

# SHIBA MSP & LIS workbook

February 1, 2025

Statewide Health Insurance Benefits Advisors  
(SHIBA)

# Table of contents

<b>Message from the SHIBA CTC .....</b>	<b>4</b>
<b>Assistance programs overview .....</b>	<b>5</b>
Counselor corner.....	5
Rainbow chart.....	6
Eligibility Criteria.....	7
Income and Resource Limits .....	7
Determining Eligibility for State Programs .....	7
Counselor corner.....	8
<b>Medicare Savings Program overview .....</b>	<b>9</b>
MSP Eligibility Criteria .....	9
Qualified Medicare Beneficiary (QMB) Program .....	9
Specified Low-Income Medicare Beneficiary (SLMB) .....	10
Qualified Individual Program (QI-1).....	10
Common features: QMB, SLMB & QI-1 .....	10
Retroactive Certification.....	10
QMB Plus & SLMB Plus.....	11
Counselor corner: MSPs .....	11
Summary of Medicare Savings Program Levels .....	12
Counselor corner: MSP application assistance.....	13
Places to Apply for MSP: .....	13
Inform beneficiaries of the following:.....	13
<b>Low Income Subsidies (LIS) or Extra Help .....</b>	<b>15</b>
Extra Help & Part D.....	15
Special Enrollment Period (SEP).....	15
Late enrollment penalties .....	15
Extra Help eligibility requirements.....	15
Automatic qualification - Extra Help notification .....	16
Applying for Extra Help .....	16
Eligibility check:.....	16
Counselor corner.....	16
Case Study: Maria Sanchez .....	17

<b>Counseling case work</b> .....	<b>19</b>
Learning objective .....	19
Activities.....	19
Counseling session transcript & activities .....	19
Activities.....	19
Counseling session transcript.....	19
Counseling session notes .....	27
Counseling session reflections .....	27
<b>Final reflections</b> .....	<b>28</b>
Learning outcome.....	28
Share with us! .....	28
<b>Appendix A: Rainbow Chart</b> .....	<b>29</b>
<b>Appendix B: Deemed Status Notice example</b> .....	<b>30</b>
<b>Appendix C</b> .....	<b>31</b>
<b>Checklist for income screening</b> .....	31
<b>Appendix D</b> .....	<b>34</b>
Counselor corner: person-centered income Inquiry .....	34
<b>Appendix E</b> .....	<b>35</b>
Counselor corner: person-centered household inquiry.....	35
Effective strategies for asking household size questions and addressing nuances related to adult relationships include:.....	35
Inclusive, person-centered ways of inquiring about household size: .....	35
<b>Resources</b> .....	<b>36</b>

# Message from the SHIBA CTC

Dear Volunteers,

As the curriculum & training coordinator (CTC), I deeply value your input in shaping effective training materials. Your feedback is crucial as we strive to refine and enhance resources to better support you in your role as Medicare counselors.

This workbook is designed to build your skills and knowledge through case scenarios and activities that encourage reflection and discussion. You are welcome to focus on the sections most relevant to your experience and expertise—there's no need to study all the material. Please take time to engage with the parts that interest you, jot down your insights, and share your thoughts during our sessions.

Your dedication to learning makes a meaningful difference in the lives of beneficiaries. Thank you for your commitment and for being an integral part of our team. I look forward to hearing your feedback and suggestions!

Best regards,

Elena Garrison  
SHIBA Training & Curriculum Coordinator  
Elena.Garrison@oic.wa.gov

# Assistance programs overview

Programs like Medicaid, Medicare Savings Programs (MSPs), and Extra Help significantly assist limited-income beneficiaries in managing healthcare costs. Counselors play a crucial role in guiding beneficiaries to these resources and ensuring they access the benefits they are entitled to.

The **Rainbow Chart** is an important tool for SHIBA counselors when it comes to low-income assistance programs.

It includes:

- Detailed program information with links to primary source pages for:
  - Medicaid
  - Medicare Savings Programs
  - Extra Help
- Eligibility criteria for 1 & 2 person households
- Updated information on income thresholds, effective April 1 each year.

Counselors can rely on the chart to screen beneficiaries and provide accurate guidance.

## **Counselor corner**

---

A person can qualify for all three programs simultaneously if they meet the eligibility criteria. For example, someone eligible for Medicaid is typically also eligible for Medicare Savings Programs and Extra Help. This interconnectedness is a key aspect of low-income assistance.

