Volunteer continuing education
Statewide Health Insurance Benefits Advisors (SHIBA)

Current issues and problem-solving preparation for 2019

- Medicare Open Enrollment
- 2018 year-end review
- Preparing for 2019 client advising

November 2018
For volunteer training only – not for distribution
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Handouts for November training

- Everything is included in this packet.

Items on My SHIBA for November training

- November training packet
## Acronyms

<table>
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<tr>
<th>Acronym</th>
<th>Description</th>
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<tr>
<td>CMS</td>
<td>Centers for Medicare &amp; Medicaid Services</td>
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<td>COLA</td>
<td>Cost-of-Living Adjustment</td>
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<td>EP</td>
<td>Enrollment period</td>
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<td>FEHB</td>
<td>Federal Employees Health Benefits</td>
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<td>GEP</td>
<td>General Enrollment Period</td>
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<td>HCA</td>
<td>Health Care Authority</td>
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<td>HIS</td>
<td>Hospice Item Set</td>
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<td>LI NET</td>
<td>Limited Income NET Program</td>
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<tr>
<td>LIS</td>
<td>Low-income Subsidy</td>
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<tr>
<td>MA</td>
<td>Medicare Advantage</td>
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<tr>
<td>MACRA</td>
<td>Medicare Access and CHIP Reauthorization Act of 2015</td>
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<td>MIPPA</td>
<td>Medicare Improvements for Patients &amp; Providers Act</td>
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<td>MSP</td>
<td>Medicare Secondary Payer</td>
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<td>NCOA</td>
<td>National Council on Aging</td>
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<td>OEP</td>
<td>Open Enrollment Period</td>
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<td>OPM</td>
<td>Office of Personnel Management</td>
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<td>PEBB</td>
<td>Public Employees Benefits Board</td>
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<td>RPEC</td>
<td>Retired Public Employees Council</td>
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<tr>
<td>QRC</td>
<td>Quick Reference Card</td>
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<td>RTC</td>
<td>Regional Training Consultant</td>
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<td>Special Enrollment Period</td>
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<td>State Health Insurance Assistance Programs</td>
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<td>SHIP Tracking and Reporting System</td>
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<td>UMP</td>
<td>Uniform Medical Plan</td>
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<tr>
<td>VA</td>
<td>Veterans Affairs (U.S. Department of)</td>
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<td>VC</td>
<td>Volunteer Coordinator</td>
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<td>Volunteer Handbook</td>
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<td>VRPM</td>
<td>Volunteer Risk Program Management</td>
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Volunteer learning objectives

This month is all about discussing 2018 topics and what to do to get ready for 2019.

After completing the November 2018 monthly training, volunteer advisors and volunteer coordinators (VCs) should feel comfortable starting the new year and working to troubleshoot and problem-solve with clients. Keep in mind SHIBA’s scope and types of information you can share even when client questions are outside of your scope of work.
Troubleshooting and sharing time

October 2018 training
Share with your group any questions about October’s continuing education training:

- CMS Module 3: Medicare Supplement Insurance (Medigap) Policies
- Review Medigap basics
- Updated MIPPA instructions for STARS beneficiary contacts
- MACRA questions

Local issues
Discuss and list some tools, paperwork and strategies that’ll help prepare you to advise clients with their Medicare coverage in early 2019.

Open Enrollment Period (OEP)
- How is the process going for you and your local group of advisors?
- How do you feel you’re doing?
- What could be done better?
- What situations have come up that are different or unique?
- Are there any Plan Finder issues?

