



Safety Net Programs for Maine's Seniors

June 5 and 6, 2014 Machias and Ellsworth

Maine Equal Justice Partners

www.mejp.org



About Maine Equal Justice Partners (MEJP)

- We work to find solutions to poverty and improve the lives of people with low income in Maine.
- We accomplish our mission through:
 - Public policy advocacy in the legislature and with governmental agencies
 - Legal representation and impact litigation on systemic issues
 - Statewide outreach and training on issues affecting people with low income and the supports that can help them prevent or move out of poverty
- MEJP focuses its work on the issues that affect people's daily lives access to adequate health care, food and income security, supports for working families, and higher education and training opportunities.
- Our website contains much information about public benefit programs www.mejp.org



What we plan to cover today

1.. Legal Services for the Elderly

2.	Health Care:		
	☐ Update on MaineCare Expansion		
	☐ Seniors and the Affordable Care Act		
	☐ ACA special Enrollment Periods		
	☐ Medicare Savings Program Asset Test		
3.	3. Food: the Food Supplement Program (SNA		
	☐ "Heat and Eat"		
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	☐ Photo IDs on EBT Cards		
	☐ Medical Deductions		

4. My Maine Connection: Online application for benefits

Legal Services for the Elderly



- Hilary Fernald, DownEast Senior Safety Net Attorney, Washington & Hancock Counties
 - hfernald@mainelse.org
 - Office hours in Machias at WHCA office on Wednesdays
 - Available to schedule meetings with clients in Ellsworth at WHCA
 - <u>www.mainelse.org</u> (See handouts)
 - LSE Helpline: 1-800-750-5353

Accepting Federal Funds to Expand MaineCare



- The Affordable Care Act (ACA) set aside federal dollars for Maine to provide Medicaid coverage to approximately 69,500 people who would be uninsured otherwise. Adults with income up to 138% FPL (\$16,105/year for an individual; \$27,311/year for a family of three) could be covered.
- The federal government pays 100% of the cost of covering "newly eligible" individuals through December 31, 2016. After that, the federal contribution will be adjusted gradually until it reaches the permanent rate of 90% in 2020.
- Many working low-income adults with income below 138% of the FPL can't afford health insurance. They have little or no discretionary income and cannot afford the out-of-pocket expenses that people in the health care Exchange have to pay, even with available subsidies

Maine's Legislature approved accepting federal funds - Vetoed

- During the last legislative session, the legislature passed 3 pieces of legislation that would have enabled Maine to accept the federal funding to expand MaineCare (Bipartisan support!)
- Unfortunately, each of the bills passed were vetoed by the Governor and the legislature was unable to overturn the veto (needed just a couple of votes!)

Benefits of accepting federal dollars to expand MaineCare

- Some of the Benefits of Accepting Federal Funds:
- 69,500 Maine people with low-income insured, including about 3,000 veterans and 1,000 of their family members
- 3,100-3,400 jobs created throughout Maine
- \$256,000,000 in additional federal dollars annually for Maine
- \$500,000,000 additional economic activity in Maine's economy
- Hospitals in states that have accepted federal funds and expanded Medicaid indicate reduction in charity care and uninsured and increase in revenues

Effort to Expand MaineCare Continues

www.CoverMaineNow.com

- See county specific fact sheets
- Story Banking



Affordable Care Act – Seniors and Special Enrollment Periods (SEPs)

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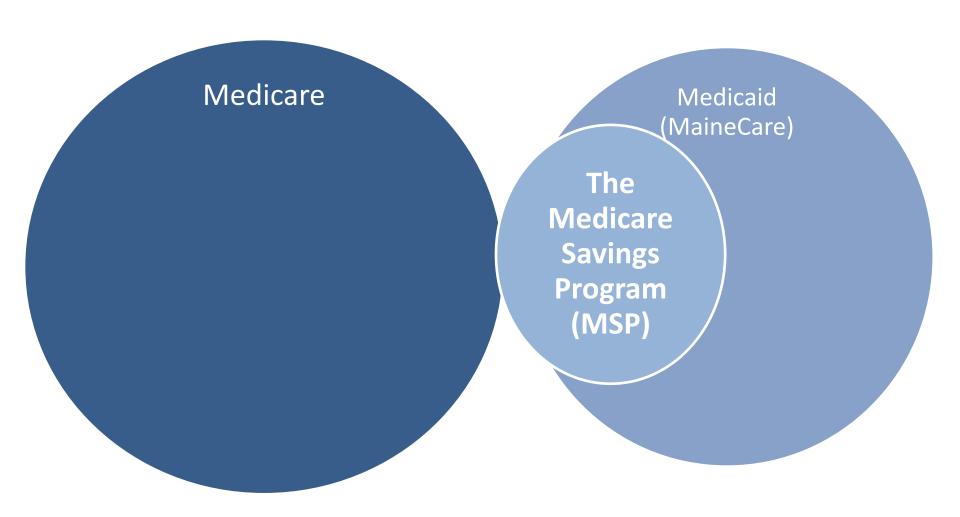
Toll Free: 1-800-432-7812