# Rainbow chart<sup>1</sup>

	Program	Household size	
		1	2
Medicaid	<b>SSI-Related Medicaid Income Limit (AKA Categorically Needy/CN Medicaid S01, S02)</b>	<b>\$963</b>	<b>\$1,435</b>
	<i>SSI Resource Limit</i>	<i>\$2,000</i>	<i>\$3,000</i>
	<b>MN – Medically Needy/Spenddown Income basis (S95, S99)</b>	<b>&gt; \$963</b>	<b>&gt; \$963</b>
	<i>MN Resource Limit</i>	<i>\$2,000</i>	<i>\$3,000</i>
	<hr/>		
Medicare Savings Program (MSP)	<b>MSP- QMB Income Limit 110% FPL (S03) <i>No Resource/Asset Limit as of 1/1/2023</i></b>	<b>\$1,401</b>	<b>\$1,894</b>
	<b>MSP- SLMB Income Limit 120% FPL (S05) <i>No Resource/Asset Limit as of 1/1/2023</i></b>	<b>\$1,526</b>	<b>\$2,064</b>
	<b>MSP- QI-1 Income Limit 138% FPL (S06) <i>No Resource/Asset Limit as of 1/1/2023</i></b>	<b>\$1,752</b>	<b>\$2,371</b>
<hr/>			
Extra Help	<b>Extra Help Income Limit 138% FPL <i>Apply for MSP to eliminate Resource/Asset Limit</i></b>	<b>\$1,752</b>	<b>\$2,371</b>
	<b>Extra Help (effective 1/1/2024) Income Limit 138-150% FPL</b>	<b>\$1,903</b>	<b>\$2,575</b>
	<i>Resource Limit</i>	<i>\$17,220</i>	<i>\$34,360</i>

<sup>1</sup> Income limits, which are based on the FPL, change each year. New limits are typically released in either January or February and take effect January 1.

\*The amounts listed above include a standard \$20 income disregard.

## Eligibility Criteria

---

### Income and Resource Limits

Eligibility for these programs depends on **income** and, in some cases, **resources or assets**. Resources are defined as liquid assets, such as savings accounts and investments, and do not include a home, car, or personal property.

- **Income Limits:** Income limits apply to all three programs (Medicaid, MSP, & Extra Help) and are based on a percentage of the Federal Poverty Level (FPL), which is recalculated and published annually.
  - The new FPL guidelines are typically applied to **Extra Help** starting in February.
  - For Washington State's programs, income limits become effective as of April 1.
  -
- **Resource Limits:** Resource limits are relevant for the following programs:
  - Full Medicaid Programs:
    - Categorically Needy (CN) and Medically Needy (MN), as indicated on the rainbow chart.
  - Extra Help Program:
    - For individuals with income limit between 138% and 150% of the Federal Poverty Level (FPL).

### Determining Eligibility for State Programs

The Department of Social and Health Services (DSHS) and the Health Care Authority (HCA) administer Medicaid programs, including MSPs:

- DSHS: Processes applications and renewals and determines eligibility.
- HCA: Manages contracts, benefits, and provides Beneficiary/community support.

## **Counselor corner**

---

As SHIBA counselors, it's important to understand that we screen for eligibility but do not determine it. If a Beneficiary seems eligible, we encourage them to apply, and provide assistance with the process.



# Medicare Savings Program overview

MSPs are a specific subset of Medicaid benefits designed to assist with the costs associated with Medicare.

## **MSP Eligibility Criteria**

---

### **Income-Based Eligibility**

In Washington State (effective January 1, 2023), eligibility for MSPs is based on **income only**, with resource limits waived.

For example:

A single person earning \$1,400 per month with \$50,000 in savings qualifies for MSPs as long as their income is below the program's threshold.

### **Federal Poverty Level (FPL) Guidelines**

Eligibility thresholds for MSPs are based on percentages of the FPL:

- **QMB:** Up to 110% of the FPL.
- **SLMB:** Between 110% and 120% of the FPL.
- **QI-1:** Between 120% and 138% of the FPL.

These thresholds are updated annually, with new income limits typically taking effect on April 1.

## **Medicare Savings Programs (MSPs): Benefits**

There are three main programs in Washington state:

### **Qualified Medicare Beneficiary (QMB) Program**

- Pays Part A and Part B premiums

- Medicare providers may not charge QMB beneficiaries Medicare deductibles, coinsurances, or copays (known as **improper billing**)<sup>2</sup>

### **Specified Low-Income Medicare Beneficiary (SLMB)**

- Pays Part B premium

### **Qualified Individual Program (QI-1)**

- Pays Part B premium

### **Common features: QMB, SLMB & QI-1**

---

- **No resource/asset limits**
- **Part B premium** is paid by the State (\$185 in 2025)
  - Part B premium is no longer deducted from Beneficiary's Social Security benefits.
- **Part B enrollment** for Beneficiaries without it
- **Part B penalties** are waived
- **Extra Help** automatic enrollment
- **Special Enrollment Period** (SEP) to make a once-per-month election into Original Medicare and a standalone prescription drug plan (PDP). It also allows a once-per-month election to switch between standalone PDPs.

### **Retroactive Certification**

---

MSPs allow for retroactive certification in some cases:

- **SLMB and QI-1:** Offer a three-month retroactive period.
- **QMB:** Does not include retroactive certification.

---

<sup>2</sup> HCA <https://www.hca.wa.gov/assets/billers-and-providers/fs-balancebillingprohibition.pdf>  
CMS <https://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/se1128.pdf>

Retroactive benefits can significantly benefit individuals. For instance, if someone qualifies retroactively, they may recover up to three months of Part B premiums, which could amount to \$555 in savings.

