



Medicare & Medicaid:

How to help beneficiaries enrolled in both programs

Agenda

- What's new? (5 minutes)
- Sharing time (15 minutes)
- June training (120 minutes)
- Wrap-up (30 minutes)

Things to remember:

- We'll be conducting continuing education via Zoom until further notice.
- *In-person counseling*: Work with your VC & sponsor to decide when it's safe to meet with clients face-to-face.

Learning objectives

1. Explain how Medicare and Medicaid work together in WA state.
2. Define “dual-eligible,” MSP (QMB, SLMB, QI-1), “Spenddown,” “WA Apple Health” & “Classic Medicaid.”
3. Demonstrate how to screen and help clients apply for LIS/MSP and how to record MIPPA topics in STARS.
4. Understand how to make referrals to the appropriate agency for out-of-scope Medicaid questions or issues.
5. Adhere to the SHIBA volunteer scope of duties when counseling on Medicaid.

What's new?

SHIBA RFP process – update

- Taking care of our volunteers in priority #1
- We notified the 'apparent successful contractors' of the results
- Next step: contract negotiations, based on work plan outlines
- Due date: not later than June 30th
- We appreciate your support to create great plans

Annual SHIBA volunteer satisfaction survey

- As we continue to work to improve the SHIBA program, we look to you for your feedback.
- Survey questions include asking how long you've volunteered for SHIBA and what specific topics can we address during training to help better prepare you for your work.
- **Please give us your feedback through this survey:**
<https://www.surveymonkey.com/r/SHIBAvolunteering>

Vaccines.gov makes it easier to find vaccines

Access to a vaccine should not be an obstacle for someone to get vaccinated. Here are three vaccine tools to bring to your communities right now:

1. Visit vaccines.gov (English) or vacunas.gov (Spanish) to search and find a vaccine near you.
2. Text **GETVAX (438829)** for English or **VACUNA (822862)** for Spanish to receive three vaccine sites on your phone within seconds.
3. Call the National COVID-19 Vaccination Assistance Hotline at **1-800-232-0233** for those who prefer to get information via a phone call.

What would you like to share? (15 minutes)

- VC shares any updates
- Volunteers – welcome to share anything!



Medicare & Medicaid:

How to assist beneficiaries enrolled in both programs

How are Medicare and Medicaid different?

Medicare	Medicaid
Federal program that is the same across the country	Statewide programs that are different between states
Administered by the federal government	Administered by state governments within federal rules (federal/state partnership)
Health insurance for people age 65 or over, with certain disabilities, or diagnosed with End-Stage Renal Disease (ESRD)	Health coverage for people who meet financial and non-financial requirements
Nation's primary payer of inpatient hospital services for the elderly and people with ESRD	Nation's primary public payer of mental health and long-term care services ; covers 40% of all births/prenatal and postpartum

Medicare and Medicaid in WA state



Washington Apple Health is an umbrella term or “brand name” for **all Washington state medical assistance programs, including Medicaid.**

Washington State
Health Care Authority

Health Care Authority (**HCA**) administers most Washington **Apple Health programs.**



Washington State
Department of Social
& Health Services

The Department of Social and Health Services (**DSHS**) administers the **Classic Medicaid programs.**

What's MAGI Medicaid (N05)?

Modified Adjusted Gross Income (MAGI) Programs

- ✓ Administered by the Health Care Authority (HCA)
- ✓ Coverage for adults with countable income at or below 133% of the FPL who are ages 19 up to 65, who are not incarcerated, and who are not entitled to Medicare
- ✓ Eligibility ends when Medicare begins (regardless of age)

People with Medicare & Medicaid

In WA, there are over **1.3 million people** on Medicare due to **age (65+)** or due to **disability**.