Fax: 207-941-2869

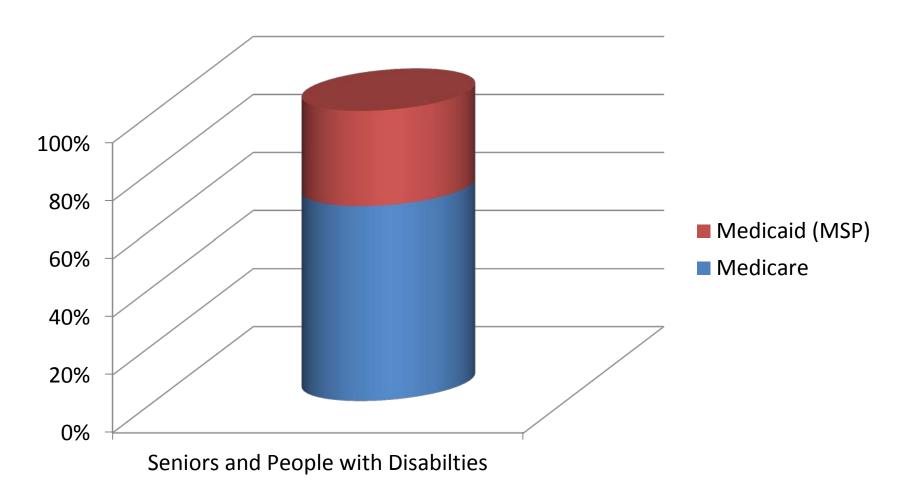
(See Handouts)

The Medicare Savings Program

(sometimes called the buy-in program or dual eligible benefits)



Medicare doesn't pay the full cost of health care. There are deductibles, co-pays, co-insurance and premiums. MaineCare has a benefit that helps pay these costs: the **Medicare Savings Program**



Different Coverage Groups in MSP

Qualified Medicare Beneficiaries (QMB); Specified Low-Income Medicare Beneficiaries (SLMB); and Qualified Individuals (QI)

Medicare Savings Program (MSP) Benefits Will my MSP pay for the cost of my.....

	QMB	SLMB or QI
Part A		
Premium	Yes	No
Deductible	Yes	No
Co-insurance & co-pay	Yes	No
Part B		
Premium (\$105.50 a month)	Yes	Yes
Deductible	Yes	No
Co-insurance & co-pay	Yes	No
Part D		
Premium	Yes	Yes
Deductible	Yes	Yes
Donut hole	Yes	Yes
Co-insurance	Yes	Yes
Co-pay	Partial	Partial

Eligibility for MSP

In order to get the MSP benefit, you need to meet three criteria:

- You must be enrolled in Medicare and have Medicare Part A coverage.
- Your "countable" income, after subtracting all the allowable disregards, must be at or below 175% FPL
- Liquid Asset limit of no more than \$50,000 per person or \$75,000 per couple (liquid assets: pensions, savings) – other assets, such as a home, vehicle, furniture, etc. DO NOT COUNT)

Allowable deductions in the MSP

- **Federal disregard**: deduct \$20 from an individual's or couple's gross income unless only income received is from a need-based source (Veteran's pension, all in-kind donations).
- Impairment-related work expenses (this deduction is only for disabled individuals/couples who are age 64 or younger and working): deduct impairment-related work expenses from an individual's or couple's gross income.
- Earned income disregard only for people who are earning wages through employment
 - Deduct \$65 from an individual's or couple's earned income.
 - Deduct half of the remaining amount of earned income.
- State disregard: \$55 from individual gross income or \$80 from a couple's gross income.
- Other less common disregards (for example, for dependent children or for a couple where only one spouse is applying for MaineCare or certain COLA disregards). Call Maine Equal Justice (207-626-7058) for more information.

