Joint Committee on Health Care Financing 2025-2026 (194th) Bill Summary

Bill Number: House, No. 1413

<u>Title:</u> AN ACT REGARDING MEDICARE SAVINGS PROGRAM ELIGIBILITY

Sponsor: Representative Steven Ultrino (Malden) and Marjorie C. Decker (Cambridge)

Hearing Date: July 1, 2025

Reporting Deadline: August 30, 2025

Prior History: 2023-24 (H1248/S770): H1248 reported favorably and referred to House Ways and

Means, accompanied by S770. No further action.

Similar Matters: S880 (Lewis – Identical, Health Care Financing)

Current Law:

Chapter 118E of the General Laws pertains to the state Medicaid program (MassHealth).

MGL Chapter 118E §25 sets the income and resource exemptions for MassHealth eligibility.

MGL Chapter 118E 25A sets eligibility standards for Qualified Medicare Beneficiary, Specified Low-Income Medicare Beneficiary and Qualified Individual programs, including the for including the consideration of certain income and assets.

130 CMR 519.010, regulations adopted by the Division of Medical Assistance governing MassHealth: Coverage Types, MassHealth Senior Buy-In.

- (A) Senior Buy-In is available to beneficiaries who
 - (1) Are entitled to Medicare Part A
 - (2) Have countable income amount, including the spouse with whom he or she lives, that is less than or equal to 100% federal poverty level
 - (3) Have countable assets less than or equal to the amount of assets allowed for Buy-In programs as identified by the Centers for Medicare and Medicaid Services, AND
 - (4) Meet universal requirements of MassHealth Standard
- (B) MassHealth pays for Medicare Part A and B premiums for deductibles and coinsurance under Parts A and B
- (C) The begin date for MassHealth Senior Buy-In coverage is the first day of the calendar month following the date of the MassHealth eligibility determination.

130 CMR 519.011, regulations adopted by the Division of Medical Assistance governing MassHealth: Coverage Types, MassHealth Buy-In.

- (A) MassHealth Buy-In For Specified Low Income Medicare Beneficiaries
 - (1) Buy-In for specified low income Medicare beneficiaries is available to individuals who meet eligibility for Senior Buy-In with the following exception: countable income of individual and spouse must be greater than 100% and less than 120% of the federal poverty level
 - (2) MassHealth pays Medicare Part B premiums for eligible Buy-In members
 - (3) MassHealth Buy-In coverage begins with the month of application and may be retroactive up to three calendar months before the month of application
- (B) Buy-In for qualifying individuals
 - (1) Eligible individuals are Medicare beneficiaries who
 - a. Are entitled to hospital benefits under Medicare Part A
 - b. Are not eligible for MassHealth Standard or CarePlus
 - c. Have countable income, including income of live-in spouse, that is equal or greater than 120% and less than 135 % federal poverty level AND

- d. Have countable assets equal to or less than the amount of assets allowed for Buy-In programs as identified by the Centers for Medicare and Medicaid Services
- (2) MassHealth will pay the entire Medicare Part B premium for those who meet the requirements.
- (3) Describes eligibility coverage period
- (4) Expenditure caps apply to some individuals
- 42 U.S.C. §1396a governs state plans for medical assistance.
 - (a)(10)(E) mandates a state plan for medical assistance to provide Medicare cost sharing for qualified beneficiaries and payment of Medicare premiums for certain individuals
- **42** U.S.C. §1396d(p)(1) defines "qualified Medicare beneficiary" as an individual entitled to hospital insurance benefits under part A (Medicare) and whose income does not exceed 100% federal poverty level.
- **42** U.S.C. §1396d(p)(3) defines "Medicare cost-sharing" as the following costs incurred with respect to a qualified beneficiary: premiums, coinsurance, deductibles, and, at the option of a State, premiums for enrollment of a qualified Medicare beneficiary in an HMO or competitive medical plan (42 U.S.C. §1395mm).

<u>Summary</u>: The proposed legislation amends section 25A of chapter 118E to mandate the division of medical assistance to expand income eligibility for the Medicare Savings Program in Massachusetts from 165% of the FPL (\$23, 475) to 200% FPL (\$31,300) within 2 years. Eligibility is to be determined based on the FPL as adjusted annually. The division must implement a waiting list in any year in which the number of qualified applicants for the Qualified Individual Program exceeds the annual block grant amount for said program.

The division must submit a state plan amendment to implement this section no later than 30 days after the effective date of this section and subsequently promulgate all regulations necessary.