STARS
- Talk about this with each other with regard to open enrollment and Plan Finder.
- What are tips and hints you can share?
- What about the desk aid works well for you?
- Help is available. Do you know where to go for help?
Other Open Enrollment Periods

PEBB: Nov. 1 – Nov. 30, 2018
- Ways SHIBA volunteers can assist PEBB retirees: Visit My SHIBA and use the search function to find PEBB
- WA State Health Care Authority (HCA) employee and retiree benefits list including benefits fairs and a video for choosing the best medical plan: www.hca.wa.gov/employee-retiree-benefits/retirees

Washington health plan finder: Nov. 1 – Dec. 15, 2018
- For people NOT on Medicare
- www.wahealthplanfinder.org
- 1-855-823-4633 Toll-free support (1-855-WAFINDER)
- 1-855-627-9604 TTY (teletypewriter)
- 1-855-923-4633 Language assistance customer service

Federal Employees Health Benefits (FEHB): Nov. 12 – Dec. 10, 2018
- “Open season” dates and options www.myfederalretirement.com/fehb-open-season/
- U.S. Office of Personnel Management (OPM) www.opm.gov/
Review 2018 training

Review the **2018 training topics** listed on the next two pages.

Provide questions and feedback on the back page about training successes, challenges and new ideas for training.

**Review questions**

- Which 2018 topics would you add to the 2019 list?
- Which 2018 core binder documents rise to the top of the reference list for you?
- What new binder documents would you like to see added in 2019?
- Share counseling tips and hints with your group. What works? What doesn’t? Where can you go for what types of help if you don’t know the answers?
- What did you learn and what would you like more of?
- Did you learn what you needed to learn? Or do you need less? More depth?
2018 Training topics

January 2018 - Rolling into 2018
- Medicare Advantage (MA) enrollment timelines
- Washington state counties and 5-star plans
- 2018 Part B Premium
- Handouts: •Medicare Advantage enrollment timelines  •2018 Medicare Parts A and B covered services costs  •Tip sheet: Medicare Part D and Medicare Advantage with Prescription Drugs plan problem-solving  •Tip sheet: 2018 SHIP-designated phone numbers

February 2018 - Medicare complaints including appeals, grievances and SHIBA complaints
- Medicare complaints: Messages and assistance process
- Medicare complaints: overview and definitions
- Complaints and fraud
- Handouts: •Medicare Appeals  •SHIBA volunteer complaint process  •Making Sense of Your Medicare Statements  •Medicare Redetermination Request Form – 1st Level of Appeal  •Welcome to Livanta—the BFCC-QIO for WA  •Quick Facts about Medicare Plans & Protecting Your Personal Information

March 2018 - Volunteer advisor resources
- Volunteer advisor binder core documents (23 total)
- Handouts: See packet for list of 23 handouts

May 2018 - Working past age 65
- Review Medicare enrollment periods
- When clients have insurance other than Medicare
- Paying Medicare premiums
- Handouts: •Form 40B  •Form L564
June 2018 - Transitioning to STARS
- STARS beneficiary contact form
- STARS beneficiary contact desk aids

July 2018 - The SHIBA volunteer handbook and VRPM policies
- Overview
- Discussion and signature
- Handouts: •Volunteer handbook •Verification signature sheet

September 2018 - Paving the way for open enrollment
- CMS Module 9: Medicare prescription drug coverage
- Plan finder resources
- Handouts: •Guide to consumer mailings from CMS (colorful letters) •PowerPoint module 9 (slides with notes): WA version •SHIBA complaints process

October 2018 - Medigaps
- CMS Module 3: Supplemental Insurance (Medigap) Policies
- Switching Medicare Supplement (Medigap) plan
- Qualifying MIPPA topics
- Handouts: •Switching Medicare Supplement (Medigap) plans job aid •CMS Module 3 notes version •Medigaps and the year 2020 •STARS Beneficiary Contact Special Instructions SHIBA job aid
2019 counseling information and discussion topics

Your RTC and VC will lead discussion on the following topics. Focus on changes, what is important for your region and what you need to know to provide advising and counseling services for clients.