## QMB Plus & SLMB Plus

---

Dual eligibility groups	Medicare Part A premiums (when applicable)	Medicare Part B premiums	Co-insurance under Medicare Part A and Part B	Full Medicaid coverage
QMB Only	X	X	X	
QMB Plus	X	X	X	X
SLMB Only		X		
SLMB Plus		X		X

QMB Plus and SLMB Plus individuals receive comprehensive benefits that extend beyond their Medicare-related assistance.

QMB+ beneficiaries have their Medicare Part A and Part B premiums, as well as cost-sharing, fully covered and qualify for the full range of Medicaid benefits available to their specific eligibility group, such as those designed for low-income families and individuals with disabilities.

Similarly, SLMB+ beneficiaries have their Part B premiums covered and gain access to the full array of Medicaid benefits applicable to their eligibility group, including support for low-income families and individuals with disabilities.

Unlike QMB and SLMB, people who qualify for QI can't be eligible for a separate Medicaid eligibility group covered under the state plan.

## Counselor corner: MSPs

---

- Use the rainbow chart to verify eligibility criteria and reference program details.
- Encourage MSP application for eligible individuals.
  - They will be automatically enrolled in Extra Help.
- Support beneficiaries with application processes through Washington Connection and other resources.

- Direct Beneficiaries not eligible for MSPs to apply for Extra Help through Social Security.
  - They must meet income and resource (assets) limits.

As SHIBA counselors, we do not provide counseling on Specified Low-Income Medicare beneficiary Plus (SLMB+) and Qualified Medicare Beneficiary Plus (QMB+) programs because these are full Medicaid-related benefits. While these programs interact with Medicare, the eligibility, application, and administration are managed through Medicaid. Our role is to guide beneficiaries on Medicare-related questions and benefits related to such MSPs as QMB, SLMB & QI-1, but for inquiries about SLMB+, QMB+, or other Medicaid-specific programs, we should refer beneficiaries directly to their local Medicaid office or the appropriate state agency. This ensures they receive accurate and comprehensive guidance on these complex programs.

## Summary of Medicare Savings Program Levels

---

Program Level	Income Threshold (FPL)	Key Benefits
<b>QMB</b>	Up to 110%	Part A & B premiums, balance billing prohibition <sup>3</sup>
<b>SLMB</b>	110%–120%	Part B premium, retroactive certification
<b>QI-1</b>	120%–138%	Part B premium, retroactive certification

---

<sup>3</sup> **Balance Billing Prohibition:** Providers cannot bill beneficiaries for any portion of costs that Medicare does not pay (e.g., Part B deductibles or coinsurance).

<https://www.hca.wa.gov/assets/billers-and-providers/fs-balancebillingprohibition.pdf>

## Counselor corner: MSP application assistance

---

Examples of documentation that may be required for an MSP application include:

- Social Security card
- Medicare card
- Birth certificate, passport or green card
- Proof of address (e.g., electric or phone bill)
- Proof of income (e.g., Social Security Administration award letter, income tax return, pay stub)

Printable paper application:

<https://www.dshs.wa.gov/sites/default/files/forms/pdf/14-001.pdf>

### Places to Apply for MSP<sup>4</sup>:

1. Online at Washington Connection:  
<https://www.washingtonconnection.org/home/>.
2. Call the Customer Service Contact Center at 877-501-2233.
3. Submit a paper HCA 13-691 Application for Medicare Savings Program (wa.gov) or submit Form HCA 18-005 Application for aged, blind, disabled/long-term if applying full Medicaid coverage (wa.gov).

### Inform beneficiaries of the following:

Beneficiary should be sent a Notice of Action within 45 days of filing an application. This notice will inform them of their application status.

- If a Beneficiary receives an approval:
  - And are found eligible for SLMB or QI, the state will pay their Part B premium starting the month indicated on their Notice of Action.

---

<sup>4</sup> WA Health Care Authority [https://www.hca.wa.gov/free-or-low-cost-health-care/i-help-others-apply-and-access-apple-health/medicare-savings-program-msp#:~:text=Individuals%20receiving%20SSI%20\(S01\)%20and,and%20process%20without%20an%20application.](https://www.hca.wa.gov/free-or-low-cost-health-care/i-help-others-apply-and-access-apple-health/medicare-savings-program-msp#:~:text=Individuals%20receiving%20SSI%20(S01)%20and,and%20process%20without%20an%20application.)

- However, it may take several months for the Part B premium (\$185 in 2025) to be added back to their monthly Social Security check. They should be reimbursed with a lump-sum check for each month that their premium should be paid for.
  - And found eligible for QMB, their benefits begin the next month.
- If they are approved, they will need to renew (recertify) their MSP every year. If they do not receive a notice in the mail to recertify, they must contact the local Medicaid office and ask what they need to do to make sure they receive their MSP benefits in the following year.
- If a Beneficiary receives a denial and are told they do not qualify for an MSP, they have the right to request a fair hearing to challenge the decision.
- If they do not receive a Notice of Action within 45 days, they must contact the Medicaid office.

# Low Income Subsidies (LIS) or Extra Help

"Extra Help" is a Medicare program to help people with limited income and resources pay Medicare drug coverage (Part D) premiums, deductibles, copays, and coinsurances. Social Security Administration (SSA) determines eligibility for the benefit.

