

Volunteer continuing education

Statewide Health Insurance Benefits Advisors (SHIBA)

Paving the way for Medicare open enrollment

- Guide to consumer Medicare mailings from CMS, Social Security and plans in 2018/2019 (Guide to colorful letters)
- Module 9: Medicare prescription drug coverage
- Extra help and Part D drug plans
- Medicare Open Enrollment timeline

September 2018

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Handouts and in-packet learning aids (also on [My SHIBA](#)):

1. Open Enrollment period timeline [Link](#)p. 9
2. Medicare enrollment periods that occur annually [Link](#)p. 10
3. **Handout:** Guide to consumer mailings from CMS (colorful letters)
4. **Handout:** PowerPoint module 9 WA version
5. How to print a customized Plan Finder report [Link](#)p. 16
6. **Handout:** SHIBA complaints process

Acronyms

AIC	Amount in Controversy
ALJ	Administrative Law Judge
ANOC	Annual Notice of Change
BC	Beneficiary Contact
BCF	Beneficiary Contact Form
BPH	Benign Prostatic Hyperplasia
CHIP	Children's Health Insurance Program
CMS	Centers for Medicare & Medicaid Services
DME	Durable Medical Equipment
EOB	Explanation of Benefits
EOC	Evidence of Coverage
ESRD	End-Stage Renal Disease
FAQ	Frequently Asked Questions
FDA	U.S. Food and Drug Administration
FPL	Federal Poverty Level
IEP	Initial Enrollment Period
IRE	Independent Review Entity
IRMAA	Income-Related Monthly Adjustment Amount
IRS	Internal Revenue Service
LIS	Low-Income Subsidy
LPI	Low Performance Icon
MA	Medicare Advantage
MAC	Medicare Administrative Contractor
MA-PD	Medicare Advantage Plans with Prescription Coverage
MSP	Medicare Savings Program
MTM	Medication Therapy Management
NET	Newly Eligible Transition
NTP	National Training Program
OE	Open Enrollment
OEP	Open Enrollment Period
PDP	Prescription Drug Plan

POS	Point-of-Sale
RRB	Railroad Retirement Board
SCE	Subsidy-Changing Event
SEP	Special Enrollment Period
SHIP	State Health Insurance Assistance Programs
SHIP TA	SHIP Technical Assistance
SNF	Skilled Nursing Facility
SSA	Social Security Administration
STARS	SHIP Tracking and Reporting System
SSI	Supplemental Security Income
TrOOP	True Out-of-Pocket
TTY	Teletypewriter
VC	Volunteer Coordinator
VH	Volunteer Handbook
VRPM	Volunteer Risk and Program Management

Volunteer learning objectives

After covering the Module 9 Medicare prescription drug coverage PowerPoint and completing the September 2018 monthly training, volunteer advisors and VCs will be able to:

- Differentiate Medicare drug coverage under Parts A, B, C and D.
- Summarize Part D drug coverage eligibility and enrollment requirements.
- Help clients compare and choose drug plans.
- Describe Extra Help with drug plan costs.
- Demonstrate a basic understanding of the timeline during open enrollment, including when information and mailings will come out.
- Be prepared to explain changes coming to Medicare in 2019:
 - Changes to the continuous special enrollment period for people with Extra Help
 - New Medicare Advantage Open Enrollment period

Troubleshooting and sharing time

Take some time to share and cover any unanswered questions with your group after reviewing the July learning objectives:

- Demonstrate an understanding of the Volunteer Handbook (VH) by sharing five non-negotiables (policies required for you to be an active volunteer) and policy updates.
- Share where you can locate the Volunteer Risk Program Management (VRPM) policies.
- Describe three policies that impact advising a client.
- Describe three primary topics covered in the volunteer handbook.
- List the steps in the volunteer path to certification.
- Return the [signature form](#) indicating that you received your volunteer handbook, if you haven't already done so.

Medicare open enrollment

In this section we'll cover:

- 2018 – 2019 Medicare Open Enrollment Period (OEP) timeline
- Medicare enrollment periods that occur annually
- Guide to colorful letters (Guide to consumer mailings from CMS, Social Security, & plans in 2019/2019)
- Colorful letter poem, a mnemonic (memory aid)
- Local OEP planning as needed

Notes

2018 – 2019 Medicare Open Enrollment Period (OEP) Timeline

2018	
Early September	Social Security checks if some Extra Help (Low-Income Subsidy) clients can still qualify. They must reply or they'll lose their coverage at the end of 2018.
Late September	CMS mails the Medicare & You handbook.
September 30	Current plan members must receive Annual Notice of Change (ANOC)
October 1	<ul style="list-style-type: none"> • Organizations may start marketing plans for 2019. • TENTATIVE date Medicare posts 2019 plan and drug benefit data on the Medicare Plan Finder.
October 2	People whose 2018 plan is leaving the Medicare program in 2019 must get notices from plans.
Early October	<ul style="list-style-type: none"> • TENTATIVE timeframe for SHIBA to publish paper copies of 2019 Part D plan lists. • TENTATIVE timeframe for SHIBA to post online Medicare Advantage plan lists for sale in Washington state by county.
October 15	<ul style="list-style-type: none"> • Last date employer/union and other group health plans must tell enrollees whether or not their drug coverage is creditable. • 2018 Annual OEP starts.
December 7	2018 Annual OEP ends.
December	<ul style="list-style-type: none"> • Social Security Benefit Rate Change Notice- Tells people about benefit changes and Medicare premiums due to cost of living increases, etc.
2019	
January 1	Changes made during OEP take effect.
January 1 – March 31	<p>NEW! Medicare Advantage OEP</p> <ul style="list-style-type: none"> • One-time option to change: <ul style="list-style-type: none"> ○ MAPD to MAPD ○ MAPD to Original Medicare and a Part D plan ○ Original Medicare and a Part D plan to MAPD ○ MA Only plan to MA Only plan ○ MA Only plan to Original Medicare ○ Original Medicare to MA Only plan

Medicare enrollment periods that occur annually

January	February	March	April	May	June	July	August	September	October	November	December			
-GEP -January 1 – March 31 <ul style="list-style-type: none"> • Part A (if not free*) • Part B -For people who missed their IEP – Coverage starts July 1			-SEP for people who enrolled in Medicare A/B during GEP -April 1 – June 30 -Join: <ul style="list-style-type: none"> • Part D Plan • MA Only Plan • MA –PD Plan 									-OEP for Medicare Advantage and prescription drug plans -October 15 – December 7 -Join, drop switch: <ul style="list-style-type: none"> • Part D Plan • MA Only Plan • MA – PD Plan -Coverage begins January 1		
-(NEW in 2019) -MA Open Enrollment Period -January 1 – March 31 -One-time option to change: <ul style="list-style-type: none"> • MAPD to MAPD • MAPD to Original Medicare and a Part D plan • MA Only plan to MA Only plan • MA Only plan to Original Medicare 			-All coverage begins July 1											
GEP = General Enrollment Period IEP = Initial Enrollment Period OEP = Open Enrollment Period SEP = Special Enrollment Period (This shows one of <i>many</i> SEPs)						MA = Medicare Advantage MA-PD = Medicare Advantage with Prescription Drug coverage * If Medicare A is free, can enroll during IEP and any month afterward								

Guide to Medicare consumer mailings from CMS (colorful letters)

CMS has updated and posted the Guide to Consumer Mailings for 2018-2019.

