



Dual Medicaid/Medicare Eligible with Developmental Disabilities

Who are Dual Eligibles?

Dual Eligibles are persons who receive health benefits from both Medicare and Medicaid.

What is the MMAI, or Medicare-Medicaid Alignment Initiative, also called the Dual Eligibles program?

MMAI stands for the Medicare-Medicaid Alignment Initiative, and is a managed care program developed jointly by the federal Centers for Medicare and Medicaid and state of Illinois Department of Healthcare and Family Services (HFS). HFS implemented the MMAI program in 2014 in select areas of the state.

Who is eligible? The MMAI program is a voluntary healthcare program for people:

- ✓ with Medicare Parts A & B and full Medicaid (no spenddown),
- ✓ age 21 or older and
- ✓ living in Cook, DuPage, Kane, Kankakee, Lake, Will, Champaign, DeWitt, Ford, Knox, McLean, Peoria, Stark, Tazewell, Vermilion, Christian, Logan, Macon, Menard, Piatt, or Sangamon Counties)
- ✓ MMAI will be available statewide by July 1, 2021.

Who is excluded?

- ✓ Individuals enrolled in Health Choice Illinois Medicaid Long Term Services and Supports (MLTSS) (*if eligible for MMAI you can choose to enroll in MMAI instead of MLTSS*)
- ✓ only eligible for Medicaid through the Breast & Cervical Cancer program;
- ✓ receiving third-party insurance (employer or retiree coverage);
- ✓ receiving temporary Medicaid benefits;
- ✓ receiving Medicaid through the Spenddown program;
- ✓ enrolled in the Health Benefits for Workers with Disabilities program,
- ✓ or receiving support through the Medicaid HCBS waiver for adults with developmental disabilities or DD institutional services; if on the PUNS waiting list you are not excluded from the MMAI program

MMAI is voluntary for health care services such as outpatient visits, therapy, hospitalization and more. However, Dual Eligible adults receiving LTSS, including adults with DD receiving LTSS, **must choose** either a MMAI plan (if eligible and living in a Chicagoland or Central Illinois county specified) or a MLTSS plan. (*Note: MMAI will be statewide by 7/1/21*). LTSS includes nursing home care or one of these 5 Home and Community Based Services (HCBS) waivers: Persons with Disabilities, Persons with Brain Injury, Persons with HIV or AIDS, Persons who are Elderly (Community Care Program) or Supportive Living Facilities

Information for Dual Eligible adults with DD without LTSS who do not participate in the Adults with DD waiver:

The only benefits available are medical (Medicare plus Medicaid) and financial (SSDI and/or

SSI)

- a. MMAI enrollment is voluntary and currently available in Chicagoland and parts of Central IL, but MMAI will expand statewide as of 7/1/21; patients are auto-enrolled into a MMAI plan, but they may disenroll at any time.
- b. Eligible for Extra Help, a program to help cover Medicare Part D prescription costs. More information available at:
https://www2.illinois.gov/aging/ship/Documents/SHIP_ExtraHelpChart.pdf
- c. and SLMB Prescription plans (no premiums): <https://www.medicare.gov/your-medicare-costs/get-help-paying-costs/medicare-savings-programs>;
http://www.ageoptions.org/services-and-programs_MedicareMaterials.html
- d. Possibly eligible for SNAP: <https://www.dhs.state.il.us/page.aspx?item=30371>

Information for Dual Eligible adults with DD who participate in the Adults with DD Home and Community Based (HCBS) waiver

- a. Benefits expand from medical and financial only, to include Home and Community-Based Services
- b. Not eligible for MMAI. If initially enrolled in MMAI, individuals will be disenrolled from MMAI once the Adults with DD waiver enrollment is finalized. May want to disenroll from MMAI when selected from the PUNS to apply for Adults with DD waiver.
- c. Eligible for Extra Help and SLMB Prescription plans
- d. Once enrolled in waiver, may need to have Service Provider Agency, or if enrolled in the Home-Based Service Program -Employer of Record or Self Direction Assistant (if you chose the SDA optional service), complete HFS Form 2653: Notice of DHS Community Based Services:
<https://www.illinois.gov/hfs/SiteCollectionDocuments/hfs2653.pdf>
- e. Technical assistance regarding possible spend down may be required, dependent upon amount of SSDI payment. This will generally be addressed with the help of the ISC/PAS agency and HFS:
<https://www.illinois.gov/hfs/info/Brochures%20and%20Forms/Brochures/Pages/HFS591SP.aspx>
- e. May be eligible for SNAP: <https://www.dhs.state.il.us/page.aspx?item=30371>

Many individuals with developmental disabilities also receive financial benefits from the federal government (social security disability insurance-SSDI and/or Supplemental Security Income-SSI) that can impact the health/medical benefits received through Medicare and Medicaid.

SSI : <https://www.illinoislifespan.org/wp-content/uploads/2020/02/SSIInfoFinalpdf.pdf>

SSI/SSDI and employment income: <https://www.ssa.gov/ssi/text-income-ussi.htm>

SSI for children under age 18: <https://www.ssa.gov/pubs/EN-05-10026.pdf>

How might an individual with disabilities qualify for SSDI?

