

# Training

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**Statewide Health Insurance Benefits Advisors (SHIBA)**

# April Update



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## Trivia facts

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### Did you know?

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In 2015, the U.S. Department of Health and Human Services reported that close to 10.7 million Medicare beneficiaries saved over \$20.8 billion on their prescription drugs through discounts when in the donut hole. This was made possible through the Affordable Care Act.

- That is an average savings of \$1,945 per beneficiary.

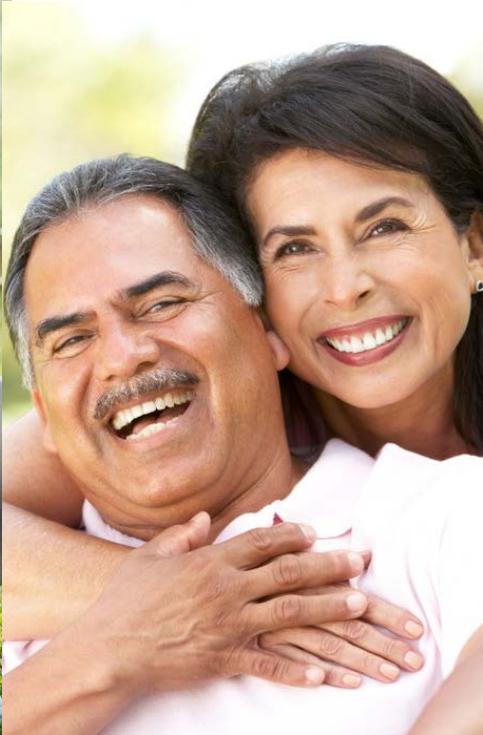
It is estimated that 39.2 million Medicare beneficiaries on Original Medicare and Medicare Advantage plans took advantage of at least **one** of the preventive/annual wellness care benefits available to them that are not subject to deductible or copay requirements.

- A total of one million more Medicare beneficiaries used their preventive benefits in 2015 than in 2014.

Volunteer outreach efforts are making a difference for Medicare beneficiaries by providing them with a greater understanding of their Medicare insurance. In addition, the efforts promote awareness of programs that can help pay for Medicare such as MSPs and Extra Help/LIS. The increased savings to Medicare beneficiaries and the increased use of preventive/wellness benefits is directly correlated to the outreach efforts of volunteers across the U.S.

It is through the efforts of our volunteers that we would like to extend our sincere gratitude and appreciation for the invaluable work you do in your communities. Thank you from all of us in the SHIBA Program at the Office of the Insurance Commissioner.





# MIPPA training

March 11, 2016

# Medicare Improvements for Patients and Providers Act of 2008

*Cost savings program available to many Medicare beneficiaries*

# MIPPA Act

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MIPPA helps fund outreach activities to Medicare beneficiaries who have limited income and assets to help reduce their out-of-pocket costs associated with Medicare.

# MIPPA

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Through statewide coordinated outreach efforts, SHIBA is working to **promote awareness** and **increase participation** in the following MIPPA-related programs that remain significantly underused:

- Medicare Savings Program (MSP)
- Extra Help a.k.a. Low Income Subsidy (LIS)
- Wellness/preventive care

# MIPPA programs

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**Help is available to save clients money!**

# Medicare Savings Programs

# How Medicare Savings Programs can help

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- Helps pay Medicare premiums and possibly other Part A & B costs
- In some cases, helps to enroll people into Medicare Part A or B without having to wait
- Eliminates any late enrollment penalties for Medicare Parts B or D and sometimes A
- Automatic eligibility for Extra Help for Part D costs
- Allows people to enroll in or change Part D or Medicare Advantage plans that include drug coverage at any time

# Medicare Savings Programs (MSPs)

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- If eligible, MSPs will pay most eligible client's Medicare Part B premium.
- In some cases, MSPs cover Medicare Parts A & B coinsurance and deductibles and Medicare Part A premium.
  - **2016 monthly income limits:**
    - \$1,337/month for a single person
    - \$1,802/month for a couple
  - **2016 asset limits:**
    - \$7,280 for a single person
    - \$10,930 for a couple

# Example

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Sam receives Social Security retirement of \$1,000 per month, and has less than \$7,000 in the bank. The Medicare Savings Program will pay his Part B premium – saving him over \$1,200 per year.



