



Medicaid unwinding and Dual-Eligible options case review



Today's topics

- Resources for helping clients with drug coverage during recertification for Medicare Savings Program (MSP) and Medicaid
 - [Limited Income Net Program \(LINET\)](#)
 - [Plan Finder](#)
- Dual-Eligible options review
 - Essential talking points
 - Interactive discussion
- [Prescription Drug Assistance Foundation](#)

Training materials



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05/05/2023

Application
ID: 0000000

- [This PowerPoint presentation](#)
- [Recertification letter sample](#)
- [Plan Finder](#)
- D-SNP side by side comparison chart

A message for individuals who are Medicare eligible or 65 and older.

Dear Jane Simpson,

What is happening?

You or someone in your household has received extended Apple Health coverage due to the COVID-19 public health emergency (PHE). This special temporary extension is now ending.

How does this change affect you?

We recently extended Apple Health through 05-31-2023. This is the last extension.

You or someone in your household is Medicare eligible or 65 and older and no longer eligible for Apple Health through Washington Healthplanfinder. We will tell you in another letter when coverage ends. Coverage may remain open while eligibility is redetermined for another Apple Health program.

What should you do?

You may qualify for other Apple Health coverage or help paying for Medicare premium(s). Apply with the Department of Social and Health Services (DSHS):

- Online at washingtonconnection.org
- Call 1-877-501-2233
- Print and return a paper application, for aged, blind, disabled or long-term care coverage (HCA 18-005): hca.wa.gov/assets/free-or-low-cost/18-005.pdf

For questions about Medicare or Medicare enrollment, contact the Statewide Health Insurance Benefits Advisors (SHIBA) at 1-800-562-6900, visit <http://insurance.wa.gov/shiba>, or call 1-800-MEDICARE (1-800-633-4227) which is open 24/7.

What if you already receive Medicare?



Housekeeping

Please honor the following requests:

- There will be specific question times
- Send questions to “Chat Monitor”
- Mute yourself
- Raise your hand
- Limit your questions to the material we are covering



Building on previous knowledge

- January-What's new in 2023
- February-Screening clients for Medicare Savings Programs/Medicaid
- March-Enrollment Periods and briefly touched on Medicaid Recertification
- April-How to check for Medicaid Status and in depth look D-SNPs

Resources for helping clients with drug coverage for Medicaid unwinding



Poll #1

What program bridges the gap before the client's Part D prescription drug coverage starts?

1. LIS
2. Prescription Drug Assistance Foundation
3. LINET
4. All of the above

Poll #2

The Prescription Drug Assistance Foundation helps make medications available to low-income, uninsured, and underinsured Washingtonians at no or reduced cost.

- True
- False

LINET



Qualifying patients must be eligible for Medicare Part D and Medicaid or Extra Help

Provides immediate prescription coverage at the pharmacy counter; enrollment is processed by claim submission

Limited pharmacy network restrictions

No premiums

Coverage usually lasts about two months

Retroactive reimbursement may be available for out-of-pocket expenses

LINET is a Medicare program that provides immediate prescription drug coverage for Medicare beneficiaries who qualify for Medicaid or Extra Help and have no prescription drug coverage.

Enrollment methods

AUTO-ENROLLED

- Periodic enrollments by the Centers for Medicare & Medicaid Services (CMS)

POINT OF SALE

- Enrolled by claim submission

RETROACTIVE

- Reimbursement request

Beneficiary chooses a plan? Y/N

YES: Enrolled into plan chosen by beneficiary

NO: Enrolled into benchmark plan by CMS

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LINET, cont.



Confirming eligibility

LINET eligibility can be confirmed by submitting an E1 query (Eligibility Transaction)

E1 query

E1 results	Status	Action
Contract ID X0001	Patient currently enrolled in LINET	Submit claim to LINET using 4 Rx data
No plan information LICs/Extra Help = YES	Patient may be eligible for LINET, not yet enrolled	Submit claim to LINET using 4 Rx data
No plan information LICs/Extra Help = NO	Patient not eligible for LINET	Refer patient to 800-MEDICARE
Plan BIN/PCN #	Patient is enrolled in a Part D plan	Submit claim to plan using 4 Rx data
Plan phone number	Patient is enrolled in a Part D plan/issues	Call phone number provided



Questions?