Mail date	Sender	Mailing/color	Main message	Consumer action
Mid-May	Social Security	Social Security LIS & MIP outreach notice (SSA Pub. Forms L447 & L448)	Inform people who may be eligible for Medicare Savings Programs (MSP), Extra Help and the Extra Help premium for Medicare prescription drug coverage.	<ul style="list-style-type: none"> If you think you qualify for Extra Help, you should apply. Apply for Extra Help through Social Security.
Early September	Social Security	Social Security notice to review eligibility for Extra Help (SSA Form No. 3026)	Inform people selected for review and that they should act if they continue to qualify for Extra Help. Includes an "Income and Resources Summary" sheet.	If you get this notice, you must reach the enclosed form in the enclosed postage-paid envelope within 30 days of your Extra Help state end.
September	Plans	Plan Annual Notice of Change (ANOC) & Evidence of Coverage (EOC)	By September 30, people will get a notice from their current plan outlining 2019 formula, benefit design, and/or premium changes.	Review changes to decide whether the plan will continue to meet your needs in 2019.
September	Plans	Plan LIS rider Model LIS rider	By September 30, all people who qualify for Extra Help will get an LIS rider from their plan telling them how much help they'll get in 2019 towards their Part D premium, deductibles, and copayments.	Keep this with your plan's "Evidence of Coverage" (EOC), so you can refer to it if you have questions about your costs.
September	CMS	Loss of Deemed Status notice (Pharmac No. 11-008) (GREY Notice)	Inform people that they no longer automatically qualify for Extra Help as of January 1, 2019.	Apply for Extra Help through Social Security Application and coverage and envelope received or a State Medical Assistance Desk and office.
Late September	CMS	"Medicare & You" Handbook	Notice to all Medicare households with Part D. Includes a summary of Medicare benefits, rights and protections, list of available health and drug plans, and answers to frequently asked questions about Medicare.	Keep the handbook as a reference guide. You can also download a copy online at dhs.wa.gov .
Early October	Employer/union plans	Notice of Creditable Coverage	By October 15, employer (or other group health plan) must tell all Medicare-eligible employees whether or not their drug coverage is creditable.	Keep the notice.

Handout: Guide to consumer mailings from CMS, Social Security and plans in 2018/2019 (Guide to colorful letters)

5 pages, color document

Reference:

www.cms.gov/Medicare/Prescription-Drug-Coverage/LimitedIncomeandResources/Downloads/Consumer-Mailings.pdf

Colorful letter poem

To the rhythm and melody of "Love is Blue."

genius.com/Paul-mauriat-love-is-blue-lyrics

SHIBA-ized version by Judith Bendersky

Lyric and letter reminder	Medicare info
Grey grey, it's a sad day, it's bad your LIS went away.	Loss of deemed status product number 11198
Blue , blue, you're re-assigned too, we can compare to see what to do.	Re-assignment notice number 11208 , 11209 or 11443
Orange note, was not your vote, co-pays go up but there is no quote.	Still auto-qualify for LIS, co- pays change product number 11199
Yellow , auto-enrolled, you're yellow, yellow means you're a lucky fellow.	Auto enrollment product number 11154 or 11429
Purple 's good, went how it should, auto enrolled, let's see if it's good.	No need to apply for LIS. duals, MSP, SSI auto LIS, product number 11166
Tan , tan, for chooser man, let's shop around to find a new plan.	Chooser's premium change, may want to get a new plan, product number 11267
Green green, facilitated scheme, if you don't choose, the options are lean.	Person is on an MSP, SSI or LIS, facilitated enrollment; product number 11186 or 11191
White letters of many kinds, SHIBA will help you through all the binds.	

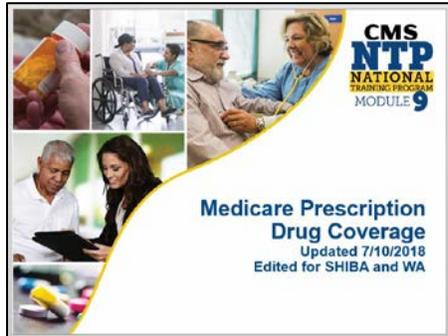
What is your Open Enrollment plan?

Now is a good time to discuss your plans for OEP if your group hasn't already done so. Talk about plans for how you will meet the needs of your community.