List some of the need-to-know 2019 changes that are important for you and your group such as:

1. 2019 changes to the Special Enrollment Period (SEP) for people with Extra Help
   a. No longer every month
   b. Change plans once per calendar quarter in first 3 quarters of the year
   c. To change plans in 4th quarter, would use Annual Open Enrollment Period
   d. Will provide more detailed information once it is available

SEP Changes for people with LIS

In 2018, you have a continuous SEP, meaning you can enroll in or switch your plan at any time, if you qualify for Extra Help (a program that helps people with limited income and resources).

Starting on January 1, 2019, you can only change plans one time per calendar quarter in the first 3 quarters of the year. If you want to change plans in the 4th quarter, you would use the Annual Open Enrollment Period (OEP). Also, dual eligible individuals will have 2 other SEPs available to them:

- The individual is making an election within 3 months after a gain, loss, or change to Medicaid or LIS eligibility, or notification of such a change, whichever is later.
• The individual is making an election within 3 months after notification of a CMS or State-initiated enrollment action or that enrollment action’s effective date, whichever is later.

And, finally, those duals/LIS eligible who are determined to be “potentially at-risk” or “at-risk” for misuse of frequently abused drugs will not be able to use the duals/LIS SEP (1x per calendar quarter SEP) to change plans.

This “duals” SEP is the only SEP that the at-risk individuals will be precluded from using. These individuals can use the SEPs outlined in above to changes plans, and they can also use the AEP or any other SEP for which they meet the criteria, like if they move out of the service area.

NOTE: In the case of retroactive entitlement, there are special rules that allow for enrollment in an MA Plan or Original Medicare and a Medigap policy. More information about conditions that allow an exception can be found in Chapter 2 of the “Medicare Managed Care Manual,” Section 30.4, at CMS.gov/Medicare/Eligibility-and-Enrollment/MedicareMangCareEligEnrol/Downloads/CY_2017_MA_Enrollment_and_Disenrollment_Guidance_8-25-2016.pdf.

Source: CMS National Training Program Module 9: Medicare Prescription Drug Coverage, page 41
www.insurance.wa.gov/sites/default/files/documents/medicare-prescription-drug-coverage-slides-notes_0.pdf

2. MA Open enrollment Period
   a. New for 2019: Enrollment Period Jan. 1 – March 31 each year
   b. Visit My SHIBA and search for “Medicare Advantage enrollment timelines.” In October 2018 you may visit this link.
Changes to Medicare Unique IDs in 2019

SHIBA volunteers, volunteer coordinators and staff who currently have a Medicare Unique ID will receive a new one to start using as of January 1, 2019. This is due to the transition to the STARS database.

- Your current Medicare Unique ID will stop working December 31, 2018.
- You will receive an email with your new Medicare Unique ID between December 20-31, 2018.
- Please use your new number when you make calls to Medicare starting in 2019.
- If you have questions about Medicare Unique ID issuance, contact Jill Root at JillR@oic.wa.gov.
- Medicare Unique ID information sheet:
  - You have a copy of it in this packet on pages 23-24
  - Visit My SHIBA and search for “unique id”

Medicare premiums and Social Security benefits for 2019: New Part B (and A) premiums

- We will probably know new premiums in late November 2018.
- In late November or early December, Social Security will send Medicare beneficiaries a letter about:
  - COLA for Social Security benefits
  - Premium amounts for Medicare Parts A and B
- This information was not available for the November 2018 volunteer training. SHIBA will update its publications, public presentations and website when Social Security releases the information.
2019 plans and enrollment periods

It’ll help to know where to look for information on:

- **New plans** – The [2019 Medicare Part D stand-alone prescription drug plans chart](#) is posted on My SHIBA in the Publications section.

- **Who to talk to if you have a unique ID and are assisting clients with Part D** – Search My SHIBA for “SHIP designated phone numbers” for the current list.

Extra Help

- The Limited Income Newly Eligible Transition Program (LI NET) is designed to eliminate gaps in coverage for low-income people transitioning to Medicare Part D drug coverage.

