



# HCFA MEDICARE AND MEDICAID GUIDE

Health Care Financing Administration



**A GUIDE FOR  
CONGRESSIONAL STAFF  
TO THE  
MEDICARE AND MEDICAID  
PROGRAMS**

## **INTRODUCTION**

A major initiative of the Health Care Financing Administration (HCFA) is to improve the understanding of Medicare and Medicaid by the more than 72 million Americans who benefit from these important programs. The elderly, disabled, and poor are too frequently confused by the complexity of these Federal health care programs.

Every year, Congressional offices on Capitol Hill and in Members' district and state offices receive tens of thousands of inquiries and complaints from Medicare and Medicaid beneficiaries.

The purpose of "A Guide for Congressional Staff to the Medicare and Medicaid Programs" is to help Congressional staff answer constituent questions. This Guide provides a description of Medicare and Medicaid: enrollment and eligibility provisions, benefits, and financing and payment systems. It also includes important names and telephone numbers of key personnel who run these programs (see Contacts).

Should you have any questions about the Guide, please contact HCFA's Congressional Affairs staff at (202) 690-8220. Mail HCFA-related correspondence to:

The Administrator  
Health Care Financing Administration  
Room 309G, Humphrey Building  
200 Independence Avenue, SW  
Washington, D.C. 20201

## **PREFACE**

As part of the Social Security Amendments of 1965 (P.L. 89-97), Congress established two health care financing programs--Medicare and Medicaid. Medicare is a health insurance program for the aged, disabled, and persons with end-stage renal disease (ESRD). Medicaid is a medical assistance program for needy individuals. In 1994, the Medicare program will cover about 36.8 million aged, disabled, and ESRD beneficiaries, while the Medicaid program will aid about 36 million low-income persons.

Overall responsibility for administration of these programs rests with the Health Care Financing Administration (HCFA), one of the four agencies within the Department of Health and Human Services (DHHS). HCFA, with its 10 regional offices, ensures that program beneficiaries are aware of the services for which they are eligible, that those services are accessible, meet acceptable standards of quality, and are delivered in an efficient manner. HCFA also ensures that providers of services meet approved standards, and that program funds are used efficiently, without fraud or abuse.

In addition to these efforts, HCFA works with other major components of the Department. These agencies include the Social Security Administration (SSA), the Public Health Service (PHS), and the Administration for Children and Families (ACF).

- SSA is responsible for administering cash benefit programs for retirees and their survivors, individuals who develop disabilities during their working years, and individuals who are otherwise disabled, blind, or aged with little or no income.
- PHS enhances the quality and effectiveness of health care services (Agency for Health Care Policy and Research); combats mental illness and substance abuse (Substance Abuse and Mental Health Administration); investigates the transmission of communicable diseases (Centers for Disease Control and Prevention); ensures the safety of food, drugs, and cosmetics (Food and Drug Administration); provides health care services in medically underserved and rural areas (Health Resources and Services Administration); and conducts biomedical research (National Institutes of Health).

- ACF is responsible for administering programs that benefit needy children and families. These programs include Headstart, Job Opportunities and Basic Skills, Aid to Families with Dependent Children, Child Support Enforcement, Adoption Assistance, Foster Care, Social Services Block Grant, Child Care and Development Block Grant, and child abuse programs.

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# THE MEDICARE PROGRAM

## Overview

The **Medicare** program, authorized in 1965 under Title XVIII of the Social Security Act, is a health insurance program for the aged and disabled. It covers acute care, and except in a few cases, does not cover long-term care or outpatient prescription drugs. It consists of two parts--**hospital insurance** (Part A) and **supplementary medical insurance** (Part B). Since 1965, the Medicare law has been amended many times. It was amended in 1972 to include individuals who are entitled to social security disability benefits and those who suffer from kidney failure or **end-stage renal disease (ESRD)**. Payment systems have been changed over the last decade, most notably in 1983 to set up a prospective payment system (PPS) for hospitals and in 1989 to reform the physician payment system. Medicare Part A provides basic health care coverage for inpatient hospital services, skilled nursing facility services, home health services and hospice care. Medicare Part B helps pay for the cost of physician services, outpatient hospital services, durable medical equipment and supplies, and several other health care items and services.

## Administration

The Health Care Financing Administration (HCFA) contracts with fiscal agents, such as Blue Cross and Blue Shield and other commercial insurance companies, to process and pay Medicare claims. Companies that process hospital, skilled nursing facility, home health agency, and hospice claims are called Medicare **intermediaries**. Companies that process physician and medical supplier claims are called Medicare **carriers**.



The Social Security Administration, using Medicare eligibility guidelines, determines an individual's entitlement to Part A and/or Part B. SSA's local offices also serve as a valuable contact point for Medicare beneficiaries seeking program information on covered services or information on claims.

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Part A Chart

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# **MEDICARE PART A**

## **Financing**

Part A of Medicare is financed by the Hospital Insurance Trust Fund, which comes primarily from the Hospital Insurance (HI) or Medicare payroll tax contributions paid by employers, employees, and self-employed individuals. The HI tax is paid on total annual earnings, at a rate of 1.45 percent for employers and employees, each, and for the self-employed, at a rate of 2.9 percent. These payroll taxes amount to about 89 percent of all Part A revenues. The remaining income consists of transfers from the Railroad Retirement Trust Fund and interest payments on trust fund accumulations.



## **Eligibility**

Most Americans age 65 or older who have paid into the social security or railroad retirement systems while working, or are receiving survivor's benefits, are entitled to health insurance under Medicare Part A. Some state and local government employees who do not participate in social security become eligible for Part A by paying only the Medicare portion of the payroll tax. Individuals under age 65 who have been receiving social security or railroad retirement disability benefits for not less than 24 consecutive months, and most individuals who have end-stage renal disease, are also entitled to Medicare Part A. In addition, some disabled government employees under age 65 may also be entitled to hospital insurance benefits.

## **Enrollment**

An individual who has paid social security taxes for the required number of quarters is eligible to enroll in Medicare Part A three months before attaining age 65. Benefits will start the first day of the month in which the individual becomes 65. Individuals who have not paid social security taxes for the required number of quarters may purchase Medicare Part A through monthly premiums (\$245 for calendar year 1994), but they must also enroll in Part B. Under the Omnibus Budget Reconciliation Act of 1993, individuals (including surviving and divorced spouses) with at least 30 quarters of coverage under the Social Security system will have the Part A premium discounted 25 percent

in 1994, with the discount raising gradually to 45 percent in 1998. These individuals must be residents of the United States, and either citizens or aliens lawfully admitted for permanent residence in the United States. In addition, legal aliens must have lived continuously in the United States for not less than five years immediately before the month in which they apply for enrollment. Individuals may apply for Medicare at any local social security office, or they may call the local social security office and request that enrollment forms be mailed to them.

In general, individuals receiving social security or railroad retirement benefits will be mailed a Medicare card and instructions when they reach age 65 (their initial enrollment period). The card will indicate the individual has Part A coverage for hospital insurance benefits, and Part B for medical insurance benefits. If Part B is not desired, instructions advise that the refusal should be noted on the card and returned in order to obtain a card showing only Part A coverage.

## Covered Services

Medicare Part A\* will pay for:

- Inpatient Hospital Care – Medicare beneficiaries are entitled to 90 days of inpatient service during a benefit period. A **benefit period** begins when a beneficiary enters a hospital and ends when the beneficiary no longer receives inpatient hospital or skilled nursing facility care for 60 consecutive days. Medicare will pay for most inpatient hospital care from the 1st through the 60th day of a hospital stay. However, the beneficiary is responsible for the initial hospital **deductible**, which is \$696 in calendar year 1994. From the 61st through the 90th day in the hospital, during each benefit period, Medicare Part A will pay for all covered services, less \$174 a day, which is the hospital **coinsurance** for 1994. Sixty (60) **lifetime reserve days** (nonrenewable) of additional care are provided under Medicare Part A and may be used during any benefit period that exceeds 90 days. Medicare will pay for all covered services of each reserve day used less a coinsurance amount that is set at \$348 a day in 1994. Inpatient hospital benefits include room and board, drugs, biologicals, diagnostic tests, medical supplies and nursing services that are medically necessary.

\* See page 11

- **Skilled Nursing Facility (SNF) Services** – Medicare covers up to 100 days of care in a SNF. To be eligible for SNF care, a beneficiary must be admitted to the facility within 30 days of a hospital stay of at least 3 consecutive days. Medicare will pay for all covered services from the 1st through the 20th day of care. The 21st through the 100th day requires a coinsurance payment by the beneficiary; in 1994 this coinsurance is \$87 per day. To be eligible for SNF coverage, a physician, physician assistant or nurse practitioner must certify that a beneficiary needs skilled nursing care or skilled rehabilitation services on a daily basis. Covered benefits include room and board, nursing services, physical therapy, occupational therapy, speech therapy, drugs and biologicals.
  
- **Home Health Care** – Medically necessary home health visits by nurses, therapists and home health aides are available to Medicare beneficiaries when the following conditions are met: (a) the beneficiary needs intermittent skilled nursing care or physical therapy, or speech therapy, or has a continuing need for occupational therapy; (b) the beneficiary is confined to the home due to an illness or injury that restricts the ability to leave home, except with the help of another individual, or the aid of supportive devices; (c) the beneficiary is under the care of a physician who determines the need for home health care and sets up an individual home health plan; and (d) the home health agency providing services is participating in Medicare. While the beneficiary does not have to be bedridden to be considered “homebound,” his/her condition should be such that absences from home are infrequent or of relatively short duration, and that to leave home would require considerable effort.
  
- **Hospice Care** – **Hospice** care services are provided to terminally ill beneficiaries. (The law defines “**terminally ill**” as having a medical prognosis of living six months or less.) Currently, beneficiaries who are certified as terminally ill are entitled to two periods of 90 days each, a subsequent 30-day period, and a subsequent extension period of unlimited

duration in the case that a physician recertifies the patient as terminally ill. To receive this care, a beneficiary must give up his/her rights to the regular Medicare coverage and agree to receive all needed services through the hospice. Among the covered services are nursing services, social services, physical and occupational therapies, physician services, counseling, medical supplies, drugs and biologicals, homemaker services and short-term inpatient care, including respite care.

### **Noncovered Services**

Although Medicare Part A pays for most inpatient hospital services, it does not pay for:

- Personal convenience items, such as a television or telephone in a beneficiary's room;
- Private duty nursing services, except when medically necessary;
- Extra charges for a private room, unless determined medically necessary;
- Care that is only **custodial**, e.g., help in routine bathing, walking and eating; and
- Care that is provided outside the United States, except certain emergency services received in Canada and Mexico under limited circumstances.

### **Payment**

The Social Security Amendments of 1983 established a **prospective payment system (PPS)** for most inpatient care provided by participating hospitals. This system pays for operating costs of most inpatient hospital care based on prospectively determined rates, which are adjusted to account for differences in treatment costs between diagnoses. These adjustments are based on payment categories called **diagnosis related groups (DRGs)**. The DRG system classifies a patient's medical diagnosis in comparison with other patients with similar diagnoses and requiring similar use of hospital resources.



Under PPS, a hospital may keep any savings accrued from providing care at a cost below the amount allotted for a DRG. If a hospital's costs exceed the predetermined rate, the provider must absorb the loss, though special provision is made for extremely expensive, outlier cases. The beneficiary, however, is liable only for the deductible and any coinsurance amounts, as well as any noncovered charges, such as those for personal care items.

Several types of hospitals are excluded from PPS and continue to be paid on a cost basis, subject to limits. These hospitals include psychiatric, long-term care, pediatric, and rehabilitation hospitals, as well as hospitals outside the 50 states (except Puerto Rico). In addition, home health agencies, skilled nursing facilities and some services in hospital outpatient departments continue to be reimbursed on a reasonable cost basis. Under this cost-based reimbursement method, institutions receive interim payments during the year. At the end of their accounting year, the institutions submit cost reports to their fiscal intermediaries detailing those costs attributable to Medicare beneficiaries. The intermediaries make a retrospective determination of allowable costs, and any overpayment or underpayment is adjusted to equal costs.

Medicare also pays for home dialysis treatments furnished beneficiaries with end-stage renal disease under two different systems, Method I and Method II. Under Method I (called the composite rate), a prospectively determined rate is paid to an approved dialysis facility for services performed in either the home or the facility. The facility is responsible for furnishing all necessary items and support services in both settings. The composite rate, which is determined by the Secretary of DHHS, is subject to the usual Medicare Part B deductible and coinsurance requirements and excludes any allowance for home dialysis assistants.