Notes:

CMS Module 9: Medicare prescription drug coverage

Over the next hour we will cover the Centers for Medicare and Medicare Services (CMS) Module 9 on Medicare Prescription Drug Coverage. **Leave room at the end for any questions or needed discussion points.**



72 slides

Reference:

- PowerPoint PDF
www.insurance.wa.gov/sites/default/files/documents/medicare-drug-coverage-slides_0.pdf
- PowerPoint slides
www.insurance.wa.gov/sites/default/files/documents/medicare-prescription-drug-coverage_0.pptx



Handout: CMS NTP Module 9: Medicare Prescription Drug Coverage Updated 7/10/2018 Edited for SHIBA and WA

72 pages with speaker notes

Reference:

www.insurance.wa.gov/sites/default/files/documents/medicare-prescription-drug-coverage-slides-notes_0.pdf

Plan finder resources

- SHIBA Plan Finder webinar
www.youtube.com/watch?v=Gbn5fEDt0qg&feature=youtu.be
- Medicare Plan Finder
www.medicare.gov/find-a-plan/questions/home.aspx
- Plan Finder frequently asked questions (FAQ)
www.medicare.gov/find-a-plan/staticpages/faq/planfinder-faq.aspx
- How to find and compare plans on Plan Finder
<https://www.medicare.gov/find-a-plan/staticpages/help-faq.aspx>
- Glossary of Medicare terms
<https://www.medicare.gov/find-a-plan/staticpages/glossary/planfinder-glossary.aspx>
- Medicare.gov Plan Finder instructions
<https://www.insurance.wa.gov/sites/default/files/documents/medicare-gov-plan-finder.pdf>
- How to print Plan Finder Results: *see the next page.*

Printing a customized Plan Finder report

To print a customized Plan Finder drug report, go to the "Your Plan Comparison" page on the [Medicare Plan Finder](#):

Your Plan Comparison

[Return to previous page](#)

Select the tabs below for more detailed information about the plan health benefits, drug costs and coverage and star ratings.

My Current Profile [Update Search](#)

Zip Code: 98133
Current Coverage: Original Medicare
Current Subsidy: No Extra Help [?]
Drug List ID: 3607812224
Password Date: 09/10/2015
[Important Coverage Information](#)

Symbols

- N Nationwide Coverage
- * Estimated

[Overview](#) [Health Plan Benefits](#) [Drug Costs & Coverage](#) [Star Ratings](#) [Manage Drugs](#)

Scroll down the page to this area and click on the "Print Comparison Report" button:

Drug Coverage Information

All of your drugs are covered on the plan's formulary. [?]

Lacrisert MIS 5MG OP

No restrictions

Tier 3: Preferred Brand

[Print My Drug List](#) [Print Comparison Report](#)

Pharmacy & Mail Order Information

A new window will open. You can check, or un-check boxes to select the amount of information that you want the document to display. This example has the suggested boxes to check. To get the formatted report to pop open, click on the Print button at the bottom of the page:

Customize Your Printable Report

Customize the report by selecting from the options below. Once you have made the selections for what you want to print, click 'Print'. The default report options have been preselected for you.

- Fixed Costs
- Drug List
- Drug Coverage Information
- Estimated Drug Costs - Bartell Drugs #62
 - Estimate of What YOU Will Pay for Drug Plan Premium and Drug Costs at Bartell Drugs #62
 - Estimated Drug Cost Details at Bartell Drugs #62
 - Estimated Monthly Cost Comparison Bar Chart - Bartell Drugs #62
 - Estimated Monthly Drug Costs at Bartell Drugs #62
- Estimated Drug Costs - Mail Order
 - Estimate of What YOU Will Pay for Drug Plan Premium and Drug Costs at Mail Order Pharmacy
 - Estimated Drug Cost Details at Mail Order Pharmacy
 - Estimated Monthly Cost Comparison Bar Chart - Mail Order Pharmacy
 - Estimated Monthly Drug Costs at Mail Order Pharmacy
- Pharmacy Network Information
- Definitions



The formatted report will look something like this. You can easily print it to give to a client, or you can copy it and paste it into a Word document, which will be properly formatted and you can then attach it to an email to send to a client:

Note: The drug costs displayed are only estimates and actual costs may vary based on the specific quantity, strength and/or dosage of the drug, the order in which you buy your prescriptions, and the pharmacy you use.

