



MEPD and TW Bulletin 24-03

Date: Feb. 23, 2024

To: Eligibility Services Supervisors and Staff
Program Managers
Regional Directors
Regional Attorneys
Hearings Officers

From: Access and Eligibility Services Program Policy
State Office 2106

Subject: End Stage Renal Disease and Medicare Savings Programs

The information in this bulletin will be included in a future handbook revision. Until the handbook is updated, staff must use the information in this bulletin. If you have any questions regarding the policy information in this bulletin, follow regional procedures.

Active bulletins are posted on the following websites:

- [Medicaid for the Elderly and People with Disabilities Handbook \(MEPDH\)](https://hhs.texas.gov/laws-regulations/handbooks/mepdh) at <https://hhs.texas.gov/laws-regulations/handbooks/mepdh/policy-bulletins>
- [Texas Works Handbook \(TWH\)](https://hhs.texas.gov/laws-regulations/handbooks/twh) at <https://hhs.texas.gov/laws-regulations/handbooks/texas-works-handbook/texas-works-bulletins>.

End Stage Renal Disease and Medicare Savings Programs

Background

A person diagnosed with End-Stage Renal Disease (ESRD) is eligible for Medicare coverage for 36 months after the month the person receives a transplant. After the 36th month, Medicare coverage ends unless the person is otherwise entitled to Medicare based on age or disability.

Effective Jan. 1, 2023, Medicare beneficiaries with a diagnosis of ESRD who lose Medicare eligibility after a kidney transplant may be eligible for a limited Medicare Part B benefit, known as Part B-ID. Medicare Part B-ID is a limited Part B benefit that only covers immunosuppressive drugs. Part B-ID does not cover any other items or services, including hospital stays, physician services, supplies, or medications.

Part B-ID beneficiaries must not be eligible for Medicare on another basis and must not be eligible for any other type of comprehensive health care coverage that covers immunosuppressive drugs, including Medicaid and CHIP.

The Social Security Administration (SSA) notifies ESRD Medicare beneficiaries of the Part B-ID benefit, and the person must apply with SSA. If eligible, Part B-ID beneficiaries will receive a new Medicare card that indicates Medicare coverage for immunosuppressive drugs only.

Part B-ID beneficiaries with limited income and resources may be eligible for a Medicare Savings Program (MSP). If eligible, the MSP will cover all or some of the Medicare premiums, coinsurance and cost sharing associated to the person's Part B-ID benefit.

Current Policy

[MEPD](#)

To be eligible for a Medicare Savings Program, such as Qualified Medicare Beneficiary (QMB), Specified Low-Income Medicare Beneficiary (SLMB), or Qualifying Individual (QI-1), a person must be entitled to Medicare Part A. ([MEPDH Q-2000](#), Qualified Medicare Beneficiaries; [MEPDH Q-3000](#), Specified Low-Income Medicare Beneficiaries; and [MEPDH Q-5000](#), Qualifying Individuals)

[Texas Works](#)

A woman is not eligible to receive Healthy Texas Women (HTW) if she is currently receiving Medicare (Part A or B), ([TWH W-911](#)).

A woman cannot be certified for HTW and an MSP.

New Policy

[MEPD](#)

A person enrolled in Medicare Part B-ID is no longer entitled to Medicare Part A. Even though Part B-ID recipients are not entitled to Medicare Part A, they can be eligible for an MSP if they meet all other eligibility criteria.

[Texas Works](#)

Women who receive HTW can also be enrolled in Medicare Part B-ID. Women receiving HTW and Medicare Part B-ID may be certified for QMB or SLMB.

Additional Information

People enrolled in Medicare Part B-ID may be eligible for Community Attendant Service (CAS) or HTW because these programs do not cover immunosuppressive drugs. These applicants may also be eligible for MSP based on their entitlement to Medicare Part B-ID.

Identification

Identify Medicare Part B-ID individuals by viewing SOLQ. The Ledger Account File (LAF) code will display "Active Title XVIII status only". Medicare Part B will reflect a start date with a premium amount lower than the standard Medicare Part B premium. The 2024 Part B-ID premium is \$103.00.

