

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

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

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/

Notes

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](https://www.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](https://www.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

PEBB recently released the retiree monthly premiums for 2019:

www.hca.wa.gov/assets/pebb/51-275R-2019.pdf

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 Premiera Medicare Supplement Plan F and how it works with Medicare.
- PEBB Premiera 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 Premiera 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
 - PEBB schedules fairs statewide Nov. 1 2018 – Nov. 30, 2018.
 - 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

- Information about medical plans and benefits for PEBB retirees: www.hca.wa.gov/public-employee-benefits/retirees/medical-plans-and-benefits
- 2019 Retiree monthly premiums: www.hca.wa.gov/assets/pebb/51-275R-2019.pdf

Resources

CMS 2019 topics

Visit [cms.gov](https://www.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

Medicare Enrollment Periods

Review the handout in the [September 2018](#) continuing education training packet.

Medicare Plan Finder

www.medicare.gov/find-a-plan/questions/home.aspx

SHIBA and PEBB: Ways SHIBA volunteers can assist PEBB Retirees

Search [My SHIBA](#) for "ways SHIBA volunteers can assist PEBB retirees."

Washington State Health Care Authority: Employee and retiree benefits

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!**

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!

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.

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



Need more information?

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:

for Medicare Part B

vs. Part D drug:

for eligibility verification:

to repeat options:

If you are a physician/prescriber

If you are a beneficiary/other

Press 1, then

Press 1

Press 2

Press 3

Press 4

Press 2

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:

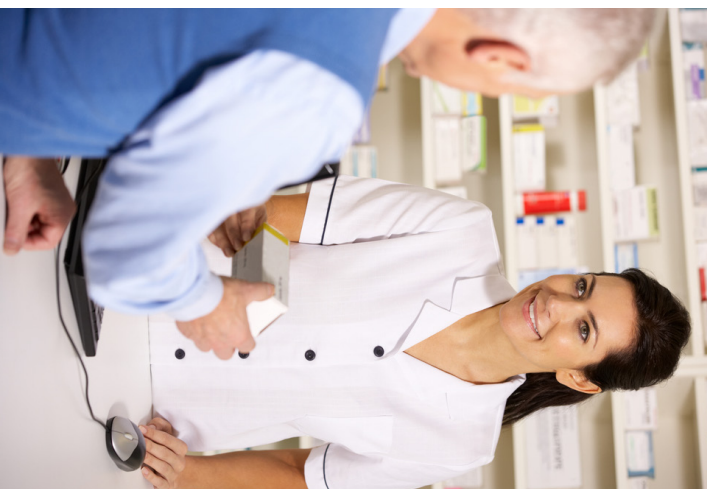
1. Point-of-sale prescription drug coverage for individuals with Medicare's Low-Income Subsidy (LIS, also called "Extra Help") who are not yet enrolled in a Medicare Part D prescription drug plan.

2. Retroactive prescription drug coverage for new "dual eligibles" — those individuals who are newly eligible for both Medicare and Medicaid, or Medicare and 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 prescription drug plan.



Note:

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

If the patient does not have an enrollment confirmation letter for Medicare's Limited Income NET Program, follow the "Four steps for Pharmacy Providers" shown at right.

Four steps for pharmacy providers

1. Request plan ID card

If the patient has a Medicare Part D plan ID card or a Medicare Part D plan letter with 4Rx data, submit claims to the Part D payer. *If not, go to step 2.*

2. Submit an E1 transaction

Submit a query to Medicare's online eligibility query system.

- If the E1 query returns BIN/PCN, submit the claim to that Medicare Part D plan.
- If the E1 query returns a Contract ID and help desk numbers, contact that Medicare Part D plan for the 4Rx data.
- If the E1 query returns a telephone number for Contract ID "X0001," the patient is enrolled in Medicare's Limited Income Net Program. Use the 4Rx data located in this brochure's Quick Reference Guide. *If the query does not return plan enrollment, go to step 3.*

3. Verify eligibility for Medicare and either Medicaid or Low-Income Subsidy (LIS)

If the patient cannot provide proof of eligibility, don't submit the claim. Refer the patient to his or her State Health Insurance Assistance Program (SHIP). *If the patient is eligible for Medicare's Limited Income NET Program, go to step 4.*

4. Submit claim

Enter claim using the 4Rx data found in this brochure's Quick Reference Guide. For more information, see the program payer sheet: www.humana.com/linet.

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:
