

**Reporting Comments on Draft Update to  
Manual For State Payment of Medicare Premiums**

**Instructions:** Please use this table to submit comments on the draft manual. Once all fields are filled completely, including your organization's contact information and specific comments, save the file with your organization's name and date. **Submit the file to [ModernizetheMSPs@cms.hhs.gov](mailto:ModernizetheMSPs@cms.hhs.gov) by 5:00 p.m. E.S.T. on FEBRUARY 29, 2020.**

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Section Name/Number	Page Number	Description of Issue or Question	Suggested Revision/Comment
General	General	Overall, we are very happy to see this updated manual. We have not relied much on the State Buy-in Manual in the past few years due to it not being updated and not being fully available online. It will be useful to have an updated version that clearly outlines many of the policies and processes around the buy-in. Even the definition section is useful and sets the right tone that this updated manual is truly meant to be understandable and a helpful document. The manual mainly includes a great deal of technical information that is difficult for us (advocates) to comment on, but hopefully the technical speak will in fact improve the complex processes that involve the states, CMS and SSA, which will most importantly improve the beneficiaries experiences accessing and receiving the buy-in benefits. We applaud MMCO for all their work to make this updated manual possible.	Thank you.

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General	General	<p>Medicare beneficiaries may apply for Extra Help (LIS) through the SSA. Under the MIPPA statute, SSA must process these applications and then send the "MIPPA LIS" leads data to the state Medicaid agency, regardless of the LIS application outcome unless the beneficiary has opted out. States are to use this data to initiate an MSP application, although states use varying processes when utilizing the SSA leads data. A GAO report, as well as NCOA's research, has shown that states are using the SSA LIS leads data very differently.</p> <p><a href="https://www.gao.gov/products/GAO-12-871">https://www.gao.gov/products/GAO-12-871</a>  <a href="https://www.ncoa.org/resources/ssa-lis-leads-data/">https://www.ncoa.org/resources/ssa-lis-leads-data/</a></p>	<p>The Manual should clarify how states should appropriately use this data to initiate an MSP application.</p>
General	General	<p>Advocates can struggle to identify who is responsible at each step (the state, SSA, or CMS). This can lead to unnecessary delay and confusion.</p>	<p>The manual should be aimed at increasing transparency about the processes and clearly identifying who is responsible at each step. This would really help advocates identify what and where the problem is for their clients.</p>
General	General	<p>Many state caseworkers are unfamiliar and uncomfortable with using the POMS, and state Medicaid manuals are much less detailed.</p>	<p>Ensuring consistent cross-referencing to the POMS and explaining what it is and when to use it are important.</p>

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1.2 Background	Page 12	We are pleased to see clear language about the buy-in and specifically that it allows eligible people to enroll in Medicare without regard to Medicare enrollment periods. However, paragraph 3 seems to indicate that the buy-in can provide Medicare entitlement if a person has not yet enrolled into Medicare. This contradicts the conditional enrollment process (outlined on pg. 30, section 1.1) which clarifies that if a person is not yet entitled to Medicare, they "must apply for Medicare at the SSA field office before a state can enroll him or her in buy-in". As per this manual, it seem like only SSI recipients will be automatically enrolled into Part B and the Part B buy-in without the need for the beneficiary to obtain Medicare entitlement on their own.	This paragraph should be re-worded to clarify that the buy-in can indeed enroll a person into either Part A or Part B but that the buy-in itself cannot grant Medicare entitlement and enroll a person into Medicare if they have not yet done so (unless they are SSI recipients).
1.2 (Background)	Page 13	The top paragraph is an excellent and clear summary that speaks to the cost effectiveness and importance of state buy-ins.	Thank you.
1.2 (Background)	Page 13	It would be helpful to clarify that a person can get ESRD Medicare without collecting Social Security disability benefits. For this population, a person does not have to collect disability benefits for 24 months in order to get ESRD Medicare. We have seen state Medicaid offices run into confusion when processing buy-ins for ESRD Medicare beneficiaries who are not collecting Social Security disability benefits but are still eligible for premium free Part A.	A note under this bullet point that speaks to how a person on ESRD Medicare can still be eligible for the buy-in even if they are not collecting social security disability benefits.