- **See pages 25-26** of this packet for the brochure, which includes information on who’s eligible and how to use the program.
Using Part D or Medicare Advantage drug coverage early in 2019

If a Medicare beneficiary recently switched Part D plans, they may need to bring to the pharmacy any information about their new plan, such as:

- Any letters they received, their Medicare card, and ID
- A copy of any electronic confirmation they received from medicare.gov

If a Medicare beneficiary has less than a three-day supply of drugs and are unable to get a refill, consult with your volunteer coordinator or regional training consultant.
What to do when a drug is NOT covered in 2019

If for some reason the plan no longer covers a client’s drug in 2019, Medicare beneficiaries should work with their Part D plan, their health care provider, and their pharmacy:

- They can ask the plan for a “transitional supply” of their current drug.
  - This is a temporary supply – up to 30 days to allow time to sort out the issue.
- They can check with their doctor if there is a different drug they can take that is on their plan’s formulary.
- They can request an exception from their plan. There are two types of exceptions:
  - Formulary exceptions:
    - Coverage of a drug not on the plan’s formulary, such as the brand-name version of a generic drug.
    - Waiving access restrictions (for example, step therapy)
  - Tier exceptions:
    - For example, getting a tier 4 drug at a tier 3 cost
- Medicare beneficiaries should contact their plan or their pharmacy for help.
- Sometimes people think a drug isn’t covered, but really they just forgot their plan has a deductible they must meet in the new year before the plan will pay.

The plan will likely require supporting documents from the prescriber. If an exception is denied, the beneficiary can appeal it. Enrollees can contact the plan or look in their benefits book for information about how to appeal a denial.
SHIBA and PEBB – ways we can assist


**Important note:**
The PEBB retiree Open Enrollment occurs: Nov. 1 – Nov. 30, 2018 with coverage changes taking effect Jan. 1, 2019.

**Ways SHIBA volunteers CAN assist PEBB retirees on Medicare**
- Everyone who has a Part D plan should do a yearly review of their plan options, and SHIBA can help.
- SHIBA is familiar with how the standardized Medicare Supplement plans work, so we can give general information about the Premera Medicare Supplement Plan F and how it works with Medicare.
- PEBB Premera Medicare Supplement Plan F does not cover outpatient prescription drugs. SHIBA can help with comparing stand-alone Part D drug plans by running a Medicare Plan Finder analysis.
- If retirees consider changing to the Premera Medicare Supplement Plan F from Kaiser or Uniform Medical Plan (UMP):
  - SHIBA can help with estimating drug costs by using the Medicare Plan Finder.

  Retirees can compare that information with total anticipated drug costs in their current plan by contacting Kaiser or UMP.

**Ways SHIBA volunteers CANNOT assist PEBB retirees on Medicare**
- SHIBA volunteers are not in a position to advise or compare PEBB options, including:
  - Kaiser Permanente plans
  - UMP plans
What SHIBA volunteers can suggest PEBB retirees do to get the information they need

- Attend a PEBB Benefits Fair
  - See the schedule at: www.hca.wa.gov/public-employee-benefits/benefits-fairs-schedule

- Call the plan’s customer service numbers with questions. Find the contact numbers for all PEBB plans at: www.hca.wa.gov/public-employee-benefits/employees/contact-plans

- Contact PEBB Benefits Services
  - **Phone:** 1-800-200-1004 (toll-free) Monday through Friday, 8 a.m. to 4:30 p.m.
    **Note:** Other business activities may result in phones being unavailable at times during business hours.
  - **TRS:** 711 through Washington Relay
  - **Office hours:** Monday through Friday, 8 a.m. to 4:30 p.m.
    **Note:** The PEBB Program does not take appointments. Visitors are seen on a first-come, first-served basis. Phone: 1-800-200-1004 (toll-free) or 360-725-0440 (Olympia)
  - **TRS:** 711 through Washington Relay
  - **Office hours:** Monday through Friday, 8 a.m. to 5 p.m. Pacific Time.

