Medicare Open Enrollment and Transitioning from the Health Connector to Medicare
SHINE Overview

- **SHINE = Serving the Health Insurance Needs of Everyone...on Medicare**

- Mission: To provide no cost and unbiased health insurance information, counseling and assistance to Massachusetts residents with Medicare and their caregivers.

- 14 Regional Offices cover entire state
  - 700 SHINE counselors (60% volunteers) available in the community to help

1-800-243-4636    SHINE@state.ma.us
What SHINE Does

- Assist people in understanding their Medicare and MassHealth rights and benefits
- Educate people about all of their health insurance options
- Educate consumers with limited resources on how to pay for health care costs. For example: Low Income Subsidy & Medicare Savings (Buy-In) Programs
- Screen for public benefits (State and Federal)
Medicare 101

- Federal health insurance program for:
  - Individuals age 65 and over
  - Individuals under age 65 with a disability

- NOT a comprehensive health insurance program
  - Gaps in Medicare coverage mean beneficiary must pay a portion of medical expenses

- 4 parts of Medicare:
  - Part A (Hospital Insurance)
  - Part B (Medical Insurance)
  - Part C (Medicare Advantage)
  - Part D (Prescription Drug Coverage)
New Medicare Cards

- Social Security Number Removal

- Randomly generated Medicare Beneficiary Identifier (MBI) will replace the SSNs on new Medicare cards

- Replacing SSNs on all Medicare cards will protect:
  - Private health care and financial information
  - Federal health care benefit and service payments

- Transition period will begin April 1, 2018 through December 31, 2019
Medicare Eligibility

- 65 years or older and eligible for Social Security (earned 40 credits/quarters)
- 65+ with spouse or ex-spouse (marriage lasted at least 10 years) who qualifies for Medicare
- Under 65 who has received Social Security Disability (SSDI) for 24 months
  - Enrollments and eligibility determinations: Social Security Administration
    1-800-772-1213; www.ssa.gov
  - Create My Social Security Account
Enrollment Periods

- Qualifying events (move, retire, etc.)
- Oct. 15-Dec. 7, change health or drug plan
- Jan. 1-March 31 if Part B enrollment missed
- 7 months around 65th birthday
- Qualifying events (move, retire, etc.)
Initial Medicare Enrollment

- 7 month window around the month in which a person becomes entitled to Medicare
  - **If 65+:** One’s Initial Enrollment Period (IEP) is the 7 month window around the month she/he turns 65
  - **If under 65:** One’s IEP is the 7 month window around the 25\textsuperscript{th} month of SSDI entitlement

- The month in which one enrolls determines the coverage start date

- Potential penalties for late enrollment
Enrolling In Medicare

- Social Security processes Medicare applications
- Common myth that Medicare will know when a person turns 65. This is **NOT TRUE** unless the person is already receiving Social Security benefits
- A person must notify Social Security of their intent to enroll in Medicare
  - Medicare and Social Security are two entirely separate entitlement programs
Delaying Medicare Parts B & D

- There is a **lifelong** penalty for not signing up for Medicare Part B when initially eligible.

- Also, Connector coverage may **NOT** be creditable for Medicare Part D (drug coverage). If enrolling late into Part D, there is also a lifelong penalty.
Part C and D Special Enrollment Periods (SEP)

- Can enroll, disenroll, or change Part C or Part D
- Must have qualifying events or circumstances
- Length of SEP depends on the qualifying event
- Penalty may apply
## Special Enrollment Periods

<table>
<thead>
<tr>
<th>Qualifying Event/Circumstance</th>
<th>Length of SEP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enrolled in Medicaid (MassHealth), Extra Help, and/or Medicare Savings Program</td>
<td>Continuous</td>
</tr>
<tr>
<td>Enrolled in Prescription Advantage</td>
<td>1 per calendar year</td>
</tr>
<tr>
<td>Moved to a new geographic service area</td>
<td>2 months after move</td>
</tr>
<tr>
<td>Leaving employer group health plan coverage, including COBRA</td>
<td>2 months after loss of coverage</td>
</tr>
<tr>
<td>Residing in a long term care facility</td>
<td>Continuous</td>
</tr>
<tr>
<td>Want to enroll into a 5-star plan</td>
<td>1 per calendar year</td>
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What is Medicare Open Enrollment?

Medicare Open Enrollment is the **ONE TIME OF YEAR** when all people with Medicare can review, compare, enroll or dis-enroll in:

- Part C (Medicare Advantage)
- Part D (Prescription Drug Plans)

Medicare Open Enrollment dates:

- **October 15th**: Open Enrollment begins
- **December 7th**: Open Enrollment ends
- **January 1st**: Health/drug coverage begins
Why Is Open Enrollment Important?

- This is the annual opportunity to review health and drug plans. *This is important because:*
  - Health needs may change year to year
  - Health or drug plan change the costs, benefits, and drug coverage they offer every year

- By reviewing plans costs and benefits & comparing them with other options available for the upcoming year, there is potential to save money & ensure appropriate coverage
Medicare + Other Benefits

- MassHealth & Medicare members (Dual eligibles), those on Extra Help (Low Income Subsidy) and Medicare Savings Program (Masshealth Buy In) consumers can:
  - Change their plans ANYTIME, so the deadline of December 7th is not as critical
Transitioning from the Health Connector to Medicare

- Why is it important for those on the Health Connector to pay attention when they become eligible for Medicare?

- There are enrollment, financial and coverage factors that could have negative consequences.

- What do we mean by this?
Transitioning from the Health Connector to Medicare

- For those in a Health Connector plan entitled to **Premium free Medicare Part A** (which means they earned 40 credits while working under Social Security and paying into Medicare):
  - If they don’t sign up for Medicare when they are initially eligible, they will **LOSE** any tax credits they are receiving
  - Loss of subsidy can add up to hundreds of dollars
Transitioning from the Health Connector to Medicare

For those in a Health Connector plan who have to purchase Part A (have less than 40 credits/quarters under Social Security) when they become eligible for Medicare:

• They can keep their Connector plan
• They will continue to receive tax credits and subsidies
Take Aways...

- Enroll in Medicare as soon as becoming eligible for premium free Part A
- Disenroll in Health Connector plan by calling the plan
- Don’t miss deadlines to sign up for Medicare
  - Plans are improving notification to members approaching 65
Where to Go For Help

- **Social Security Administration:** 1-800-772-1213
  - To enroll in Medicare
  - [www.ssa.gov](http://www.ssa.gov)

- **SHINE:** 1-800-AGE-INFO (1-800-243-4636), press 3
  - English and Spanish

- **Medicare:** 1-800-MEDICARE (1-800-633-4227)

- **MCPHS Pharmacy Outreach Program:** 1-866-633-1617
  - Review of meds & drug coverage, refers affordable prescription drug programs
QUESTIONS?