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November 15, 2024

Reminder of Prohibition of Billing Qualified Medicare Beneficiaries (QMBs)

Dear providers,

The Health Plan of San Mateo (HPSM) is writing today to remind you of your requirement to comply with Qualified Medicare Beneficiaries (QMBs) billing rules. Federal law forbids Medicare providers and suppliers, including pharmacies, from billing people in the QMB program for Medicare cost sharing. Medicare beneficiaries enrolled in the QMB program have no legal obligation to pay Medicare Part A or Part B deductibles, coinsurance, or copays for any Medicare-covered items and services.

It is the responsibility of the provider to identify QMBs. Providers can use the provider portal to check a member's dual status. Access the provider portal here:

https://www.hpsm.org/provider/portal

**What is the QMB program?** The QMB eligibility group is a Medicaid eligibility group through which states pay Medicare premiums and cost sharing for certain low-income Medicare beneficiaries. In 2017, 7.7 million people (more than one out of eight people with Medicare) were in the QMB program.

Learn more here: <a href="https://www.cms.gov/medicare/medicaid-coordination/about/qualified-medicare-beneficiary-program">https://www.cms.gov/medicare/medicaid-coordination/about/qualified-medicare-beneficiary-program</a>

Please direct question to HPSM Provider Services at **PSInquiries@hpsm.org**.

Thank you,

The Health Plan of San Mateo