Medicare Enrollment and Coverage for Ryan White HIV/AIDS Program (RWHAP) Clients

Access, Care, and Engagement (ACE) TA Center January 31, 2023



How to ask questions

Attendees are in **listen-only mode**.

To ask a question, **use the chat box** at the lower-right of your screen to chat with the presenter.

You may also **email questions** to <u>acetacenter@jsi.com</u> after the webinar.

TargetHIV NEWS **EVENTS** LIBRARY COMMUNITY HELP Home » Help » Technical Assistance Directory » ACE TA Center **ACE TA Center** The Access, Care, and Engagement Technical Assistance (ACE TA) Center builds the capacity of the Ryan White HIV/AIDS Program (RWHAP) community to navigate the changing health care landscape and help people with HIV to access and use their health coverage to improve health outcomes. Many RWHAP clients are eligible for health coverage options, including Medicare, Medicaid, and Marketplace plans. The ACE TA Center ACE TA Center Home provides practical tools and resources to support engagement, education, enrollment, and renewal activities. **Health Coverage Basics** Tools and Resources **Training and Technical Assistance** Webinars Our tools, resources, training, and technical assistance offerings are **ACE Policy Blogs** responsive to recipient and subrecipient needs and informed by best and promising practices for health coverage engagement and enrollment. The **Evaluation and Needs Assessment** ACE TA Center is a cooperative agreement between JSI Research & Training **Advisory Council** Institute, Inc., (JSII) and the Health Resources and Services Administration, (HIV/AIDS Bureau ₫). Subscribe



Ip » Technical Assistance Directory » ACE TA Center

E TA Center

ss, Care, and Engagement Technical Assistance (ACE TA) Center e capacity of the Ryan White HIV/AIDS Program (RWHAP) ty to navigate the changing health care landscape and help people to access and use their health coverage to improve health s. Many RWHAP clients are eligible for health coverage options, Medicare, Medicaid, and Marketplace plans. The ACE TA Center practical tools and resources to support engagement, education, nt, and renewal activities.

ng and Technical Assistance

, resources, training, and technical assistance offerings are e to recipient and subrecipient needs and informed by best and g practices for health coverage engagement and enrollment. The enter is a cooperative agreement between JSI Research & Training Inc., (JSIC) and the Health Resources and Services Administration, 6 Bureauc).



ACE TA Center Home	
Health Coverage Basics	
Tools and Resources	
Webinars	
ACE Policy Blogs	
Evaluation and Needs Assessment	
Advisory Council	
Subscribe	

Can you hear us?



The audio is being shared via your computer speakers/headset.



If you can't hear the audio, make sure your computer audio is turned on.



If you're still having problems, please chat the host.

Call-In number: Webinar ID: Password: 309 205 3325 947 8059 8722 832277







Engage, enroll, and retain

clients in health coverage (e.g., Marketplace and other private health insurance, Medicare, Medicaid).



Communicate with Ryan White HIV/AIDS Program (RWHAP) clients

about how to stay enrolled and use health coverage to improve health care access, including through the use of Treatment as Prevention principles.



Improve the clarity

of their communication around health care access and health insurance.



- RWHAP program staff, including case managers
- RWHAP organizations (leaders and managers)
- RWHAP clients
- Navigators, State Health Insurance Assistance Programs (SHIP) counselors and other in-person assisters that help enroll RWHAP clients in health coverage

FIND US AT:

targethiv.org/ace



ACE TA Center Home
Health Coverage Basics
Tools and Resources
Webinars
ACE Policy Blogs
Evaluation and Needs Assessment
Advisory Council
Subscribe

The LAI ART: Coverage and Cost-Sharing Considerations for RWHAP Clients fact sheet walks through the different coverage and cost-sharing considerations for LAI ART across public and private payers – including Medicaid, Medicare, and commercial insurance – and provides information to RWHAP recipients and

Center provides practical tools and resources to support engagement, education,

Long-Acting Injectable ART: Coverage and Cost-

Featured: NEW ACE TA Center tool!

enrollment, and renewal activities.

Sharing Considerations

Roadmap for presentation





Today's presenters

Molly Tasso



Project Director, ACE TA Center Liesl Lu



Senior Technical Advisor, ACE TA Center Michelle Dawson



Lead Content Developer, ACE TA Center



Audience Poll #1

How ready is your organization to assist clients with Medicare enrollment?

- We are experts and we stay up-to-date on enrollment best practices.
- We have some experience and we partner with external enrollment specialists.
- We have some experience and we are building our in-house capacity.
- We have little experience and are exploring ways to improve.
- Other (chat in your response)



Are you working on building your in-house Medicare enrollment capacity? If so, what areas do you need help with?

Let us know in the chat!

