.**

El Programa de Ahorros de MEDICARE (MSP) lo ayuda a pagar las primas de MEDICARE. Si es elegible para el Programa de Ahorros de MEDICARE, Medicaid pagará el costo de sus primas de MEDICARE. Este programa permite niveles de ingresos más altos que el programa de Medicaid y además no tiene evaluación de recursos. Para descubrir si Medicaid puede

pagar sus primas de MEDICARE, comuníquese con el NY State of Health o con su Departamento de Servicios Sociales local. Si vive en la ciudad de Nueva York, puede llamar al 311 para buscar una oficina cercana a su domicilio.

- El Programa de Medicamentos Recetados de MEDICARE (Medicare Part D) es la parte de MEDICARE que proporciona cobertura de medicamentos recetados. Si se determina que usted es elegible para MEDICARE, recibirá más información de los Centros de Servicios de MEDICARE y Medicaid (CMS) acerca de lo que debe hacer para formar parte del Programa de Medicamentos Recetados de MEDICARE (Part D), de qué manera MEDICARE pagará los costos de sus medicamentos y qué otros pasos deberá tomar. Es muy importante que guarde esta información y la lea detenidamente. Si tiene alguna pregunta con respecto a MEDICARE, llame al 1-800-633-4227. Para recibir asesoramiento personalizado y gratuito con respecto a las opciones de planes y los beneficios de MEDICARE, llame al Programa de Información, Asesoramiento y Asistencia sobre Seguros de Salud (HIICAP) al 1-800-701-0501.

**Solicite MEDICARE hoy mismo**

Esta decisión se basa en la Sección 366 (2)(b)(1) de la Ley de Servicios Sociales.

Date: 01.02.2018

Program Area

Paragraph Number 00000

Version Number 00001

Effective Date 2016

Title Medicare Turing 65 Correction letter (NYC)

Comment

Reason Code print to mail

**THIS LETTER CONTAINS IMPORTANT INFORMATION ABOUT YOUR MEDICAID COVERAGE.**

On \_\_\_\_\_ we sent you a notice about your Medicaid coverage that may have been confusing. The notice mistakenly informed you that you were no longer eligible for Medical Assistance. Please disregard the notice.

A revised notice is enclosed. Please read the revised notice as it will require you to take action in order to continue to be eligible for benefits under the Medicaid program.

~S\

**ESTA CARTA CONTIENE INFORMACIÓN IMPORTANTE SOBRE SU COBERTURA DE MEDICAID.**

El \_\_\_\_\_ le enviamos un aviso sobre su cobertura de Medicaid que puede haber sido confusa. El aviso le informó erróneamente que usted ya no era elegible para recibir Asistencia Médica. Por favor ignore el aviso.

Se adjunta un aviso revisado. Por favor lea el aviso revisado ya que le requerirá tomar medidas para continuar siendo elegible para beneficios bajo el programa de Medicaid.