



Welcome to the Medicare Adventure: Tips, Pointers & Dates for Clients and their Caregivers

Prepared For:

Estate Planning Councils

October 21st and 28th, 2014

Who We Are

- Senior Community Services established in 1950
- Non-profit organization
- Our Mission: develop, coordinate and provide services to help meet needs of older adults and support their caregivers
- Our Vision: Mobilize the community to reimagine aging

What We Offer - Locally

- H.O.M.E – affordable home maintenance and chore services
- Senior Centers – senior education, wellness and recreational programs
- Senior Outreach & Caregiver Programs – licensed social workers provide professional care coordination

What We Offer - Statewide

- Medicare & Health Insurance Counseling – trained counselors guide seniors in choosing appropriate coverage
- Seniors Partner Care Program – provides help with medical bills for qualified Medicare beneficiaries
- CareNextion – innovative, web-based communication tool for caregivers

Parts of Medicare

- Medicare Part A – Inpatient Hospital, Skilled Nursing (Rehab), Hospice and Home Health Care
- Medicare Part B – Professional, office visits, ambulance, durable medical equipment, etc.
- Medicare Part C – legislation
- Medicare Part D – Take Home Drugs

Medicare Part A

- Inpatient Hospital stay – “3 Days” for “Qualified Hospital Stay”
 - Days 1 – 60 \$1,260/confinement
 - Days 61 – 90 \$315/day
 - Days 91 – 150 \$630/day

- Skilled Nursing (rehab)
 - Must follow a “Qualified Hospital Stay”
 - Days 1 – 20 \$0
 - Days 21 – 100 \$157.50/day

Medicare Part A (Continued)

- Hospice
 - Less than 6 months
 - Determined by doctor
 - Hospice Plan

- Home Health Care
 - Therapies provided in home if home bound

Medicare Part A (Continued)

Beneficiary & Family Care Quality Improvement Organization (QIO)

- Reviews hospital bills
- Observation vs. inpatient status
- Early discharge & quality hospital reviews
- 1-855-408-8557, <http://www.keproqio.com>

Medicare Part B

- 2015 Premium \$104.90
- Annual Deductible \$147
- Professionals
- Office visits
- Ambulance
- Most services 80% benefit
- Durable Medical Equipment, etc.

Medigap/Supplement Plans

- Medicare A & B first payer
- Must have Medicare A & B
- Medigap and Supplement terms mean the same
- Does not include take home drugs
- Underwriting may apply
 - Basic with Riders Plans
 - Extended Basic Plans
 - High Deductible Plans
 - Select Plans

Cost Plans

- Only available only in MN
- Very popular
- Second payer for Medicare Part A services
- First payer for Medicare Part B services
- Then plan asks for reimbursement from Medicare for Part B services
- May or may not include prescription coverage

Medicare Part D

- Take Home Prescriptions
- Shingles vaccine
- Hospital Observation medications
- Voluntary
- Can purchase Stand Alone or with a plan
- Annual Election (Open Enrollment)
 - Oct. 15 – Dec. 7, 2014 - - Effective Jan. 2015
 - Check medications EVERY YEAR

Medicare Part D (Continued)

- 2015 Numbers

– Annual Deductible	\$320
– \$320.01 - \$2,960.00	75%/25%
– \$2,960.00 - \$6,680.00	(donut hole) 100%*
– \$6,680.00 +	\$6.60 brand/\$2.65 gen

- Check for: on formulary, tier and quantities
- Watch for: Step therapy and prior authorization

Medicare Advantage Plans

- Medicare Advantage Plans
- Insurance carrier becomes the payer of claims
- If the plans include RX coverage, **you must take their drug coverage**
- Annual Election Period (Medicare Open Enrollment) Oct 15. – Dec. 7, 2014 (effective January 2015)

Medicare Advantage Plans (Continued)

- Types of Plans:
 - HMO/POS
 - PPO
 - PFFS
 - Special Needs

Caregiving

- Helping a loved one with:
 - Driving
 - Grocery shopping
 - Medications
 - Cleaning house
 - Mowing lawn or removing snow
 - Going to medical appointments
 - Writing out checks

Caregiving (Continued)

- Then you are a caregiver!!
- Congratulations!