Under Method II (called direct dealing), payment to suppliers for home dialysis supplies and equipment is made by the Medicare carrier on a fee-for-service basis. Support services furnished by a dialysis facility are paid by the Medicare intermediary. (Hospital-based facilities are paid on the basis of cost; independent facilities are paid on the basis of charges related to costs.) This method is an alternative to Method I and allows the beneficiary to make his/her own arrangements for supplies and equipment from one supplier.

Medicare payment for dialysis made under Method II may not exceed the amount of the median payment that would have been made under Method I (composite rate) for hospital-based dialysis facilities. (Currently, the median composite rate for hospital-based dialysis facilities is about \$129 per treatment, which is approximately \$4 per treatment greater than the median composite rate for independent dialysis facilities.)

The beneficiary may choose either to deal with a facility (paid under Method I), or to deal directly with a supplier (paid under Method II). A beneficiary may change his/her method of payment for home dialysis; however, the change is usually not effective until January 1, of the following year.

Finally, Medicare payment for hospice services is based on prospectively determined daily rates for routine home care, continuous home care, inpatient respite care, and general inpatient care. The payment limit for hospice routine home care is now \$88.65 per day; for continuous home care the limit is \$517.43 per day; for inpatient respite care, \$91.70 per day; and for general inpatient care, \$394.39 per day. These payment rates are reviewed annually and adjusted as necessary. Aggregate payments to hospices are limited by an annual cap, set at \$12,248 per beneficiary in 1994 and updated annually to reflect the change in the medical care component of the Consumer Price Index (CPI).

## **Appeals Process**

Beneficiaries, and in certain instances providers, disagreeing with a decision on Medicare approved charges or whether services received are covered by Medicare Part A, have the right to appeal decisions by Peer Review Organizations (PROs, see page 39), intermediaries, and Part A providers.

PROs make decisions mainly about medical necessity, quality of care, and appropriateness of setting for services rendered in hospitals and ambulatory surgical centers. If a beneficiary disagrees with a PRO decision, he/she can request a reconsideration. If the reconsideration decision is unfavorable on claims of \$200 or more, the beneficiary can appeal the decision to an **SSA Administrative Law Judge (ALJ)** and then to the SSA Appeals Council. Claims of \$2,000 or more may be appealed to a Federal Court. There is an appeals process for Health Maintenance Organization matters (see page 24), similar to the Part A appeals process just described.

If the beneficiary is a member of an HMO, the HMO will make determinations about the medical necessity, quality of care, and appropriateness of setting. He/she cannot appeal to a PRO about services under the HMO, but the individual may register complaints with the PRO about the quality of inpatient hospital care.

In other cases involving Part A services (hospice care, home health services and skilled nursing facility services, and a few inpatient matters not handled by the PROs), Medicare intermediaries make determinations about Medicare coverage and payment amounts. A beneficiary (or in certain instances a provider) disagreeing with an intermediary's initial decision has 60 days to request a reconsideration by the intermediary. If the reconsideration decision is unfavorable on claims of \$100 or more, the beneficiary or provider has 60 days to request a hearing before an SSA ALJ. If the beneficiary (or provider) wishes to appeal further, he/she has 60 days to request review by the SSA Appeals Council. Claims of \$1,000 or more may be appealed to a Federal Court.

In addition, if a beneficiary believes he/she is being prematurely discharged from a hospital or is concerned about receipt of other Notices of Noncoverage, he/she may request a review by the PRO. The PRO must issue a decision within 3 working days after receipt of beneficiary's request.

Finally, Part A providers may appeal cost report controversies. If a provider disagrees with the intermediary's Notice of Program Reimbursement for cases of \$10,000 or more, the provider has six months to request a hearing before the Provider Reimbursement Review Board (PRRB). PRRB decisions may be appealed to Federal Court. For cases under \$10,000, the provider may request a hearing before the intermediary; judicial review is not available for these claims.

## MEDICARE (PART A): HOSPITAL INSURANCE-COVERED SERVICES FOR 1994

| Services                                                                                                                                                                                                                                                                               | Benefit                                                                      | Medicare Pays                                                                  | You Pay                                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|--------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| <b>HOSPITALIZATION</b><br>Semiprivate room and board, general nursing and other hospital services and supplies.<br>(Medicare coverage based on benefit periods, see page 4).                                                                                                           | First 60 days                                                                | All but \$696                                                                  | \$696                                                                       |
|                                                                                                                                                                                                                                                                                        | 61st to 90th day                                                             | All but \$174 a day                                                            | \$174 a day                                                                 |
|                                                                                                                                                                                                                                                                                        | 91st to 150th day*                                                           | All but \$348 a day                                                            | \$348 a day                                                                 |
|                                                                                                                                                                                                                                                                                        | Beyond 150 days                                                              | Nothing                                                                        | All costs                                                                   |
| <b>SKILLED NURSING FACILITY CARE</b><br>You must have been in a hospital for at least 3 days, enter a Medicare-approved facility generally within 30 days after hospital discharge, and meet other program requirements.**<br>(Medicare coverage based on benefit periods; see pg. 5.) | First 20 days                                                                | 100% of approved amount                                                        | Nothing                                                                     |
|                                                                                                                                                                                                                                                                                        | Additional 80 days                                                           | All but \$87 a day                                                             | Up to \$87 a day                                                            |
|                                                                                                                                                                                                                                                                                        | Beyond 100 days                                                              | Nothing                                                                        | All costs                                                                   |
| <b>HOME HEALTH CARE</b><br>Medically necessary skilled care, home health aide services, medical supplies, etc.                                                                                                                                                                         | For as long as you meet Medicare requirements for home health care benefits. | 100% of approved amount; 80% of approved amount for durable medical equipment. | Nothing for services; 20% of approved amount for durable medical equipment. |
| <b>HOSPICE CARE</b><br>Pain relief, symptom management and support services for the terminally ill.                                                                                                                                                                                    | For as long as doctor certifies need.                                        | All but limited costs for outpatient drugs and inpatient respite care.         | Limited cost sharing for outpatient drugs and inpatient respite care.       |
| <b>BLOOD</b>                                                                                                                                                                                                                                                                           | Unlimited if medically necessary.                                            | All but first 3 pints per calendar year.                                       | For first 3 pints.***                                                       |

1994 Part A monthly premium: None for most beneficiaries.  
 \$245 if you must buy Part A (Premium may be higher if you enroll late).

\* 60 reserve-days may be used only once.

\*\* Neither Medicare nor Medigap insurance will pay for most nursing home care.

\*\*\* To the extent the 3 pints of blood are paid for or replaced under one part of Medicare during the calendar year, they do not have to be paid or replaced under the other part.

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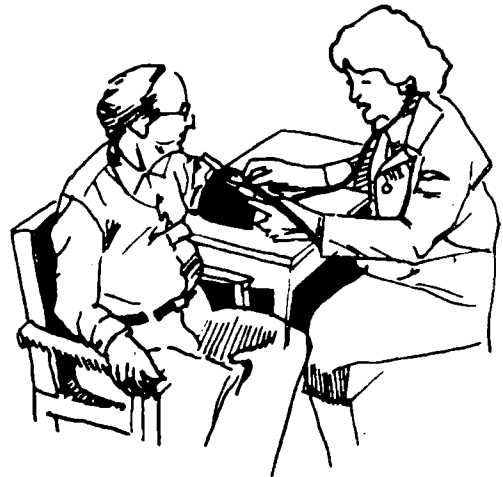
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## MEDICARE PART B

### Financing

The Medicare Part B Supplementary Medical Insurance Trust Fund primarily finances physician and hospital outpatient services. The Part B Trust Fund is financed by premium payments from enrollees and by general revenue funds from the U.S. Treasury. The Omnibus Budget Reconciliation Act of 1990 established the amounts of the premium payable through 1995. The 1994 premium is \$41.10. The Omnibus Budget Reconciliation Act of 1993 further established the premium to equal 25 percent of program costs from 1996 through 1998. In addition, beneficiaries are responsible for an annual **deductible**, currently \$100, as well as **coinsurance** (usually 20 percent) of the approved Medicare Part B charges.



### Eligibility

Supplementary medical insurance (Part B) is voluntary and open to individuals who are entitled to Part A Medicare benefits, as well as those individuals age 65 and older who are residents of the United States, or aliens lawfully admitted for permanent residence who have resided continuously in the United States during the five years preceding the month in which application for Part B enrollment is made.

### Enrollment

Beneficiaries who want Part B should file an application during their initial enrollment period. This is the seven month period beginning three months prior to the month an individual is first eligible.

Those who fail to apply during their initial enrollment period, or cancel their Medicare coverage, and who do not qualify for a special enrollment period (Medicare enrollees who are covered under an employer's group health plan based on current employment) are allowed to apply during the annual general enrollment period—January through March. Those who fail to enroll during their initial enrollment period may be assessed a premium penalty if they are not covered under an employer group health plan based on current employment. This **penalty** is an additional 10 percent of the premium for each full 12-month period the individual could have been enrolled in Part B but was not.

## Covered Services

Medicare Part B\* helps pay for:

- **Physician Services** — All covered services received in physicians' offices, hospitals, SNFs, and home health agencies, including diagnostic tests, medical and surgical supplies, as well as second opinions before surgery. Some limitations apply to services performed by chiropractors, podiatrists, dentists, and optometrists. Services of specially qualified practitioners, e.g., certified registered nurse anesthetists, certified nurse midwives, clinical psychologists, clinical social workers, physician assistants and nurse practitioners are covered under approved conditions.
- **Drugs and Biologicals** — Only drugs that cannot be self-administered, immunosuppressive drugs used in therapy for one year following an organ transplant, erythropoietin (EPO) when prescribed for individuals suffering from end-stage renal disease, flu shots, pneumococcal vaccine or immunization required because of an injury or immediate risk of infection, and hepatitis B vaccine for certain high-risk individuals, therapeutic shoes for individuals suffering from severe diabetic foot disease.
- **Other Medical Services and Health Supplies** — Durable medical equipment (wheelchairs, oxygen equipment), physical and occupational therapy, speech pathology services, ambulance transportation, mental health services, pap smears, and screening mammography. Also includes covered services and supplies provided in Medicare approved ambulatory surgical centers, comprehensive outpatient rehabilitation facilities, rural health clinics, independent clinical laboratories, and Federally qualified health centers.

## Noncovered Services

Some health care services not generally paid for by Medicare Part B include:

- Routine physical examinations and tests, except for screening mammography and pap smears;

\* See page 19

- Routine foot care;
- Most dental care services, including dentures;
- Most outpatient prescription drugs or biologicals;
- Hearing aids and most eyeglasses, except for one pair of eyeglasses or contact lens furnished subsequent to a cataract surgery involving insertion of intraocular lens;
- Cosmetic surgery, unless medically necessary because of accidental injury or to improve the function of a malformed body part;
- Charges imposed by physicians or other individuals who are immediate relatives;
- Services performed outside the United States, except emergency services in Canada or Mexico under certain limitations;
- Experimental procedures; and
- Custodial care.

Beneficiaries may be relieved of liability for payment of certain noncovered services if they did not know or could not be reasonably expected to know that the services were not covered. This “**waiver of liability**” applies only to payment denied because the care was custodial, not reasonable and necessary under Medicare program standards, or for home health care where the patient was not homebound or receiving skilled nursing care on an intermittent basis. It also only applies when care was provided by a “participating” provider or furnished on agreement.

In addition, when physician services are provided by a nonparticipating physician (see page 17) on a nonassigned basis and the physician knew or should have known the care was not covered under the Medicare program, the physician must inform the patient in advance by written notice and get the patient’s written agreement to pay for the services. If this notice is not given and agreement was not obtained, the beneficiary cannot be required to pay for the services and is entitled to a refund if he/she has paid for the services.

## Payment

The Omnibus Budget Reconciliation Act of 1989 required the Secretary of DHHS to develop a payment system for physician services based on a **resource-based** fee schedule. This fee schedule replaced the reasonable charge payment structure of actual, customary, and prevailing charges. It is being phased in over a four-year period, beginning January 1, 1992 and ending in 1996. The fee schedule is updated annually and is based on relative value units for physician work expenses, overhead expenses, and malpractice expenses. The values are adjusted for each locality by a geographic adjustment factor.