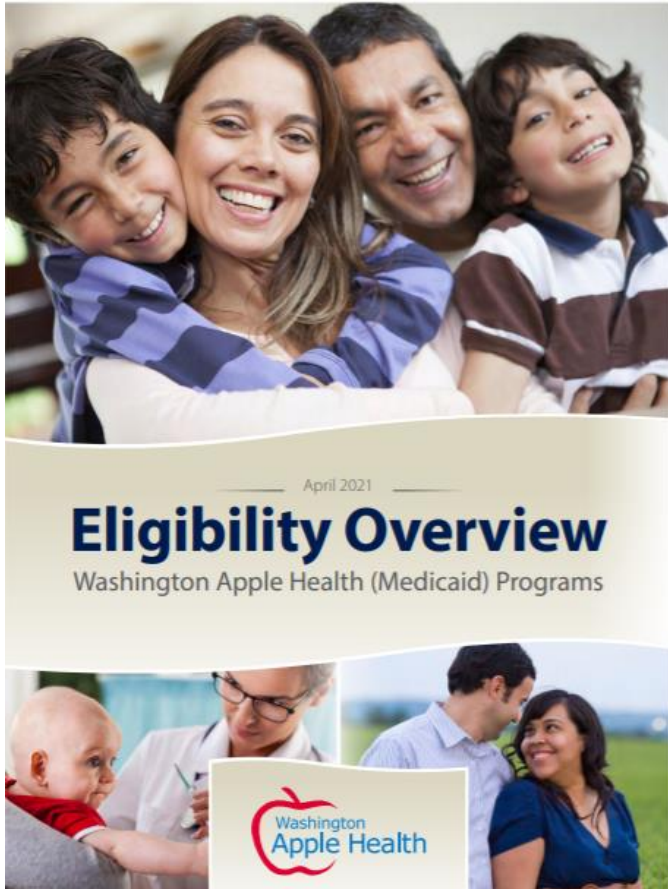


Some of these Medicare beneficiaries qualify for one (or more) Classic Medicaid programs due to limited income and resources or functional impairment with a need for long term supports and services.

"Classic Medicaid"

- ✓ The term used to describe the **Medicaid health care programs administered by DSHS** (Department of Social and Health Services)
- ✓ People on Medicare **may qualify** for these programs:
 - SSI-Related Medicaid (CN)
 - Spenddown/Medically Needy (MN)
 - Medicare Savings Programs (MSPs)
 - Long-term services and supports
- ✓ **Most** of these programs have both **income and resource limits**

Eligibility Overview – Medicaid programs

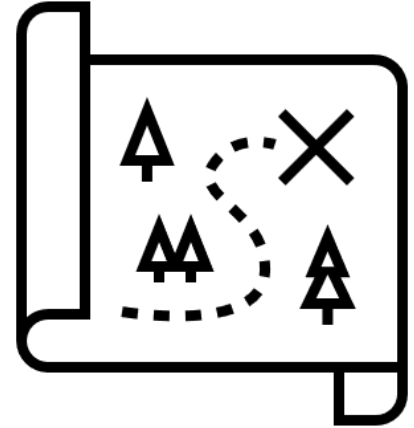


- ✓ This guide gives an **overview of eligibility requirements for Washington Apple Health**. It doesn't include every requirement or consider every situation that might arise.
- ✓ There are **many different Medicaid programs** with many **different eligibility requirements**.
- ✓ We will focus on **Classic Medicaid programs for which people with Medicare may be eligible**.

Resource: [2021 Eligibility Overview – WA Apple Health \(Medicaid\) Programs](#)

Are you ready for a Medicare adventure?

In today's training, you will meet 3 people who need your help as they navigate transitioning from **WA Apple Health to Medicare and other Classic Medicaid programs.**



- *Imagine these people live in your community*
- *Consider the resources available to them and the barriers they may face*



There will be ***twists in the path*** and ***potential danger*** along the way.

Are you ready for a Medicare adventure?



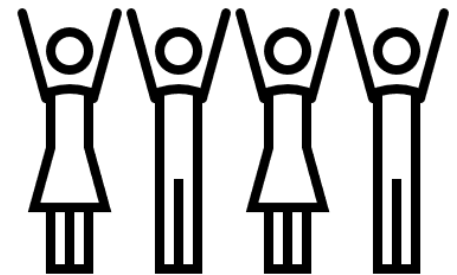
You will need to use your **knowledge** and available **tools** to **guide and protect** your clients.



If you harness the **power of working together** with your fellow **SHIBA volunteers**,



you will successfully complete this **adventure!**



Case study #1

Meet Oscar & Beatriz



Additional information:

- They are both U.S. citizens.
- Currently, they live with their daughter.

Oscar (64) & Beatriz (63) moved to the USA 10 years ago. Oscar worked for 8 years in the hospitality industry but lost his job in April 2020; Beatriz never worked in the USA. Oscar is hoping to go back to work soon. They both have health insurance through WA Apple Health (MAGI Medicaid).

Oscar turns 65 in July; last week, he received a letter saying that he needs to sign up for Medicare. He also has another letter saying that his current coverage won't end until the pandemic is over. They both are confused and concerned about losing their health insurance.

How would you help Beatriz?



