TO:    DIRECTORS, LOCAL DEPARTMENTS OF SOCIAL SERVICES
       DEPUTY/ASSISTANT DIRECTORS FOR FAMILY INVESTMENT
       FAMILY INVESTMENT SUPERVISORS AND CASE MANAGERS
       DIRECTORS, LOCAL HEALTH DEPARTMENTS

FROM:  CHARLES E. HENRY, EXECUTIVE DIRECTOR, FIA
       JOSEPH E. DAVIS, EXECUTIVE DIRECTOR, DHMH/OOE

RE:    AUTOMATIC MPAP ELIGIBILITY FOR QMB RECIPIENTS

PROGRAM AFFECTED:  MEDICAL ASSISTANCE (QMB AND MPAP)

ORIGINATING OFFICE:  OFFICE OF OPERATIONS AND ELIGIBILITY,
                      MEDICAL CARE PROGRAMS

SUMMARY:  On July 30, 2002, the Centers for Medicare and Medicaid Services (CMS)
          approved Maryland’s request for an addition to the 1115 Medicaid waiver linking the
          Qualified Medicare Beneficiary (QMB) and the Maryland Pharmacy Assistance
          Programs (MPAP). This change will allow QMB recipients to receive automatic
          pharmacy coverage.

          Effective October 1, 2002, automatic enrollment of all Qualified Medicare Beneficiaries
          in the Maryland Pharmacy Assistance Program will begin. Once customers are
determined eligible for QMB, CARES will send a QMB add or update to MMIS. This
interface will convert the QMB (S03) to a S10 to reflect dual eligibility (QMB/MPAP).
Due to the link in programs, the MPAP and QMB certification periods will be the same.
This link eliminates the need for recipients to complete a separate application for each
program. LDSS case managers must tell customers of the addition of the
pharmacy benefit and that completing a QMB redetermination will result in
continuation of both types of assistance.

          MMIS will issue the cards and customers will receive a QMB (gray & white) card, a
          MPAP (yellow & white) card, and an information notice. If the QMB recipient has a
          spouse or other family members who do not have QMB, they must file a written MPAP
          application and meet all eligibility requirements to receive pharmacy benefits.

          In addition, MPAP recipients are now eligible to purchase all medically necessary
          prescription drugs authorized by Medicaid. Customers can verify whether the
          prescription is covered with their pharmacist. The MPAP co-pay remains at $5.00 for
          prescriptions and refills.
INQUIRIES: Please direct inquiries to Darlene Rondon-Bey, DHMH, at 410-767-6532, or Deborah Weathers at 410-767-7994.

cc: DHR Executive Staff FIA Management Staff
    DHMH Executive Staff FIA Trainers
    DHMH Management Staff Constituent Services
    DHR Help Desk
    RESI