SPECIFIED LOW INCOME MEDICARE BENEFICIARY


1. Overview

Effective January 1, 1993, Section 4501(b) of the Omnibus Budget Reconciliation Act (OBRA) of 1990 required states to pay Medicare Part B premiums for individuals whose income exceeds QMB standards, but is less than a specified higher percentage of the Federal Poverty Level (FPL). The coverage is called Specified Low-Income Medicare Beneficiaries (SLMB).

2. Policy Statement

To be eligible in the SLMB category an individual must be entitled to and receive Medicare Part A, have income that is at least 100% FPL but less than 120% of the FPL, and not have resources over $7,730 for an individual or $11,600 for a couple.

3. SLMB Benefits

Medicaid benefits available to SLMB enrollees only include payment of Medicare Part B premiums. If an applicant is approved for SLMB and previously refused Part B coverage, the SLMB approval will automatically establish Part B coverage.

4. SLMB Effective Date

Eligibility begins the date a TennCare application or Low-Income Subsidy (LIS) application is filed or the date all eligibility requirements are met, whichever is later.

5. Non-Financial Eligibility Requirements

a. Medicare Part A (Hospital Insurance)

Individuals must be enrolled in Medicare Part A benefits. Individuals may be either entitled to receive premium-free Medicare Part A, or eligible to purchase Medicare Part A. See the Medicare Savings Program Overview policy.

TennCare will use an individual’s Social Security Number (SSN) to verify his entitlement to and receipt of Medicare Part A benefits with the SSA.

b. Age

If an applicant is eligible on the basis of age, then she must be age 65 or older. There is no age limit for individuals who are eligible on the basis of disability.
c. **Citizenship**

Individuals must be U.S. citizens, U.S. nationals or eligible non-citizens. Individuals are not required to provide documentary evidence of citizenship or national status if they are entitled to or enrolled in any part of Medicare.

d. **Enumeration**

Individuals must possess and provide a valid SSN or proof of application for an SSN, unless they meet an exception.

e. **State Residence**

Individuals in this category must be residents of Tennessee.

6. **Financial Eligibility Requirements**

a. **Eligibility Determination Group**

The Eligibility Determination Group (EDG) is governed by the principle of Financially Responsible Relatives (FRR) and the applicant/enrollee’s living arrangements. See the *ABD Eligibility Determination Group* policy.

b. **Income Limit**

The income limit for receiving benefits in this category is less than 120% FPL for an individual or couple.

c. **Resource Limit**

The resource limit for receiving benefits in this category is:

i. $7,730 for an individual; or

ii. $11,600 for a couple.

d. **Cost-of-Living Adjustment (COLA) Disregard**

The Social Security Administration (SSA) is responsible for applying COLA to its benefit programs, including Old-Age, Survivors, and Disability Insurance (OASDI), Railroad Retirement Benefits (RRB) and Supplemental Security Income (SSI). If the SSA applies a COLA for a given year, it is applied on January 1st of that year. However, the annual update for FPLs is not typically released until March or April. This can cause individuals who were previously SLMB eligible to become income-ineligible due to their increased Social Security income in the period between the COLA adjustment and the FPL increase.
To address the discrepancy caused by the timing of the COLA and FPL adjustments, SLMB enrollees who become income-ineligible in January are provided with a COLA disregard for the months of January, February, March, and if needed, April. The COLA disregard is equal to the amount of the monthly COLA increase.

e. **Budget**

Mrs. Daley is 65 years old, receives $1,200 per month in Social Security benefits and is entitled to and receiving Medicare Part A. Her spouse is 60 years old with deemed monthly earned income of $400. Mr. Daley does not yet receive Medicare. The couple lives together in their home. Since Mr. Daley’s income in deemed to Mrs. Daley, her EDG is increased by 1. Mrs. Daley has an EDG size of 2.

Mrs. Daley’s total countable income, $1,347.50, is less than 120% FPL, $1,624, so she is income eligible for the SLMB category.
7. **SLMB and TennCare Medicaid Eligibility**

Individuals may be eligible for both TennCare Medicaid and SLMB, with the exception of TennCare Standard. Only individuals with “grandfathered status” in TennCare Standard may be eligible for both TennCare Standard and SLMB. 

Applicants/enrollees may not receive benefits in more than one Medicare Savings Program.
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