Not everyone will receive the same disregards - it is difficult to give one number that represents an upper limit for income eligibility. However, in general, for people who are not working, if their income is at or below the following amounts, they will be eligible for MSP:

- o If single: \$1,770 (this is \$75 over 175% FPL).
- o If married: \$2,394 (this is \$100 over 175% FPL). If only one of you wants to enroll in MSP, your joint gross income can be up to \$356 higher, which is \$2,618.

Remember the earned income disregard! If you are **working**, your income can be even higher.

MSP Enrollment



Like all other MaineCare programs, DHHS must make an eligibility decision within 45 calendar days (or else they must temporarily provide the benefit until they are able to make a final decision). Temporary coverage after the 45th day will not happen automatically – applicants will need to call DHHS and tell them that their application has been pending for 45 days.

Because it is the Social Security Administration (SSA) that collects the Part B premiums, even if DHHS makes a decision on the MSP application within 45 days, it may be several months until SSA stops taking the Part B premium out of the person's Social Security retirement or Social Security Disability Insurance (SSDI) check. They will then receive a lump sum check from SSA to reimburse them for any Part B premiums that were taken out of their benefit check when in fact their MSP benefit was paying that premium.

People are enrolled in MSP for 12 months at a time. Before the end of the 12-month enrollment period, DHHS should send members a review form. They must return the form and continue to meet applicable eligibility guidelines for continued enrollment.

The appeals process for the MSP

MSP, DEL and Maine Rx Plus members and applicants have the right to appeal almost any DHHS decision that adversely affects eligibility or benefits.

Members and applicants have the right to bring a family member, an attorney or another trusted person to a fair hearing to appeal a decision. Help may also be available through Pine Tree Legal Assistance or Legal Services for the Elderly (toll-free **1-800-750-5353**; in the Augusta area, call **623-1797**).

Appeals must be made within 30 calendar days of the date of the DHHS written decision to deny or terminate MSP. To appeal an MSP decision, call or write to the regional DHHS office and ask for a fair hearing.

If appealing a DHHS decision to end MSP benefits, the coverage can continue up to the time of the fair hearing decision, but **only** if the request for a fair hearing is made within **12 calendar days** of the date on the DHHS decision. If the 12-day deadline is missed, an appeal within the 30-day deadline can still be filed; however, the coverage will not continue up to the hearing decision. If the person wins the hearing, then DHHS may have to pay any back bills. If a person loses, they don't have to pay back any bills or assistance that was paid or provided through MSP, DEL or Maine Rx during the appeals process.

Low Cost Drugs for the Elderly and Disabled Program (DEL)

DEL provides low-income seniors (175% FPL -\$20,108 for a single person) over the age of 62 and people with disabilities.

1-866-RxMAINE (1-866-796-2463)

Basic Benefits:

- 80% minus \$2.00 of the cost of all generic prescription drugs on MaineCare Preferred Drug List.
- 80% minus \$2.00 of the cost of brand-name medications on the Preferred Drug List for the treatment of diabetes, heart disease, high blood pressure, chronic lung disease (emphysema and asthma), arthritis, anticoagulation, Hyperlipidemia (high cholesterol), incontinence, thyroid disease, osteoporosis, Parkinson's Disease, glaucoma, Multiple Sclerosis, and ALS (Lou Gehrig's Disease).

DEL Continued

Supplemental Benefits:

 includes other drugs not covered in basic benefit. Drugs must be medically necessary and supplied from participating manufacturers. Actual savings vary from drug to drug. DEL Members pay the State's MaineCare rate minus \$2.00

Catastrophic Spending Limit:

- After a Member spends \$1,000 on eligible prescription drugs (tracked from August 1st each year to July 31st of the following year) DEL pays 80% of the cost of all eligible prescription drugs, regardless of the disease or condition. Drugs must be medically necessary and supplied from companies with agreements with the State. Eligible prescription drugs are only those drugs that were covered by DEL on May 31, 2001.
- Some drugs require 'prior approval' for coverage. Members with Medicare Part D coverage are eligible for DEL Wrap benefits only.
- The DEL Preferred Drug List is posted at <u>www.mainecarepdl.org/pdl</u>

Other Resources

MaineCare

Who's Covered, Who's Not (handout)

MedAccess: 877-275-1787

 Works with individuals and healthcare providers to identify ways patients can save money on prescription medications. Helps patients and providers evaluate options including low-cost generic programs, Medicare Part D, patient assistance programs and other state and local programs that can help save on prescription medication costs.