Caregiver Tools

- Eldercare Partners
 - Available in the 7 county Metro
 - Licensed Social Workers work with caregivers
 - Fees on a sliding fee scale
 - Mediate Family Meetings
 - 612-770-7005
- Carenextion

Caregiver Tools (Continued)

CareNextion is a web-based tool that helps caregivers organize, communicate and find assistance for their loved ones.

CareNextion continued

- Reduces caregiver stress by sharing responsibilities as part of a team
- Stay organized through a shared calendar and journal
- More efficiency
- Access to resources
- [CareNextion.org](https://www.CareNextion.org)



For More Information:

- Kimberlee Bluhm, Director of Medicare Programs – 952-767-7887 or k.bluhm@seniorcommunity.org
- Senior Community Services: www.seniorcommunity.org
- Carenextion: www.carenexion.org or 612-770-7005

QUESTIONS

Medicare Reference Grid 2015

	Eligibility	Enrollment	Premiums	Penalties
Medicare Part A Hospitalization Coverage	<ul style="list-style-type: none"> • Age 65 • 25th month of SSA disability • 40 work credits 	<ul style="list-style-type: none"> • With SSA • First of the month following enrollment • If not receiving a monthly benefit check, client will need to contact SSA • Not always automatic • 7 month rule applies • No General Enrollment period even if paying for premium. 	<ul style="list-style-type: none"> • Free for most (40 credits) • If not having enough work credits, then will have to pay premium to have. • 30 – 39 work credits \$224/month • 0 – 29 work credits \$407/month 	<ul style="list-style-type: none"> • None if you have or spouse has at least 40 work credits. • If you have to pay premium and did not enroll at age 65, then penalty is 10% added to premium and is paid for 2 times the number of years coverage could have been taken. • Premium is paid for life..
Medicare Part B Medical Coverage	<ul style="list-style-type: none"> • Age 65 • 25th month of SSA disability 	<ul style="list-style-type: none"> • With SSA • When age 65 or coming onto 25th month of SSA disability • Also: Special, General, and Waiver • 7 month rule applies 	<ul style="list-style-type: none"> • \$104.90 for most • Based on prior year income. • (See grid for more information.) 	<ul style="list-style-type: none"> • If coverage is not waived because of other active group coverage, then enrollment is available Jan. 1st – March 31st to be effective July 1st. • 10% is added to the Part B premium and is paid for life.
Medicare Part C Legislative	NA	NA	NA	NA
Medicare Part D Prescription Drug Coverage	<ul style="list-style-type: none"> • Age 65 • 25th month of SSA disability 	<ul style="list-style-type: none"> • SSA only involved in the LIS/Extra Help enrollment and benefit • 7 month rule applies • Also: Open/Annual enrollments into private plans. • If waiting to enroll, “creditable coverage” is important. 	<ul style="list-style-type: none"> • Vary widely. • Depends on the level of benefits provided, insurance carrier and plan. 	<ul style="list-style-type: none"> • 1% per month that one did not take the coverage and did not have “creditable coverage”. • Part D started June 1, 2006. • Penalty is paid for life.

Important Dates for Medicare

Medicare A, B, and D's Effective dates:

Birthday Rule (7 Month Rule) for Newly Eligible Medicare Beneficiaries:

<p>Initial Enrollment Period – The 7 Month Rule - 3 months before, the month of, and 3 months after, your birth month in order to avoid a Premium Penalty.</p>	<p>Start of Coverage varies – start the process as early as possible so your coverage is effective no later than the 1st day of your birth month. See examples below.</p>
<p>If your 65th birthday is on the 1st of a month, then Medicare can start first of the PRIOR month. Example: If your birthday is on Oct. 1, coverage starts September 1. Examples: If your birthday is on any other day in October: Enroll July, August, or September – Coverage starts October 1 Enroll in Oct. – Coverage starts 1 month after enrollment (Nov. 1) Enroll in Nov. – Coverage starts 2 months after enrollment (Jan. 1) Enroll in Dec. – Coverage starts 3 months after enrollment (March 1) Enroll in Jan. – Coverage starts 3 months after enrollment (April 1)</p>	

Part A & B Special Other Time Enrollments:

<p>Waiver Period – The period after your Initial Enrollment Period when you do not need to enroll in Part A or Part B and can avoid the Part A and Part B Premium Penalties when you do enroll (subject to automatic enrollment in Parts A and B, or required enrollment in Part A under an Employer Plan).</p>	<p>Applies when you or your spouse has “active group coverage” meaning one of you is working and you are covered by an Employer (more than 20 employees) or Union Plan.</p>
<p>General Enrollment Period - Jan. 1 – March 31. Applies to both A & B.</p>	<p>Coverage Starts July 1. If you enroll at this time and it does not fall within your Initial Enrollment Period, you may incur the Premium Penalty.</p>

Part D and Medicare Advantage Plans with Part D Coverage Effective (Not turning 65) Dates:

Annual Election Period	Oct. 15 thru Dec. 7 – You can enroll in a Stand Alone Plan for the first time or change from one Stand Alone Plan to another. Coverage effective Jan.1.
Special Enrollment Period	<p>You are entitled to a Special Enrollment Period if you experience a “Qualifying Event.”</p> <ul style="list-style-type: none"> • There are many “Qualifying Events,” but some of the more common ones are: leaving your Employer or Union Group Plan; moving to a new address in your Plan’s area or one that isn’t in your Plan’s area; you return to the US after living overseas; you move into or out of a Skilled Nursing Facility. • Special Enrollment Periods generally last for 2 full months after the month of the “Qualifying Event.” If you don’t enroll by the end of the Special Enrollment Period, you will have to wait until the next Annual Enrollment Period to enroll. • Deciding that your current plan is too expensive is not a Qualifying Event. • Coverage effective on the 1st of the following month.
MAP Dis-Enrollment Period	<ul style="list-style-type: none"> • January 1st thru February 14th each year. • If you dis-enroll from your MAP that includes Prescription Drug Coverage, you can ONLY return to Original Medicare. Coverage is effective the 1st of the month after you dis-enroll. • You can also enroll in a Stand Alone Part D Plan no later than Feb. 14. Any Part D Premium Penalty you had will continue.

For those that receive a Monthly Social Security Benefit Check, Medicare will start on their 65th birthday or if they are disabled most of the time Medicare will start on the first of the 25th month of disability.

How to Use the Medicare.gov Website

Go to: www.Medicare.gov

Select: Find health and drug plans or Review your health and drug coverage options

Data Entry: Medicare Plan Finder will appear on the Screen. There is an online demo of the tool available on the right side of the screen.

For a personalized search (bottom part of screen) you need to enter zip code, Medicare number, last name, effective date of Part A, and date of birth. This information is on the Part D Information Sheet, or obtain the information from the client when you are with them. If you enter this correctly, when the results screen later appears, the client's current drug plan should be shown as the first drug plan. Note if you do not have all the basic information correct, you will get a "cannot be found" message and must use the general search. Click Find Plans to continue.

Step 1 of 4: Answer 2 questions – How do you get your Medicare coverage and do you get help to pay for your Medicare drugs. Click Continue to Plan Results.

Step 2 of 4: This is the drug entry screen or you can pull up a stored drug list with the saved drug ID number and password. **Note, as soon as you enter 1 drug a saved ID number and password is generated.** Write these down to save you time if you go back later for the same client.

With the drug entry feature as soon as you enter a drug, the dosage and frequency questions pop up, along with retail or mail order pharmacy. If a generic equivalent is available, a drop down box appears asking if the generic equivalent should be used. You can use equivalent for some, but not all, of the client's drugs. Click my drug list is complete to continue to next screen.

Step 3 of 4: Select Your Pharmacies

The program uses a radius of .5 miles as the standard for pulling up pharmacy names. Thus you may have to click a larger radius or change the zip code to the pharmacy's zip code to find the one you want. Click Add Pharmacy and then Continue to Plan Results.

Step 4 of 4: Refine Your Plan Results

Results are available in 3 categories – Prescription Drug Plans with Original Medicare (the Stand Alone Plans), Health Plans with Drug Coverage (the Medicare Cost and Advantage plans), and Health Plans without drug coverage (the Medicare Advantage plans that do not include drug coverage). Click the category box for the result type you want. In a unique situation, you may use the modifiers on the left if you want to limit results. Click Continue to Plan Results to get to the next screen.

Results: The screen shows the plan names and key points of all the plans that meet the criteria selected in Step 4. Display is 2015 data; you can switch to 2014 data if needed. Check the box for the top 3 plans (or current plan, plus lowest 2 plans) and click Compare Plans.

Compare: The comparison screen shows 5 tabs of results – an overview, the health plan benefits, the drug plan costs and coverages, star ratings, and MTM (Medication Therapy Management Program Information). Usually it is the third tab that is presented, but if not, click on the third tab to get the drug plan results. The overview numbers (first tab) contain estimated annual costs including Medicare out of pocket costs. These can be useful if trying to compare health plan costs.

Printing: With the drug plan comparison showing, use the print button at the left top of the screen to produce a Comparison Report. Review report for reasonableness of results. If any drugs are not covered by the formulary, you should note this in the cover letter.

If the client is in a Cost Plan, from the personalized plan comparison page, click on the line Medicare Health Plans with Drug Coverage. Go to the drug plans offered by the current carrier. Follow the same procedures as above to print a comparison report of the cost plan offerings.

Mail: Find the appropriate cover letter for the situation and update it for the client. Use a highlighter to mark the key results for the lowest cost plan – monthly premium, deductible, and annual cost. Make a copy of the cover letter and the comparison report to mail to the client. Write the client's name on all report pages, so they can be identified. The program does not print name or other identifier anywhere.

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Medicare.gov contains an interactive tool to help you determine which drug plan is best for you. To access this tool at www.medicare.gov, you must provide your Medicare ID number (from your wallet card) as well as the information requested on this form. We will not sell or share your personal information with anyone for marketing. Mail this form to us. We will run your personalized report and deliver it to you.

This form does not enroll you in any plan; it only provides your personalized results report.

I understand the above disclaimer. Please sign:

Client Full Name:

Medicare #:		Address:	
Phone Number:			County:
Birth Date:		Gender/Ethnicity:	

Medicare Part A Effective Date:		Name of Current Supplemental Medical Plan:	
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Name of Current Medicare Part D Plan:

Pharmacy Name and Address:

Prescription Information:

If you take a brand-name drug, can we substitute an available generic equivalent when running the reports? (Circle) Yes No

	Prescription Name	Frequency	Dosage
1.			
2.			
3.			
4.			
5.			

Use the back of the form if you need more space.



Senior Community Services

Celebrating 64 Years of Mobilizing the Community to Reimagine Aging
www.seniorcommunity.org

LOCAL SERVICES

STATEWIDE SERVICES

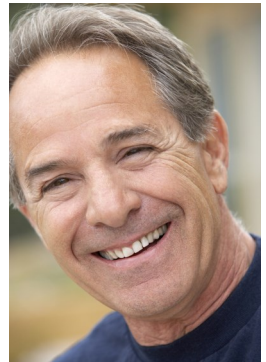
HOUSEHOLD AND OUTSIDE MAINTENANCE FOR ELDERLY

MEDICARE & HEALTH INSURANCE COUNSELING

HOME provides affordable homemaking, home maintenance and chore services that help seniors continue to live independently in their homes.



Medicare and Health Insurance Counselors guide seniors, disabled, and their caregivers in choosing appropriate coverage from Medicare, Medicare supplements, Part D plans and in resolving insurance claims.



952-746-4046

**952-767-7887
or toll-free
1-888-541-5488**

SENIOR CENTERS

Senior Centers provide a broad array of senior education, prevention safety, wellness and recreational programs.



763-295-2000

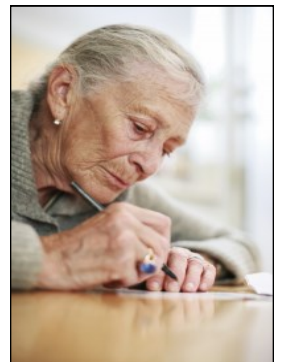
SENIOR PARTNERS CARE

SENIOR OUTREACH & CAREGIVER PROGRAMS

Licensed social workers provide professional care coordination and supportive counseling for frail elders to assist them to remain independent. Eldercare Partners offers a number of services for caregivers including support groups coaching and counseling.



SPC benefits those Medicare beneficiaries who cannot afford supplemental insurance and have difficulty paying their share of the medical expense after Medicare has made payment.



952-767-7888
Eldercare Partners
612-770-7005

**952-767-0665
or toll-free
1-888-541-5488**



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