The law also established the Medicare Volume Performance Standard (MVPS) rates of increase for expenditure of physician services. The goal of the MVPS is to slow the high annual rate of increase in physician expenditures. Separate MVPS apply for surgical services, primary care services, and all other physician services. The overall MVPS for Federal fiscal year 1994 is 9.3 percent. Updates for physician fees are based partly on how the rate of growth in overall Medicare spending on physicians compares to MVPS during a previous period. The MVPS is set by Congress to reflect an appropriate annual rate of increase in physician payments.

Beginning September 1990, all physicians and medical suppliers of services are required to complete and submit, within one year, the "Claim for Medicare Payment" on behalf of the beneficiary. There can be no charge for this service. When physicians or suppliers provide an item or service to a beneficiary, the bill is submitted to the carrier in one of two ways: either on an **"assigned"** or **"nonassigned"** basis. In cases of assigned claims, the beneficiary transfers his/her right for Medicare payment to the physician. The physician bills Medicare and is reimbursed by the carrier. The beneficiary is responsible for the 20 percent coinsurance which may be collected at the time of service. In cases of nonassigned claims, the physician is also required to submit the bill to the carrier, but payment is made by the Medicare carrier directly to the beneficiary. The beneficiary is then responsible for paying the physician's bill, including any "extra billing" amount above the Medicare allowed charge.

Physicians who provide services to beneficiaries are either participating or nonparticipating. **Participating** physicians and suppliers always accept assignment. They sign a one-year contract agreeing to accept Medicare's approved charge as full payment for all covered services. A participating physician bills Medicare directly and is paid 80 percent of Medicare's approved charge. The physician may only charge the beneficiary the applicable deductible and coinsurance amounts.



**Nonparticipating physicians** are not required to accept assignment on all claims, but may accept assignment on a case-by-case basis. On nonassigned claims, the beneficiary is responsible for the deductible and coinsurance amounts, plus any difference between the actual charge and the Medicare-approved charge. However, the bill cannot be more than the limiting charge. For 1994, the limit is 115 percent of the nonparticipating fee schedule and nonparticipating physicians are paid 95 percent of the fee schedule. Thus, a nonparticipating physician may not charge a beneficiary on a nonassigned claim more than 115 percent of 95 percent (or 9.25 percent) of the physician fee schedule.

## **Appeals Process**

The Medicare law provides administrative appeal rights under the Part B program for disputes over whether services are covered or about the Medicare-approved amount for physician/supplier assigned claims. If the beneficiary or provider is dissatisfied with the carrier's review decision for claims of \$100 or more, he/she may request a hearing before the carrier hearing officer. The claimant may combine claims that have been reviewed or reopened within the past six months to meet the \$100 requirement. If the claimant still disagrees with the hearing officer's decision on claims of \$500 or more, he/she has 60 days to appeal to an SSA Administrative Law Judge and another 60 days to appeal to the SSA Appeals Council. The claimant may combine claims that have had a hearing decision within the past 60 days to meet the \$500 requirement. Cases involving \$1,000 or more may be eventually appealed to a Federal Court.

In general, a physician who does not accept assignment has no appeals rights, except for payment denials based on medical necessity. In these cases, the provider has 30 days to refund payment to the beneficiary and the appeals process described above applies. In other similar cases, a provider on an unassigned claim may appeal if the beneficiary elects not to appeal.

## MEDICARE (PART B): MEDICAL INSURANCE-COVERED SERVICES FOR 1994

| Services                                                                                                                                                                                                                    | Benefit                                                                      | Medicare Pays                                                                                                        | You Pay                                                                                                                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>MEDICAL EXPENSES</b><br>Physician's services, inpatient and outpatient medical and surgical services and supplies, physical and speech therapy, diagnostic tests, durable medical equipment, and other medical services. | Medicare pays for medical services in or out of the hospital.                | 80% of approved amount (after \$100 deductible); 50% of approved charges for most outpatient mental health services. | \$100 deductible,* plus 20% of approved amount and limited charges above approved amount.** 50% of approved charges for mental health services. |
| <b>CLINICAL LABORATORY SERVICES</b><br>Blood tests, urinalysis, and more.                                                                                                                                                   | Unlimited if medically necessary.                                            | Generally 100% of approved amount.                                                                                   | Nothing for services.                                                                                                                           |
| <b>HOME HEALTH CARE</b><br>Medically necessary skilled care, home health aide services, medical supplies, and other services. (Home health care covered under Part B only if you do not have Part A.)                       | For as long as you meet Medicare requirements for home health care benefits. | 100% of approved amount; 80% of approved amount for durable medical equipment.                                       | Nothing for services; 20% of approved amount for durable medical equipment.                                                                     |
| <b>OUTPATIENT HOSPITAL TREATMENT</b><br>Reasonable and necessary services for the diagnosis or treatment of an illness or injury.                                                                                           | Unlimited if medically necessary.                                            | Medicare payment to hospital based on hospital costs.                                                                | \$20% of billed amount (after \$100 deductible).*                                                                                               |
| <b>BLOOD</b>                                                                                                                                                                                                                | Unlimited if medically necessary.                                            | 80% of approved amount (after \$100 deductible and starting with 4th pint).                                          | First 3 pints plus 20% of approved amount for additional pints (after \$100 deductible).***                                                     |

1994 Part B monthly premium: \$41.10 (Premium may be higher if you enroll late).

\* Once you have had \$100 of expense for covered services, the Part B deductible does not apply to any other covered services you receive for the rest of the year.

\*\* Federal law limits charges for physician services (see page 17).

\*\*\* To the extent any of the 3 pints of blood are paid for or replaced under one part of Medicare during the calendar year, they do not have to be paid for or replaced under the other part.

## **THE MEDICARE SECONDARY PAYER PROGRAM**

**Medicare Secondary Payer (MSP)** is a program that assures that other insurance coverage pays for health care services before Medicare in selected situations. These situations apply to beneficiaries who receive benefits from certain employer-sponsored group health insurance, workers' compensation, automobile, liability, or no-fault insurance. In these cases, the other insurer is the "primary" payer and Medicare "secondary" payer, which results in lower Medicare expenditures.

Medicare is secondary to group health insurance coverage for beneficiaries aged 65 or over, if the individual is currently employed or is the spouse of a currently employed individual of any age, and the beneficiary is covered under a group health plan sponsored by or contributed to by an employer with 20 or more employees. The employer's plan must be offered to the beneficiary, but the beneficiary may reject the plan and choose Medicare as primary. The employer may not offer any inducements for the beneficiary to choose Medicare.

Medicare is also the secondary payer to certain disabled beneficiaries covered by a large group health plan. This provision applies to group health plans that cover employees of an employer with at least 100 employees. Employed beneficiaries of smaller companies may also be covered by this secondary payer provision if the plan is a multi-employee plan with at least one employer of 100 or more employees.

Medicare is secondary for up to eighteen months (reverts to 12 months after October 1, 1998) for all individuals with end-stage renal disease who have employer group health plan coverage. Medicare is also secondary to workers' compensation and black lung benefits.

Medicare is secondary in cases where medical expenses are covered under automobile, no-fault or liability insurance (e.g., automobile, business). In cases of liability insurance, Medicare will pay conditional payments if it receives a bill and will recover its payments from the settlement amount.

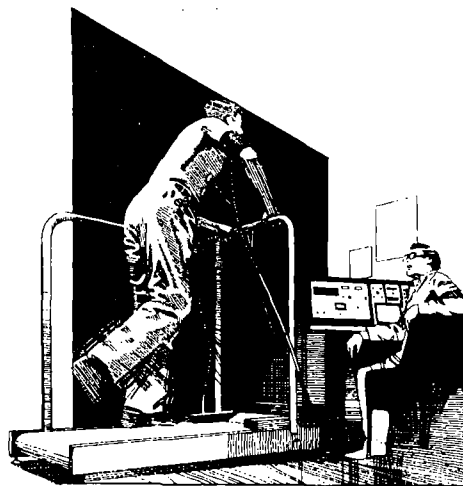
In addition, Medicare is secondary payer to Veterans Administration (VA) authorized services and cannot pay for services provided in VA hospitals. However, Medicare may pay for covered services for veterans when those services are provided by a non-VA provider and the VA has not authorized payment. Medicare may also be able to reimburse part of any deductible or coinsurance charged for VA services.

Finally, Medicare is always the primary insurer when beneficiaries are covered under both Medicare and Medicaid.

To help identify MSP cases, Congress enacted the Omnibus Budget Reconciliation Act of 1989 (OBRA 1989). It requires the Social Security Administration (SSA), the Internal Revenue Service (IRS), and the Health Care Financing Administration (HCFA) to establish a MSP Data Match Program that allows an exchange of information on Medicare beneficiaries. The purpose of this program is to: identify potential situations where certain MSP provisions may exist; prevent mistaken payments from the Medicare Trust Fund when another third party is obligated to make primary payment; and to recover any mistaken primary payments made by Medicare. OBRA 1989 also requires that HCFA send questionnaires to the identified employers to obtain specific information about group health plan coverage of identified employees and/or their spouses. Employers are subject to civil money penalties for willfully and repeatedly failing to respond timely or for sending incorrect or incomplete information.

## MANAGED CARE PLANS

Medicare, in addition to the traditional fee-for-service program, offers its beneficiaries the option of enrolling in managed care or coordinated care programs. Managed care programs promote quality, enhance access to health care, and reduce inappropriate utilization through the coordination of health care services. The term “**managed care**” refers to a variety of health care delivery systems and financing mechanisms that have the following common characteristics: (1) active coordination of health services; (2) provision of services through an established network of providers and a means of influencing patients to use the network; and (3) negotiated payment terms with the providers. **Health maintenance organizations (HMOs), competitive medical plans, preferred provider organizations (PPOs), health care prepayment plans (HCPPs), and “point-of-service” (POS) plans** are all varieties of managed care programs.



Most Medicare beneficiaries are eligible to enroll in managed care plans. The only criteria are that a beneficiary: (1) be enrolled in Part B and continue to pay the Part B premium; (2) live in the plan's service area; (3) not be receiving care in a Medicare certified hospice; and (4) not have chronic kidney disease. Beneficiaries generally pay fixed monthly premiums and any required out-of-pocket expenses or nominal copayments. Many plans offer, at no additional cost, health care services not covered by Medicare, such as eyeglasses, dental services, and hearing aids.

Whether beneficiaries choose fee-for-service or managed care, they generally get all of Medicare's hospital and medical benefits. The quality of care provided by both systems is comparable. The differences in the two systems include how the benefits are delivered, how and when payment is made, and how much beneficiaries may have to pay out of their pocket.

There are three types of managed care plans: risk plans, cost plans, or HCPPs. Under the risk plan, the managed care contractor is paid a predetermined monthly payment that is based on 95 percent of what Medicare would have paid for the same services received under its fee-for-service program. The plan provides all Part A and Part B services and beneficiaries **MUST** obtain all medical care and services through plan-authorized providers and physicians, except in cases of emergency.

Under the cost plan and HCPP, contractors are paid interim per capita payments on the basis of a budget, and a retrospective cost settlement is made to reflect the reasonable costs incurred by the managed care plans for the covered services it actually furnishes to enrolled members. Beneficiaries enrolled in HCPPs are not required to obtain all their medical care and services through the plan. Some plans cover all Part B benefits and others cover only some of them. HCPPs do not cover Medicare Part A services, but some will arrange such services and file Part A claims on the beneficiary's behalf. In addition, HCPPs may have other enrollment requirements and rules that are different than other managed care plans.

Within broad Federal guidelines, these managed care plans are free to determine their own organization and rules governing payment to their affiliated providers.

### **Appeals Process**

HMOs have appeal procedures similar to the procedures provided through fee-for-service Medicare. Through the appeals procedures, Medicare enrollees can contest an HMO's decision to deny services or payment of claims. HMO decisions are subject to further appeal involving HCFA and/or the Federal courts. A request for reconsideration must be made in writing and filed with the HMO, carrier or intermediary where the initial determination was made; or an SSA office or the Railroad Retirement Board, when applicable.

HMOs also have internal grievance procedures for disputes that do not involve denied services or the payment of claims. Medicare beneficiaries enrolled in managed care plans also have the right to disenroll monthly, returning to fee-for-service Medicare or joining another HMO.

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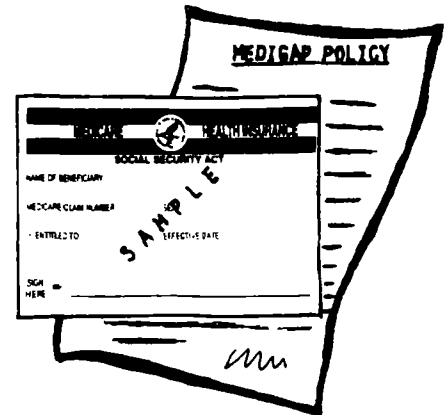
MEDIGAP

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## MEDIGAP COVERAGE

Although Medicare pays a significant amount of acute health care costs, some expenses are the responsibility of beneficiaries. To offset these expenses, many people elect to purchase private supplemental insurance. These policies, often referred to as **Medigap insurance policies**, are designed to pay for deductibles, coinsurance, and for some health services not covered by Medicare. Added protection may be in the form of supplemental insurance, long-term care insurance, or prepaid health plans. The Federal government does not sell Medigap insurance.



Beneficiaries should exercise caution in purchasing supplemental protection. To assist beneficiaries in selecting supplemental insurance, HCFA, with advice from the National Association of Insurance Commissioners (NAIC), publishes a "Guide to Health Insurance for People with Medicare." This Guide is available from HCFA or through local social security offices. States' standards for health insurance coverage and reimbursement may vary. However, Federal law does mandate national standardization of Medigap policies which have been developed by the NAIC. These 10 standard plans (see page 27) include a basic benefit package (Plan A) and nine other policies with a different combination of additional benefits plus the basic benefit package (Plans B through J). Insurers are not allowed to change the letter designations for these plans but may add names or titles to these designations. Beneficiaries should contact their state insurance commissioner or agencies on aging to obtain guidance and information on purchasing additional health care coverage.

The Omnibus Budget Reconciliation Act of 1990 (OBRA 1990) authorized HCFA to award grants to States for health insurance counseling services relating to Medicare, Medicaid, Medigap, long-term care insurance and other health insurance benefit information. Some states currently offer these counseling services and other states will establish these services in the future.

In addition, a new health insurance product that contains some of the features of a managed care plan has been authorized by Congress to be sold in 15 states effective January 1992 through 1994. The policies developed under the "**Medicare SELECT**" pilot program is private Medigap insurance that will be regulated by the States

and be required to meet certain Federal standards. Medicare SELECT is different from regular Medigap insurance in that these policies may restrict benefits to items and services furnished through a network of entities known as “preferred providers” who have been selected by the Medicare carrier to contract with the issuer of the policy to participate in the program. The plan may also pay reduced benefits for services that are not obtained through the network. Premiums for these plans are generally lower than other Medigap policies, however, provider choice does not affect the payment of Medicare benefits.

States currently designated to sell Medicare SELECT policies include Alabama, Arizona, California, Florida, Illinois, Indiana, Kentucky, Massachusetts, Minnesota, Missouri, North Dakota, Ohio, Texas, Washington, and Wisconsin.

## 10 STANDARD MEDICARE SUPPLEMENT BENEFIT PLANS

| BASIC BENEFITS                                        | PLAN<br>A | PLAN<br>B | PLAN<br>C | PLAN<br>D | PLAN<br>E | PLAN<br>F | PLAN<br>G | PLAN<br>H | PLAN<br>I | PLAN<br>J |
|-------------------------------------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Part A Hospital (Days 61-90)                          | X         | X         | X         | X         | X         | X         | X         | X         | X         | X         |
| Lifetime Reserve Days(91-150)                         | X         | X         | X         | X         | X         | X         | X         | X         | X         | X         |
| 365 Life Hosp. Days-100%                              | X         | X         | X         | X         | X         | X         | X         | X         | X         | X         |
| Parts A and B Blood                                   | X         | X         | X         | X         | X         | X         | X         | X         | X         | X         |
| Part B Coinsurance-20%                                | X         | X         | X         | X         | X         | X         | X         | X         | X         | X         |
| ADDITIONAL BENEFITS                                   | A         | B         | C         | D         | E         | F         | G         | H         | I         | J         |
| Skilled Nursing Facility<br>Coinsurance (Days 21-100) |           |           | X         | X         | X         | X         | X         | X         | X         | X         |
| Part A Deductible                                     |           | X         | X         | X         | X         | X         | X         | X         | X         | X         |
| Part B Deductible                                     |           |           | X         |           |           | X         |           |           |           | X         |
| Part B Excess Charges                                 |           |           |           |           |           | 100%      | 80%       |           | 100%      | 100%      |
| Foreign Travel Emergency                              |           |           | X         | X         | X         | X         | X         | X         | X         | X         |
| At-Home Recovery                                      |           |           |           | X         |           |           | X         |           | X         | X         |
| Prescription Drugs                                    |           |           |           |           |           |           |           | 1         | 1         | 2         |
| Preventive Medical Care                               |           |           |           |           | X         |           |           |           |           | X         |

**Basic Benefits** pay the patient's share of Medicare's approved amount for physician services (generally 20%) after \$100 annual deductible, the patient's cost of a long hospital stay (\$174/day for days 60-90, \$348/day for days 91-150, approved costs not paid by Medicare after day 150 to a total of 365 days lifetime), and charges for the first 3 pints of blood not covered by Medicare.

**Two prescription drug benefits are offered:**

1. a "basic" benefit with \$250 annual deductible, 50% coinsurance and a \$1,250 maximum annual benefit (Plans H and I above), and
2. an "extended" benefit (Plan J above) containing a \$250 annual deductible, 50% coinsurance and a \$3,000 maximum annual benefit.

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MEDICAID

Divider Title: \_\_\_\_\_

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# THE MEDICAID PROGRAM

## Overview

The Medicaid program, authorized by Title XIX of the Social Security Act, is a Federal-state program that pays for health care services for certain low-income persons. Forty-nine states, the District of Columbia, Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Northern Mariana Islands all operate Medicaid programs. Arizona operates a Federal assistance program as an alternative to Medicaid under a waiver of some basic Federal requirements.



## Administration

Medicaid programs are administered by the states. At the state level, a single state agency (usually the human services agency) administers the Medicaid program within Federal statutes, regulations and guidelines. At the Federal level, HCFA sets broad policy and monitors state administration.

States have broad discretion in designing and administering their Medicaid programs, and programs vary from state to state. Each state, however, must operate its Medicaid program under a state plan, submitted to and approved by HCFA, detailing eligibility, benefits, payment rates, and other program features. A state must also submit amendments to the existing approved Medicaid plan, and get HCFA approval, before implementing changes in its program.

## Financing

Medicaid services and the associated administrative costs are financed jointly by the Federal government and the states. Federal funds are made available each year by the Congress to meet claims submitted by the states. The Federal government matches state expenditures for health care services covered under the plan of each state according to a formula that is based on the state's per capita income. The matching rate, called the **Federal Medical Assistance Percentage (FMAP)**, may range from 50 to 83 percent. FMAPs are recalculated annually.

## Eligibility

State Medicaid programs must cover eligible residents of the United States who are citizens, or aliens lawfully admitted for permanent residence, or permanently residing in this country “under color of law.” States are also required to cover services necessary for the treatment of an emergency medical condition (including labor and delivery) for undocumented aliens. Medicaid eligibility, for the most part, is linked to the Federally-assisted welfare programs of Aid to Families with Dependent Children (AFDC) and Supplemental Security Income (SSI). A state may not impose any eligibility requirement prohibited by the Federal Medicaid law. Persons seeking assistance should contact the local welfare or human services department to determine their eligibility.

There are two basic groups who qualify for Medicaid: the “categorically needy” and the “medically needy.” **Categorically needy individuals** include those persons who receive public assistance under SSI and AFDC because they are poor and either aged, blind, or disabled or who are specified members of families with dependent children. In most states, receipt of payment under one of these programs confers automatic Medicaid eligibility. However, under Federal law, some states have chosen to use criteria that are more restrictive than the SSI standards in determining Medicaid eligibility for the aged, blind and disabled. The Federal law requires that these criteria be no more restrictive than state eligibility rules in place January 1, 1972, when the SSI program began.

States are also required to provide Medicaid coverage to other categorically needy groups. These include: all pregnant women in families with incomes up to 133 percent of poverty, all infants and children up to age 6 in families with incomes up to 133 percent of poverty, and children born after September 30, 1983, up to age 19 in families with incomes at or below 100 percent of poverty.

States have the option to cover pregnant women and infants in families with incomes up to 185 percent of poverty. Certain other optional categories of individuals not associated with receiving public assistance benefits under the Social Security Act may be covered if the state chooses.

**Medically needy individuals** are those who would meet categorically needy criteria except for their slightly higher income and/or resources, but who, in the view of the state or other jurisdiction, cannot afford to pay for their own medical care. A state may limit medically needy coverage to pregnant women and children, or it may extend coverage to certain other groups as well. Certain types of persons — typically

able-bodied adults — cannot qualify for Medicaid regardless of low poverty level status or poor health. A state may set income and resource standards for the medically needy that are no lower than the levels for comparable groups of categorically needy individuals, but no higher than allowed by Federal statute. These individuals are allowed to “**spend down**” to the medically needy income eligibility level by deducting incurred medical expenses from their income. The medically needy program is optional. As of October 1, 1993, 35 states, the District of Columbia, American Samoa, Puerto Rico, the Virgin Islands, and the Northern Mariana Islands cover the medically needy under their Medicaid programs.

States and the District of Columbia are required by the Medicare Catastrophic Coverage Act of 1988 to pay Medicare premiums, deductibles, and coinsurance for qualified elderly and disabled persons who are eligible for Part A and who have incomes below the poverty level and resources at or below twice the standard under the SSI program. States are also required to pay Part B premiums (but not coinsurance or deductible) for **low income Medicare beneficiaries** between 101 and 110 percent of the poverty level beginning January 1, 1993 and then between 101 and 120 percent beginning January 1, 1995, and thereafter. In addition, states are required to pay Medicare Part A premiums for qualified disabled and working individuals who are entitled to enroll in Medicare Part A with incomes at or below 200 percent of the poverty level and resources at or below twice the standards under the SSI program.

To protect a “**community spouse**” (the spouse who is not institutionalized) from impoverishment, the law now permits the institutionalized spouse to protect income and assets for community spouses with insufficient income of their own. The monthly protected income level for a community spouse may not exceed \$1,816.50, effective January 1, 1994 (indexed for inflation in subsequent years). In addition, beginning January 1, 1994, states are required to select a spousal resource allowance from a minimum of \$14,532 (maximum of \$72,660) in resources for the community spouse.

## Services

All states are required to offer coverage for a core group of services, referred to as “**mandatory services.**” These are:

- o inpatient hospital services;
- o outpatient hospital services;
- o physicians’ services;
- o nursing facility services for persons 21 or older;
- o home health services for anyone entitled to nursing facility care;
- o rural health clinic services;
- o early and periodic screening, diagnostic and treatment services for persons under age 21;
- o nurse-midwife services;
- o family planning services;
- o pediatric or family nurse practitioner services;
- o Federally-qualified health center services;
- o other laboratory and x-ray services;
- o dental services that would be covered if performed by a physician; and
- o intermediate care facilities for the mentally retarded.



States may also offer a broad range of additional services, referred to as “**optional services.**” These include such services as:

- o nursing facility services for persons under age 21;
- o home and community-based services;

- o chiropractic services;
- o private duty nursing;
- o dental services;
- o physical therapy;
- o occupational therapy;
- o services for individuals with speech, hearing and language disorders;
- o prescription drugs;
- o prosthetic devices;
- o eyeglasses;
- o diagnostic, screening, preventive, and rehabilitative services;
- o personal care services;
- o pediatric immunizations; and
- o tuberculosis-related services for tuberculosis-infected individuals who meet the state's income and resource test for categorically needy disabled individuals.

The chart on page 37 shows, as of October 1993, the optional services covered by each state for both categorically needy and, if applicable, medically needy populations.

### **Provider Payment**

Under the law, states have considerable latitude in developing their payment system for Medicaid services. The following three basic statutory requirements apply to all types of services:

- o Providers, such as hospitals, nursing facilities, physicians, and laboratories, must accept Medicaid payment as payment in full, except any beneficiary

cost-sharing amounts provided in the state plan or any amount due from a medically needy beneficiary with a spend-down liability.

- o Medicaid is the payer of last resort, secondary to any health insurance coverage available to beneficiaries, including Medicare.
- o Mechanisms for making payments must ensure that payments will be efficient and economical.

In addition, states' payment rates must be sufficient to attract enough providers so that services will be as available to Medicaid beneficiaries as they are to the general population. In general, states employ retrospective or prospective (similar to Medicare) payment systems for hospital services. For Medicaid nursing facility services, regulations provide that aggregate payments may not exceed what would have been paid by Medicare. Medicaid usually pays physicians and other practitioners the lesser of the actual charge for the services or a maximum allowable charge established by the state.