About Beatriz:

- ✓ She is 63
- ✓ Never worked in the USA
- ✓ Currently has MAGI Medicaid

Using your knowledge and available tools, **select the best answer** to the following questions:



- *How would you help her?*
- *Where would you refer her?*



- A. Tell her that SHIBA can't help with her questions and refer her to DSHS.
- B. Say that she's not eligible for Medicare yet, but that she should call SHIBA before she turns 65 and for now, refer her to a local HCA navigator.
- C. Try to help her compare MAGI Medicaid plans to find the best option.

How would you help Oscar?



About Oscar:

- ✓ He turns 65 in July
- ✓ Worked for 8 years in the USA
- ✓ Currently has MAGI Medicaid
- ✓ USA citizenship

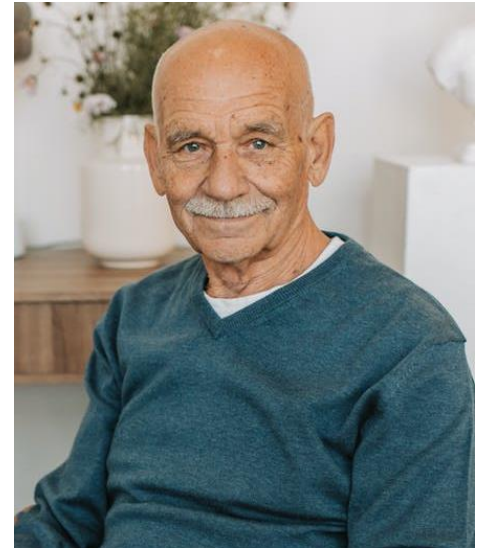
As a **group**, answer the following questions:

- *Does Oscar qualify for Medicare?*
- *Must he sign up for Medicare?*
- *If he chooses Medicare, when should he sign up?*



If Oscar chooses Medicare, how much will it cost?

- Part A premium?
- Part B premium?
- Part D or MA plan premiums?
- Medigap?



Before **overwhelming** Oscar with the costs of Medicare, you decide it's time to **screen his eligibility for Medicaid programs**.

You can't remember each Classic Medicaid program, so you pull out your **Rainbow chart** for help.

SHIBA job aid: Rainbow chart

Program Income Limit Program Resource Limit	Household Size See Notes about who is counted					
	1	2	3		4	
SSI-Related Medicaid Income Limit (AKA Categorically Needy/CN Medicaid S01, S02)	\$814	\$1,211	Check with DSHS/HCA		Check with DSHS/HCA	
<i>SSI Resource Limit</i>	<i>\$2,000</i>	<i>\$3,000</i>	<i>Check with DSHS/HCA</i>		<i>Check with DSHS/HCA</i>	
MN – Medically Needy / Spenddown Income basis (S95, S99)	> \$814	> \$814	> \$814		> \$814	
<i>MN Resource Limit</i>	<i>\$2,000</i>	<i>\$3,000</i>	<i>\$3,050</i>		<i>\$3,100</i>	
MSP- QMB Income Limit 100% FPL (Federal Poverty Level) (S03)	\$1,093	\$1,472	\$1,850		\$2,228	
<i>MSP- QMB Resource Limit</i>	<i>\$7,970</i>	<i>\$11,960</i>	<i>\$7,970*</i>	<i>\$11,960*</i>	<i>\$7,970*</i>	<i>\$11,960*</i>
MSP- SLMB Income Limit 120% FPL (S05)	\$1,308	\$1,762	\$2,216		\$2,670	
MSP- QI-1 Income Limit 135% FPL (S06)	\$1,469	\$1,980	\$2,491		\$3,001	
<i>MSP- SLMB and QI-1 Resource Limit</i>	<i>\$7,970</i>	<i>\$11,960</i>	<i>\$7,970*</i>	<i>\$11,960*</i>	<i>\$7,970*</i>	<i>\$11,960*</i>
Full Extra Help Income Limit 135% FPL	\$1,469	\$1,980	\$2,491		\$3,001	
<i>Full Extra Help Resource Limit</i>	<i>\$9,470</i>	<i>\$14,960</i>	<i>\$9,470*</i>	<i>\$14,960*</i>	<i>\$9,470*</i>	<i>\$14,960*</i>
Partial Extra Help Income Limit 150% FPL	\$1,630	\$2,198	\$2,765		\$3,333	
<i>Partial Extra Help Resource Limit</i>	<i>\$14,790</i>	<i>\$29,520</i>	<i>\$14,790*</i>	<i>\$29,520*</i>	<i>\$14,790*</i>	<i>\$29,520*</i>

SHIBA job aid: [Rainbow chart](#)