Maine Breast and Cervical Cancer Program

1-800-350-5180

 Helps uninsured women, age 40-64, pay for breast or cervical cancer screenings at a participating provider service location site. Uninsured women diagnosed with breast or cervical cancer or undergoing treatment for breast or cervical cancer may also qualify for MaineCare if their income is below 250% FPL.

Hospital Free Care

- All hospitals are required to provide free care to Maine residents who are unable to pay for hospital care. State regulations require hospitals to provide free care to people with income below 150% FPL:
 - Up to \$1,459 a month for an individual
 - Up to \$1,967 a month for a family of 2
 - Up to \$2,474 a month for a family of 3
 - Up to \$2,982 a month for a family of 4
- SOME HOSPITALS provide free care to people with higher income. Please check with individual hospitals about their Free Care guidelines – most are available online.

Food Supplement Benefits (SNAP/Food Stamps)

The Food Supplement (FS) program helps people access needed food. Eligible households receive their monthly benefits through an Electronic Benefit (EBT) card which they can use at participating retailers.

All households with incomes below 185% FPL (\$3051/month for a family of 3) may be eligible for FS benefits. There is no asset test for this program.

You do *not* have to live with children, receive cash assistance, or be elderly or disabled to get Food Supplements. Many people work and get FS benefits.

Several important decisions will be made in the next few months affecting the Food Supplement Program. These include:

- "Heat and Eat"
- Relief from Overpayments
- Photos on EBT cards

The FS/LIHEAP Connection: "Heat and Eat"

- If a FS household receives a LIHEAP benefit it is automatically eligible to use the FS "standard utility allowance" (SUA). In most cases, this means that the household will get more FS benefits.
- Until recently if a household received any amount of LIHEAP it would qualify for the SUA. A new federal law now requires that the household receive a LIHEAP payment of more than \$20 to qualify for the SUA.
- Maine must now decide whether to increase LIHEAP benefit to at least \$21 for FS household to continue to get the SUA.
- This issue mainly affects seniors and people with disabilities living in subsidized housing with heat included in their rent.
- Approximately 8,000 Maine households will be affected by this decision. Access to the SUA gives them approximately \$107 a month in additional Food Supplement benefits.

"Heat and Eat", continued

- MaineHousing has already supplemented benefits for the approximately 450 new LIHEAP recipients in this heating season so that they will qualify for the SUA. No adjustment has yet been made for the approximately 7,500 households that qualified for the SUA based on receipt of a small 5-year LIHEAP benefit in the previous four years.
- LIHEAP applications are now closed until August, 2014.
- Under the current Maine rules, anyone who receive at least \$21 in LIHEAP in the past 12 months will continue to be eligible for the SUA.
- There will be no change until DHHS and MaineHousing make a decision about whether next year's LIHEAP rules will give at least \$21 to all affected households. This decision will be made this summer.
- It would cost approximately \$160,000 in additional LIHEAP costs to make this change. This would reduce the average LIHEAP benefit by approximately the cost of 1 gallon of oil a year. By doing this, affected households will receive over \$10,000,000 a year in additional food benefits.

Food Supplement Estimator

http://www.ptla.org/maine-food-supplement-estimators

Option 1

Use the "short forms." The document you generate will tell you the information you entered and the estimated amount of food supplements for a household your size.

- For households WITH NO elderly or disabled member
- For households WITH an elderly or disabled members

Food Supplement Overpayments

- If someone is assessed a Food Supplement
 Overpayment and can show it would be a
 hardship to repay, they may be able to get a
 "waiver" of the overpayment.
- The Overpayment must have been an "Agency Error" or "Inadvertent Household Violation."
- "Intentional Program Violations" also known as IPVs are not eligible for waiver.
- Please see the MEJP form to request a waiver as DHHS offices do not have a form.