## **Extra Help & Part D**

---

All Medicare beneficiaries with Extra Help have

- \$0 Part D deductible
- \$0 plan premium for benchmark PDP plans
- Maximum co-pays of \$4.90 for generic and \$12.15 for brand-name drugs on plan formulary

## **Special Enrollment Period (SEP)**

All Medicare beneficiaries with Extra Help are eligible for monthly SEP to enroll in or change their standalone Part D plan. Changes are effective the first of the next month.

## **Late enrollment penalties**

The late enrollment penalty is waived for all Medicare beneficiaries who qualify for Extra Help.

## **Extra Help eligibility requirements**

---

Available to beneficiaries:

- With income below 150% of Federal Poverty Level (FPL)
- Qualifying beneficiaries must have

- Incomes at/below \$22,590<sup>5</sup> (single) per year (\$30,600<sup>6</sup> two-person).
- Assets limited to \$17,010<sup>7</sup> (individual) (\$33,950)<sup>8</sup> for those with income bracket between 139%-150% FPL

## **Automatic qualification - Extra Help notification**

---

Beneficiaries automatically qualify for Extra Help coverage if:

- They have both Medicare and full Medicaid
- They're in a Medicare Savings Program
- They get Supplemental Security Income (SSI) benefits

These beneficiaries will get a Deemed Status Notice<sup>9</sup> (PURPLE Notice No.11166), informing them of their eligibility.

## **Applying for Extra Help**

---

If an individual does not automatically qualify for Medicare Extra Help, they must apply through the Social Security Administration (SSA). This can be done by calling SSA, visiting a local office, or applying online to determine eligibility.

### **Eligibility check:**

Applicants will need to provide information about their income and assets (for those between 139-150% FPL) to determine if they meet the criteria for Extra Help.

## **Counselor corner**

---

When assisting beneficiaries with limited income, recommend starting with the Medicare Savings Program (MSP). MSP approval is typically faster, does not consider resource limits, and automatically qualifies the beneficiary for Extra Help, simplifying the process. By applying for MSP, beneficiaries gain additional support, such as coverage for their Medicare Part B premium, while also reducing their

---

<sup>5</sup> In 2024

<sup>6</sup> In 2024

<sup>7</sup> In 2024

<sup>8</sup> In 2024

<sup>9</sup> See Appendix B



prescription costs through Extra Help. This approach ensures quicker access to comprehensive benefits with minimal paperwork.

### **Case Study: Maria Sanchez**

Maria Sanchez is a 68-year-old Medicare beneficiary living in Washington State. She recently sought assistance from SHIBA because her prescription drug costs have become unmanageable. Below is her financial information:

- **Monthly Income:** \$1,650 (Social Security)
- **Resources:** \$7,000 (savings account)

Maria is aware of the Extra Help program but is unsure if it's the best fit for her situation. She seeks your guidance in understanding her options.

---

### **Assignment Instructions**

#### **1. Analyze Maria's Situation**

- Identify Maria's eligibility for both the Medicare Savings Program (MSP) and Extra Help.
  
- Consider the benefits of applying for MSP compared to applying directly for Extra Help.

#### **2. Answer the Following Questions:**

- a. Why might applying for MSP be a faster option for Maria compared to Extra Help?

b. How does the absence of resource limits in Washington State's MSP program benefit Maria?

c. Explain how MSP approval automatically qualifies Maria for Extra Help and what this means for her prescription drug costs.

# Counseling case work

## Learning objective

---

To improve counselor's communication and technical skills when counseling beneficiaries on MSP & LIS benefits.

## Activities

---

Listen the counseling session and use the provided checklist (Appendix C).

## Counseling session transcript & activities

---

### Activities

- Read and study the transcript in detail.
- Review the breaks and reflect on how you might have approached this session.
- Consider alternative strategies and their potential impact.
- Identify challenges you might encounter and think of solutions.
- Share & discuss your reflections with peers during the CE to gain diverse perspectives.

### Counseling session transcript

**Beneficiary** Hello.

**SHIBA Counselor** Hi, this is \_\_\_\_\_ from Washington SHIBA we help people with Medicare. Is this (Beneficiary name)?

**Beneficiary** Yes, this is (Beneficiary name).

**SHIBA Counselor** Hi (Beneficiary). You called our program for some help with Medicare costs. I have a referral saying maybe your neighbor suggested that you call us. How can I help you?

**Beneficiary** I'm struggling. I don't even know how I'm going to get through this. For the past few years I had my Medicare through Premera and could afford all of my medications. Now I got a new plan, my drugs are so expensive that I will have to use savings to pay for them, and I don't know what to do.

---

*What would you say to acknowledge the Beneficiary's emotional distress when they share that they are struggling and don't know how they'll get through this?*

---

**SHIBA Counselor** Is your new plan a Medicare Advantage Plan? Does it say HMO or PPO behind the name of the plan, or on the card somewhere?

**Beneficiary** It says HMO.

**SHIBA Counselor** One of the things that you can do is you can change your plan because it's the Medicare Advantage open enrollment period. So, we might be able to find a plan that will lower your drug costs regardless, but there are also assistance programs people with limited income. These programs might offer lower costs for your Medicare and your prescription drugs.