- As of October 2018, you may contact Retired Public Employees Council (RPEC) SHIBA Ombudsman Program at (360) 352-8262 (Olympia). Visit My SHIBA and search “ways volunteers can assist PEBB retirees.”
Additional PEBB resource information

Resources

CMS 2019 topics
Visit [cms.gov](http://cms.gov) and search for “2019.”

Eligibility Overview Washington Apple Health (Medicaid) Programs
April 2018
[www.hca.wa.gov/assets/free-or-low-cost/22-315.pdf](http://www.hca.wa.gov/assets/free-or-low-cost/22-315.pdf)

Medicare Enrollment Periods
Review the handout in the [September 2018](http://September%202018) continuing education training packet.

Medicare Plan Finder
[www.medicare.gov/find-a-plan/questions/home.aspx](http://www.medicare.gov/find-a-plan/questions/home.aspx)

SHIBA and PEBB: Ways SHIBA volunteers can assist PEBB Retirees
Search [My SHIBA](http://My%20SHIBA) for “ways SHIBA volunteers can assist PEBB retirees.”

Washington State Health Care Authority: Employee and retiree benefits
[www.hca.wa.gov/employee-retiree-benefits](http://www.hca.wa.gov/employee-retiree-benefits)
Reminders and future training

Evaluation
Please fill out the training evaluation. We value your feedback!

Be sure to hand in your VRPM/volunteer handbook signature sheet if you have not done so. We have only received signature sheets from about half of our volunteers. This is your review of the VRPM and Volunteer Handbook. Check in with your VC or RTC if you have any questions.

Future training
There will be no continuing education training in December.

Future proposed topics: LI NET, scavenger hunt part 2, refreshing the binders, new handouts not included in March, end-of-year review/overview and scenarios on new handouts. Let us know what you think.

If you have ideas, include them on your evaluation form and return it to your RTC.
Happy Holidays!

Thanks for all you do and we look forward to seeing you January 2019!
Using your Medicare Unique ID

A Medicare Unique ID allows SHIBA advisors to get more detailed information from Medicare to assist clients.

**Benefits of a Medicare Unique ID**

You can:

- Get through to Medicare right away;
- Provide elevated assistance for SHIBA clients when you have the facts about their Medicare coverage; and
- Call Medicare – even if the beneficiary is not on the phone or with you.

**Confidentiality reminder**

Keep your Medicare Unique ID in a secure place. To protect yourself and clients’ personal information, never share your Medicare Unique ID with anyone.

**How to use your Medicare Unique ID**

First, you’ll need to have the following information **before** using your Medicare Unique ID:

- Beneficiary’s name with correct spelling
- Medicare number
- Date of birth
- Address
- Have your Medicare Unique ID handy (but keep this document in a secure place):

  Write your Medicare Unique ID here

1. Call **1-888-647-6701** and enter your Medicare Unique ID number.
2. **Press 1** for general information.
3. A Medicare customer service representative (CSR) will answer and ask for your Medicare Unique ID number and state (Washington).
4. When asked, give the client’s name, Medicare number, etc.
5. Once the CSR confirms your identity and the client’s identity, ask your questions. Take notes!
Using your Medicare Unique ID

Note:

If you enter an incorrect or inactivated Medicare Unique ID, you will instead hear the regular menu of options presented to all 1-800-MEDICARE callers.

120-day automatic deactivation

Your Unique ID will automatically inactivate if you:

- Don’t use it at least once within 120 consecutive days; and
- No STARS Beneficiary or Outreach Contacts show as generated under your name within same 120 consecutive days.

To re-activate your Unique ID, submit a request through your volunteer coordinator. Your volunteer coordinator will then send the request to shiba@oic.wa.gov. Once approved, it can take more than four weeks for re-activation to occur.