Recoupment

- For "inadvertent household" or "agency error" claims, the mandatory reduction amount shall be the greater of 10% of the monthly benefit, or \$10.00, assuming the household continues to be eligible for a monthly benefit.
- For Intentional Program Violations, the mandatory reduction amount shall be the greater of 20%, or \$20.00, again, assuming the household continues to be eligible for a monthly benefit.
- A higher rate of recoupment may be used with the household's permission.

Recoupment - continued

 The Department can collect a SNAP overpayment from any household member who was 18 or older at the time the overpayment occurred.

 If you have a client who applies for a waiver of a Food Supplement overpayment and is denied, feel free to contact Crystal Bond or Jack Comart at Maine Equal Justice Partners by calling 626-7058.

FS/SNAP Medical Deduction



- Food Supplement/SNAP is intended to Help Seniors and People with Disabilities Get the Food they Need to Stay Healthy.
- Seniors and people with disabilities often need special diets, but medical expenses make it hard for them to buy the food they need.
- Congress created a special "medical deduction" in the FS/SNAP program.

Who can get a FS/SNAP Medical Deduction?

Seniors: age 60 years or older

Person with a disability who:

- Gets Supplemental Security Income (SSI) or Social Security Disability (SSDI); or any other federal, state or local public disability pension;
- Gets a State SSI supplement check;
- Gets MaineCare based on disability;
- Gets Railroad Retirement Disability benefits;
- Is a veteran who is totally disabled, permanently housebound, or needs aid and attendance; OR
- Is a surviving spouse of a veteran who is getting VA benefits or is a child of a veteran who is permanently disabled.

What expenses count towards a medical deduction?

- Medical care not reimbursed by insurance (doctor's visits, dental care, chiropractic care and other health treatments)
- **Health insurance costs**: premiums, copays and deductibles
- Medical-related transportation or lodging
- Prescription Medications or over the counter medications approved by your health care provider
- Health supplies recommended by your health care provider (eyeglasses, hearing aides, incontinence supplies, etc.)
- Medical Equipment (purchase, rental or repair of wheelchair, prosthetics, emergency response system, special beds and more)
- Other expenses that are medical related
- Securing and maintaining a seeing eye, hearing ear dog or any service animal specifically trained to serve the needs of a disabled or aged individual. Dog food and veterinarian bills are allowed.
- Note: Most special diet foods are not allowable medical deduction(s) but you can use your SNAP benefits to help buy food for a special diet.

How do I claim my medical expenses?

- You can claim medical expenses when you apply for or recertify for the FS/SNAP. You can also ask your case worker at any time to give you a medical deduction.
- You must show proof of your medical expenses.
 "Proof" can be receipts, cancelled checks, a print out from your pharmacy, your own written record of medically-related transportation, or other similar records and statements.
- You do not need to give proof of your medical expenses each month. You can ask that your expenses be estimated over the SNAP certification period if you don't expect them to change.

(See medical deduction form)

How Much is allowed for a "medical deduction"?

- You can only count medical costs that are more than \$35 a month. For example, if you and your spouse are both seniors and have total medical costs of \$100 a month, your household's medical deduction is \$65 in that month.
- There is no limit on the medical deduction. You can deduct all allowable medical costs over \$35 even if you haven't paid them yet.

IMPORTANT NOTE: Medical costs that will be paid by a health insurer or someone outside of your household cannot count as a medical deduction.

New Policy of Photos on EBT Cards

- Starting April 28, 2014, the Maine Department of Health and Human Services began a "pilot project" in the greater Bangor area to add photos to EBT cards.
- The federal Department of Agriculture (USDA) runs the Supplemental Nutrition Assistance Program (SNAP). It requested that the State not to go forward with the plan until it had been assured that people's rights would be protected. However, the State chose to ignore the warning and began moving forward with the plan.
- This pilot project is voluntary. This means that if someone does not want to have their picture taken and put on their card they do not have to do it. They cannot be penalized for saying no.

Photo IDs - continued

- Red Control of the Co
- Seniors, people with disabilities, victims
- of domestic violence and household heads that only receive benefits for their children (not themselves) are exempt from the pilot plan.
- The only people who can be asked to have their picture taken are those who come into the office voluntarily between now and the end of June. A person cannot be told they have to come into the office just to have their photo taken.