Call the Help Desk at **800-783-1307**
Or visit: **Humana.com/LINET**



Claim submission information

Electronic pharmacy claims should be submitted using the following information:

<u>BIN</u> 015599	<u>PCN</u> 05440000	<u>GROUP ID</u> May be left blank
<u>CARDHOLDER ID</u> Medicare claim number or Medicare number		
<u>OPTIONAL FIELD: PATIENT ID</u> Medicaid ID or Social Security number		

How can a beneficiary request retroactive reimbursement?

- Complete the Direct Member Reimbursement Form located in the LINET welcome letter or on our website at [Humana.com/LINET](https://www.humana.com/LINET)
- Attach copy of receipt or printout from the pharmacy and proof of payment
- Mail or fax completed form with receipt

Send information to:

LINET
P.O. Box 14310
Lexington, KY 40512-4310
Fax: **877-210-5592**





Poll #3

What can you use a Medicare.gov account for?

- Checking for additional coverage
- Tracking prescription drug record
- Paying Part A and/or Part B premiums
- All of the above

Medicare.gov accounts

There are many benefits to creating a username and password for a Medicare.gov account, including:

- Checking for additional coverage.
- Tracking prescription drug record.
- Ordering and/or printing Medicare card.
- Seeing the current Medicare Summary Notice (MSN).
- Paying Part A and/or Part B premiums.

Dual-Eligible options case review

Case review talking points

MSP Screening – Verification of assistance level (from letter)

Differences with Medicare vs. Apple Health:

- Need Medicare Prescription Drug coverage – can have co-pays
- No Over-the-counter benefits with Medicare Part D Plan
- No Dental, Vision & Hearing

Coverage options: Original Medicare + Medicaid + PDP **vs.** D-SNP

Determination factors:

- Medical needs
- Providers (in network for D-SNP)
- Prescription Drug Coverage
- Extra Benefits



Case review talking points, *cont.*

- Using Side x Side chart
- What is “Best” for a client - Weighing extra benefits vs. access issues, etc.
- LINET

Dual-Eligible options case review set up

When people with Apple Health for Adults become eligible for Medicare, they must apply for the Medicare Savings Program to have the state pay their Part B premium.

This is a case review of someone who has been on MAGI Medicaid. They are now on Medicare and need help understanding what they need to know and what to expect.



Dual-Eligible options case review

Gladys is on MAGI Medicaid ending 5/31.

She received letters confirming that she is:

- Approved for QMB
- Has been auto-enrolled in the \$0 premium Clear Spring Health Value Rx (PDP)

She needs dental and vision coverage.



D-SNP plans for case review

During the Plan Finder review, we chose two D-SNPs that have Gladys' medications on the formulary, and her doctors are in network.

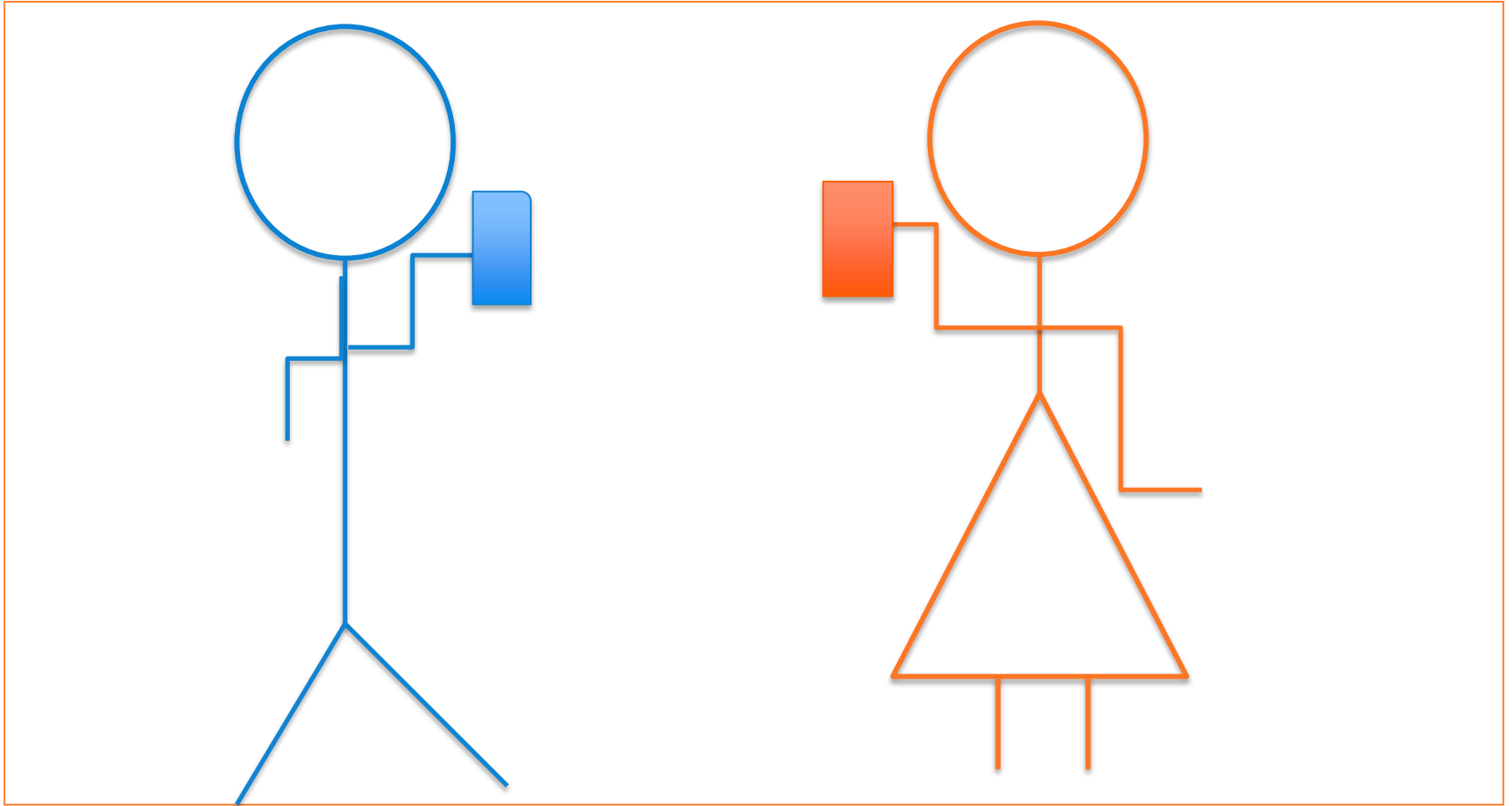
These plans are:

- United Healthcare Dual Complete
- Molina Medicare Complete Care

Side by Side case review

D-SNP plan spreadsheet counseling tool

Case review (counselor and Gladys)





Case review discussion

1. Why didn't we need to ask her age or if she is married?
2. Why was she auto-enrolled in Part D plan?
3. Can she change her plan this year?
4. When can she change her plan for next year?

Prescription Drug Assistance Foundation



Prescription Drug Assistance Foundation

Mission: To make medications available to low-income, uninsured, and underinsured Washingtonians at no or reduced cost.

- **Western WA, Rod Shutt**
rods@prescriptiondrugassistance.org
- **Eastern WA, Kelly Armstrong**
kellya@prescriptiondrugassistance.org

Presentation by Rod Shutt now available on the SHIBA YouTube channel and My SHIBA

Coming up this month...

Lunch & Learn

May:

Letters to clients during HCA Unwinding (External Guide)

D-SNP Challenges & Practices

- 2nd Thursdays
- 11:00-Noon
- Register in advance for this meeting here:
https://wa-oic.zoom.us/meeting/register/tZEuc-mupzsoGtYfm4hRHILyA3_wHg4xKQTN

National Medicare fraud campaign

As WA state's Senior Medicare Patrol (SMP), SHIBA is participating in the National Medicare Fraud Prevention Week, June 5-11, 2023.

We'll run ads statewide on KIRO, KTTH & Mariners radio stations. They'll also run web article/ads & streaming TV. All ads will run June 5- 30, 2023.

We'll post on My SHIBA, in the outreach section:

- The article
- Social media graphic
- Links to SMP site for more outreach materials

Should be available by mid to late May on My SHIBA.



Celebrating 26 years of the Senior Medicare Patrol (SMP)



Resources

LINET

- <https://docushare-web.apps.external.pioneer.humana.com/Marketing/docushare-app?file=3553056>

Prescription Drug Assistance Foundation (Rod Shutt)

- <https://prescriptiondrugassistance.org/>

Counseling checklist

- <https://www.insurance.wa.gov/sites/default/files/documents/counseling-checklist.pdf>

Washington Apple Health Guide to Unwinding from the PHE (p. 45)

- <https://www.hca.wa.gov/assets/free-or-low-cost/external-guide-to-ah-post-phe.pdf>

Health Care Authority (HCA) Cross Agency Desk Aid

- <https://www.dshs.wa.gov/sites/default/files/ESA/cc/documents/Cross%20Agency%20Desk%20Aid%202023.04.pdf>