Title II Information			
Given Name:	[REDACTED]	M.I:	C
Title II Claim Acct #:	[REDACTED]	State and County Code:	[REDACTED]
Surname:	[REDACTED]	Zip Code:	[REDACTED]
Number Of Lines Of Address:	3		
Address:	[REDACTED]		
Direct Deposit Indicator:		Deferred Payment Date:	
Schedule Payment Date:		Schedule Prior Payment Amount:	\$0.00
Schedule Payment Combined Check:		LAF Code:	Active Title XVIII status only
Date of Birth:	[REDACTED]	Proof Of Age:	Convincing evidence
Date of Initial Entitlement:		Date of Suspension or Termination:	
Date of Current Entitlement:		Sex Code:	[REDACTED]
Disability Onset Date:		Medicare Indicator:	Medicare data is present
Net Monthly Benefit If Payable:	\$0.00	HI Option Code:	None - no longer under renal disease provision
HI Indicator:	Y	HI Premium:	\$0.00
HI Stop Date:	09/01/2[REDACTED]	HI Buy-In Code:	
HI Buy-In Indicator:	NO	HI Buy-In Stop Date:	
HI Buy-In Start Date:		HI Start Date:	05/01/2[REDACTED]

Part B/SMI			
SMI Indicator:	YES	SMI Option Code:	Yes
SMI Stop Date:		SMI Premium:	\$103.00
SMI Buy-In Indicator:	State billing -Texas	SMI Buy-In Code:	State billing -Texas
SMI Buy-In Start Date:	11/01/2[REDACTED]	SMI Buy-In Stop Date:	10/01/[REDACTED]
Other Primary Insurance Amount:	\$0.00		
Number Of Cross-Reference Account Number (XRAN) Entries:			
Dual Entitlement Number:		Dual Entitlement BIC:	
Entry #	Monthly Benefit Credited Date	Monthly Benefit Credited Amount	Monthly Benefit Credited Type

Medicare Logical Unit of Work

TIERS displays a new Part B-ID option in the Medicare Claim - Details screen. Select Part B-ID in the *Type* field, select the associated claim number for the Part B-ID in the *Claim #* field and enter the Begin Date.

There cannot be an overlap in coverage for Part B-ID with active Part A or B, or vice versa.

The following error message appears when the Part B-ID *Begin Date* or *End Date* overlap with the Part A or Part B records.

A Medicare Part A or Part B claim record and a Part B-ID claim record cannot exist for an individual for the same time period.

Note: Only Data Integrity (DI) staff can enter the *End Date* for a Medicare Part A or B claim record. If a Medicare Part A or Part B claim record does not have an end date, send an email to DI to request the *End Date* be entered before adding a Medicare Part B-ID record.

The screenshot displays the 'Medicare Claim - Details' screen in the TIERS system. The interface includes a navigation menu on the left and a main form area. The form is divided into several sections: Individual Information, Dates, Medicare Details, and Details. In the 'Medicare Details' section, the 'Type' dropdown is set to 'Part B-ID' and the 'Claim #' dropdown is set to 'A'. In the 'Details' section, the 'Begin Date' is set to '01/01/2010'. Other fields include 'Name', 'Individual #', 'Reported On', 'Verification Received On', 'MMP Opt Out Indicator', 'Dual Status', 'Medicare Beneficiary Identifier #', 'Buy-In Begin Date', 'Buy-In End Date', 'Verification' (set to 'MMA'), and 'Enrollment'.

Application Processing

The current MSP cascade logic applies when testing a Part-B ID recipient for QMB, SLMB or QI-1.

Ensure continuous QMB coverage if the person was receiving regular QMB coverage one month and is eligible for Part B-ID QMB the following month.

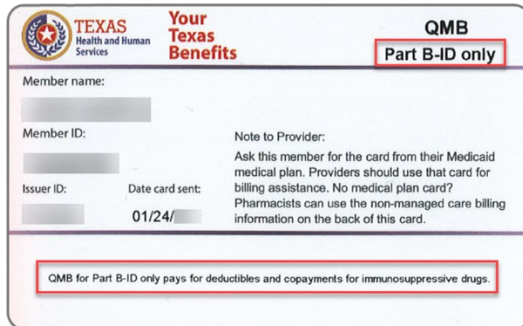
Regular MSP and Part B-ID MSP

Regular MSPs are QMB, SLMB and Qualifying Individual (QI-1) benefits based on entitlement for Medicare Part A.

Part B-ID MSPs are QMB, SLMB or QI-1 benefits based on entitlement for Medicare Part B-ID. Part B-ID MSPs help with Medicare Part B-ID premiums, deductibles and co-insurance costs associated to immunosuppressive drugs. The 2024 Medicare Part B-ID premium amount is \$103.00.

A person approved for Part B-ID QMB does not receive regular QMB benefits.

For recipients with Part B-ID QMB, the Medicaid card has 'Part B-ID only' noted in the upper lefthand corner.



A regular MSP recipient who is losing Medicare Part A entitlement based on ESRD and transferring to Part B-ID MSP will receive a new EDG number. The system retains the same review due date, packet sent date and packet received date for the new EDG if they are approved for the same MSP Type of Assistance (TOA).