SSI-related Medicaid (CN) – eligibility

Program Income Limit <i>Program Resource Limit</i>	Household Size See Notes about who is counted			
	1	2	3	4
SSI-Related Medicaid Income Limit (AKA Categorically Needy/CN Medicaid S01, S02)	\$814	\$1,211	Check with DSHS/HCA	Check with DSHS/HCA
SSI Resource Limit	\$2,000	\$3,000	Check with DSHS/HCA	Check with DSHS/HCA

CN – Categorically Needy (“Full Dual Eligible”)

Applicant must be:

- 65 or over (aged) OR
- Meet SSA definition of blind OR
- Meet SSA definition of disabled AND Income and resources are the same or lower than the standards for SSI-Related Medicaid

SSI-related Medicaid (CN) – benefits

Categorically Needy (CN) or “Full Dual Eligible”

Medicare pays first and Medicaid is second payer, or the payer of last resort if there's another insurance (i.e. an employer or retiree health plan).

Medicaid would cover some things that Medicare does not cover (i.e.): dental benefits, transportation to medical appointments, limited OTC drugs

If joins a MA-PD plan, will **not** have co-pays or deductibles for anything Original Medicare Part A or B would cover

Medicare Part A or B co-payments or deductibles covered, as long as **providers accept both Medicare and Medicaid**

Part D premiums covered by Extra Help/LIS; **may have small Part D copays**

Automatically (“deemed”) eligible for Extra Help/LIS

Who are “Dual Eligibles?”

- Duals have **both Medicare and Medicaid (CN, MN, or MSP)**.
- Once on Medicare, claims are processed **FIRST** by Medicare A or B or their MA plan (Part C).
- Once on Medicare, **outpatient prescriptions are not covered by Medicaid**, but by Part D or MA-PD.
- A few drugs that Medicare cannot pay for **may be paid by Medicaid** [for example, some over the counter (OTC) drugs]



Resource: [Dually Eligible Beneficiaries under Medicare and Medicaid](#)

Medically Needy (MN)/Spenddown – eligibility

Program Income Limit <i>Program Resource Limit</i>	Household Size See Notes about who is counted			
	1	2	3	4
MN – Medically Needy / Spenddown Income basis (S95, S99)	> \$814	> \$814	> \$814	> \$814
MN Resource Limit	\$2,000	\$3,000	\$3,050	\$3,100

The Medically Needy (MN) program covers slightly less than the Categorically Needy program.

Applicants must be:

- 65 or over (aged) OR
- Meet SSA definition of blind OR
- Meet SSA definition of disabled AND income and resources are the same or lower than the standards for SSI-related Medicaid

Medically Needy (MN) – benefits

For a Medicare beneficiary, Medically Needy (MN) coverage begins when **they meet their Spenddown and then ONLY for the remainder of the base period.**

Medically Needy (MN)

- Medicare pays first and Medicaid pays second AFTER meeting the spenddown
- Coverage is nearly the same as for CN (Full-Dual Eligible)
- Will be automatically (“deemed”) eligible for Extra Help
- May have small Part D co-pays

MSP (Medicare Savings Programs) – eligibility

Program Income Limit Program Resource Limit	Household Size See Notes about who is counted					
	1	2	3		4	
MSP- QMB Income Limit 100% FPL (Federal Poverty Level) (S03)	\$1,093	\$1,472	\$1,850		\$2,228	
<i>MSP- QMB Resource Limit</i>	\$7,970	\$11,960	\$7,970*	\$11,960*	\$7,970*	\$11,960*
MSP- SLMB Income Limit 120% FPL (S05)	\$1,308	\$1,762	\$2,216		\$2,670	
MSP- QI-1 Income Limit 135% FPL (S06)	\$1,469	\$1,980	\$2,491		\$3,001	
<i>MSP- SLMB and QI-1 Resource Limit</i>	\$7,970	\$11,960	\$7,970*	\$11,960*	\$7,970*	\$11,960*

Applicant must:

- Have Medicare due to age or disability
- Meet income and resource limits

Qualified Medicare Beneficiary (QMB) - benefits

QMB pays for **Part A and/or Part B premium**; providers aren't allowed to bill client for deductibles, coinsurance and copayments when client gets services and supplies except outpatient prescriptions.