# Medicare Savings Programs (MSPs)

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There are four kinds of Medicare Savings Programs:

- 1. Qualified Medicare Beneficiary (QMB) Program**  
Helps pay Part A and/or Part B premiums, deductibles, coinsurance and copayments.
- 2. Specified Low-Income Medicare Beneficiary (SLMB) Program**  
Helps pay Part B premiums only.
- 3. Qualifying Individual (QI) Program**  
Helps pay Part B premiums only.
- 4. Qualified Disabled and Working Individuals (QDWI) Program**  
Helps cover Part A premium only. An individual may qualify for this program if he/she has a disability and is working. The client must be under age 65.

# Extra Help/LIS

# How Extra Help can help

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- Helps pay Medicare Part D premiums
- Helps to Pay Medicare Part D co-insurance or co-pays
- Allows people to enroll in or change Part D or Medicare Advantage plans that include drug coverage at any time
- Eliminates any late enrollment penalties for Medicare Part D
- Eliminates the donut hole

# Extra Help a.k.a. Low Income Subsidy (LIS)

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If eligible, the Extra Help/(LIS) program will reduce costs associated with Medicare Part D premiums, deductibles and co-pays.

- **2016 monthly income limits:**
  - \$1,485/month for a single person
  - \$2,003/month for a couple
- **2016 asset limits:**
  - \$13,640 for a single person
  - \$27,250 for a couple

# Example

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Samantha receives \$1,400 per month in Social Security retirement. She has less than \$10,000 in savings. Extra Help could save her a lot of money. The program could help:

- Pay some or all of her Part D premium
- Pay most or all of her deductible
- Make it so she has small drug co-pays
- Allow her to change her drug plan at any time.



# MSPs and Extra Help/LIS

*Things to be aware of & applying for these programs*

# Things to know

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- Income listed is **GROSS** - before any deductions, including Part B premiums or taxes
- Income can be higher and people may still qualify
  - Examples: Some income is from employment, or family size is larger than 2, or only one member of the couple is on Medicare
- Assets can be higher and people may still qualify
  - Example: Person has money set aside for burial expenses - limit is \$1,500 per person
- Some people only qualify for Extra Help
  - Their income or assets are too high for MSPs

# Apply if client might be eligible

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The only way to be sure if a client qualifies is to apply for:

- MSP:
  - Online: [www.washingtonconnection.org](http://www.washingtonconnection.org)
  - At local Community Services Office (CSO)
  - 1-800-562-3022 X 16129
- Extra Help/LIS:
  - Online: [www.ssa.gov/medicare/prescriptionhelp/](http://www.ssa.gov/medicare/prescriptionhelp/)
  - At local Social Security Office
  - 1-800-772-1213

# Wellness/preventive benefits

# Medicare wellness/preventive benefits

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- In 2011, Medicare began to offer more wellness/preventive benefit coverage.
- In addition, Medicare made preventive care more affordable by no longer making wellness/preventive visits subject to additional out-of-pocket expenses.
- As result, there are more wellness and preventive benefits to take advantage of making it easier to focus on staying healthy.

**The goal is to prevent and/or detect health issues before they become a major health problem.**

# Medicare wellness/preventive benefits

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Here are just a few of the Medicare **wellness and preventive benefits** available with **no additional out-of-pocket costs**:

- “Welcome to Medicare” preventive visit and yearly “Wellness” visit
- Cancer screenings, such as mammograms, prostate and colorectal cancer
- Vaccinations - Hepatitis B, Flu, Pneumonia, Shingles
  - Other vaccines covered by Medicare Part D
- Tobacco - Use prevention and cessation counseling
- Depression screening
- Glaucoma test

Billed to Medicare Part B or a client’s Medicare Advantage plan. For no additional costs, the client must meet the proper timing, billing codes and eligibility.

For full details see *Medicare and You 2016*  
pages 43-70

# MIPPA data reporting

# Help sponsors with MIPPA data reporting

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- Be sure to check the boxes in the CCR Section 4 - Topics Discussed for either LIS or MSP or both.
- In the “Note” section of the CCR, clearly state “MIPPA application assistance.”
  - Example: “MIPPA – LIS and/or MSP application assistance.”
  - Clearly indicate if you assisted with the application for LIS, MSP or, both.
- If doing wellness/preventive benefit outreach, note it in the “Note” section of the PMA.
  - The intent of preventive outreach is to bring awareness to the “free” wellness/preventive benefits that continue to go unused by beneficiaries.

