The purpose of this LCM is to inform social services districts of interim procedures which must be followed to accrete Specified Low Income Medicare Beneficiaries (SLIMBs) to Medicare Part B buy-in. SLIMBs is a new group of buy-in eligibles created by the federal Omnibus Budget Reconciliation Act of 1990. Applicants must meet the criteria found in 89 ADM-7 for Qualified Medicare Beneficiaries (QMB), except that their net income must be greater than 100 and less than 110 percent of the Federal Poverty Line (FPL). The MA program will pay the Medicare Part B monthly premiums for SLIMBs. Unlike QMBs, SLIMB eligibility can be established three months prior to the month of application for MA.

Districts must use the following levels to determine buy-in eligibility for SLIMBs:

<table>
<thead>
<tr>
<th>Household Size</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>100% FPL</td>
<td>$580</td>
<td>$785</td>
</tr>
<tr>
<td>110% FPL</td>
<td>$638</td>
<td>$864</td>
</tr>
</tbody>
</table>
Until MBL is programmed to do SLIMB budgets, districts must complete budgets off-line. Districts must also complete the attached HCFA-1819 for each applicant determined to be a SLIMB. The completed form should be sent to:

Mr. Stanley Leslie  
NYS Department of Social Services  
Division of Health & Long Term Care  
40 North Pearl St.  
Albany, NY 12243

Eligibility policy questions concerning SLIMBs should be directed to Susan Thuillez at 1-800-342-3715, extension 3-5535, e-mail AZ0660. System questions or questions concerning HCFA-1819 should be directed to Stanley Leslie at extension 3-5451, email AY1640.

These provisions are effective immediately, retroactive to April 1, 1993.

An Administrative Directive will be issued shortly with further instructions concerning SLIMBs.

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Sue Kelly  
Deputy Commissioner  
Division of Health & Long Term Care