

## Medicare-Aid Frequently Asked Questions

### What is Medicare-Aid?

Medicare-Aid is a special Medicaid program for people who have Medicare and also have limited income and resources. It is a free program that helps pay your Medicare premiums, co-payments and deductibles. There are several Medicare-Aid programs which are also known as Medicare Savings Programs: **MQB-Q, MQB-B, and MQB-E.**

**MQB-Q** (Comprehensive Medicare-Aid) covers the Medicare Part B premium, the Part B deductible for doctor bills, the Part A hospital deductible, 20% co-payment of Part B approved costs and co-payment for Medicare approved skilled nursing home care.

**MQB-B** (Limited Medicare-Aid) covers only the Medicare Part B premium.

**MQB-E** (Limited Medicare-Aid Capped Enrollment) also covers only the Medicare Part B premium for those people whose income is too high to qualify for MQB-B.

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### What are the monthly income limits for these programs? (Effective 04/2004)

Program	Number in Family	
	1	2
<b>MQB-Q</b>	\$776	\$1,041
<b>MQB-B</b>	\$931	\$1,249
<b>MQB-E</b>	\$1,048	\$1,406

To be eligible for these programs, you must have Medicare and meet income and resource limits. You may apply for the Medicare Aid programs at your county Department of Social Services (DSS). You will find them in the phone book under government agencies. If you cannot locate the phone number for your local DSS or if you have further questions regarding Medicaid eligibility after contacting the local department, call the Office of Citizen Services CARE-LINE Information and Referral Service toll-free at 1-800-662-7030 (Voice and Spanish) and someone will assist you. For local calls or calls from outside of North Carolina, dial (919) 733-4261. The Office of Citizen Services also has a dedicated TTY line at 1-877-452-2514 or for local TTY or TTY calls from outside of North Carolina, dial (919) 733-4851 for deaf and hearing impaired.

The Office of Citizen Services can also provide you with information and referrals on other Department of Health and Human Services programs along with other government and non-profit agencies that may be helpful, as well as tell you about prescription assistance programs available through drug manufacturers. (Office of Citizen Services – 1-800-662-7030 (Voice and Spanish); (919) 733-4261 (local or out of state calls); 1-877-452-2514 (TTY Dedicated) and (919) 733-4851 (TTY Dedicated for local or out of state calls).

**How long can I receive benefits after I qualify?**

Once an application is approved, you receive benefits for 12 months. Then you must complete a review of your eligibility each 12 months to continue receiving Medicare-Aid. A worker at the department of social services will contact you when it is time for your review. You must continue to meet the income and resource guidelines.

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**Will Medicare Aid pay for my prescriptions?**

No. Medicare Aid only pays your Medicare premiums, co-payments and deductibles.

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**What happens if I have to go into a nursing home?**

If you need help with the cost of care in a nursing home, you must apply at your local DSS. MQB-Q covers only the Medicare co-payment for Medicare approved skilled nursing home care. After the first 20 days, nursing home care is not covered by Medicare Aid.