Updated 10/4/2018
Medicare’s Limited Income NET Program
Quick reference guide

Program eligibility
Individuals must not be enrolled in any other Medicare Part D prescription drug plan and must have either Medicare and Medicaid, or Medicare and the Low-Income Subsidy (LIS).

Two ways to submit a claim
1. Use the 4Rx data in the patient’s enrollment confirmation letter, and use the Medicare claim number (on the red, white and blue Medicare card).
2. If the patient does not have a letter, use the entire Medicare claim number (on the red, white and blue Medicare card) and the 4Rx data below:

   - **BIN** = 015599
   - **PCN** = 05440000
   - **Group ID** = May be left blank
   - **Cardholder ID** = Medicare claim number (include letters)
   - **Optional field:**
     - **Patient ID** = Medicaid ID or Social Security number

Questions?
Call the Help Desk at 1-800-783-1307, or visit: www.humana.com/linet

Visit these program websites:

www.cms.gov/Medicare/Eligibility-and-Enrollment/LowIncSubMedicarePresCov/MedicareLimitedIncomeNet.html
This website provides:
- Tip sheet – Immediate need
- Tip sheet – Retroactive coverage
- Four steps for pharmacy providers
- Payer sheet

www.humana.com/linet
This website provides:
- Four steps for pharmacy providers
- Payer sheet
- Continuing education credits (Education on demand study modules are available for pharmacists and pharmacy technicians)

Call the Help Desk at 1-800-783-1307

If you are a pharmacy provider for claim rejections:  Press 1, then Press 1
for Medicare Part B vs. Part D drug:  Press 2
for eligibility verification:  Press 3
to repeat options:  Press 4
If you are a physician/prescriber  Press 2
If you are a beneficiary/other  Press 3

Medicare’s Limited Income NET Program
administered by Humana®

TIPS FOR PHARMACY PROVIDERS
About Medicare's Limited Income NET Program

The Centers for Medicare & Medicaid Services (CMS) created this program to provide:

1. Point-of-sale prescription drug coverage for individuals with Medicare's Low-Income Subsidy (LIS, also called "Extra Help") who are not yet enrolled in a Medicare Part D prescription drug plan.

2. Retroactive prescription drug coverage for new "dual eligibles" — those individuals who are newly eligible for both Medicare and Medicaid or Supplemental Security Income (SSI).

Temporary coverage

All enrollees are (temporarily) covered by Medicare's Limited Income NET Program until CMS enrolls them in a standalone Medicare Part D Plan. If the patient does not have an enrollment confirmation letter for Medicare's Limited Income NET Program, use the 4Rx data on the temporary card provided in the patient's enrollment confirmation letter.

Note: Use the 4Rx data on the temporary card provided in the patient's enrollment confirmation letter for Medicare's Limited Income NET Program.

Pharmacy Providers

Four steps for Medicare's Limited Income NET Program:

1. Request plan ID card
2. Submit an E1 transaction
3. Verify eligibility for Medicare and either Medicaid or Low-Income Subsidy (LIS)
4. Submit claim

To enroll, go to step 4.

Pharmacy Providers should follow the Four steps for Medicare's Limited Income NET Program. If the patient does not have an enrollment confirmation letter for Medicare's Limited Income NET Program, use the 4Rx data on the temporary card provided in the patient's enrollment confirmation letter for Medicare's Limited Income NET Program.

Note: Use the 4Rx data on the temporary card provided in the patient's enrollment confirmation letter for Medicare's Limited Income NET Program.

Security income (SSI), which may qualify Medicare for both Medicare and Medicaid, and for new "dual eligibles" — those individuals who are newly eligible for both Medicare and Medicaid or Supplemental Security Income (SSI, also called "Extra Help") who are newly enrolled in a Medicare Part D Plan. A retroactive prescription drug coverage for new "dual eligibles."
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 Quick Reference Cards (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.

Thank you!
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:
______________________________________________________________________
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