

Department of Social and Health Services

Olympia, Washington

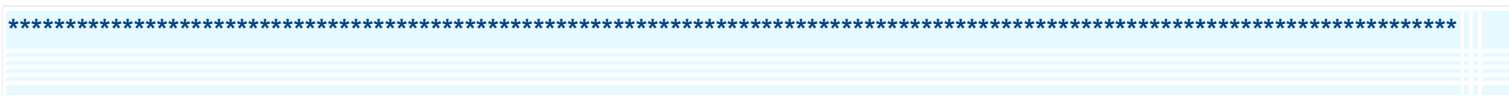
EAZ Manual

Revision # 1017
Category Income – Effect of Income on Eligibility and Benefit Level
Issued 3/1/2019
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Summary

Updated Worker Responsibilities WAC 388-450-0200 updating allowable medical expenses for Basic Food/FAP and specifically MSP.

See below for edited text:



Worker Responsibilities - [WAC 388-450-0200](#)

Determining Allowable Medical Expenses

1. Review the application for claimed medical expenses.
2. Ask all AUs with an elderly person or an individual with a disability if those members have any medical/dental bills or expect to have these expenses.
3. Verify the portion of the expense that will not be reimbursed or paid by another source by obtaining:
 - o A billing from the provider showing the amount due after insurance coverage; or
 - o Proof of the amount of covered and uncovered expenses from all insurance carriers including Medicare.

4. Certify the AU's benefits without the claimed deduction if the expense is not verified.
5. Allow the Medicare ~~Savings Program (MSP) premium~~ deduction for the month(s) without an approved MSP AU only when benefits are approved but the buy-in has not started.
6. Enter ~~an~~ the end of the application months as an end date for the deduction ~~60 days from the date the application for MSP benefits is approved or the MSP start date, whichever is later.~~

EXAMPLE: Stanley applies for MSP on 10/5. Worker processes and approves application on 10/20 and Stanley is found eligible for QMB (S03) coverage starting 11/1. Worker sets the end date of the medical expense deduction to ~~12~~10/31.

EXAMPLE: Stanley applies for MSP on 10/5. Worker processes and approves application on 10/20 and Stanley is found eligible for SLMB (S05) starting 10/1. Therefore, Stanley isn't eligible for a medical expense deduction in the month of October.

NOTE: Do not allow the deduction for ~~MSP~~the Medicare premium if the client's previous MSP AU was closed for less than one benefit month.

NOTE: In some circumstances a client is eligible for Medicaid and Health Care Authority (HCA) is paying the premium under the State buy-in program. Don't allow the Medicare Part B premium deduction HCA is paying it. Verify whether HCA is paying the premium by reviewing the Bendex cross match on the Income screens. Bendex will show "State billed for SMI Premium Payments (500)" if HCA is paying the Medicare Part B premium.