**If you don't record data as stated above, SHIBA headquarters will assume that the completed MIPPA program applications and/or outreach never happened!**

# CCR section 4 – Topics Discussed

TopicsDiscussed - Microsoft Internet Explorer provided by Office Of Insurance Commissioner

https://forpress.wa.gov/oic/onlineservices/Protected/SHIBA/TopicsDiscussed.aspx?mode=A&module=SHB

File Edit View Favorites Tools Help

http--www.cms.gov-Outrea... In the Loop My SHIBA Prescription Drug Benefit M... Suggested Sites

**Medicare Topics Discussed:** Age 65 and older or Medicare related:  
 Yes  No

**Medicare Dollars Saved:**  
 Yearly Estimated Dollars Saved \$

**Medicare (Parts A and B)**

- Appeals / Complaints
- Claims / Billing
- Enrollment / Eligibility / Benefits

**Medicare Health Plans / Advantage (Part C)**

- Appeals / Complaints
- Claims / Billing
- Enrollment / Eligibility / Comparisons
- Plan / Benefit Changes / Non-renewals

**Prescription Drug - Medicare Rx (Part D)**

- Appeals / Complaints
- Claims / Billing
- Enrollment / Application Assistance
- Low Income Assistance (LIS)
- Plan Eligibility
- WA State Rx Discount Card

**Medigap / Supplements**

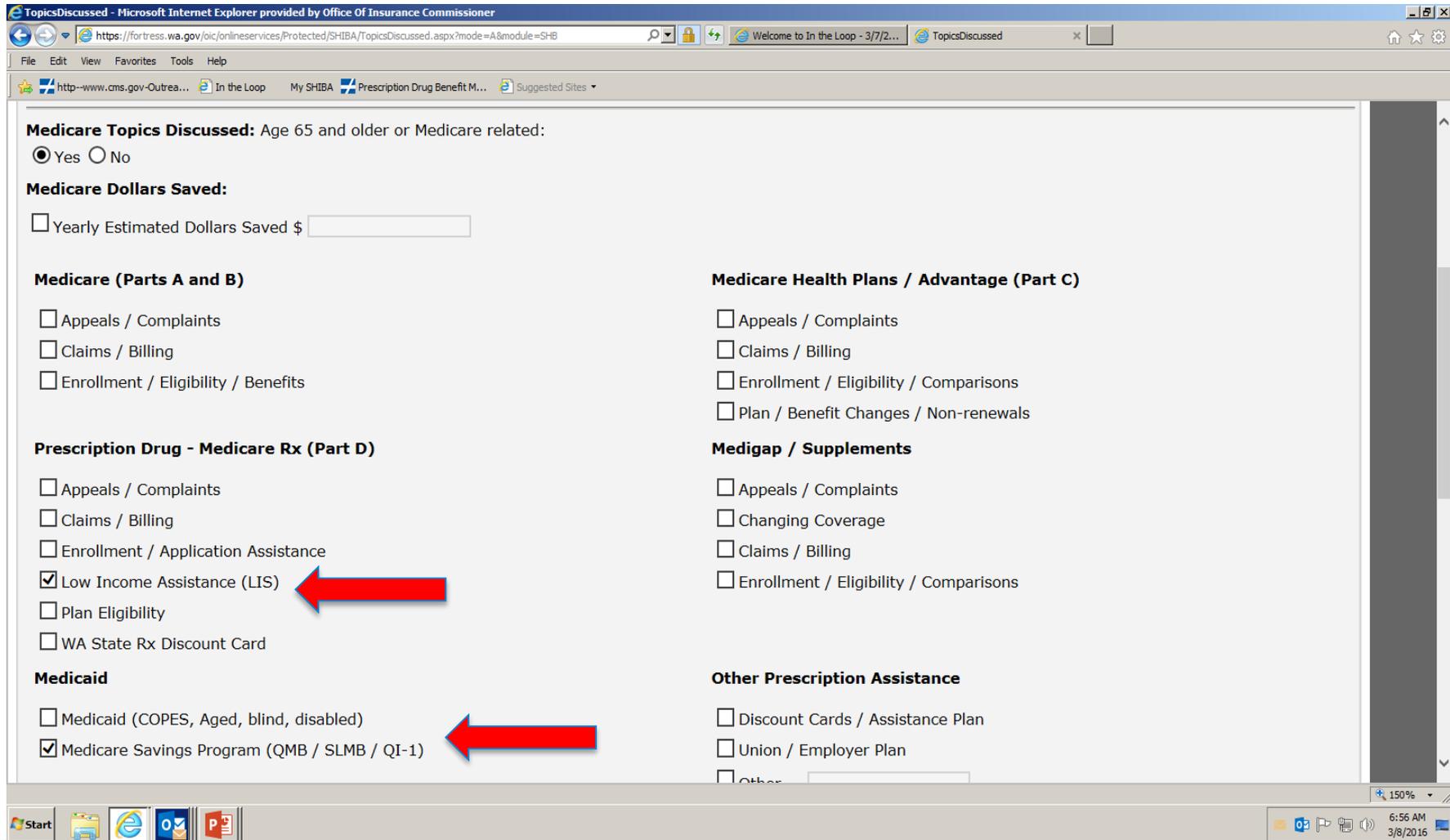
- Appeals / Complaints
- Changing Coverage
- Claims / Billing
- Enrollment / Eligibility / Comparisons