May I ask you some questions related to your income, household size and savings to see if you're eligible for any of the programs?

**Beneficiary** Sure, but I doubt I am – I tried to get Extra Help and some other assistance when I signed up for Medicare three years ago and they said I wasn't eligible because I have some savings for emergencies.

**SHIBA Counselor** OK. Well, there are a few programs, and in 2023 Washington state changed the Medicare Savings Program so only your income, not your savings are considered .

There are different levels, but if you qualify for any of the levels the state will pay your Part B premium for you and you are automatically enrolled in Extra Help to lower your drug costs.

So you could be eligible for assistance you could not get three years ago.

---

*How would you explain Medicare Savings Programs and Extra Help in smaller, easier-to-follow steps to ensure the Beneficiary understands?*

---

**Beneficiary** Fabulous.

**SHIBA Counselor** It is fabulous. So, it's OK if I ask you some questions about your income, household size and savings?

**Beneficiary** Oh please. Yes.

**SHIBA Counselor** OK, first are you single or married?

**Beneficiary** I'm single.

**SHIBA Counselor** OK. And do you have any dependents living with you?

**Beneficiary** Nope, I don't. I'm just by myself.

**SHIBA Counselor** OK. And then you said you started Medicare three years ago. Was that because you were 65 or are you under 65?

**Beneficiary** That's when I turned 65.

**SHIBA Counselor** OK...is your income over about \$1,750 (screening for \$1,752) per month?

**Beneficiary** No, I'm not exactly sure what my income is because they take my

Medicare out of my check, but I can tell you that every month I get \$1,105 deposited into my checking account.

**SHIBA Counselor** That's your Social Security deposit for this year?

**Beneficiary** Yes, it is.

**SHIBA Counselor** Do you have to pay for Part A or is it \$0 cost to you because you had 10 or more years of work credit?

**Beneficiary** I worked, so I only have to pay for Part B.

**SHIBA Counselor** Are payments for your new Medicare Advantage plan taken out of your Social Security, or just your Part B?

**Beneficiary** My new plan is supposed to be free, so I think it is just the Part B.

**SHIBA Counselor** Do you have any other income? Any pension or retirement account payments that that you get monthly?

**Beneficiary** No, I only get Social Security.

**SHIBA Counselor** So your total monthly income is \$1,105 dollars?

**Beneficiary** That's the only income I get. That's correct.

**SHIBA Counselor** OK and you haven't applied for any assistance since you tried 3 years ago, so you're definitely having your Part B premiums taken out. Is that right?

**Beneficiary** That's correct. I haven't applied for anything because I didn't think I could get it.

**SHIBA Counselor** When the \$185 payment taken out for Part B payment is added to the amount deposited in your account, your gross income about \$1,290 total,

which is under the limit for Medicare Savings Programs. So, it seems you would be eligible for at least a Medicare Savings Program from the State of Washington that will also get you Extra Help.

**Beneficiary** Oh good. What would I be eligible for?

**SHIBA Counselor** There are three levels of Medicare Savings Programs. The state pays your Part B premium and you can get special Medicare Advantage plans any of them. You are also automatically enrolled in Extra Help prescription drug assistance through Social Security.

DSHS makes the determinations, so I can't promise, or say you ARE eligible. But from what you have shared, it seems like you would probably be eligible for what's called QMB level - that would pay your Part B premiums, and prevents you from being charged for services covered by Medicare A & B, including co-pays.

With Extra Help, you won't have to pay a drug deductible, if your plan has one, or more than \$5 (\$4.90) per prefer generic medications or \$12.15 for brand name drugs that are covered by your Medicare plan.

---

*How would you explain Medicare Savings Programs and Extra Help in smaller, easier-to-follow steps to ensure the Beneficiary understands?*

---

**Beneficiary** So it would pay my Part B premiums and lower my co-pays for my prescriptions? Wow, I could save a lot of money! Are there limits?

**SHIBA Counselor** Well, it is important to be sure you renew your Medicare Savings Plan when it is due – generally in a year – and that your prescriptions are covered by your Medicare plan, but other than that, the number of payments made or prescriptions covered are not limited to a certain number or amount.

**Beneficiary** So I am taking Eliquis. How much would that cost?

**SHIBA Counselor** \$12.15 per month at most as long as your Medicare plan covers it

---

*Would you add anything else to this?*

---

**Beneficiary** And if I get Ozempic, how much will it cost?

**SHIBA Counselor** \$12.15 per month at most as long as your Medicare plan covers it

**SHIBA Counselor**

So over the next year, at the very least, you would get a total of about \$2,200 more from Social Security because the Part B premiums would not be deducted and you would save on your prescriptions. But there could be more benefits if you are QMB, as it seems you will be, or you choose one of the special Medicare Advantage plans called D-SNP plans.

**Beneficiary** Oh wow. OK. So what do I need to do?

**SHIBA Counselor** Well I would like to ask one more question to see if you might be eligible for any more help than the Medicare Savings Program and Extra Help. You mentioned that you had savings that made you ineligible for assistance three years ago. Do you have more than \$2000 in your savings?

