

State of Maryland
Qualified Medicare Beneficiary (QMB) and
Specified Low-Income Medicare Beneficiary (SLMB) Programs

Explanation of Ineligibility Due to Excess Resources

Date: _____

Name: _____ Spouse Name: _____

HOH Client ID Number: _____ Spouse ID Number: _____

AU Number: _____

Dear _____:

This is to notify you that based on the application/redetermination filed on _____, you have been determined ineligible for the Qualified Medicare Beneficiary (QMB) and Special Low-Income Medicare Beneficiary (SLMB) programs. You are not eligible because your resources exceed the the maximum allowable amount of \$8,100.00 for an Individual or \$12,910.00 for a couple.

The amount of excess resources is: \$ _____

You are:

Denied Medical Assistance eligibility for _____ based on the application filed on _____.

Terminated from Medical Assistance eligibility effective: _____

The following resources were considered:

Type of Resource	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

The Total amount of your Countable Resource is: _____

You may reapply when your resources no longer exceed the maximum allowable amount as of the first of the month. Your resources may be used for necessary personal or health care needs (e.g., burial plan, nursing facility or other medical bills, home repairs), but may not be given away or otherwise disposed for less than fair market value. When you reapply, you will be required to verify how the resources were used. Keep all receipts for this purpose.

This decision is based on COMAR 10.09.24.08. If you do not agree with this decision, you have the right to request a hearing within 90 days of the date on this notice. The procedures for requesting a hearing are attached. If you have any questions about this letter, please call your caseworker at the number below.

Case Manager: _____

Department of Social Services: _____

Telephone Number: _____

HOW TO HAVE A HEARING IF YOU THINK WE ARE WRONG

What do I do if I think your decision is wrong?

- Call the telephone number on the other side of this notice to ask for a conference.
- Request a hearing by:
- Calling 1-800-332-6347 or the telephone number on the other side of this notice and requesting a hearing; or
- Visiting your local department office and requesting a hearing; or
- Mailing or giving a request for a hearing in writing to:
- Your local department office; or
- The following address:

DHMH Docketing – Unit A Office of Administrative Hearings 11101 Gilroy Road Hunt Valley, Maryland 21031-1301

- If you don't want to fill out the form to request the hearing:
- Come to your local department office. We will help you.
- Call your case manager at the telephone number on this notice or call 1-800-332-6347.

How long do I have to request a hearing?

- You must ask for a hearing no later than **90 days** after the date of this notice.

How long can I still get my benefits while I wait for my hearing?

- If you ask for a hearing no later than **10 days** after the date of this notice and you were getting benefits, you can continue to get your benefits while you wait.

Will I owe any money if I get my benefits while I wait?

- If the judge agrees with us and you lose your appeal, you may have to pay back benefits. This might not be required if it is determined that your request for a hearing resulted from a bona fide belief that the department's decision was in error.

When and where will the hearing be?

- The Office of Administrative Hearings will send you a notice telling you the time and place of your hearing.

Do I have to come to the hearing?

- Yes. You will lose if you do not come. If you can't come, tell the Office of Administrative Hearings and they will reschedule your hearing.

Can I bring someone to help me or speak for me?

- Yes. You can bring a lawyer, friend, or relative. If you want free legal help, call your local department or call Legal Aid at 1-800-999-8904. To see if you qualify for free legal representation, call the Maryland Volunteer Lawyer Services at 1-800-510-0050.

How can I prepare for the hearing?

- You can see your file, including your computer file, at your local department and talk with us about this decision. Please call the telephone number on the other page to make an appointment. We will send you our reasons for the decision that you are appealing, at least 6 days before your hearing.