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1.3.4 Medicare Enrollment-Table 1.0	Page 16	The column "Individual Enrollment" appears incomplete since it does not include information about enrolling in Part B. The "Note" does not seem sufficient. We see many people who enroll in Part A because it is free but are not made aware of the need to enroll in Part B. This table perpetuate this confusion.	There should be a section about Part B enrollment added to this column. For example, "Part B: Individuals must sign up for Medicare Part B at SSA if they are: . . ."
1.3.4 Medicare Enrollment-Table 1.0	Page 16	The bottom right section of the table is inaccurate since not all individuals can sign up for Medicare on the SSA website. We encounter very frustrated people who attempt online enrollment but are not allowed to proceed. Many people who are trying to use the 8 month Part B SEP (post employer coverage) think that all they need to do is go online when in fact they must visit their local office to submit the proof of employer coverage or mail this form.	We suggest modifying the language: "An individual can sign up for Medicare through SSA's toll-free number ..., by making an appointment at their local..., or some individuals can sign up for Medicare on the ssa.gov website."
1.3.5 Medicare Re-enrollment	Page 16	We see individuals trying to enroll in Part B as a means to apply for MSPs who are turned away because they are told they must first pay their past due premiums.	Any additional language here to reiterate that individuals trying to re-enroll in Part B do not have to pay past due premiums first would be helpful.
1.4 Requirements for Enrolling Individuals Under Buy-In Agreements	Page 17	We appreciate this clear statement that if a member of a buy-in group already has Medicare Part A and Part B, the state should not refer the person to SSA. Rather, the state should proceed with the buy-in.	Thank you.
1.4 Requirements for Enrolling Individuals Under Buy-In Agreements	Page 17	We appreciate the language about retroactive Part A, and that the state may need to review eligibility for Part B buy-in for the retroactive period. This is often ignored.	Thank you.
1.5 (Effect of Buy-in on an individual)	Page 18	Opening sentence of section 1.5 contradicts other entries of this manual. Please see our first comment/suggestion above on Background 1.2 page 12 discussing paragraph 3.	Opening sentence of section 1.5 contradicts other entries of this manual. Please see our comment/suggestion above on paragraph 3 of page 12.

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1.5 (Effect of Buy-in on an individual)	Page 19	Excellent and clear summary on how buy-in beneficiaries are entitled to retroactive buy-in benefits. This paragraph also provides great clarification on the fact that buy-in benefits are <b>not subject to recoupment.</b>	Thank you.
1.6.1 (Part B Buy-in Agreement Groups - General)	Page 22	The second paragraph helpfully explains that in auto-accrete states, CMS is responsible for enrolling SSI beneficiaries onto the Part B Buy-in. However, there is a disconnect in this manual that outlines who is responsible for the Part A buy-ins for this population. Many SSI recipients are not eligible for premium-free Part A or retirement benefits due to insufficient work history. We have seen many such beneficiaries correctly enrolled onto the Part B Buy-in by CMS who may go months or even year without being enrolled onto the Part A buy-in.	We suggest updating this section to clearly convey that while SSA and CMS are responsible for processing the Part B buy-in for SSI beneficiaries in auto-accrete states, it is the state's responsibility to process the Part A Buy-in for those SSI beneficiaries who are not eligible for premium free Part A.
1.6.1 (Part B Buy-in Agreement Groups - General)	Page. 27	QI determination summary is quite vague and unclear.	Clarify that QI-1 benefits can be retroactive only within the same calendar year.
1.6.2 Required Categories Plus Three Medicare Savings Program Eligibility Groups	Page 23-24	We appreciate the mention that states can use less restrictive financial methodologies in counting applicants' incomes and resources as a way to expand eligibility. We also appreciate the clarification that states have the option to define family size for determining eligibility for the MSPs.	Thank you.
1.12.1 (Policy Regarding which Entity Initiates Buy-in)	Page 31	Please see our comments/suggestions made for section 1.6.1, page 22 (line 22)	Please see our comments/suggestions made for section 1.6.1, page 22.
2.3 Data Exchange Between CMS and SSA	Page 51	Missing word in second sentence of last paragraph of section. "Premiums continue to be paid the enrollee.."	Update the language by adding "by" in between "paid" and "the".
6.3 Refund of Medicare Premiums to Individuals	Page 194	Beneficiaries awaiting refunds are often struggling to make ends meet, so a timeline for when they can expect their refund would be helpful.	We recommend clarifying the timeline for when a beneficiary should expect to receive their refund.