**Beneficiary** I do.

**SHIBA Counselor** OK. You said you had Premera previously – did you like the way it worked?



*What questions would you ask to learn more about what the Beneficiary values most in their Medicare plan?*

---

**Beneficiary** I did. I mean, it seemed to be OK and I was managing. I liked being able to go to the dentist and get eyeglasses.

**SHIBA Counselor** So you're going to have new options once you're Medicare Savings Program and Extra Help are processed, including those Medicare Advantage plans you could not get without the assistance.

**Beneficiary** OK. What do I need to do? How do I apply?

**SHIBA Counselor**

You have a few different options for applying –

- You can go to a local DSHS office to apply and often get immediate approval
- You can contact your local Area Agency on Aging to apply for this and other programs that may be available, like energy assistance.
- If you are comfortable online and filling out forms, you can complete the application yourself on [WashingtonConnection.org](http://WashingtonConnection.org)
- You can make another appointment with a SHIBA counselor, and one of us will help you apply through Washington Connection.

Once you are approved and have the effective date a SHIBA counselor can help you review your Medicare plan options including the assistance.

---

*What would you do to recommend the best application option for the Beneficiary based on their comfort level and urgency?*

---

**Beneficiary** OK, How long does it take? How soon can it start?

**SHIBA Counselor** Well, the online application takes about 20 minutes.

Approval time depends on DSHS, what they may need from you, etc.

The effective date can vary as well, depending on how you apply and when in the month, but it generally doesn't take more than a few weeks to get the approval or denial.

**Beneficiary** I am going to need to get my new refills at the end of the month. Can I get my money back if I pay for my prescriptions before I am approved?

**SHIBA Counselor** That will depend on when you pay for them and the effective date of the Extra Help. Your best bet is to apply as soon as you can and talk to your pharmacist about options if you need more medication before your assistance is effective.

---

*What would you say to help the Beneficiary understand the potential timelines for application processing and assistance approval?*

---

**Beneficiary** OK, well, I guess I need to go so I can try to go to the DSHS office today.

**SHIBA Counselor** Sounds good – do you have any other questions?

**Beneficiary** Yes, should I call the SHIBA 800 number again after I have done my application or after I have my approval?

**SHIBA Counselor** When you get your approval should be fine. It will actually be best if call our local number ###-###-#### and explain in the voicemail that you were approved for Medicare Savings Program effective \_\_\_\_\_.

I may not be able to help you with the next step, but that is the best way to get a local counselor who can.

Do you have any other questions?

*How would you encourage the Beneficiary to schedule a follow-up appointment after their approval to ensure they fully understand their new options?*

---

**Beneficiary** No, I think I know what I am doing for now. Thank you!

### **Counseling session notes**

---

### **Counseling session reflections**

---

*What strategies would you use to keep the conversation focused and efficient while still addressing the beneficiary's needs thoroughly?*

*What resources or tools would you use during the call to provide specific details about the beneficiary's options, Medicare Advantage plan, or medication costs?*

# Final reflections

## **Learning outcome**

---

Do you feel more confident explaining to beneficiaries the benefits provided by MSP?

Do you feel more confident articulating the eligibility criteria for the Medicare Savings Program (MSP)?

How has your understanding of Extra Help improved through this training?

How will you apply what you've learned in your future counseling sessions?

## **Share with us!**

---

Share an idea for how the SHIBA team and sponsors can help support the volunteer advisors even more/better via email at: [Elena.Garrison@oic.wa.gov](mailto:Elena.Garrison@oic.wa.gov)

Thank you for your participation!

# Appendix A: Rainbow Chart<sup>10</sup>

## SHIBA job aid

### Medicare help rainbow chart

Program	Household size		Need to apply for LIS?	Copay/coinsurance plan's formulary drugs
	1	2		
<b>SSI-Related Medicaid Income Limit (AKA Categorically Needy/CN Medicaid S01, S02)</b>	<b>\$963</b>	<b>\$1,435</b>	NO	Copay: \$1.55 generic /\$4.60 brand Catastrophic Copay: \$0
<i>SSI Resource Limit</i>	<i>\$2,000</i>	<i>\$3,000</i>		
<b>MN – Medically Needy/Spendedown Income basis (S95, S99)</b>	<b>&gt; \$963</b>	<b>&gt; \$963</b>	NO	Copay: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0
<i>MN Resource Limit</i>	<i>\$2,000</i>	<i>\$3,000</i>		
<b>MSP- QMB Income Limit 110% FPL (S03) No Resource/Asset Limit as of 1/1/2023</b>	<b>\$1,401</b>	<b>\$1,894</b>	NO	Copay: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0
<b>MSP- SLMB Income Limit 120% FPL (S05) No Resource/Asset Limit as of 1/1/2023</b>	<b>\$1,526</b>	<b>\$2,064</b>	NO	Copay: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0
<b>MSP- QI-1 Income Limit 138% FPL (S06) No Resource/Asset Limit as of 1/1/2023</b>	<b>\$1,752</b>	<b>\$2,371</b>	NO	
<b>Extra Help Income Limit 138% FPL Apply for MSP to eliminate Resource/Asset Limit</b>	<b>\$1,752</b>	<b>\$2,371</b>	NO <i>If approved for MSP first</i>	Copay: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0
<b>Extra Help (effective 1/1/2024) Income Limit 138-150% FPL</b>	<b>\$1,903</b>	<b>\$2,575</b>	YES	Copay: \$4.90 generic/\$12.15 brand Catastrophic Copay: \$0
<i>Resource Limit</i>	<i>\$17,220</i>	<i>\$34,360</i>		

