

Medicare Part D and Home and Community Based Waivers

Since Medicare Part D began on January 1, 2006, Medicare beneficiaries on Medical Assistance residing in a nursing home have not paid any co-payments for their prescription drugs.

Beginning January 1, 2012, Medicare beneficiaries on Medical Assistance Home and Community Based Waivers will no longer have to pay co-payments for prescription drugs covered by Medicare Part D.

This includes Medicare beneficiaries enrolled in the following waivers in Minnesota:

- Elderly Waiver
- Brain Injury Waiver
- Community Alternative Care Waiver
- Community Alternatives for Disabled Individuals Waiver
- Developmental Disabilities Waiver

This change does not apply to Alternative Care enrollees.

Observation Stay in the Hospital: Medicare May Not Cover Your Nursing Home Stay

If you are in the hospital and you have Medicare, are you an inpatient or an outpatient? It may sound simple, but it isn't. It may be hard to imagine when you are in a hospital gown in a hospital bed on an upper floor of the hospital, wearing a hospital band on your wrist and filling out a meal form, that you may not actually be an inpatient, but are instead in the hospital for an "observation stay".

Observation is a word used by Medicare when a patient's care does not meet required guidelines for hospital inpatient status — a hospital stay with full services. Although you are in a hospital room and bed and receive services that are similar to a hospital inpatient stay, observation is not the same as being an inpatient at the hospital. Patients may have both observation days and inpatient hospital days during the same hospital stay.

Observation days in the hospital are covered under Part B Medicare services rather than Part A, which covers inpatient services. As a patient in observation, you may have to pay a co-payment for each service you receive.

Generally, prescription drugs and over-the-counter drugs are not covered under Part B while in observation.

Ask the critical question

When in the hospital, you or a family member should ask, "Am I being placed in observation status?"

The impact on Nursing Home Medicare coverage

The Senior LinkAge Line® has received appeal requests from an increasing number of Medicare beneficiaries who had a hospital stay classified as "Observation" and were admitted to a nursing home for skilled care and/or skilled rehab services. They were unable to get any Medicare coverage for their stay because they did not have a three day hospital inpatient stay, which is a requirement to qualify for Medicare Part A coverage in the nursing home. Days spent in a hospital for observation services do not count toward meeting the three day hospital requirement.

To find out more about observation status or to get help with an appeal, call the Senior LinkAge Line® at 1-800-333-2433.

Keeping Yourself Healthy: Use Your Medicare Preventive Benefits

Medicare covers many preventive services. As long as you meet basic eligibility standards, you have the right to receive these services no matter if you have Original Medicare or a Medicare Advantage Plan.



1.866.333.2466

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DHS-6101-ENG 2-10