Photo IDs continued

- DHHS has said that they will let households put two photos on their EBT card. However, even if a household member's photo is not on the card, that member can still legally use the card.
- The household can also still authorize a non-household member to use the card as long as they fill out a form at DHHS to make that person an "authorized representative." These "authorized representatives" might be a home health provider or a trusted friend or family member outside of the person's household.

Photo IDs - continued

Very Important!



- People shopping with EBT cards cannot be treated differently from other people in the check-out line.
- Under federal law, a cashier cannot ask to look at someone's EBT card if it has a photo on it, if they are not also asking to look at everyone else's EBT, credit, or debit card.

Photo IDs - continued

 Before the effort to expand Photo IDs on a state-wide basis can occur, the Department must promulgate rules. We expect to see rules proposed sometime in the near future. We will review the rules carefully, and provide comment. Others can do so as well.

 We expect it will be late summer before the project can expand state-wide.

Call Maine Equal Justice if you have questions about photo IDs

- If you know of anyone having ANY PROBLEMS using their EBT card after a photo is added; OR
- if you know anyone who has felt pressured to add a photo to their EBT card when they did not want to; OR
- if you or your clients have any questions about this new plan:
- PLEASE CALL Crystal Bond at Maine Equal Justice at 207-626-7058, ext.205.
- It will be very helpful to us in commenting on the rules that get proposed if we know of any issues or problems that people have experienced in the pilot program.

Apply for Benefits Online: My Maine Connection



- DHHS launched a new online application and screening tool for public programs: www.maine.gov/mymaineconnection/
- People can fill out a screening tool anonymously to find out if they are eligible for TANF; Food Supplement; MaineCare; WIC; Child Care; and/or EITC OR they can go directly to an online application to apply for TANF; Food Supplement; MaineCare; and/or Child Care.
- People are not required to apply online. They can have a
 written application mailed to them. Additionally, some offices
 will still allow an applicant to sit with a worker to fill out an
 application. However, offices are moving away from that
 practice. Eventually, only people who need assistance due to
 a disability or low literacy level will be given the opportunity
 to sit with a worker to fill out an application.

My Maine Connection



- AFTER YOU SUBMIT AN ONLINE APPLICATION the application will be followed up by a call from a DHHS caseworker to review and supplement the application and arrange for any needed verification (like copies of wage stubs, birth certificates, drivers license, etc. if required. Copies of these documents can be provided to DHHS. People should not have to mail or take in originals.)
- People can also recertify for benefits using My Maine Connection. When they receive notice in the mail that their benefit renewal is due they are informed that they can go to My Maine Connection to recertify online.

People can use My Maine Connection to:



- update their personal information. If their address changes, for example, they will be able to update it online without having to contact a DHHS caseworker.
- 2. check their current benefits.
- 3. go "paperless" by choosing electronic notification. Instead of receiving notices in the mail they will receive them on My Maine Connection. If they miss an electronic notice, DHHS will send them a reminder in the mail to let them know that they have a notice that they have not viewed yet.

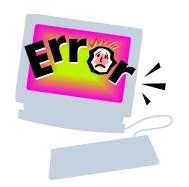
My Maine Connection



Advocacy Tips:

- ➤ When people apply they will get a distinct tracking number called a confirmation number—note it as proof of application. Best practice is to click on the application summary link and save the PDF to their desktop or print that page off (that page will have their tracking number and the date of application on it).
- These programs have time limits in which applications must be processed according to federal law. The new system should not unduly delay benefits in violation of law. If this is happening please let us know.

With all of these changes, there may be some 'speed bumps' along the way.



- If you run into any problems, you can contact the My Maine Connection Helpdesk at 1-855-797-4357 or <u>mmchelp.dhhs@maine.gov</u>.
- If that does not resolve your issue you can contact Crystal Bond at Maine Equal Justice Partners:
- 207-626-7058 x 205 or
- Toll Free: (866)626-7059, ext. 205
- Email: cbond@mejp.org

THANK YOU for the work you do and for taking the time to come to this workshop today.

Any Questions or Comments?

Crystal Bond cbond@mejp.org

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Maine Equal Justice Partners - 207-626-7058