Contact: SHIBA | 800-562-6900 | [shiba@oic.wa.gov](mailto:shiba@oic.wa.gov)  
For training purposes only – do NOT share with consumers

Page 1 of 8  
SHIBA job aid – Updated 3.5.2024

<sup>10</sup> SHIBA Volunteer only resources materials  
<https://www.insurance.wa.gov/volunteer-only-resource-materials>  
Medicare help rainbow chart  
[https://www.insurance.wa.gov/sites/default/files/documents/2024-rainbow-chart-extra-help\\_0.pdf](https://www.insurance.wa.gov/sites/default/files/documents/2024-rainbow-chart-extra-help_0.pdf)

# Appendix B: Deemed Status Notice example



DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

7500 Security Boulevard  
Baltimore, MD 21244-1850

<BENEFICIARY FULL NAME>  
<ADDRESS>  
<CITY STATE ZIP>

<file creation date>

You're getting this notice because you automatically qualify for Extra Help paying Medicare Part D drug coverage costs. **Please keep this notice for your records.**

### **What does it mean to automatically qualify for Extra Help?**

Getting Extra Help means you'll pay no more than <gen\_amt> for a generic drug and no more than <brd\_amt> for a brand-name drug in a Medicare Part D drug plan in 2024. **You automatically qualify for this help starting <effective date> at least until December 31, <year>.**

**Note:** You can only get Extra Help if you live in one of the 50 states or Washington D.C.

### **Medicare will enroll you in a Part D drug plan**

Medicare will enroll you in a plan to make sure you get help paying for drug coverage. You'll get a yellow or green notice from Medicare telling you what plan you'll be enrolled in.

If you need drug coverage after <effective date> but before your new Medicare drug plan starts, your pharmacist can bill Medicare's Limited Income Newly Eligible Transition (NET) Program.

Also, if you paid for any prescriptions before you got this notice, and you were eligible for Medicare and Medicaid, you may be able to get back part of what you paid. Call Medicare's Limited Income NET Program for more information at 1-800-783-1307. TTY users can call 711.

### **What if I don't want a Medicare Part D drug plan?**

If you don't want to be in any Medicare drug plan, you can opt out of this drug coverage. Call 1-800-MEDICARE (1-800-633-4227) and tell them you want to "opt out." TTY users can call 1-877-486-2048. Caution: If you opt out, you won't get Medicare drug coverage or Extra Help paying your drug costs.

### **What if I'm already in a Medicare Part D drug plan?**

If you've had any prescriptions filled since <effective date>, you may be able to get back part of what those prescriptions cost. Call your plan for more information.

### **Get help & more information**

For help understanding this notice, call your State Health Insurance Assistance Program at <SHIP Phone Number> for free, personalized health insurance counseling. Or, call 1-800-MEDICARE (1-800-633-4227) for help. TTY users can call 1-877-486-2048.



CMS Product No. 11166 –  
PURPLE December 2023

# Appendix C

## Checklist for income screening

	<b>Income Screening checklist:</b>	Done
1	<b>The Why &amp; How</b> – Explain why we do income screening	
	<ul style="list-style-type: none"> <li>• Might be eligible for assistance programs that lower amount they have to pay for care and prescriptions.</li> </ul>	
	<ul style="list-style-type: none"> <li>• Eligibility for assistance programs is based on income &amp; household size.</li> </ul>	
	<ul style="list-style-type: none"> <li>• The programs are offered through DSHS – so they make decisions, but we can help them figure out if they might be eligible and want to apply</li> </ul>	
	<ul style="list-style-type: none"> <li>• Being eligible for MSP means enrolled in Extra Help for prescription coverage.</li> </ul>	
2	<b>Ask Beneficiary if they would like you to ask the eligibility (income &amp; household) questions → Conduct screening</b>	
	<ul style="list-style-type: none"> <li>• Single or married?</li> </ul>	
	<ul style="list-style-type: none"> <li>○ Single – proceed</li> </ul>	
	<ul style="list-style-type: none"> <li>○ Married: Spouse also on Medicare?</li> </ul>	
	<ul style="list-style-type: none"> <li>• Yes (2-person/married household)</li> </ul>	
	<ul style="list-style-type: none"> <li>• No (1-person/Single)</li> </ul>	
	(Uncommon) Any Dependents? (Refer to DSHS)	