Client needs to show Medicare or Medicare Advantage and Provider One Services Card to all providers and suppliers

The client's **providers must be contracted with both Medicare and Medicaid**

Benefits covered: (Works much like a Medigap Plan F)

- Hospital deductibles
- SNF copays or co-insurance: days 21-100 (\$170.50 daily)
- Part A monthly premium (up to \$437)
- Part B annual deductible (\$185)
- Part B or C coinsurance or co-pays

Enrollment starts first of the month following the month eligibility is documented

SLMB and QI-1 – benefits

Program Income Limit Program Resource Limit	Household Size See Notes about who is counted					
	1	2	3		4	
MSP- SLMB Income Limit 120% FPL (S05)	\$1,308	\$1,762	\$2,216		\$2,670	
MSP- QI-1 Income Limit 135% FPL (S06)	\$1,469	\$1,980	\$2,491		\$3,001	
MSP- SLMB and QI-1 Resource Limit	\$7,970	\$11,960	\$7,970*	\$11,960*	\$7,970*	\$11,960*

- Both SLMB & QI-1 pay **Part B premiums only**
- Main difference is person must apply each year for QI benefits as applications are granted on first-come, first-served basis

Is Oscar eligible for a Medicaid program?



Use the **Rainbow chart** to **select the best answer** to the following question:



- *Oscar may be eligible for which Medicaid program?*



- A. He may be eligible for **MSP SLMB**, which will cover both Part A & B premiums.
- B. He may be eligible for **MSP QI-1**, but he will have to pay Part A premiums.
- C. He may be eligible for **MSP QMB**, which will cover both Part A & B premiums.
- D. He is **not eligible for any Medicaid program** because he doesn't have premium-free Part A.

- ✓ Beatriz and Oscar's combined monthly income is \$1,350
- ✓ They have about \$10,000 in savings
- ✓ They have 1 car

Important update: Medicaid & PHE

- Due to the PHE (Public Health Emergency), people with MAGI Medicaid were “frozen” and kept in the same plan even after they enrolled into Medicare.
- **Please disregard all previous job aids and information on this topic.**
- **Now, all Medicare enrollees who had MAGI Medicaid prior to enrolling into Medicare are enrolled in Classic Medicaid medical (FFS = fee-for-service) instead of a MAGI Medicaid managed care plan.**
- This allows for **Medicare to coordinate benefits with Medicaid.**

Important update: Medicaid & PHE

- DSHS **should** enroll clients into a **MSP** and people should be automatically “**deemed**” eligible for **Extra Help/LIS**.
- **When the PHE ends, people may lose Classic Medicaid medical if their income or resource limits are too high.**
- If a person’s income or resources may be **too high to keep Classic Medicaid (FFS) after the PHE**, they may want to utilize their **6-month Medigap guaranteed issue**; people will need to call DSHS to cancel Classic Medicaid (FFS) to enroll into a Medigap.
- Volunteers can use the SHIBA job aid: [Calling the Health Care Authority Medicaid Phone System](#) to help clients verify **MSP** status.

Does Oscar have any other options?



As a **group**, answer the following questions:



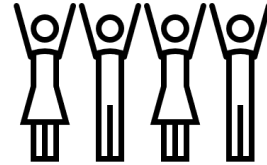
- ✓ Oscar received a letter saying that his current coverage won't end until the pandemic is over.
- *If he chooses not to enroll in Medicare, what other options does he have?*
- *What does Oscar's letter mean?*
- *After the PHE ends, will his benefits change?*

Case study # 1 – closed



- ✓ Oscar may call you again when the pandemic ends for help with Medicare.

You've successfully completed this counseling session!



As a **group**, answer the following questions:

- *Would you refer Oscar to another agency or resource?*
- *How would you follow-up with Oscar after your counseling session ends?*



Let's take a 5-minute break



Case study #2

Meet Jan



Additional information:

- Jan is single (never married)
- She owns one house
- She takes one expensive brand-name medication: Aubagio

Jan (42) worked as a software developer until she developed an autoimmune disorder, which prevents her from working. She receives \$1,430 per month from SSDI (Social Security Disability Insurance) and has a WA Apple Health plan (MAGI Medicaid).

Last week, she received mail from SSA welcoming her to Medicare and a new Medicare card. She's compared prices between her WA Apple Health plan and Medicare and is concerned she won't be able to afford Medicare. Also, she's read that the pandemic prevents people from losing their current health coverage. She'd like to keep WA Apple Health and wants to know how she can appeal to keep it.

How would you help Jan?



About Jan:

- ✓ Her Medicare starts July 1, 2021
- ✓ She's received SSDI payments since June 2019

As a **group**, answer the following questions:

- *Does Jan have to accept Medicare?*
- *Can she appeal to keep WA Apple Health (MAGI Medicaid)?*



How much will Medicare cost for Jan?

