

People with Medicare and Other Coverage

If clients have:	Make sure they know:
Missed Medicare Enrollment	<ul style="list-style-type: none"> • MSPs (Medicare Savings Programs) may let them join any time with no penalty. Screen and help apply! • Ensure they know when/how to join Medicare; coverage options before then.
COBRA Contacts: COBRA plan administrator or benefits department	<ul style="list-style-type: none"> • They get no Special Enrollment Period (SEP) to join Medicare when COBRA ends! They may join Medicare during the Initial Enrollment Period (IEP) or General Enrollment Period (GEP). • If they join Medicare, their COBRA will likely end. If this happens, they may want to look into other options, including Medigaps, Part D, and MA. • If COBRA covers family members, they may want to ask the plan administrator or benefits department what happens to family coverage if clients join Medicare.
Current job (their or their spouse's) with health insurance Contacts: Job-based plan administrator or benefits department	<ul style="list-style-type: none"> • They may join Medicare during IEP or defer it with no penalty (refer to SSA). <ul style="list-style-type: none"> ○ Many people will join Part A if it's free for them. ○ After the job/insurance ends, they have an 8 month SEP to join Part B. ○ If their plan's drug coverage is creditable to (as good as or better than) Part D, they may defer Part D with no penalty. ○ Some smaller employers require workers to join Medicare when eligible. • The plan administrator/benefits department can let clients know: <ul style="list-style-type: none"> ○ Whether their drug coverage is creditable to Part D. ○ If they must join Medicare and any cost changes in the job insurance. ○ Impacts to family coverage; which plan pays first and which pays second.
Classic Medicaid Contacts: 1-800-562-3022 1-877-501-2233 or Local Community Services Office or www.dshs.wa.gov	<ul style="list-style-type: none"> • Clients on Classic Medicaid may also qualify for Medicare Savings Programs, such as QMB, SLMB, QI-1 or Medicaid for Aged, Blind and Disabled. • They likely will be “deemed” to get LIS automatically. They may change Part D plans monthly. • Depending on the clients’ situation, they may not need extra coverage, and they may still have out-of-pocket costs. DSHS can provide details and determine eligibility.

	<ul style="list-style-type: none"> • If they have issues finding providers who see patients with Medicare and Medicaid, they think about joining a MA plan, especially one with a network. If they join MA, they may change MA plans that include Part D monthly. • They may also have other insurance, such as a Medigap, a retiree or employer plan or MA. • You may verify a clients' Medicaid coverage using the ProviderOne Client Portal at www.waproviderone.org/client.
<p>ACA (Apple Health) Also called MAGI, Expanded, Alternate Benefits Plan or "Obamacare" Medicaid www.wahealthplanfinder.org 1-855-923-4633</p>	<ul style="list-style-type: none"> • Clients on Modified Adjusted Gross Income (MAGI) Apple Health who are turning age 65 or become enrolled in Medicare due to a disability will be disenrolled from MAGI Medicaid and will be notified that their Medicaid is ending. Someone who becomes eligible for Medicare cannot remain on this Medicaid program. • The client should be automatically enrolled ("deemed" eligible) for Extra Help (also called Low Income Subsidy or LIS). This Extra Help will continue, at least for the rest of the current calendar year even if the client is no longer eligible for or enrolled in a Medicaid program. • There is no automatic transfer from "MAGI" Medicaid to "Classic" Medicaid programs, because the income and asset requirements are different. Screen clients for Medicaid and MSP. In most cases, they need to submit a new application for the Medicare/"Classic" Medicaid programs.
<p>Tribal or Indian Health Services (IHS) Contacts: Local tribes/clinic or 1-503-326-2020 or www.ihs.gov</p>	<ul style="list-style-type: none"> • This is not insurance. Care may be limited to only services the tribe/IHS clinics offer, and only in certain areas. The tribe/clinic can give more information specific to the tribal area. • Natives do not get a SEP for Medicare. They may join Medicare in the IEP or GEP. • IHS drug coverage is creditable to (as good as) Part D, so they may defer Part D with no penalty. • If natives need care not offered by the tribe/IHS or care outside the area, they may want to think about Medigaps, Part D, MA, Medicaid or MSP.

<p>TRICARE or TRICARE for LIFE Contacts: 1-800-538-9552 or www.tricare.mil</p>	<ul style="list-style-type: none"> • When 20-year military veterans and spouses with TRICARE join Medicare, they get TRICARE for Life (TFL). This fills most gaps in Original Medicare and has drug coverage creditable to (as good as) Part D, so they may defer Part D with no penalty. Must have both Medicare Parts A and B. • Most clients with TFL find they don't need other coverage. They may see any provider who accepts Medicare. Clients may keep TFL and also have Part D or MA. If clients think about joining these, we suggest they talk with TRICARE.
<p>Retiree health insurance (through their or their spouse's former job) Contacts: Retiree plan administrator or benefits department</p>	<ul style="list-style-type: none"> • If the retiree plan meets their needs, they may not need further action. • If it covers drugs, the plan sends a letter every fall saying whether drug coverage is creditable to (as good as) Part D. If yes, they may defer Part D with no penalty. If no, they may have a penalty if they defer Part D. • Some enrollments cancel retiree plans! If clients cancel their retiree plans, they probably will not be able to get it back if they change their mind. Suggest client to talk with their plan administrator or benefits department before buying MA, Part D, or applying for LIS (as Medicare may automatically enroll them in Part D).
<p>Veterans Affairs (VA) Contacts: 1-360-619-5925 or www.va.gov</p>	<ul style="list-style-type: none"> • This is NOT insurance. Care may be limited to certain conditions, in certain facilities. The VA can give further details. If clients need other care, they may want to think about Medigaps, Part D, MA, Medicaid or MSP (they may have these and keep VA). • Veterans get NO SEP for Medicare. They may join Medicare in the IEP or GEP. • VA drug coverage is creditable to (as good as) Part D. If clients' have VA drug coverage, they may defer Part D with no penalty.