



FLORIDA HEALTH JUSTICE PROJECT

The Public Health Emergency (PHE) and Continuous Medicaid Enrollment: *What will happen to those receiving Medicaid based on age or disability?*

Background: During the national COVID-19 Public Health Emergency (called the “PHE”), which began in March 2020 and is still on-going, almost no one on Medicaid can lose coverage. Thus, many Medicaid beneficiaries who are no longer technically eligible have stayed covered. This is referred to as the PHE’s “continuous enrollment requirement.” However, after the federal government declares that the PHE has ended, states will begin returning to normal Medicaid redeterminations and eligibility rules. At that time, beneficiaries who are no longer eligible for Medicaid *under any coverage category will lose Medicaid.*

Medicaid based on age and disability Some Floridians who qualify for Medicaid based on age or disability, are also eligible for Medicare. But while Medicaid coverage begins immediately for those who qualify, there is generally a 2-year waiting period before Medicare coverage begins after an individual under 65 is determined disabled. Florida provides Medicaid for low-income aged and disabled individuals whose income is more than the SSI monthly award of \$841 and is below \$1017/month, including those subject to the 2 year waiting period for Medicare. This coverage group is called “MEDS-AD.”

What happens to those on MEDS-AD once Medicare “kicks in”? After an individual on MEDS-AD becomes eligible for Medicare, the person loses full Medicaid coverage. Assuming the person’s income is still less than 100 % of the poverty level, the person is eligible for the Qualified Medicare benefit (QMB). QMB is a type of Medicare Savings Program, also called “MSPs.” (More information on all of the MSPs can be found [here](#), and Florida’s income limits for all SSI-related Medicaid programs, including MEDS-AD, QMB and other MSP programs can be found [here](#).)

QMB covers Part A & B premiums, as well as deductibles, coinsurance, and copayments for services and items Medicare covers. For those on QMB, Medicare providers aren’t allowed to bill for services and items Medicare covers, except outpatient drugs. Pharmacists may charge up to a limited amount (no more than \$4.00 in 2022) for prescription drugs covered by Medicare Part D.

What will happen to people in the MEDS-AD coverage category after the PHE ends? After the PHE ends, the Department of Children and Families (DCF) will redetermine eligibility for all current Medicaid enrollees, including those on MEDS-AD. If the enrollee’s Medicare began after

March, 2020, their Medicaid eligibility under MEDS-AD will be terminated after the PHE ends. DCF will send a notice informing the person that their full Medicaid has ended and that they have been enrolled in the QMB program. It should also inform them of their enrollment in the “**Medically Needy**” program and specify their “share of cost” (which is like a deductible). For more information on the Medically Needy program, click [here](#).

If I am a MEDS-AD recipient, and I am now also eligible for Medicare, what can I do before the PHE ends?

- If you need assistance with daily activities of living, such as bathing, dressing, managing your medications, you may be eligible for the Medicaid Long-Term Care (LTC) Program. This program includes both nursing home care and home and community based services (HCBS). [Here](#) is information on how to apply and a [consumer video](#) on HCBS services.
- If possible, create an online account with DCF [here](#), and report all your information, including if you now need significant assistance with the activities of daily living and want to apply for the LTC program.
- You should make sure your address on file with DCF is up-to-date.
- If you need help understanding your Medicare options, including for Medicare Part D which covers prescription drugs, you can contact your local SHINE program, which is part of the local Area Agency on Aging. You can find out more about that program [here](#).
- Medicaid is complicated! The Florida Health Justice Project will be providing updated information about what happens regarding Medicaid eligibility after the PHE ends. Please check our [PHE and Extended Medicaid web page](#) for updates

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