



Information partners can use on:

Medicare's Limited Income NET (LINET) Program for people with retroactive Medicaid & SSI eligibility

Medicare's LINET Program gives temporary drug coverage to people who qualify for Medicare's low-income subsidy (LIS), also called Extra Help, and either: both Medicare and Medicaid or both Medicare and Supplemental Security Income (SSI). Currently, Humana administers the LINET Program.

LINET gives retroactive drug coverage (if eligible) and immediate, temporary drug coverage (for up to 2 months) until the person with Medicare selects and enrolls in a Medicare drug plan. If a person doesn't choose a drug plan, Medicare selects and automatically enrolls them in a plan.

Medicare's LINET Program handles retroactive Medicare drug coverage for eligible people

In certain cases, people with Medicare who are also eligible for either Medicaid or SSI and have LIS to help pay for Medicare drug coverage are eligible for retroactive Medicare drug coverage. When Medicare records show a person's Medicare/Medicaid full benefit dual eligibility or SSI is retroactive for past months, their LIS is retroactive for the same period. LINET covers people who are eligible for retroactive LIS for any uncovered months in the past, the month Medicare gets notified they qualify for Medicaid or SSI, and the following month. After that, they'll get drug coverage from the Medicare drug plan that Medicare selected for them, or from the Medicare drug plan they chose if they joined a plan on their own.

Example: Social Security notified Medicare in February 2021 that Bob Smith was eligible for SSI in November 2020. Medicare's LINET Program provides Mr. Smith with retroactive Medicare drug coverage from November 2020 through March 2021. After March 2021, he'll get Medicare drug coverage from the plan Medicare selected for him, since he didn't select a plan on his own.

Not every person who's eligible for both Medicare and Medicaid, or who gets both Medicare and SSI, will have retroactive coverage

Certain people with Medicare/Medicaid or Medicare/SSI partial-benefit dual eligibility won't be eligible for retroactive coverage.

How to find out if a person may be eligible for retroactive coverage through Medicare's LINET Program

People should check the yellow auto-enrollment notice they get in the mail to find out if they're eligible for retroactive Medicare drug coverage through LINET. Medicare sends a yellow notice to everyone newly eligible for Medicaid or SSI. This notice lets them know they automatically get Medicare drug coverage and includes their coverage effective date.

There are 2 versions of the yellow auto-enrollment notice:

- Retroactive coverage through Medicare's LINET Program (Notice 11429)
 People with retroactive coverage get a yellow auto-enrollment notice in the mail with "CMS Product No. 11429 YELLOW" printed in the bottom right corner. This notice gives information about a person's eligibility for retroactive Medicare drug coverage through LINET. It lists the name and phone number of the Medicare drug plan that will give their future drug coverage, and also lists LINET contact information for dates of retroactive coverage. People with retroactive coverage also get an additional notice from LINET with coverage details and instructions on how to get reimbursed for covered prescriptions they filled during any months they're eligible for retroactive coverage.
- No retroactive coverage through Medicare's LINET Program (Notice 11154) People who aren't eligible for retroactive coverage get a yellow autoenrollment notice in the mail with "CMS Product No. 11154 YELLOW" printed in the bottom right corner. This notice lists the name and phone number of the Medicare drug plan that will give their future drug coverage. People who get this notice will still get LINET coverage until their Medicare drug plan enrollment starts.

Reimbursing people with retroactive coverage

People with retroactive coverage may be able to get reimbursed for any Medicare-covered drugs they paid for, from any pharmacy, during any past months in which they were entitled to retroactive coverage under LINET. Generally, all Medicare drugs are covered, subject to certain standard safety, abuse, and prior authorization limitations.

LINET will reimburse eligible people the money they paid out-of-pocket for their covered Medicare drugs, minus any applicable copayments (up to \$3.95 for a generic and up to \$9.85 for a brand-name drug in 2022). People can read the materials they get in the mail from LINET for instructions on how to file for reimbursement, or call Humana at 1-800-783-1307. TTY users can call 711.

Once LINET gets a written reimbursement request, it has 14 calendar days to reply with a coverage decision. If the claim **is** eligible for reimbursement, LINET will mail a check no later than 30 days after that. If the drug isn't covered, the person who made the reimbursement request will get a letter explaining why.

Other people who may be eligible for Medicare's LINET Program

Medicare may not always have the most current information about a person's Medicaid or SSI eligibility. A person may qualify for retroactive coverage through LINET as long as they qualified for both Medicare drug coverage **and** either Medicaid or SSI on the date the claim(s) were submitted. Also, the claim must be submitted within 90 days of the retroactive coverage date that's listed in the yellow notice.

In some cases, this means people may get yellow auto-enrollment notice "CMS Product No. 11154 – YELLOW," when they should've gotten "CMS Product No. 11429 – YELLOW." They can visit Medicare.gov, or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048. Or, they can contact their State Health Insurance Assistance Program (SHIP) for free, personalized help. They can visit shiphelp.org to get their state's SHIP phone number.

Get more information about Medicare's LINET Program

For more information about Medicare's LINET Program or a person's retroactive coverage, visit humana.com or call the LINET help desk at 1-800-783-1307. TTY users can call 711. Someone will be available to take your call from 8 a.m. – 11 p.m. (Eastern time).

You have the right to get Medicare information in an accessible format, like large print, Braille, or audio. You also have the right to file a complaint if you feel you've been discriminated against. Visit Medicare.gov/about-us/accessibility-nondiscrimination-notice, or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

This product was produced at U.S. taxpayer expense.