**Medicaid**

- Medicaid (COPES, Aged, blind, disabled)
- Medicare Savings Program (QMB / SLMB / QI-1)

**Other Prescription Assistance**

- Discount Cards / Assistance Plan
- Union / Employer Plan
- Other



# Important contact information

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## **Social Security Administration**

- *Extra Help (LIS) application*
- [www.ssa.gov](http://www.ssa.gov)

## **WA State Department of Social and Health Services/Health Care Authority**

- *Apply online for the MSP programs*
- [www.washingtonconnection.org](http://www.washingtonconnection.org)

## SHIBA screening tool for MSP and Extra Help

Income is monthly, and before any taxes or other deductions, including any Medicare premiums

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Gross UNEARNED\* income: 1. \$ \_\_\_\_\_

(\*Includes Social Security, SSDI, pensions, unemployment benefits, etc.)

Deduct \$20 (per household): 2. \$ \_\_\_\_\_

Subtotal A: (#1 minus #2) 3. \$ \_\_\_\_\_

Gross EARNED\* income: 4. \$ \_\_\_\_\_

(\*Includes wages, salary and income from self-employment, etc.)

Deduct \$65 work expense: 5. \$ \_\_\_\_\_

Subtotal earned income: (#4 minus #5) 6. \$ \_\_\_\_\_

One half of #6 subtotal earned income: 7. \$ \_\_\_\_\_

Subtotal B (#6 minus #7): 8. \$ \_\_\_\_\_

Countable total income (#3 plus #8) \$ \_\_\_\_\_

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### Estimate of TOTAL ASSETS:

Cash: \$ \_\_\_\_\_

Stocks: \$ \_\_\_\_\_

Bank accounts: \$ \_\_\_\_\_

IRA / 401K: \$ \_\_\_\_\_

Real estate: (NOT the home you live in) \$ \_\_\_\_\_

Certificates of deposit: \$ \_\_\_\_\_

Cars\* \$ \_\_\_\_\_

Recreational vehicles: \$ \_\_\_\_\_

Savings bonds: \$ \_\_\_\_\_

TOTAL ASSETS: (Sum of all assets): \$ \_\_\_\_\_

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This is a tool to help SHIBA Volunteers better screen clients for Medicare Savings Programs and Extra Help. DSHS or Social Security make the final eligibility determination. If clients seem close, encourage them to apply and report their full information about their income and assets. The calculations will be made by the proper agency.

**\*One car used for medical appointments is not counted**



# MIPPA BINGO

M

I

P

P

A


MSP, Part B premium, Donut hole, 4, \$2,003, 2011, LIS, Section 4, \$13,640, Note section, MIPPA, Outreach, Social Security, Extra Help, \$1,802, Awareness, Qualified Medicare Beneficiary, 65, \$7,280, [www.washingtonconnection.org](http://www.washingtonconnection.org), Medicare and You 2016 pages 43-70, Note, Part D, SHIBA, Money, \$27,250, 2008, Qualifying Individual, Part A premium



# Training course evaluation

## Statewide Health Insurance Benefits Advisors (SHIBA)

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>
This training was informative and useful.				
The course content held my interest.				
Participation and interaction were encouraged.				
The time allotted for the training was sufficient.				
This training experience will be useful in my work.				
The content was organized and easy to follow.				
Trainer was knowledgeable about the subject matter.				
The trainer was well prepared.				
The training objectives were met.				
The material followed a logical flow.				

1. What did you like most about the training?
2. What aspects of training could be improved?
3. What additional trainings would you like to see in the future?
4. Please share other comments here:

**Please tear evaluation off and hand it to your trainer.**