- Part A premium?
- Part B premium?
- Part D or MA plan premiums?
- Medigap?



Before **overwhelming** Jan with the costs of Medicare, you decide it's time to **screen her eligibility for Medicaid programs**.

You can't remember each Classic Medicaid program, so you pull out your **Rainbow chart** for help.

Is Jan eligible for a Medicaid program?



- ✓ Jan's monthly income is \$1,430
- ✓ She has \$1,500 in savings
- ✓ She doesn't have a car

Use the **Rainbow chart** to **select the best answer** to the following question:



- Jan may be eligible for which Medicaid program?



- A. She may be eligible for **MSP SLMB**, which will pay her Part B premium.
- B. She is **not eligible for any Classic Medicaid program** because she is under the age of 65.
- C. She may be eligible for **MSP QMB**, which will pay her Part B premium and coinsurance/deductibles.
- D. She may be eligible **MSP QI-1** and **Spenddown**.

How to counsel clients receiving SSDI

SSDI Social Security Disability Insurance

Parts A & B

- Counsel as you would for any other Medicare enrollee
- **Screen for Medicare Savings Programs** and help clients to fill out and submit applications or refer clients to www.washingtonconnections.org
- **May not have access to Medicare Supplement (Medigap)** insurance since they are under age 65
- Will be eligible for guaranteed issue of a Medigap plan when they turn age 65 (first 6 months of being 65 and enrolled in Part B)

Part D/Medicare Advantage plans

- **Screen for Extra Help/LIS** and assist clients to submit applications or refer clients to www.ssa.gov/benefits/medicare/prescriptionhelp
- **Use your Unique ID to call CMS to confirm client's LIS status**
- Run the Medicare Plan Finder to help them choose the best plan (MA-PD or PDP)

SHIBA Job Aid: [Disability Basics](#)

What's a "Spenddown?"

- **Spenddown is the amount of the person's income minus the income limit for the MN (Medically Needy) program.**
- A person is given a **base period (typically 3 or 6 months)** to spend down "excess income". In other words, to **incur medical expenses equal to his/her Spenddown amount.**
- The person receives **CN healthcare coverage for the rest of the base period** once the Spenddown amount is reached.

Spenddown – things you need to know

What is a “base period?”

- A “base period” is the time period used to calculate your Spenddown amount.
- The base period usually begins the first day of the month in which you apply for MN benefits.
- You can choose a base period of either **three or six months**.
- **DSHS will calculate your Spenddown amount** by multiplying the number of months in your base period by the amount of your monthly excess income.

Spenddown – things you need to know

“How do I choose between a 3-month and a 6-month base period?”

- First, figure out what your Spenddown amount would be for both a 3-month base period and a 6-month base period. (Remember: base periods ordinarily begin on the first day of the month of application.)
- Next, estimate what your medical expenses are likely to be for the next three to six months. In general, it is more convenient to have a longer base period, but sometimes a shorter period will result in more coverage.
- **The DSHS staff should help you decide which base period is best for you.**

Spenddown calculation example

Jan is single and receives \$1,430 per month in SSDI payments. She has no earned income. She has less than \$2,000 in resources.

\$1,430: Jan's monthly income

-\$20: minus unearned standard income deduction

\$1,410: Jan's **countable income** or "**net income**"

-\$794: minus the 2021 MN income limit for one person

\$616: Jan's "**excess income**" per month

*To meet her Spenddown (and for MN coverage to start),
how much must Jan pay for a
3-month base period or 6-month base period?*

Spenddown – things you need to know

“What expenses count toward my Spenddown amount?”

Some examples of medical bills that can be used to meet your spenddown amount are:

- Dental bills
- Doctor's bills
- Prescription drugs
- Hospital bills (Inpatient and Outpatient)
- Nursing home costs
- Nursing services
- Organ transplant bills
- Prosthetic devices (Artificial teeth, limbs, hearing aid, eyeglasses and crutches)
- Laboratory fees
- Home health care
- Rehabilitative services
- Physical Therapy
- Medical supplies and equipment
- Over-the-counter Medications when prescribed by Physician
- Medicare premium, deductibles, or co-insurance charges
- Health insurance premium, deductibles, or co-insurance charges

Spenddown – references

If your client has questions about Spenddown, you can give them these documents:

The Medically Needy “Spenddown” Program

https://www.washingtonlawhelp.org/files/C9D2EA3F-0350-D9AF-ACAE-BF37E9BC9FFA/attachments/02497EC9-48E2-43C4-A1A7-74412B897F52/5104en_medically-needy-spenddown-program.pdf

What is Medicaid Spenddown and how is it figured?