### **Provider Appeals**

If a provider disagrees with the payment rate or rate-setting methodology, the provider may appeal the decision to the state. The extent to which providers are given appeal rights and the issues which may be appealed are determined by state law. Providers may have other appeal rights linked to participation in the Medicare program.

### **Waivers**

States may apply to the Federal government for **waivers** of Federal statutory requirements in order to develop cost-effective alternative methods of service delivery under their Medicaid programs. The most common waivers are the freedom-of-choice waiver and the home and community-based services waiver authorized under sections 1915(b) and 1915(c), respectively of the Social Security Act. Under a **freedom-of-choice waiver**, a state may waive otherwise applicable right of beneficiaries to free choice of providers in order to, for example, implement a primary care case-management system or a specialty physician services arrangement. States may also require that Medicaid beneficiaries receive services from specified providers, generally on a negotiated contract basis. With freedom-of-choice waivers, the state must demonstrate to HCFA that the waiver program is

cost-effective (i.e., waiver costs would be equal to or less than non-waiver costs) and that beneficiaries' access to care and quality of services are not substantially impaired.

A state may also request a **home and community-based services waiver** to provide a wide range of services not otherwise available under its Medicaid plan, targeted exclusively to individuals who are institutionalized or at risk of an institutional stay funded by Medicaid. The statute includes explicit authorization for such services as homemaker, home health aide, personal care, adult day care, respite care, habilitation and case management services. States may also request any other service which the Secretary approves as cost-effective and necessary to avoid institutionalization. These "other" services have included such things as personal emergency response alarm systems, private duty nursing, special medical equipment and supplies, home modifications, etc. States may operate these programs on less than a statewide basis at their request and may also use institutional financial eligibility rates to qualify clients for Medicaid waiver services in the community. There are currently 179 approved programs operating in 48 states, serving such diverse populations as mentally retarded, frail elderly, persons with AIDS, and technologically-dependent children. To obtain such a waiver, a State must demonstrate that the average per capita cost of services under the waiver program is less than (or equal to) the cost which would have been incurred for alternative institutional care.

The Omnibus Budget and Reconciliation Act of 1990 provides a new "optional service" home and community care program for the frail elderly that is subject to funding limitation. This law also includes a provision for a limited program for community care services for the mentally retarded/developmentally disabled.

# MEDICAID SERVICES STATE BY STATE

October 1, 1993

## Optional Services in State Medicaid Programs

| • CN <sup>1</sup><br>+ Both CN and MN <sup>2</sup> |           | Key to Medicaid Determination column:<br>(See reverse side for explanation.) |                    | Basic Required Medicaid Services See Above |                |                                 |                        |                         |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          | Age 65 or Older in IMDs <sup>4</sup> |                           | ICF/MR <sup>5</sup> Services |    | Inpatient Psychiatric Services for Under Age 21 |    | Christian Science Nurses |    | Christian Science Sanatoriums |  | NF Services for Under Age 21 |  | Emergency Hospital Services |  | Personal Care Services |  | Transportation Services |  | Case Management Services |  | Hospice Care Services |  | Respiratory Care Services |  | Total Additional Services |  |
|----------------------------------------------------|-----------|------------------------------------------------------------------------------|--------------------|--------------------------------------------|----------------|---------------------------------|------------------------|-------------------------|-------------------------|----------------------------------|------------------------------|----------------------|-----------------|-----------------|------------------|----------------------|----------------------------------------|------------------|----------|--------------------|------------|---------------------|--------------------|---------------------|-------------------------|--------------------------------|----------------|------------------------------|-------------------------------------------------|--------------------------|-------------------------------|------------------------------|-----------------------------|------------------------|-------------------------|--------------------------|--------------------------------------|---------------------------|------------------------------|----|-------------------------------------------------|----|--------------------------|----|-------------------------------|--|------------------------------|--|-----------------------------|--|------------------------|--|-------------------------|--|--------------------------|--|-----------------------|--|---------------------------|--|---------------------------|--|
| FMAP <sup>3</sup>                                  | See Above | 1634 State                                                                   | SSI-criteria State | 209 (b) State                              | Not applicable | Podiatrists' Services           | Optometrists' Services | Chiropractors' Services | Psychologists' Services | Medical Social Workers' Services | Nurse Anesthetists' Services | Private Duty Nursing | Clinic Services | Dental Services | Physical Therapy | Occupational Therapy | Speech, Hearing and Language Disorders | Prescribed Drugs | Dentures | Prosthetic Devices | Eyeglasses | Diagnostic Services | Screening Services | Preventive Services | Rehabilitative Services | A. Inpatient Hospital Services | B. NF Services | ICF/MR <sup>5</sup> Services | Inpatient Psychiatric Services for Under Age 21 | Christian Science Nurses | Christian Science Sanatoriums | NF Services for Under Age 21 | Emergency Hospital Services | Personal Care Services | Transportation Services | Case Management Services | Hospice Care Services                | Respiratory Care Services | Total Additional Services    |    |                                                 |    |                          |    |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 71.22                                              | •         |                                                                              |                    |                                            |                | Alabama                         | •                      |                         |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              | 25 | AL                                              |    |                          |    |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | •         |                                                                              |                    |                                            |                | Alaska                          |                        | •                       | •                       | •                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    | 22                                              | AK |                          |    |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | +         |                                                                              |                    |                                            |                | American Samoa <sup>4</sup>     |                        |                         |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    | 16                                              | AS |                          |    |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 65.90                                              | •         |                                                                              |                    |                                            |                | Arizona <sup>5</sup>            | •                      | •                       |                         | •                                | •                            | •                    |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 | 29 | AZ                       |    |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 74.46                                              | +         |                                                                              |                    |                                            |                | Arkansas                        | +                      |                         |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 | 17 | AR                       |    |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | +         |                                                                              |                    |                                            |                | California                      | +                      | +                       | +                       |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 | 28 | CA                       |    |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 54.30                                              | •         |                                                                              |                    |                                            |                | Colorado                        | •                      | •                       |                         | •                                | •                            | •                    |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 19                       | CO |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | +         |                                                                              |                    |                                            |                | Connecticut                     | +                      | •                       | +                       | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 | 24 | CT                       |    |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | •         |                                                                              |                    |                                            |                | Delaware                        | •                      | •                       |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 | 15 | DE                       |    |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | +         |                                                                              |                    |                                            |                | D.C.                            | +                      | +                       |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 | 25 | DC                       |    |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 54.78                                              | +         |                                                                              |                    |                                            |                | Florida                         | +                      | +                       | +                       |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 | 23 | FL                       |    |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 62.47                                              | •         |                                                                              |                    |                                            |                | Georgia                         | +                      | •                       |                         | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 18                       | GA |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | +         |                                                                              |                    |                                            |                | Guam                            | •                      | •                       |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 14                       | GU |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | +         |                                                                              |                    |                                            |                | Hawaii                          | +                      | +                       |                         | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 24                       | HI |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 70.92                                              | •         |                                                                              |                    |                                            |                | Idaho                           | •                      | •                       | •                       |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 20                       | ID |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | +         |                                                                              |                    |                                            |                | Illinois                        | +                      | •                       | +                       |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 26                       | IL |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 63.49                                              | •         |                                                                              |                    |                                            |                | Indiana                         | •                      | •                       | •                       | •                                | •                            |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    |                          | 30 | IN                            |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 63.33                                              | +         |                                                                              |                    |                                            |                | Iowa                            | +                      | +                       | •                       | +                                | +                            |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    |                          | 24 | IA                            |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 59.52                                              | +         |                                                                              |                    |                                            |                | Kansas                          | +                      | +                       | +                       | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 25                       | KS |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 70.91                                              | +         |                                                                              |                    |                                            |                | Kentucky                        | +                      | •                       |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 23                       | KY |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 73.49                                              | +         |                                                                              |                    |                                            |                | Louisiana                       | •                      | +                       | •                       |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 15                       | LA |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 61.96                                              | +         |                                                                              |                    |                                            |                | Maine                           | +                      | •                       | +                       | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 27                       | ME |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | +         |                                                                              |                    |                                            |                | Maryland                        | +                      | +                       |                         | +                                | +                            |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 24                       | MD |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | +         |                                                                              |                    |                                            |                | Massachusetts                   | +                      | +                       |                         | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 27                       | MA |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 56.37                                              | +         |                                                                              |                    |                                            |                | Michigan                        | +                      | +                       | +                       |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 26                       | MI |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 54.65                                              | +         |                                                                              |                    |                                            |                | Minnesota                       | +                      | •                       | +                       | +                                | +                            |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 30                       | MN |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 78.85                                              | •         |                                                                              |                    |                                            |                | Mississippi                     | •                      |                         |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 20                       | MS |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 60.64                                              | •         |                                                                              |                    |                                            |                | Missouri                        | •                      | •                       |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 17                       | MO |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 71.05                                              | +         |                                                                              |                    |                                            |                | Montana                         | +                      | •                       |                         | +                                | •                            | +                    |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 29                       | MT |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 61.98                                              | +         |                                                                              |                    |                                            |                | Nebraska                        | +                      | •                       | +                       | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 25                       | NE |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.31                                              | •         |                                                                              |                    |                                            |                | Nevada                          | •                      | •                       |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 25                       | NV |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | +         |                                                                              |                    |                                            |                | New Hampshire                   | +                      | •                       | +                       | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 25                       | NH |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | +         |                                                                              |                    |                                            |                | New Jersey <sup>6</sup>         | +                      | •                       | +                       | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 | 29 | NJ                       |    |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 74.17                                              | •         |                                                                              |                    |                                            |                | New Mexico                      | •                      | •                       |                         | •                                | •                            |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 12                       | NM |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | +         |                                                                              |                    |                                            |                | New York                        | +                      | •                       |                         | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 26                       | NY |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 65.14                                              | +         |                                                                              |                    |                                            |                | North Carolina                  | +                      | •                       | +                       |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 23                       | NC |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 71.13                                              | +         |                                                                              |                    |                                            |                | North Dakota                    | +                      | •                       | +                       | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 26                       | ND |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | +         |                                                                              |                    |                                            |                | N. Mariana Islands <sup>4</sup> |                        |                         |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 12                       | NM |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 60.83                                              | •         |                                                                              |                    |                                            |                | Ohio                            | •                      | •                       | •                       |                                  | •                            | •                    |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    |                          | 23 | OH                            |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 70.39                                              | +         |                                                                              |                    |                                            |                | Oklahoma                        | +                      | •                       |                         | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 17                       | OK |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 62.12                                              | +         |                                                                              |                    |                                            |                | Oregon <sup>6</sup>             | •                      | •                       | •                       |                                  | +                            | •                    |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 26                       | OR |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 54.61                                              | +         |                                                                              |                    |                                            |                | Pennsylvania                    | +                      | •                       | +                       | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 21                       | PA |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 50.00                                              | +         |                                                                              |                    |                                            |                | Puerto Rico <sup>7</sup>        |                        |                         |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 8                        | PR |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 53.87                                              | +         |                                                                              |                    |                                            |                | Rhode Island                    | •                      | •                       |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 17                       | RI |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 71.08                                              | •         |                                                                              |                    |                                            |                | South Carolina                  | •                      | •                       |                         | •                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 21                       | SC |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 69.50                                              | •         |                                                                              |                    |                                            |                | South Dakota                    | •                      | •                       | •                       |                                  | •                            |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    |                          | 20 | SD                            |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 67.15                                              | +         |                                                                              |                    |                                            |                | Tennessee                       | +                      | •                       |                         |                                  |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 17                       | TN |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 64.18                                              | +         |                                                                              |                    |                                            |                | Texas <sup>6</sup>              | +                      | •                       | +                       | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    | 21                       | TX |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |
| 74.35                                              | +         |                                                                              |                    |                                            |                | Utah                            | +                      | •                       |                         | +                                |                              |                      |                 |                 |                  |                      |                                        |                  |          |                    |            |                     |                    |                     |                         |                                |                |                              |                                                 |                          |                               |                              |                             |                        |                         |                          |                                      |                           |                              |    |                                                 |    |                          |    |                               |  |                              |  |                             |  |                        |  |                         |  |                          |  |                       |  |                           |  |                           |  |

### NOTES

1. States may choose either to determine the categorical Medicaid eligibility of their aged, blind, and disabled residents, or have the Social Security Administration (SSA) make these determinations for them. The "Medicaid Determination" column reflects the selected option.