	(Uncommon-Under 65 ) Are you working and eligible for disability? – (Refer to DSHS)	
3.	<b>Determine total monthly income</b> – Add up Social Security, Retirement Benefits, monthly payments received → Use updated rainbow chart to identify eligibility level	
	<ul style="list-style-type: none"> <li>• <b>Under \$1,752(S)/ \$2,371 (M) (MSP max income)?</b></li> </ul>	
	<ul style="list-style-type: none"> <li>• Over → Is it over \$1,903/\$2,575 (Extra Help Level)</li> </ul>	
	<ul style="list-style-type: none"> <li>• Under → <b>Probably eligible, try to identify if they already have MSP</b></li> </ul>	
	<b>Ask: If they know Part B is being deducted from Social Security</b>	
	<ul style="list-style-type: none"> <li>• <i>Do you know if your Part B is taken out of your monthly checks?</i></li> </ul>	
	<ul style="list-style-type: none"> <li>• <i>Do you have a Provider 1 Card?</i></li> </ul>	
	<ul style="list-style-type: none"> <li>• <i>Have you had Medicaid or any other state assistance?</i></li> </ul>	
	<b>Unsure? → Check: Call HCA Self-help line</b> to learn if they are enrolled	
	<ul style="list-style-type: none"> <li>• <b>Need Social Security or Provider1 #</b> 1-800-562-3022 (HCA Job Aid <a href="#">Link to Job Aid</a>)</li> </ul>	
4.	<b>Screen for resource limits if applicable</b> (for program appropriate for income)	
	MSP → No	
	Medicaid → Yes	(S) \$ 2,000 (M) \$ 3,000
	Extra Help Only → Yes	(S) \$17,220 (M) \$34,360



5.	<b>Plan next step: Application, Referral or Follow-up appointment:</b>	
	<ul style="list-style-type: none"> <li>• Make referral to ALTC,</li> </ul>	
	<ul style="list-style-type: none"> <li>• start application or</li> </ul>	
	<ul style="list-style-type: none"> <li>• set-up follow-up appointment</li> </ul>	

# Appendix D

## **Counselor corner: person-centered income Inquiry**

---

Income is an important factor when it comes to eligibility for Medicare Savings Programs. When collecting financial information for Medicare assistance programs, it's crucial to approach the inquiry with sensitivity and respect for the individual's privacy.

### **Effective strategies for asking income questions**

- Explain the purpose.
- Frame it as a common concern.
- Emphasize confidentiality.
- Offer different ways for them to share income information, such as providing a range or an estimate if they are uncomfortable sharing exact figures.

### **Sample income inquiry phrases:**

To explore potential savings opportunities, could we discuss your current income and see if you might qualify for the Medicare Savings Program?

Can you please share with me your current monthly/yearly income to help us determine eligibility for Medicare assistance programs?

Would you mind sharing your income with me? We have programs that, depending on your income, might qualify you for savings on premiums and co-insurance.

To better assist you with your Medicare options, could we discuss your current income situation?

# Appendix E

## **Counselor corner: person-centered household inquiry**

---

### **Effective strategies for asking household size questions and addressing nuances related to adult relationships include:**

- Using clear and inclusive language in interviews.
- Providing guidance and examples to help individuals determine who should be included in their household.
- Allowing flexibility to account for various living arrangements and family structures.
- Considering individual circumstances and relationships on a case-by-case basis.
- Ensuring confidentiality and sensitivity when discussing personal and familial relationships.

### **Inclusive, person-centered ways of inquiring about household size:**

- When reflecting on your household, who are the individuals with whom you share your living space and expenses in the context of tax filing?
- In determining household size, we consider anyone who shares your living space and contributes to your financial obligations. Can you specify the number of individuals in your household?
- To ensure an accurate assessment of eligibility, we aim to comprehend your household composition based on tax filer status. Your household encompasses all those who reside with you and share financial responsibilities. Could you please provide us with your household information you use for tax filing purposes?

### **Complex situations:**

Please refer beneficiaries to Social Security Administration website:

<https://secure.ssa.gov/poms.nsf/lnx/0603020055#:~:text=Individual%20lives%20alone%20or%20does,for%20a%20one%2Dperson%20family.>

# Resources

## **CMS.gov**

Guide to consumer mailings from CMS, Social Security, & plans in 2024/2025

<https://www.cms.gov/Medicare/Prescription-Drug-Coverage/LimitedIncomeandResources/Downloads/Consumer-Mailings.pdf>

## **Medicare Rights Center**

Medicare Savings Program financial eligibility guidelines

<https://www.medicareinteractive.org/pdf/MSPFinancialEligibilityGuidelines.pdf>

## **Medicare.gov**

Forms, Publications, & Mailings → Help with costs

<https://www.medicare.gov/basics/forms-publications-mailings/mailings/help>

Help with drug costs

<https://www.medicare.gov/basics/costs/help/drug-costs>

## **SHIBA**

Rainbow chart

[https://www.insurance.wa.gov/sites/default/files/documents/2024-rainbow-chart-extra-help\\_0.pdf](https://www.insurance.wa.gov/sites/default/files/documents/2024-rainbow-chart-extra-help_0.pdf)

## **SSA.gov**

Understanding the Extra Help with Your Medicare Prescription Drug Plan

<https://www.ssa.gov/pubs/EN-05-10508.pdf>