

## Updated CMS Guidance for States on Eligibility and Enrollment Processes for the Medicare Savings Programs

On February 13, 2024, the Centers for Medicare & Medicaid Services (CMS) released updated instructions for states on eligibility and enrollment processes for the Medicare Savings Programs (MSPs). This guidance, contained in [chapter one](#) of the [Manual for the State Payment of Medicare Premiums](#) (also called the “State Buy-in Manual”) provides states with instructions to implement policies in the *Streamlining Medicaid; Medicare Savings Program Eligibility and Enrollment Final Rule (CMS 2421-F)* in advance of upcoming compliance dates.

The MSPs provide vital links to coverage and care for people with low incomes who are eligible for Medicare. However, many eligible people are not enrolled in the MSPs, in part due to cumbersome application and verification processes.

The MSP final rule significantly simplifies processes for eligible individuals to enroll and retain eligibility in the MSPs by:

- Automatically enrolling most Medicare-enrolled SSI recipients into the Qualified Medicare Beneficiary (QMB) group, which covers Medicare premiums and cost-sharing. **Compliance deadline: no later than October 1, 2024.**
- Better leveraging the Medicare Part D Low Income Subsidy (LIS) program to enroll eligible individuals in the MSPs, including maximizing use of LIS “leads” data and defining “family of the size involved” for MSP groups using the definition of “family size” in the LIS program. **Compliance deadline: no later than April 1, 2026.**
- Reducing documentation requirements for MSP applicants prior to enrollment. **Compliance deadline: no later than April 1, 2026.**

The manual revisions also reflect revised regulations for the state payment of Medicare premiums, effective January 1, 2023 and January 1, 2024, from the CMS final rule, *The Medicare Program; Implementing Certain Provisions of the Consolidated Appropriations Act, 2021 and Other Revisions to Medicare Enrollment and Eligibility Rules (CMS 4199-F)*.

### ABOUT THE INTEGRATED CARE RESOURCE CENTER

The Integrated Care Resource Center is a national initiative of the Centers for Medicare & Medicaid Services to help states improve the quality and cost-effectiveness of care for individuals dually eligible for Medicare and Medicaid. The state technical assistance activities are coordinated by Mathematica Policy Research and the Center for Health Care Strategies. For more information, visit [www.integratedcareresourcecenter.com](http://www.integratedcareresourcecenter.com).

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