Inquiry

A new field on the **EDG Search/Summary** screen shows Part B-ID coverage when viewing the MSP EDG. If the *Part B-ID* field is '**YES**', it indicates the MSP EDG is for Part B-ID coverage. If the field is '**NO**', the EDG is for regular MSP.

Search/Summary Details

EDG - Search/Summary

EDG #: [] EDG Name: []

21805: No Authorized Records found.

EDG Search Criteria

EDG #: [] Show Inactive EDGs [Reset] [Search]

EDG Summary Information

EDG #:	Medicare Cost Share	Case #:	EDG Name:
Program:	Type of Assistance: MC - QMB	Status:	Pending
Owner Employee #:	Last Disposed By Employee #:	Case Mail Code:	
Certified Adults: 1	Certified Children: 0	TANF PRA Appeal with Continuous Benefit:	
Continuous Eligibility Period As of Today:	MAGI: No	Reason:	Eligibility approved;
Alternate Payee:	Type:	Special Review:	NO
Last Disposition Date:	Action Effective Date:	Part B-ID:	YES
Periodic Review Due/End Date:	Last Month of Cert. Period:	Renewal Status:	
Periodic Income Check Status:	Periodic Income Check Status Date:	Spend Down Met Date:	N/A
EDG is over the income limits for MA Pregnant Women:	TANF-NC:	Medicaid Benefit Reinstated:	
HTW Transition from TP40:	Medicaid Benefit Suspended:		

EDG Address Information

Home Phone#: [] Work Phone#: []

EDG Mailing Address: []

The Individual-Medicare Summary screen, accessible through the *Individual Inquiry* hover menu, now displays Medicare Part B-ID information.

TIERS Medicare Summary

Individual - Medicare Summary

Individual Information

Individual: [] Case #: [] Name: [] DOB: []

Gender: [] Race: [] Ethnicity: [] Juvenile Placement No History:

County Jail Confinement History: No

Medicare Summary

Medicare	Medicare Begin Date	Medicare End Date	Medicare Dates Last Updated By
Part A	11/01/[]	12/31/[]	[]
Part B	11/01/[]	12/31/[]	[]
Part B-ID	01/01/[]		[]

Alert 914

New Alert 914, CMS Update for Part B-ID, generates when the Medicare Interface receives notification that Part B-ID is ending and there is no open Medicare Part A and/or B record. DI staff will process this alert.

The screenshot displays a task management interface. At the top, there is a header with 'Export To Excel', 'Page Size: 300', and 'Total Items: 1'. Below this is a table with columns: Task, Action, Assigned To, Task Name, Case Name, Received Date, Task Due Date, Event, Case #, Location, and Combined Programs. A task is listed with the name 'Alert 914: CMS update for Part B-ID for individual', received date '01/19/2024', and due date '12/15/2024 05:00:00 PM'. The event is 'Change' and the location is 'Data Integrity MSP'. Below the table, a detailed view of the task is shown, including fields for Reason (Alert), Combined Programs (MSP), SSN, Rescheduled (No), Task Due Date, Task ID, Escalated? (No), Phone Number, Task State (Claimed), Received Date, Date Of Birth, Worker Group (METask), Late? (No), Program (MSP), Event (Change), Case #, Location (Data Integrity), Task Created Date (12/05/2023 02:26:04 PM), and Assigned To. A Comments section contains the text: 'CMS indicates closure of Part B-ID as of 2024-10-01 00:00:00.00 for [redacted] through MMA. Please verify.' Below the comments is a table with columns: Date/Time, Action taken by, Action, Assigned To, and Comments. One entry is shown for '12/05/2023 03:22:35 PM' with the action 'Claim'. At the bottom, there is a footer with 'Total: 1 | Current Page: 1' and navigation icons.

Automation

Changes to TIERS are currently scheduled to be implemented with TIERS Release 116.3 on Feb. 24, 2024.

Correspondence

A new eligibility notice reason will display on the TF0001 for Part B-ID MSP approvals: *Eligibility approved for Part B-ID MSP*. Changes to Form TF0001, Notice of Case Action, will be implemented on Feb. 24, 2024.

Handbook

The MEPDH is currently scheduled to be updated in the September 2024 revision.

The TWH is currently scheduled to be updated in the October 2024 revision.

Training

Training for Release R116.3, General Information, is available in PALMS starting Feb. 16, 2024.

Effective Date

This policy is effective with the implementation of TIERS Release 116.3 currently scheduled for Feb. 24, 2024.