DC Medicaid helps low-income city residents pay for medical care. Sometimes it helps with in-home care. And sometimes it pays for assisted living. Medicaid also pays for long-term care in nursing homes. This fact sheet describes four types of DC Medicaid that help older city residents. The four types are: QMB, State Plan Medicaid, EPD Waiver, and Long-Term Care Medicaid. (This fact sheet does not cover Medicaid programs for younger people.)

QUALIFIED MEDICARE BENEFICIARY (QMB)

QMB lowers some of Medicare's co-insurance payments. An older adult qualifies if they have Medicare. An older adult's annual income must be lower than $37,470. This is three times the national poverty line for 2019. To apply, fill out the “QMB Application.” It is on the city’s website at dhcf.dc.gov/service/qualified-Medicare-beneficiary-qmb.

DC STATE PLAN MEDICAID

Some older residents may get DC “State Plan Medicaid.” This type of Medicaid covers more care than QMB. So, it’s sometimes called “QMB Plus.” It is available to people with and without Medicare. Sometimes it will pay for in-home care, if needed. Older residents qualify in a variety of ways. To qualify, older residents must be at least 65 years old. Their annual income must be lower than $12,490 (the national poverty line for 2019.) Their assets must be less than $4,000 (2019). This amount does not include their primary home.

Some older adults with higher incomes can still qualify. To do so, they must have high medical bills. This group “spends down” their income on medical bills to qualify.

1 Co-insurance is a percentage of a medical bill you pay for each bill. You pay this even after you’ve paid other costs needed to maintain your policy.

MEDICAID IS NOT MEDICARE

Some people confuse Medicaid with Medicare. Medicare also helps people pay for their medical care. Most people get Medicare only after years of work. DC Medicaid does not have a work requirement. Some people have both Medicaid and Medicare. A person with both Medicaid and Medicare is “dual eligible.”

INFORMATION CONT’D ▶
DC STATE PLAN MEDICAID (CONT.)
To apply for “State Plan Medicaid” fill out the “Combined Application.” Find the application on the city’s website at dhs.dc.gov/publication/combined-application-benefits.

Different rules exist for older adults age 60-64. Those without dependent children may qualify if their annual income is just under $26,100 (two times the national poverty line for 2019). An older adult with dependent children can have higher annual incomes. These residents must apply through DC Health Link. Residents can apply online at dchealthlink.com or by phone at 1-855-532-5465.

EPD WAIVER
The EPD Waiver covers more care than QMB or State Plan Medicaid. It pays for more hours of in-home care than State Plan Medicaid. It also pays for some assisted living facilities. A DC resident qualifies if they are at least 65 years old. Some younger adults with a disability also may qualify. A resident’s monthly income must be lower than $2,313 (three times the SSI payment level for 2019). Their assets must be less than $4,000 (2019). This amount does not include their primary home. They must also need extensive help from others with activities of daily life. Call DC ADRC at 202-724-5622 to apply.

LONG-TERM CARE MEDICAID
Long-Term Care Medicaid pays for someone to live long-term in a nursing home. It is also called “Institutional Medicaid.” This is different from Medicare, which may pay for short-term rehab in a nursing home. Long-Term Care Medicaid also helps pay for medical care.

A DC resident qualifies if they are at least 18 years old. Their monthly income must be lower than $2,313 (three times the SSI payment level for 2019). Their assets must be less than $4,000 (2019). This amount does not include their primary home. They also must need major help from others for daily life. Some older adults with higher incomes can still qualify. To do so, they must have high medical bills. This group “spends down” their income on medical bills to qualify. Call DC ADRC at 202-724-5622 to apply. Older adults already in a nursing home should contact the home’s social worker.