☐ The State has an agreement with SSA under section 1634 of the Social Security Act. SSA makes Medicaid eligibility determination for supplemental security income (SSI) recipients. (31 States and the District of Columbia)

☒ The State makes its own Medicaid eligibility determination for SSI recipients using the SSI eligibility criteria. (7 States and the Northern Mariana Islands)

☒ The State uses more restrictive criteria than those of the SSI program to determine Medicaid eligibility for SSI recipients. A State that selects this option is commonly referred to as a "209 (b) State". Section 209 (b) of Public Law 92-603 later became Section 1902 (f) of the Social Security Act. (12 States)

☐ The Medicaid determination option is not applicable.

2. The Omnibus Budget Reconciliation Act of 1990 (OBRA '90) authorized the selection of up to eight States to provide community-supported living arrangements (CSLA) services as an optional State plan service. The States selected to provide CSLA services are: California, Colorado, Florida, Illinois, Maryland, Michigan, Rhode Island, and Wisconsin.

3. Also as a Medicaid option, OBRA '90 allows for the provision of home and community care to functionally disabled, elderly individuals who are either medically needy or eligible for Medicaid due to receipt of SSI benefits. Texas and Rhode Island have implemented this option.

# **Clinton Presidential Records**

## **Digital Records Marker**

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This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

This marker identifies the place of a tabbed divider. Given our digitization capabilities, we are sometimes unable to adequately scan such dividers. The title from the original document is indicated below.

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### **QUALITY ASSURANCE**

Divider Title: \_\_\_\_\_

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# QUALITY ASSURANCE ACTIVITIES

## Overview

HCFA is responsible for assuring that health care services provided to Medicare and Medicaid beneficiaries meet professionally recognized standards of care and are delivered effectively and efficiently. Providers of health services, e.g., hospitals, nursing facilities, home health agencies, that participate in the Medicare and Medicaid programs are required to meet specific Federal standards. Peer Review Organizations (PROs), state surveyors, and other organizations assist HCFA in ensuring that health care providers meet these standards.



## Peer Review Organizations

**Peer Review Organizations** are primarily physician groups under contract with Medicare to review medical necessity, appropriateness, and quality of inpatient hospital care as well as health care provided in health maintenance organizations and in ambulatory surgical centers. States are authorized to contract with PROs and other review organizations for Medicaid review.

When health care quality standards are not met by providers (e.g., premature discharge, inappropriate readmission or transfer), PROs may initiate educational interventions, intensify review or, as a last resort, recommend that the Inspector General (IG) of the Department of Health and Human Services sanction a provider or practitioner.

If care was not medically necessary or was provided in an inappropriate setting, the PRO may deny Medicare payment for that care. A beneficiary, provider, or practitioner who is dissatisfied with a PRO's initial denial determination is entitled to a written notice and reconsideration of the determination by the PRO. The PRO must investigate written complaints from beneficiaries, or their representatives, about the quality of Medicare services received.

Hospitals participating in Medicare must maintain a written agreement with a PRO in the area as a condition of participation under Medicare. There are currently 53 PROs throughout the country that review care within each state, the District of Columbia, and the territories.

### **Survey and Certification**

Under current law, many types of entities providing health care services to Medicare and Medicaid beneficiaries must meet certain health and safety standards in order to participate in these programs. State health departments or other appropriate state agencies carry out most survey and certification responsibilities for both Medicare and Medicaid. Information derived from surveys of providers is available to the public from HCFA or state agencies.

In general, HCFA relies on the Joint Commission on Accreditation of Healthcare Organizations (JCAHOs) or the American Osteopathic Association (AOA) for certification of hospitals. Hospitals that meet JCAHO or AOA standards are deemed to meet Federal requirements. State agencies survey those hospitals that have not requested accreditation by the JCAHO or AOA. HCFA and state agencies also carry out special surveys of all psychiatric hospitals.

In addition, HCFA has recognized the JCAHO and the Community Health Accreditation Program (CHAP) for home health agencies. Thus, a home health agency accredited under JCAHO and CHAP is deemed to meet certification requirements under Medicare and is not subject to routine surveys by the State survey agency.

HCFA is also responsible for implementing new survey and certification procedures for qualifying all nursing facilities for participation in the Medicare and Medicaid programs. All nursing homes that participate in these programs are subject to an unannounced standard survey. State survey agencies are responsible for investigating potential violations of health facility standards in all Medicare and/or Medicaid participating facilities. HCFA personnel may also investigate potential violations. Any complaints regarding the care given to beneficiaries in nursing homes (e.g., allegations of unsanitary conditions or cruel or indifferent treatment) should be directed to the state survey and certification agency or appropriate HCFA regional office.

## Program Integrity Activities

HCFA's program integrity activities are those intended to detect and investigate fraud or abuse of the Medicare and Medicaid programs by health care providers or beneficiaries, and to provide appropriate sanctions when necessary. **Fraud** is generally viewed as obtaining something of value, unlawfully, through willful misrepresentation. **Abuse** covers a wide variety of excessive services or program violations, and improper practices not involving prosecutable fraud.

With the assistance of HCFA intermediaries and carriers, the DHHS's Office of Inspector General (IG) investigates fraud and abuse of the Medicare program. The IG also helps states in detecting Medicaid fraud and has developed special computer software for states to use in detecting drug diversion.

State Medicaid programs must have systems in place to detect fraud and abuse. In particular, they must produce profiles of utilization patterns of individual beneficiaries and providers. Most states also have special Medicaid fraud control units connected to their attorney generals' offices.

Beginning January 1, 1995, states will be required to follow new standards established by the Secretary of DHHS. They must demonstrate that they operate an effective Medicaid Fraud Control Unit (MFCU), or demonstrate that a MFCU would not be cost effective because minimal fraud exists and beneficiaries would be protected from fraud and abuse without a MFCU.

Criminal or civil money penalties are applicable to persons or entities who are convicted of committing specified fraudulent acts or have filed fraudulent claims under the program. The law now requires the Secretary to exclude providers and practitioners who are convicted of crimes involving health programs established under the Social Security Act or involving patient abuse or neglect. If a person believes fraud has occurred, he/she should telephone the fraud and abuse hotline at 1-800-638-5779. In Maryland, call 1-800-638-3986.

# **Clinton Presidential Records**

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### **CONTACTS**

Divider Title: \_\_\_\_\_

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## STATE-BY-STATE MEDICARE AND MEDICAID CONTACTS

- HCFA CENTRAL OFFICE** - Congressional Affairs (202-690-8220)
- HCFA REGIONAL OFFICES** - Medicare and Medicaid Beneficiary Services
- PART B CARRIERS** - Physician Services
- PART A INTERMEDIARIES** - Hospital, hospice, home health, and skilled nursing facility services (Congressional contacts only)
- PEER REVIEW ORGANIZATIONS (PRO)** - Hospital stays and Part A services
- MEDICAID** - State Directors

### ALABAMA

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Birmingham, Alabama 35298  
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**Part A:** BC & BS of Alabama  
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**Part A:** BC of Washington and AK  
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**PRO:** PRO West  
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**Part A:** Hawaii Medical Services  
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**Part A:** BC & BS of Arizona  
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Phoenix, Arizona 85002-3466  
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**PRO:** Health Serv. Advisory Group  
1-800-626-1577 / 602-264-6382

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**Part A:** Arkansas BC & BS  
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P.O. Box 2181  
Little Rock, Arkansas 72203  
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**PRO:** AR Foundation for  
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1-800-272-5528 (in-state only)

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## **ARKANSAS** (continued)

Shirley Gamble

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## **CALIFORNIA**

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**Part B:** Transamerica Occidental  
Counties of Los Angeles, Orange,  
San Diego, Ventura, Imperial,  
San Luis Obispo, Santa Barbara  
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Upland, California 91785-0061  
1-800-675-2266/ 213-748-2311  
Rest of State: Claims Dept.  
Blue Shield of California  
Chico, California 95976  
(Area codes 209, 408, 415, 707, 916):  
1-800-952-8627 916-743-1583  
(In the following area codes—other than  
Los Angeles, Orange, San Diego, Ventura,  
Imperial, San Luis Obispo and Santa Bar-  
bara counties— 213, 619, 714, 805, 818):  
1-800-848-7713 714-796-9393

**Part A:** Blue Cross of California  
P.O. Box 70000  
Van Nuys, CA 91470  
Janie Solomon: 818-703-4563

**Part A:** Aetna Life and Casualty  
P.O. Box 808019  
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Pat Taormino: 707-792-5801

**Part A:** Mutual of Omaha Insurance  
P.O. Box 1602  
Omaha, Nebraska 68101  
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**PRO:** California Medical Review  
1-800-841-1602 / 415-882-5800

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916-657-1496

## **COLORADO**

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**Part B:** BC & BS of Colorado  
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**Part A:** New Mexico BC & BS  
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**PRO:** Colorado Foundation for  
Medical Care  
1-800-727-7086 / 303-695-3333

David West, Ph.D.  
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1-800-982-6819  
In Hartford: 203-728-6783  
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**Part A:** Aetna Life and Casualty  
270 Farmington Ave., Suite 181  
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**Part A:** Travelers Insurance Co.  
Government Operations  
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East Hartford, CT 06108  
Richard Stuart: 203-277-2478

**Part A:** BC & BS of Connecticut  
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**PRO:** CT Peer Review Organ.  
1-800-553-7590 (in-state only)  
203-632-2008

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203-566-2934

## DELAWARE

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**Part B:** Pennsylvania Blue Shield  
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1-800-851-3535

**Part A:** BC & BS of Delaware  
One Brandywine Gateway  
P.O. Box 1991  
Wilmington, Delaware 19899  
Tom Onley: 302-421-3161

**PRO:** WV Medical Institute  
1-800-522-0446  
302-655-3077

Philip Soule, Sr.  
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## **DISTRICT OF COLUMBIA** (continued)

**Part A:** BC & BS of Maryland  
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**PRO:** Delmarva Foundation for  
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904-355-8899

**Part A:** BC & BS of Florida  
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**Part A:** BC & BS of Georgia  
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**PRO:** Professional Review Organ.  
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**Part A:** Health Care Service Corp.  
233 North Michigan Ave.  
Chicago, Illinois 60601  
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**Part A:** Aetna Life and Casualty  
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Peoria, IL 61615-3800  
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**PRO:** Crescent Counties Foundation  
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**Part B:** AdminaStar Federal  
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**Part A:** Associated Insurance  
Companies, Inc.- AdminaStar  
8115 Knue Road  
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**PRO:** Indiana PRO Organization  
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**Part B:** IASD Health Services Inc.  
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**Part A:** IASD Health Services Inc.  
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**PRO:** Iowa Foundation for  
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## KANSAS

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**Part A:** BC & BS of Kansas  
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**PRO:** Kansas Foundation for  
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## **MAINE**

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C and S Administrative Services  
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**Part A:** Associated Hospital  
Service of Maine  
2 Gannett Drive  
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**PRO:** Health Care Review, Inc.  
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## **MARYLAND**

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Camp Hill, PA 17089-0100  
Rick Johnson 717-731-2456/  
1-800-233-1124  
Rest of State: MD Blue Shield  
1946 Greenspring Drive  
Timonium, Maryland 21093  
Barbara Mullican 410- 561-4053  
1-800-492-4795 / 410-561-4160

**Part A:** BC & BS of Maryland  
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1946 Greenspring Drive  
Timonium, MD 21093  
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**PRO:** Delmarva Foundation  
for Medical Care, Inc.  
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1-800-492-5811

Nelson Sabatini  
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## **MASSACHUSETTS** (continued)

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### **Part A:** BC & BS of MA

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In Detroit: 313-225-8200

**Part A:** BC & BS of Michigan  
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Rosalee Livingston: 313-225-0860

**PRO:** Michigan Peer Review Organ.  
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## **MINNESOTA**

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**Part B:** The Travelers Companies  
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Goodhue, Hennepin, Houston, Olmstead,  
Ramsey, Wabasha, Washington, Winona  
8120 Penn Avenue South  
Bloomington, Minnesota 55431  
1-800-352-2762 / 612-884-7171  
Rest of State: BS of MN  
P.O. Box 64357  
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1-800-392-0343 / 612-456-5070

**Part A:** BC & BS of Minnesota  
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St. Paul, Minnesota 55164-0357  
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**PRO:** Foundation for Health  
Care Evaluation  
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## **MISSISSIPPI**

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### **Part B:** The Travelers Companies

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Jackson, Mississippi 39225-2545

1-800-682-5417 (in-state only)

1-800-227-2349 / 601-956-0372

### **Part A:** BC & BS of Mississippi

P.O. Box 23035

Jackson, Mississippi 39225-3035

Richard Lefoldt: 601-932-3704

### **PRO:** Mississippi Foundation for Medical Care

1-800-844-0600 / 601-948-8894

Helen Wetherbee

### **Medicaid** Executive Director

Suite 801, Robert E. Lee Building

239 North Lamar Street

Jackson, MS 39201-1399

601-359-6050

## **MISSOURI**

### **HCFA Region VII** Administrator

Gene Hyde 816-426-5233

Beneficiary Serv.: 816-426-3682

### **Part B:** BS of Kansas City

Counties: Andrew, Atchison, Bates,  
Benton; Buchanan, Caldwell, Carroll,  
Cass, Clay, Clinton, Daviess, DeKalb,  
Gentry, Grundy, Harrison, Henry, Holt,  
Jackson, Johnson, Lafayette, Livingston,  
Mercer, Nodaway, Pettis, Platte, Ray, St.  
Clair, Saline, Vernon, and Worth

P.O. Box 419840

Kansas City, Missouri 64141-6840

1-800-892-5900 / 816-561-0900

Rest of State

General American Life Ins. Co.

