

**441—78.57(249A) Qualified Medicare beneficiary (QMB) provider services.**

**78.57(1) Payment.** Payment will be made to QMB providers for a QMB-eligible member's coinsurance, copayment, and deductible for Medicare-covered services. The eligible member may be responsible for copayments pursuant to 441—subrule 79.1(13).

**78.57(2) Definitions.**

*“Coinsurance”* means a percentage of costs of a covered health care service that has to be paid.

*“Copayment”* means a fixed amount a member pays for a covered health care service.

*“Deductible”* means the amount paid for covered health care services before the insurance plan will effect payment.

*“Medicare cost sharing”* means the Medicare member's responsibility for a Medicare-covered service. “Medicare cost sharing” includes coinsurance, copayments, and deductibles.

*“Qualified Medicare beneficiary”* or *“QMB”* means an individual who has been determined eligible for the QMB program pursuant to 441—paragraph 75.6(5)“a.” Under the QMB program, Medicaid pays the individual's Medicare Part A and B premiums, coinsurance, copayment, and deductible (except for Part D).

[ARC 0315D, IAB 5/27/26, effective 7/1/26]