



Medicare Savings Program (MSP) and the Avisery MSP Referral Pathway

What are Medicare Savings Program?

Medicare Savings Programs (MSP) are state programs that assist Medicare beneficiaries with limited incomes and assets pay for Medicare Part A and Part B premiums and/or cost sharing amounts. Please note, that a beneficiary must be enrolled in Medicare Part A to qualify for an MSP. The program is administered through Medicaid and eligibility is determined by the beneficiary's income and assets. The Illinois Department of Human Services (DHS) processes applications and determines which MSP a beneficiary qualifies for.

There are three types of MSPs:

Type of MSP	Benefit	Effective Date
Qualified Medicare Beneficiary (QMB)	Pays for Medicare Part A and Part B premiums, deductibles, and co-insurance. Individuals enrolled in AABD (Aid to the Aged, Disabled and Blind) Medicaid automatically qualify and should be enrolled in QMB.	Effective the first day of the month following the month of approval
Specified Low-Income Beneficiary (SLMB or SLIB)	Pays the monthly Medicare Part B premium	May be retroactive three months prior to the date of application
Qualified Individual (QI)	Pays the monthly Medicare Part B premium	May be retroactive three months prior to the date of application

The Qualified Disabled Working Individual (QDWI) is an MSP for some people with disabilities under the age of 65 who lost their Social Security Disability benefits and Medicare premium-free Part A because they returned to work. QDWI will only assist these individuals to pay for the Part A premium. To qualify, an individual cannot be eligible for Medicaid, must meet citizenship and residency requirements, have monthly income at or below 200% of the federal poverty level, and assets of no more than

\$4,000 if single or \$6,000 if married. To learn more about QDWI, visit <https://www.dhs.state.il.us/page.aspx?item=13842>.

What are the current MSP income and asset limits?

2024 MSP Income and Asset Limits				
Program	Monthly Income Limit*		Asset Limits**	
	Individual	Couple	Individual	Couple
QMB	\$1,280/month or less	\$1,728/month or less	\$9,430	\$14,130
SLMB/SLIB	\$1,529/month or less	\$2,067/month or less	\$9,430	\$14,130
QI	\$1,717/month or less	\$2,323/month or less	\$9,430	\$14,130

* A \$25 income disregard is reflected in the income amounts listed above
 **Please note that following are exempt and do not count as an asset:

- Prepaid burial funds and expenses in a designated account up to \$1,500 per person (not included in the limits above)
- Life insurance policies with a cash value of less than \$1,500

How Does a Client Apply for MSP?

Beneficiaries can apply for MSP through the Illinois Medicaid ABE (Application for Benefits Eligibility) website at <https://abe.illinois.gov> or submit a paper application to their [local DHS office](#) by mail or in person. It is recommended that applications are submitted online since they are time stamped and processed faster. Once an MSP application is received with all the necessary information, Illinois DHS has 45 days to process it. Applications that are not processed in a timely manner can be referred to the Avisery MSP Referral Pathway for assistance.

What is the MSP Legal Referral Pathway?

The MSP Legal Referral Pathway assists beneficiaries who are experiencing issues with their MSP application or benefits. Avisery has partnered with Legal Aid Chicago, Land of Lincoln Legal Aid, and Prairie State Legal Services to provide legal assistance to older adults and people with disabilities living in Illinois with resolving the following MSP issues:

- Beneficiaries who were approved for MSP, but continue to have the Medicare Part B premium deducted from their Social Security benefit 60 days after receiving a DHS approval notice.
- MSP applications that take 60 days or longer to be processed once all necessary information has been submitted.
- Beneficiaries who applied for the Extra Help Program through Social Security, do not currently have MSP, and never received information or a screening form from DHS about MSP. (When a beneficiary applies for Extra Help, Social Security

sends the State Medicaid office the client's information to initiate an MSP screening unless the beneficiary declines sending their information to the State.)

- Very low-income beneficiaries who are required to pay a premium to enroll in Part A and who need assistance coordinating their Part A enrollment with their application for QMB to avoid being charged the Part A premium (via the Part A "Conditional Enrollment" process).

How Do I Make a Legal Referral for MSP assistance?

If you identify a client with one of the issues listed above, please email Avisery at avisery@ageoptions.org. We will follow up with you to review the case and complete a referral form with the necessary client information. We ask that you do not email client sensitive information directly to us unless it is in a secure or encrypted email.

Once the referral form is completed, we will forward it to the appropriate legal assistance provider, depending on the client's geographic area. The legal aid provider will then contact the client to receive permission to directly advocate with DHS and/or file an administrative appeal if necessary. The client **will not** be charged a fee for MSP legal assistance

Legal representation from these Avisery partners has resulted in clients being approved for MSP benefits timelier and helped clients receive reimbursement for past Part B premiums they had paid out-of-pocket. Thus far, clients referred by Avisery have been reimbursed in amounts ranging from \$700 to \$7,006. Our continuing goal is to identify trends in systemic issues and opportunities for improvement that can be then shared with state and legislative partners to ensure beneficiaries receive the benefit to which they are entitled.