P.O. Box 505

St. Louis, Missouri 63166

1-800-392-3070 / 314-843-8880

### **Part A:** Mutual of Omaha Ins. Co.

10220 North Executive Hills Blvd.

Suite 220

Kansas City, Missouri 64158

Congressional: 816-891-6500

### **Part A:** BC & BS of Mississippi

P.O. Box 23035

Jackson, Mississippi 39225-3035

Richard Lefoldt: 601-932-3704

### **PRO:** Missouri Patient Care

Review Foundation

1-800-347-1016 / 314-893-7900

Donna Scheckett

### **Medicaid** Director

P.O. Box 6500

Jefferson City, MO 65102

314-751-6922

## **MONTANA**

HCFA **Region VIII** Acting Administrator  
Geraldine Trocheck 303-844-2111  
Beneficiary Serv.: 303-844-6136  
Ext. 238

**Part B:** BC & BS of Montana  
2501 Beltview  
P.O. Box 4310  
Helena, Montana 59604-4310  
1-800-332-6146 / 406-444-8350

**Part A:** BC & BS of Montana  
Great Falls Division  
P.O. Box 5004  
Great Falls, Montana 59403  
Mike Wagner: 406-791-4000

**Part A:** BC & BS of Montana  
Helena Division  
P.O. Box 4309  
Helena, Montana 59601  
Mike Wagner: 406-791-4000

**PRO:** Montana-Wyoming Foundation  
for Medical Care  
1-800-497-8232 / 1-800-332-3411  
406-443-4020

Nancy Ellery  
**Medicaid** Administrator  
P.O. Box 4210  
Helena, MT 59604  
406-444-4540

## **NEBRASKA**

HCFA **Region VII** Administrator  
Gene Hyde 816-426-5233  
Beneficiary Serv.: 816-426-3682

**Part B:** Blue Shield of Kansas  
Claims should be sent to:  
Part B - BC & BS of Nebraska  
P.O. Box 3106  
Omaha, Nebraska 68103-0106  
1-800-633-1113 / 913-232-3773  
(customer service site in Kansas)

**Part A:** BC & BS of Nebraska  
P.O. Box 3248  
Omaha, Nebraska 68180  
John Hines: 402-390-1883

**Part A:** Mutual of Omaha Ins.  
P.O. Box 1602  
Omaha, Nebraska 68101  
Liz Powers: 402-978-5256

**PRO:** Iowa Foundation for  
Medical Care  
1-800-247-3004 / 515-223-2900

Robert Seiffert  
**Medicaid** Administrator  
301 Centennial Mall South, 5th Fl.  
Lincoln, NE 68509  
402-471-9718

## **NEVADA**

HCFA **Region IX** Administrator  
Gerald Moskowitz 415-744-3502  
Beneficiary Serv.: 415-744-3621

**Part B:** Aetna Life and Casualty  
P.O. Box 37230  
Phoenix, Arizona 85069  
1-800-528-0311 / 602-861-1968

## **NEVADA** (continued)

**Part A:** Aetna Life and Casualty  
P.O. Box 808019  
Petaluma, CA 94975-8019  
Pat Taormino: 707-792-5801

**PRO:** Nevada Peer Review  
1-800-748-6773  
801-487-2290 / 702-385-9933

April H. Townley  
**Medicaid** Deputy Administrator  
2527 North Carson Street  
Carson City, NV 89710  
702-687-4378

## **NEW HAMPSHIRE**

HCFA **Region I** Administrator  
Sidney Kaplan 617-565-1188  
Beneficiary Serv.: 617-565-1232

**Part B:** Medicare B  
C and S Administrative Services  
P.O. Box 9790  
Hingham, MA 02044-9195  
1-800-447-1142 / 207-284-4336

**Part A:** NH - VT Health Service  
Two Pillsbury Street  
Concord, New Hampshire 03301  
Edward Cutting: 603-224-9511

**PRO:** New Hampshire Foundation for  
Medical Care  
1-800-582-7174 / 603-749-1641

Lee Bezanson  
**Medicaid** Administrator  
6 Hazen Drive  
Concord, NH 03301-6521  
603-271-4353

## **NEW JERSEY**

HCFA **Region II**  
Administrator  
William Toby 212-264-4488  
Beneficiary Serv.: 212-264-3657

**Part B:** Pennsylvania Blue Shield  
P.O. Box 400010  
Harrisburg, PA 17140-0010  
1-800-462-9306 (in-state only)  
Rick Johnson 717-731-2456/  
717-975-7333

**Part A:** BC & BS of New Jersey  
33 Washington Street  
Newark, New Jersey 07102  
Joseph Rampone: 201-456-2233

**PRO:** The PRO of New Jersey, Inc.  
1-800-624-4557 / 908-238-5570

Saul M. Kilstein  
**Medicaid** Director  
CN-712, 7 Quakerbridge Plaza  
Trenton, NJ 08625  
609-588-2600

## **NEW MEXICO**

HCFA **Region VI** Acting Administrator  
Ed Lessard 214-767-6427  
Beneficiary Serv.: 214-767-6403

## **NEW MEXICO** (continued)

**Part B:** Aetna Life and Casualty  
P.O. Box 25500  
Oklahoma City, OK 73125-0500  
1-800-423-2925

**Part A:** New Mexico BC & BS  
P.O. Box 27630  
Albuquerque, NM 87192-7630  
Jan Orio: 505-294-1588

**PRO:** NM Medical Review Assoc.  
1-800-432-6824 / 505-842-6236

Bruce Weydemeyer  
**Medicaid** Director  
P.O. Box 2348  
Santa Fe, NM 87504-2348  
505-827-4315

## **NEW YORK**

HCFA **Region II**  
Administrator  
William Toby 212-264-4488  
Beneficiary Serv.: 212-264-3657

**Part B:** Empire BC and BS  
Counties of: Bronx, Columbia,  
Delaware, Dutchess, Greene, Kings,  
Nassau, New York, Orange, Putnam,  
Richmond, Rockland, Suffolk,  
Sullivan, Ulster, Westchester  
P.O. Box 2280  
Kathy Dunphy 212-476-4922  
Peekskill, New York 10566  
1-800-442-8430 / 516-244-5100

**Part B:** Group Health, Inc.  
For Queens County:  
P.O. Box 1608, Ansonia Station  
New York, New York 10023  
Jim Ryan 212-721-1300 ext. 400  
212-721-1770

**Part B:** BC & BS of Western NY  
7-9 Court Street  
Binghamton, New York 13902-3197  
Jerry Macy 607-779-6221  
607-772-6906 / 1-800-252-6550

**Part A:** Empire BC and BS  
P.O. Box 4846  
Syracuse, New York 13221  
Carol Glisker: 315-479-3097

**PRO:** Island Peer Review Organ  
1-800-331-7767 / 516-326-7767

Gregory Kaladjian  
**Medicaid** Acting Dep. Commissioner  
40 North Pearl Street  
Albany, NY 12243-0001  
518-474-9132

## **NORTH CAROLINA**

HCFA **Region IV**  
Acting Administrator  
Clarence J. Boone 404-331-2329  
Beneficiary Serv.: 404-331-2054

**Part B:** CT General Life Ins. Co.  
P.O. Box 671  
Nashville, Tennessee 37202  
1-800-672-3071 / 919-665-0348

## **NORTH CAROLINA** (continued)

**Part A:** BC & BS of N. Carolina  
P.O. Box 2291  
Durham, North Carolina 27702  
Susanne Naylor: 919-490-4096

**PRO:** Medical Review of  
North Carolina  
1-800-682-2650 / 919-851-2955

Barbara Matula  
**Medicaid** Director  
1985 Umstead Drive  
P.O. Box 29529  
Raleigh, NC 27626-0529  
919-733-2060

## **NORTH DAKOTA**

HCFA **Region** VIII Acting Administrator  
Geraldine Trocheck 303-844-2111  
Beneficiary Serv.: 303-844-6136  
Ext. 238

**Part B:** Blue Shield of N.D.  
4510 13th Avenue, S.W.  
Fargo, North Dakota 58121-0001  
1-800-247-2267 / 701-282-0691

**Part A:** BC & BS of North Dakota  
4510 13th Avenue, S.W.  
Fargo, North Dakota 58121-0001  
Rod Carson: 701-282-1847

**PRO:** N.D. Health Care Review  
1-800-472-2902 / 701-852-4231

Betty Strecker  
**Medicaid** Director  
600 East Boulevard Avenue  
Bismarck, ND 58505-0261  
701-224-2321

## **NORTHERN MARIANA ISLANDS**

HCFA **Region** IX Administrator  
Gerald Moskowitz 415-744-3502  
Beneficiary Serv.: 415-744-3602

**Part B:** Aetna Life & Casualty  
P.O. Box 3947  
Honolulu, Hawaii 96812  
808-524-1240

**Part A:** HI Medical Service Assn.  
P.O. Box 860  
Honolulu, Hawaii 96808-0860  
Fred Fortin: 808-944-2405

**PRO:** Hawaii Medical Service Assn.  
(PRO for American Samoa/Guam/HI)  
808-944-3581 / 1-800-944-3586

Maria A. V. Leon Guerrero  
**Medicaid** Administrator  
P.O. Box 409 CK  
Saipan, MP 96950  
011-670-234-8950 ext. 2905

## **OHIO**

HCFA **Region** V Administrator  
Chester Stroyny 312-886-6432  
Beneficiary Serv.: 312-353-5737

**Part B:** Nationwide Mutual Ins.  
P.O. Box 57  
Columbus, Ohio 43216  
1-800-282-0530 / 614-249-7157

**Part A:** Community Mutual  
Insurance Company  
P.O. Box 145482  
Cincinnati, Ohio 45250-5482  
Thomas Mowry: 513-852-4230

## **OHIO** (continued)

**PRO:** Peer Review Systems  
1-800-233-7337 / 614-895-9900

Kathryn T. Glynn  
**Medicaid** Deputy Director  
30 East Broad St., 31st Floor  
Columbus, OH 43266-0423  
614-644-0140

## **OKLAHOMA**

HCFA **Region** VI Acting Administrator  
Ed Lessard 214-767-6427  
Beneficiary Serv.: 214-767-6403

**Part B:** Aetna Life and Casualty  
701 N.W. 63rd St.  
Oklahoma City, OK 73116-7693  
1-800-522-9079 / 405-848-7711

**Part A:** Group Health Service  
of Oklahoma  
1215 South Boulder Ave.  
Tulsa, Oklahoma 74119  
Peggy Risinger: 918-560-2090

**PRO:** Oklahoma Foundation for  
Peer Review  
1-800-522-3414 / 405-840-2891

Raymond Haddock  
**Medicaid** Division Administrator  
P.O. Box 25352  
Oklahoma City, OK 73125  
405-557-2539

## **OREGON**

HCFA **Region** X Administrator  
Nancy Dapper 206-615-2306  
Beneficiary Serv.: 206-615-2354

**Part B:** Aetna Life and Casualty  
200 S.W. Market St., P.O. Box 1997  
Portland, Oregon 97207-1997  
1-800-452-0125 / 503-222-6831

**Part A:** BC & BS of Oregon  
P.O. Box 8110  
Portland, Oregon 97207-8110  
James Verdick: 503-721-7115

**PRO:** Oregon Medical Professional  
Review Organization  
1-800-344-4354 / 503-279-0100

Jean I. Thorne  
**Medicaid** Director  
203 Public Service Building  
Salem, OR 97310  
503-378-2263