<https://www.insurance.wa.gov/sites/default/files/2019-01/whats-a-medicaid-spenddown.pdf>

What about MAGI Medicaid?



- ✓ Jan takes an expensive medication: Aubagio
- ✓ She is 42 years old

As a **group**, answer the following questions:

- *Should Jan try to delay enrollment into Medicare?*
- *How does the PHE affect her coverage?*
- *How can she choose a plan that contracts with all her specialists?*
- *What about a Medigap?*
- *Is she eligible for Extra Help/LIS or LINET?*



Helping clients enroll into LIS & MSP

If you **screen** a client for **Extra Help/LIS** and they may be eligible, help them **apply** on www.ssa.gov.

- This job aid will show you how to apply for Extra Help/LIS: [Extra Help/LIS Application Guide](#)

If you **screen** a client for **MSP** and they may be eligible, help them **apply** on www.waconnection.org.

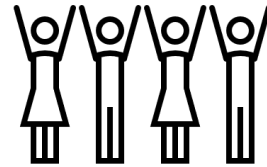
- This job aid will show you have to apply for MSP: [Medicare Savings Program \(MSP\) Application Guide](#)

Case study # 2 – closed



- ✓ Jan may call you again for help with Medicare during Open Enrollment.

You've successfully completed this counseling session!



As a **group**, answer the following questions:

- *Would you refer Jan to another agency or resource?*
- *How would you follow-up with Jan after your counseling session ends?*



How to record MIPPA topics in STARS

What's MIPPA?

- Medicare Improvements for Patients and Providers Act of 2008 (**MIPPA**)
- MIPPA provides funding to **increase awareness of Extra Help/LIS and MSP** to help Medicare beneficiaries reduce their out-of-pocket costs associated with Medicare.
- SHIBA/OIC receives MIPPA funding to support outreach activities to Medicare beneficiaries who have limited income and assets.
- SHIBA volunteers help increase community awareness of MIPPA through screening for LIS/MSP and community outreach (i.e., presentations, dropping off LIS/MSP brochures, etc.).

Let's watch this training video



SHIBA training video: [How to record MIPPA topics in STARS](#)

Screening for LIS and MSP

- When you **screen** a client for Extra Help/LIS and MSP (Medicare Savings Programs), please record that interaction in STARS
- Select **"Yes"** for **"MIPPA"** field (see below) **even if the client is not eligible for LIS or MSP**

MIPPA	<input checked="" type="radio"/> Yes <input type="radio"/> No 
Send to SMP	<input type="radio"/> Yes <input checked="" type="radio"/> No
SIRS eFile ID	

- Next, scroll down to **"Topics Discussed"** and select **"Eligibility/Screening"** under **"Part D (LIS/Extra Help)"** and **"Medicaid"**

Part D Low Income Subsidy (LIS/Extra Help)	Medicaid
Eligibility/Screening	Eligibility/Screening

Applying for LIS and MSP

- If you help a client **apply** for Extra Help/LIS and MSP (Medicare Savings Programs), please record that interaction in STARS.
- Select **"Yes"** for **"MIPPA"** field (see below)

MIPPA	<input checked="" type="radio"/> Yes <input type="radio"/> No R 
Send to SMP	<input type="radio"/> Yes <input checked="" type="radio"/> No
SIRS eFile ID	<input type="text"/>

- Next, scroll down to **"Topics Discussed"**
- If you help a client **apply for LIS**, select **"Application Submission"** under **"Part D (LIS/Extra Help)"**
- If you help a client **apply for MSP**, select **"Application Submission"** under **"Medicaid"**

Part D Low Income Subsidy (LIS/Extra Help)	Medicaid
Application Submission	Application Submission

Medicaid – volunteer scope

As a SHIBA volunteer, you **can help** people:

- Explain how **Medicare works with Medicaid**
- **Screen and apply** for LIS, MSP & other Medicaid programs
- Review Medicaid programs and eligibility requirements by using the Rainbow chart
- Use Medicare Unique ID to verify client's LIS/MSP status
- **Refer** clients to the appropriate agency (DSHS, HCA, etc.) for **out-of-scope Medicaid questions** (i.e. replacing Provider One card, Medicaid billing complaint, finding a provider, etc.)
- For other people on Spenddown, refer them to the DSHS Spenddown Unit (1-877-501-2233)

Medicaid – volunteer scope

As a SHIBA volunteer, you **should not** :

- Tell a client they are “for sure” eligible for a Medicaid program
- Answer questions about benefits for Medicaid programs
- Determine if a client has met their Spenddown/answer personal questions about a client’s Spenddown
- Explain what additional Medicaid benefits (i.e. dental, transportation, LTSS, etc.) a client may have; each person is eligible for different benefits

Group activity (5-10 minutes)

How do you incorporate LIS/MSP awareness into your counseling or outreach? Any ideas for increasing community awareness of MIPPA?

Ice-breaker questions:

- *Do you have webinars or one-on-one sessions about MIPPA (i.e. LIS/MSP)?*
- *Are there community partners who could cohost a MIPPA event?*
- *Any other ideas for educating people how SHIBA can assist with LIS/MSP enrollment?*



Wrap-up

Group review & share – learning objectives

1. Explain how Medicare and Medicaid work together in WA state
2. Define “dual-eligible,” MSP (QMB, SLMB, QI-1), “Spenddown,” “WA Apple Health” & “Classic Medicaid”
3. Demonstrate how to screen and help clients apply for LIS/MSP and how to record MIPPA topics in STARS
4. Understand how to make referrals to the appropriate agency for out-of-scope Medicaid questions or issues
5. Adhere to the SHIBA volunteer scope of duties

Please share
ONE item you
learned today
or
ONE way you
will use this
training in
counseling
clients or
outreach?

Additional resources on My SHIBA

- SHIBA job aid: [Calling the Health Care Authority Medicaid Phone System](https://www.insurance.wa.gov/SHIBA/JobAids/Calling-the-Health-Care-Authority-Medicaid-Phone-System) (www.insurance.wa.gov)
- SHIBA job aid: [Extra Help/LIS Application Guide](https://www.insurance.wa.gov/SHIBA/JobAids/Extra-Help-LIS-Application-Guide) (www.insurance.wa.gov)
- SHIBA job aid: [Medicare Savings Program \(MSP\) Application Guide](https://www.insurance.wa.gov/SHIBA/JobAids/Medicare-Savings-Program-MSP-Application-Guide) (www.insurance.wa.gov)
- SHIBA job aid: [Rainbow chart](https://www.insurance.wa.gov/SHIBA/JobAids/Rainbow-chart) (www.insurance.wa.gov)
- SHIBA job aid: [Using Your Medicare Unique ID](https://www.insurance.wa.gov/SHIBA/JobAids/Using-Your-Medicare-Unique-ID) (www.insurance.wa.gov)

Medicaid resources for clients

Publications

- | | | |
|---|--|---|
| <ul style="list-style-type: none">• Behavioral Health Treatment Guide for Individuals and Families (www.hca.wa.gov) | <ul style="list-style-type: none">• DSHS/HCA Cross Agency desk aid (www.dshs.wa.gov) | <ul style="list-style-type: none">• Eligibility Overview: WA Apple Health (Medicaid) Programs (www.hca.wa.gov) |
| <ul style="list-style-type: none">• Get Help Paying for Medicare brochure (www.insurance.wa.gov) | <ul style="list-style-type: none">• Get Help paying for Medicare – Information for American Indians and Alaskan Natives flyer (www.insurance.wa.gov) | <ul style="list-style-type: none">• Medicare Savings Program paper application in English & 15 other languages (www.hca.wa.gov) |
| <ul style="list-style-type: none">• The Medically Needy “Spenddown” Program (www.washingtonlawhelp.org) | <ul style="list-style-type: none">• WA Apple Health Adult Dental Coverage in English & 15 other languages (www.hca.wa.gov) | <ul style="list-style-type: none">• Washington Apple Health (Medicaid) and Long-Term Services and Supports (LTSS) for Adults (www.dshs.wa.gov) |

2021 continuing education topics

Month	Topic (subject to change as needed)	Medicare & You
January	A look at what's new for 2021 and a broad overview of M&Y 2021.	All sections
February	Medicare rights, protections and appeals.	Section 8
March	Medicare and other insurances.	Section 1
April	Volunteer recognition! Special topic: Volunteers!	N/A
May	SMP (Senior Medicare Patrol)	N/A
June	Medicare and Medicaid	Section 7
July	Medigap plans (Medicare supplements)	Section 5

Evaluation

- ☐ *Did you find today's training helpful or useful for your SHIBA counseling or outreach?*
- ☐ *What would have made this training better for you?*

Please send your thoughts or suggestions to:

SarahC@oic.wa.gov

or

Fill out this anonymous survey:

<https://www.surveymonkey.com/r/P33NQVD>