Our Search Details
 pcode: 98133
 current Plan: Original Medicare
 current Subsidy: No Extra Help
 Drug List ID: 3607812224
 Password Date: 9/10/2015

Four Drug Information				
Drug Name	Quantity	Frequency	Brand / Generic	Original Drug Entry
Lacrisert MIS SMG OP	1 X Box of 60 inserts	Every 1 Month	Brand	Lacrisert
			Cigna-HealthSpring Rx Secure-Xtra (PDP)	Transamerica MedicareRx Choice (PDP)
			55617-275	99579-062
			Members: 1-800-222-6700 711 (TTY/TDD) Non-Members: 1-800-735-1459 711 (TTY/TDD) Plan Website: www.cignahealthspring.com	Members: 1-888-672-7206 711 (TTY/TDD) Non-Members: 1-877-527-1958 711 (TTY/TDD) Plan Website: www.transamericamedicareRx.com
Drug Coverage Information				
Lacrisert MIS SMG OP		Tier 3: Preferred Brand No restrictions		Tier 3: Preferred Brand No restrictions

Here's an example of what it looks like pasted into a Word document:

Note: The drug costs displayed are only estimates and actual costs may vary based on the specific quantity, strength and/or dosage of the drug, the order in which you buy your prescriptions, and the pharmacy you use.

Your Search Details

Zipcode: 98133

Current Plan: Original Medicare

Current Subsidy: No Extra Help

Drug List ID: 3607812224

Password Date: 9/10/2015

Your Drug Information

Drug Name	Quantity	Frequency	Brand / Generic	Original Drug Entry
<u>Lacrisert</u> MIS 5MG OP	1 X Box of 60 inserts	Every 1 Month	Brand	<u>Lacrisert</u>

<u>Cigna-HealthSpring</u> Rx Secure-Xtra (PDP)	<u>Transamerica MedicareRx</u> Choice (PDP)
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STARS changes and updates

As we've all started using STARS in July, we have also learned a lot.

1. You can access many **helpful resources** from the STARS Landing Page. One very useful tool is STARS Frequently Asked Questions (FAQs). It's located on the STARS support resources page. Look there for the most current version.

Some resource examples:

- What to do if you're locked out of STARS
- What to do if you forgot your password
- Why isn't the zip code populating the County field?
- Why am I receiving an error to enter at least one topic on the Beneficiary Contact form when I have topics selected?
- And lots more

To access:

- Go to STARS Landing Page: stars.entellitrak.com
- Click on "STARS manual, job aids, and support resources: SHIP TA Center"

SHIP Tracking and Reporting System (STARS)

Welcome to the STARS (SHIP Tracking and Reporting System) Landing Page!

[Log into STARS](#)

Need Help with STARS?

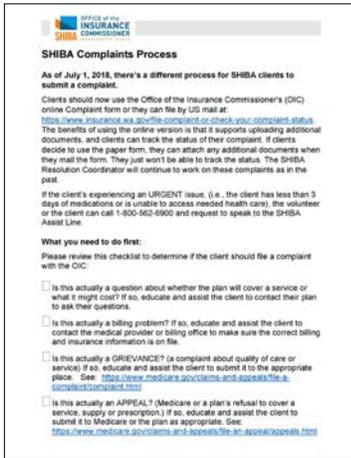
- STARS manual, job aids, and support resources: SHIP TA Center
- STARS technical issues or questions: Contact the Booz Allen STARS Help Desk



2. Most STARS users cannot **add to or edit a Beneficiary Contact Form** (BCF) that was entered by a different STARS user. This includes adding “Additional Beneficiary Sessions” to a record that another user created. You should enter a new BCF if you had a new contact with a client.
3. It’s possible to **search for, view and print a BCF** that was created by another user in your organization, as long as the user that created the form is at or below your level on the STARS hierarchy. Most volunteers are “Team Members” and most Volunteer Coordinators are “Site Managers.” The SHIP TA Center is offering training on searches in August 2018, and they will post the information on the STARS support resources page once available.
4. **Tracking volunteer time:** We made a mistake about time tracking, when we learned that only STARS users at higher levels can currently add a volunteer’s time to STARS. SHIBA will work with Volunteer Coordinators to develop a process for how to track time, but this process was not resolved at this document’s printing. We will share updated information as soon as we have it, so please stand by.
5. Booz-Allen, the contractor that developed STARS for the SHIPs, is keeping a list of **requested updates and enhancements** to the system. For example, they’ve already told us they plan to upgrade the time tracking, and we asked them to enlarge the window in the notes field in the BCF. We don’t know the timeline for any of these, but will keep sending requests for them to add to their list as we become aware of them.
6. **You cannot enter complaints** into STARS. Please review the [SHIBA Volunteers Complaints Process](#) document.
7. We are all **learning about STARS** and encourage you to ask questions. If you can’t find the answers, please contact your Volunteer Coordinator, Regional Training Consultant or Liz Mercer at LizM@oic.wa.gov or 360-725-7225.