- Persons who receive SSDI can be eligible based upon their own work history, or their status as a Disabled Adult Child (DAC) of a worker who is disabled/retired/deceased.
- An adult who is disabled before age 22 may be eligible for SSDI benefits as a DAC if a parent is deceased or receives retirement or disability benefits. We consider this a "child's" benefit because it is paid on a parent's Social Security earnings record. The "adult child" including an adopted child, or, in some cases, a stepchild,

grandchild, or step grandchild, must be unmarried, age 18 or older, and have a disability that started before age 22.

- Medicare is available after receiving SSDI benefits for 24 months.

Dual Eligibles may qualify for Medicaid if their income from work, disability benefits or other sources is at or below \$1,073/month in 2021. If their income is above that, they may still qualify for Medicaid through a Spenddown. Spenddown is a program that allows someone to use medical expenses to reduce their countable income.

<https://www.illinois.gov/hfs/info/Brochures%20and%20Forms/Brochures/Pages/HFS591SP.aspx>

Medicaid will also help pay for Medicare costs through the Medicare Savings Program.

Frequently Asked Questions:

1. I got an enrollment letter from the MMAI Program instructing me to respond before a certain date, but I am in one of the “exempt” categories. What should I do next?

- a. If you also have private insurance, in addition to Medicare and Medicaid, you need to make sure that HFS has complete information about your private insurance. Notify DHS of your private insurance:

<https://www.illinois.gov/hfs/info/Brochures%20and%20Forms/Brochures/Pages/HFS2875.aspx>

- b. If you receive services under the Adults with Developmental Disabilities waiver (for example you reside in a CILA, or get Home-Based Services), you need to contact your case manager at your Independent Service Coordination (ISC) Agency to make sure they have HFS Form 2653: (Notice of DHS Community-Based Services) and that it has been completed and submitted to HFS:

<https://www.dhs.state.il.us/page.aspx?item=44976> You can ask your caseworker to verify that your status has been updated.

2. I enrolled in the MMAI program and tried it out for a while but now I want to disenroll and return to being a “regular” Dual Eligible. What do I need to do in order to disenroll from the MMAI?

- a. An individual can enroll, disenroll, or switch MMAI plans at any time of the year, even if the beneficiary is automatically enrolled by contacting Client Enrollment Services: 1-877-912-8880; or TTY: 1-866-565-8576
- b. If receiving LTSS services, you must either choose an MMAI plan or a MLTSS plan (but see list of MMAI exclusions, above)

3. I am enrolled in the MMAI and am planning an out-of-state vacation. What will my insurance coverage be while I am outside of Illinois? Can I still use my Medicare card for doctor visits and prescriptions? How will the co-pays be handled?

- a. If you are an MMAI member and planning to travel out of state, please inform your health plan of your travel plans. They can inform you what their coverage includes outside of Illinois.

MMAI Provider Network Contact Information:

MMAI contact information:

<https://www.illinois.gov/hfs/MedicalProviders/cc/Pages/MMAIContactInformation.aspx>

Medicaid will pay for Medicare cost-sharing expenses: Some people who are enrolled in both Medicare and Medicaid may be eligible to have Medicaid pay for their Medicare cost-sharing expenses:

<https://www.illinois.gov/hfs/info/Brochures%20and%20Forms/Brochures/Pages/HFS3120.aspx>

Terms to know :

- ✓ **Dual Eligible (Dual):** Person who has both Medicare and Medicaid health insurance
- ✓ **MMAI:** Medicare-Medicare Alignment Initiative
- ✓ **Exempt Dual:** Person who has both Medicare and Medicaid and is also enrolled in the Adults with Developmental Disabilities Home and Community-based Services Waiver
- ✓ **Third Party Liability (TPL):** Person who has both Medicaid and private health insurance (or another type of health coverage). Third Party Liability means that a "third party" - not medical assistance and not you - has or may have a responsibility to pay all or part of the cost of your medical care. A third party may be another person, an insurance company, an organization or a program. Medicaid pays for your health care costs when no third party resource is responsible to pay for them, or when the third party resource will not pay enough of your medical bills.
https://www.illinois.gov/hfs/SiteCollectionDocuments/Private_Insurance_ThirdPartyLiability.pdf

Examples of Third Party Resources that may pay your medical bills:

- Medicare
- Railroad retirement and other retirement pension plans that provide health insurance coverage
- Health insurance policies, such as:
 - Private health insurance - a health insurance policy bought from an insurance company
 - Group health insurance – health insurance provided through an organization such as an employer, union or veterans' organization
 - Worker's compensation – insurance coverage provided by an employer for work-related injuries
- CHAMPUS (Civilian Health and Medical Program of the Uniformed Services) - medical coverage for family members of uniformed service personnel
- Court orders requiring a separated or divorced parent to provide health insurance or to pay medical costs for a dependent

<https://www.illinois.gov/hfs/info/Brochures%20and%20Forms/Brochures/Pages/HFS2875.aspx>