## **PENNSYLVANIA**

HCFA **Region** III Administrator  
Maurice Hartman 215-596-1351  
Beneficiary Serv.: 215-596-6865

**Part B:** Pennsylvania Blue Shield  
P.O. Box 890065  
Camp Hill, PA 17089-0065  
Rick Johnson 717-731-2456  
1-800-382-1274 / 717-763-3601

**Part A:** Aetna Life and Casualty  
501 Office Center Drive  
Fort Washington, PA 19034  
Dennis Phipps: 215-643-7200

## **PENNSYLVANIA** (continued)

**Part A:** Independence Blue Cross  
1901 Market Street  
Philadelphia, PA 19103  
Robert McKeown: 215-241-2770

**Part A:** Veritus, Inc.  
Fifth Avenue Place  
Pittsburgh, PA 15222  
Marilyn Koch: 412-928-6201

**PRO:** Keystone Peer Review Organ.  
1-800-322-1914 / 717-564-8288

Sherry Knowlton  
**Medicaid** Deputy Secretary  
P.O. Box 2675  
Health and Welfare Bldg  
Harrisburg, PA 17105-2675  
717-787-1870

## **PUERTO RICO**

HCFA **Region II**  
Administrator  
William Toby 212-264-4488  
Beneficiary Serv.: 212-264-3657

**Part B:** Seguros De Servicio De Salud De  
Puerto Rico  
Call Box 71391  
San Juan, Puerto Rico 00936-3628  
In Puerto Rico: 800-462-7015  
In Puerto Rico metro area:  
Earl Harper 809-749-4080

**Part A:** Cooperativa de Seguros  
de Vida de Puerto Rico  
GPO Box 3428  
San Juan, Puerto Rico 00936-3428  
Alba Cosme de Natal: 809-764-4060

**PRO:** Puerto Rico Foundation for  
Medical Care  
809-753-6705 / 809-753-6708

Agneris Guzman  
**Medicaid** Director  
Building A, G.P.O. Box 70184  
San Juan, PR 00936  
809-765-1230

## **RHODE ISLAND**

HCFA **Region I** Administrator  
Sidney Kaplan 617-565-1188  
Beneficiary Serv.: 617-565-1232

**Part B:** BS of Rhode Island  
444 Westminster Street  
Providence, RI 02903-3279  
1-800-662-5170 / 401-861-2273

**Part A:** BC & BS of Rhode Island  
444 Westminster Street  
Providence, RI 02903-3279  
George Schobel: 401-459-1000

**PRO:** Health Care Review, Inc.  
1-800-221-1691 (New England-wide)  
1-800-662-5028 / 401-331-6661

Robert J. Palumbo  
**Medicaid** Assoc. Dir.  
600 New London Avenue  
Cranston, RI 02920  
401-464-3575

## **SOUTH CAROLINA**

### **HCFA Region IV**

Acting Administrator

Clarence J. Boone 404-331-2329

Beneficiary Serv.: 404-331-2054

### **Part B:** BC & BS of South Carolina

300 Arbor Lake Drive, Suite 1300

Columbia, South Carolina 29223

1-800-868-2522 / 803-754-0639

### **Part A:** BC & BS of South Carolina

P.O. Box 100190

Columbia, South Carolina 29202

William Horton: 803-788-3860

### **PRO:** Carolina Medical Review

1-800-922-3089 / 803-731-8225

Gwendolyn G. Power

**Medicaid** Dep. Exec. Director

P.O. Box 8206

Columbia, SC 29202-8206

803-253-6100

## **SOUTH DAKOTA**

### **HCFA Region VIII** Acting Administrator

Geraldine Trocheck 303-844-2111

Beneficiary Serv.: 303-844-6136

Ext. 238

### **Part B:** BS of North Dakota

4510 13th Avenue, S.W.

Fargo, North Dakota 58121-0001

1-800-437-4762 / 701-282-0691

### **Part A:** ISAD Health Services Inc.

636 Grand Avenue

Des Moines, Iowa 50309

Debra Bejarno: 515-245-5121

### **PRO:** South Dakota Foundation for Medical Care

1-800-658-2285 / 605-336-3505

David Christensen

**Medicaid** Administrator

Richard F. Kneip Building

700 Governors Drive

Pierre, SD 57501-2291

605-773-3495

## **TENNESSEE**

### **HCFA Region IV**

Acting Administrator

Clarence J. Boone 404-331-2329

Beneficiary Serv.: 404-331-2054

### **Part B:** CT General Life Ins. Co.

P.O. Box 1465

Nashville, Tennessee 37202

1-800-342-8900 / 615-244-5600

### **Part A:** BC & BS of Tennessee

801 Pine Street

Chattanooga, Tennessee 37402

David Deal: 615-755-5779

### **PRO:** Mid-South Foundation for Medical Care

1-800-489-4633 / 901-682-0381

Manny Martins

**Medicaid** Asst. Commissioner

729 Church Street

Nashville, TN 37247-6501

615-741-0213

## **TEXAS**

HCFA **Region VI** Acting Administrator  
Ed Lessard 214-767-6427  
Beneficiary Serv.: 214-767-6403

**Part B:** BC & BS of Texas  
P.O. Box 660031  
Dallas, Texas 75266-0031  
1-800-442-2620 (in-state only)  
214-235-3433

**Part A:** BC & BS of Texas  
P.O. Box 660031  
Dallas, Texas 75266-0031  
Congressional: 214-669-6900

**PRO:** Texas Medical Foundation  
1-800-777-8315 / 512-329-6610

Randy P. Washington  
**Medicaid** Deputy Commissioner  
P.O. Box 149030  
Austin, TX 78714-9030  
512-450-3050

## **UTAH**

HCFA **Region VIII** Acting Administrator  
Geraldine Trocheck 303-844-2111  
Beneficiary Serv.: 303-844-6136  
Ext. 238

**Part B:** Blue Shield of Utah  
P.O. Box 30269  
Salt Lake City, Utah 84130-0269  
1-800-426-3477 / 801-481-6196

**Part A:** BC & BS of Utah  
P.O. Box 30270  
Salt Lake City, Utah 84130  
Frank Brown: 801-481-6673

**PRO:** Utah Peer Review Organ.  
1-800-274-2290 / 801-487-2290

Rod Betit  
**Medicaid** Director  
288 North 1460 West  
Salt Lake City, UT 84116-0580  
801-538-6406

## **VERMONT**

HCFA **Region I** Administrator  
Sidney Kaplan 617-565-1188  
Beneficiary Serv.: 617-565-1232

**Part B:** Medicare B  
C and S Administrative Services  
P.O. Box 9790  
Hingham, MA 02044-9195  
1-800-447-1142 / 207-828-4336

**Part A:** NH - VT Health Service  
Two Pillsbury Street  
Concord, New Hampshire 03301  
Edward Cutting: 603-224-9511

**PRO:** New Hampshire Foundation for  
Medical Care  
1-800-639-8427 (in-state only)  
603-749-1641 / 802-655-6302

Kent Stoneman  
**Medicaid** Director  
103 South Main Street  
Waterbury, VT 05671-1201  
802-241-2880

## **VIRGIN ISLANDS**

### **HCFA Region II**

Administrator

William Toby 212-264-4488

Beneficiary Serv.: 212-264-3657

**Part B:** Seguros De Servicio De  
Salud De Puerto Rico

Call Box 71391

San Juan, Puerto Rico 00936-3628

Virgin Islands: 800-474-7448

Earl Harper 809-749-4080

**Part A:** Cooperativa de Seguros  
de Vida de Puerto Rico

GPO Box 3428

San Juan, Puerto Rico 00936-3428

Alba Cosme de Natal: 809-764-4060

**PRO:** Virgin Islands Medical Inst.  
809-778-6470

Miriam James

**Medicaid** Executive Director

3rd Street / Estate Thomas

Charlotte Amalie

St. Thomas, VI 00802

809-774-4624

## **VIRGINIA**

**HCFA Region III** Administrator

Maurice Hartman 215-596-1351

Beneficiary Serv.: 215-596-6865

**Part B:** PA Blue Shield

Counties of: Arlington,

Fairfax; Cities of: Alexandria,

Falls Church, Fairfax

P.O. Box 890100

Camp Hill, PA 17089-0100

Rick Johnson 717-731-2456

1-800-233-1124 / 717-763-3601

**Part B:** The Travelers Companies

P.O. Box 26463

Richmond, Virginia 23261

Lois Gray 804-330-6133

1-800-552-3423 / 804-330-4786

**Part A:** BC & BS of Virginia

P.O. Box 12201

Roanoke, VA 24023-2201

Thomas Jarvis: 703-853-5000

**PRO:** Medical Society of Virginia  
Review Organization

1-800-545-3814 (in-state only)

804-289-5320

In Richmond: 289-5397

Bruce U. Kozlowski

**Medicaid** Director

600 East Broad Street

Suite 1300

Richmond, VA 23219

804-786-8099

## **WASHINGTON**

**HCFA Region X** Administrator

Nancy Dapper 206-615-2306

Beneficiary Serv.: 206-615-2354

## **WASHINGTON** (continued)

**Part B:** Washington State Medicare Part B  
P.O. Box 91070

Seattle, WA 98111-9170

In Seattle: 1-800-422-4087

206-464-3711

In Spokane: 1-800-572-5256

509-536-4550

In Tacoma: 206-597-6530

**Part A:** BC of WA and Alaska

P.O. Box 2847 M/S 153

Seattle, Washington 98111-2847

Janet Russell: 206-670-5504

**Part A:** Clark County

BC & BS of Oregon

P.O. Box 8110

Portland, OR 97207-8110

James Verdick: 503-721-7115

**Part A:** King County Medical BS

1800 Ninth Ave., M/S 900

P.O. Box 21248

Seattle, Washington 98111-3248

Edward Freutel: 206-464-3797

**Part A:** Aetna Life and Casualty

151 Farmington Avenue / M-323

Hartford, Connecticut 06156

Janet Kalas: 203-636-5667

**PRO:** PRO for Washington

1-800-445-6941 / 206-364-9700

In Seattle: 368-8272

James A. Peterson

**Medicaid** Asst. Secretary

P.O. Box 45080

Olympia, WA 98504-5080

206-753-1777

## **WEST VIRGINIA**

**HCFA Region III** Administrator

Maurice Hartman 215-596-1351

Beneficiary Serv.: 215-596-6865

**Part B:** Nationwide Mutual

P.O. Box 57

Columbus, Ohio 43216

Diane Williams 614-249-1163

1-800-848-0106 / 614-249-7157

**Part A:** BC & BS of Virginia

P.O. Box 12201

Roanoke, VA 24023-2201

Thomas Jarvis: 703-853-3930

**PRO:** WV Medical Institute

1-800-642-8686, ext. 266

304-346-9864

Ann Stottlemeyer

**Medicaid** Director

Building 6, State Capitol Complex, Room  
717B

Charleston, WV 25305

304-926-1700

## **WISCONSIN**

**HCFA Region V** Administrator

Chester Stroyny 312-886-6432

Beneficiary Serv.: 312-353-5737

**Part B:** WI Physicians' Services

Box 1787

Madison, Wisconsin 53701

1-800-944-0051

In Madison: 608-221-3330

**WISCONSIN** (continued)

**Part A:** BC & BS United of WI  
401 West Michigan Street  
Milwaukee, Wisconsin 53202  
Timothy Cullen: 414-226-6004

**PRO:** Wisconsin Peer Review  
Organization  
1-800-362-2320 (in-state only)  
608-274-1940

Kevin Piper  
**Medicaid** Director  
P.O. Box 309  
Madison, WI 53701-0309  
608-266-2522

Kenneth C. Kamis  
**Medicaid** Director  
6101 Yellowstone Road  
Cheyenne, WY 82002  
307-777-7531

**WYOMING**

HCFA **Region** VIII Acting Administrator  
Geraldine Trocheck 303-844-2111  
Beneficiary Serv.: 303-844-6136  
Ext. 238

**Part B:** BC & BS of Wyoming  
P.O. Box 628  
Cheyenne, Wyoming 82003  
1-800-442-2371 / 307-632-9381

**Part A:** BC and BS of Wyoming  
P.O. Box 2266  
Cheyenne, Wyoming 82001  
Lloyd Wilder: 307-634-1393

**PRO:** Montana-Wyoming Foundation  
for Medical Care  
1-800-497-8232 (in-state only)  
406-443-4020

# **Clinton Presidential Records**

## **Digital Records Marker**

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