Complaints Job Aid

As of July 1, 2018, the way complaints can be submitted to SHIBA has changed. This document provides information and the new processes.



Handout: SHIBA Complaints Process

2 pages

Reference:

www.insurance.wa.gov/sites/default/files/documents/shiba-complaints-process.pdf

Notes

Resources

Module: 9

Medicare Part D – Prescription Drug Coverage
February 2018 National Training Program

CMS Powerpoint: www.cms.gov/Outreach-and-Education/Training/CMSNationalTrainingProgram/Downloads/2018-Mod-9-Medicare-Prescription-Drug-Coverage-Temp.pptx

SHIBA Powerpoint: SHIBA training is adapted from the CMS NTP link above. We've updated it to reflect Washington state considerations.

- PDF:
www.insurance.wa.gov/sites/default/files/documents/medicare-drug-coverage-slides_0.pdf
- PowerPoint:
www.insurance.wa.gov/sites/default/files/documents/medicare-prescription-drug-coverage_0.pptx

CMS National Training Program (NTP)

To view all available NTP training materials, or to subscribe to our email list, visit:

CMS.gov/outreach-and-education/training/CMSNationalTrainingProgram

Guide to consumer mailings from CMS (colorful letters)

www.cms.gov/Medicare/Prescription-Drug-Coverage/LimitedIncomeandResources/Downloads/Consumer-Mailings.pdf

Review

We've covered:

- Medicare prescription drug coverage (Module 9)
- Plan finder
- Colorful letters
- Extra help and drug plans
- Timeline of Open Enrollment

Other review items:

- [Volunteer Handbook](#)
- [VRPM](#)
- STARS: [June 2018 Training](#)
- Complaints
 - [STARS job aid](#)
 - [SHIBA complaint process](#)
- Plan Finder webinar
www.youtube.com/watch?v=Gbn5fEDt0qg&feature=youtu.be

Reminders and future training

Reminder

We need a signed [form acknowledging receipt of the VH and VRPM training from everyone](#). Fill it out including signature and date and return to your VC.

Evaluation

- Please fill out the training evaluation.
- We're looking for your feedback for 2019 topics and if you prefer your training content in paper or electronic form. Let us know what you think. If you have ideas, include them on your evaluation form and return it to your RTC.

October and November training ideas:

- Medigaps
- Medigap portability chart
- End of year review/overview and scenarios on new handouts.

Future training

- No monthly training is planned for December.
- Volunteers are encouraged to review STARS and VRPM [training](#).

Continuing education evaluation

Date of Training: _____ Training Location: _____

How can SHIBA improve the monthly trainings?

What additional trainings within our SHIBA scope would you like to see?

What SHIBA training materials (including QRCs) would you like to see added to My SHIBA?

Other: _____

Optional: If you would like to be contacted, please provide your name and contact information. Someone in our office will contact you. Thank you!

Name: _____

Day Phone: _____ Email: _____

If you prefer to give electronic feedback about curriculum or training, please contact: Diana Schlesselman: dianas@oic.wa.gov or Liz Mercer: lizm@oic.wa.gov.

Your feedback:

What type of training would you like for 2019?

Do you prefer to receive a paper copy of the training each month or to have it available to you electronically only? Training content is always posted on [My SHIBA](#).

Preference: Paper Electronic (circle one)

Comments:
