

Transitioning from the Health Connector to Medicare AND Medicare Open Enrollment



SHINE Overview

- **SHINE**= **S**erving the **H**ealth **I**nsurance **N**eeds of **E**veryone...*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
 - Over 700 SHINE counselors 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
- **Assist** with applications
- Help to resolve problems
- Screen for public benefits (State and Federal)
- Counsel over the phone or in person



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.



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** creditable for Medicare Part D (drug coverage). If enrolling late into Part D, there is also a lifelong penalty.

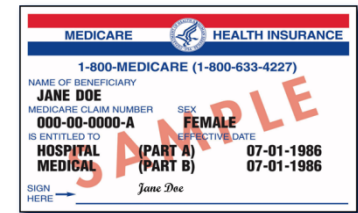


Take Aways...

- 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

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)



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

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 25th month of SSDI entitlement
- The month in which one enrolls determines the coverage start date
- Potential penalties for late enrollment

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**

Where to Go For Help



- **Social Security Administration: 1-800-772-1213**
 - To enroll in Medicare
 - 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