Recap: Medicare basics



Recap: Part I

- In Part I, we covered:
 - The changing demographics of RWHAP clients
 - Medicare eligibility for people with HIV
 - The different parts of Medicare
 - Medicare prescription drug coverage for people with HIV
 - Medicare enrollment pathways
- View the recording at targethiv.org/ace/webinars



Primary criteria for Medicare eligibility

To enroll in Medicare, an individual must be a U.S. citizen or a legal resident for at least five years (with some exceptions).

Three potential pathways:

- Age 65 or older
- Under 65 with a qualifying disability
- Have end stage renal disease



Comparing coverage and costs

- The RWHAP, including • ADAP, may help pay for Medicare premiums, deductibles, and copayments.
- Shop and compare Original Medicare and Medicare Advantage Plans at www.medicare.gov

Original Medicare (Parts A and B)

Includes:

$(\mathbf{+})$ H

Medicare Advantage (also called Part C)



Includes:

- Part A (hospital insurance)
- Part B (medical insurance)

Most plans include:

 Part D (prescription drug) coverage)

Some plans also include:

- Lower out-of-pocket costs
- Extra benefits

Plans adminstered by:

 Private insurance companies that contract with the government

Part A (hospital insurance)

Part B (medical insurance)

Part D (prescription drug

Supplemental coverage

Supplement Insurance

(Medigap) policy

Plans adminstered by:

The federal government

to help pay out-of-pocket

costs-such as a Medicare

Clients can purchase:

coverage)



Claiming Social Security Disability Insurance (SSDI) – under age 65 A person with SSDI will automatically qualify for Medicare after they have received SSDI payments for 24 months.



Claiming Social Security Retirement Benefits - age 62 to 65

A person may claim Social Security retirement benefits as early as 62, and will be auto-enrolled into Medicare at 65.





Overview of Medicare enrollment pathways



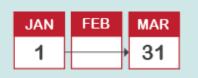
Special Enrollment Period (SEP) - age 65+ 8 month window to apply after losing employer sponsored coverage.





General Enrollment Period (GEP) - age 65+

Runs annually from January 1 to March 31 for those who missed the IEP.



Medicaid Unwinding Update



April 1, 2023: Medicaid continuous coverage requirement begins to unwind

- What can you do to help clients avoid gaps in coverage?
 - Make sure clients update their contact information with their state Medicaid agency.
 - Encourage clients to check their mail frequently for letters from their state Medicaid agency.
 - Help clients complete their Medicaid renewal form, if they receive one.
 - If a client is found ineligible for Medicaid, help them enroll into another form of health coverage (e.g. Medicare, Marketplace plan).



Best practices and enrollment support



Best practices to support Medicare enrollment

- Ensure continuity of coverage
- ✓ Actively enroll
- Avoid penalties
- Provide one-on-one enrollment support



BEST PRACTICE #1: Ensure continuity of coverage

- Confirm with clients that their current providers accept Medicare: <u>medicare.gov/care-compare</u>
- Help clients compare Medicare drug plans in their area and choose one that covers their HIV medications and other non-HIV medications: <u>medicare.gov/plan-compare/</u>
- **Reminder**: The RWHAP, including ADAP, may help pay for Medicare premiums, deductibles, and copayments.



BEST PRACTICE #2: Actively enroll

- For clients who choose:
 - Original Medicare (Parts A and B), enroll through Social Security
 - Medicare Advantage, Medicare Part D (Rx Drug Plan), or Medigap, enroll through Medicare.gov
- Only a small subset of people are automatically enrolled in Medicare:
 - People already receiving Social Security retirement benefits
 - People receiving 24+ months of Social Security Disability Insurance (SSDI) benefits
 - People with ESRD or ALS



BEST PRACTICE #3: Avoid penalties

- Help clients enroll as soon as they are eligible to avoid late enrollment penalties and minimize gaps in coverage.
- Create EHR reminders or ask medical case managers to flag clients who:
 - Are approaching their 65th birthday
 - Will be receiving their 25th month of SSDI benefits



BEST PRACTICE #4: Provide oneon-one enrollment support

- Establish a relationship with your local State Health Insurance Assistance Program (SHIP): <u>shiphelp.org</u>
- Refer clients to SHIP for external Medicare enrollment support
- Support RWHAP staff to become trained SHIP counselors in order to build in-house enrollment capacity



State Health Insurance Assistance Programs (SHIP)

- State-based programs that provide **local and objective insurance counseling** and assistance to Medicare-eligible individuals, their families, and caregivers.
 - Review health or drug plan options
 - Explore financial assistance options
 - Explain how Medicare works with other types of health coverage
 - Help with complex issues such as dual eligibility for Medicaid and Medicare.
- Find your local SHIP: <u>shiphelp.org/about-</u> medicare/regional-ship-location



Train RWHAP staff as SHIP counselors

- RWHAP and ADAP program staff are ideal SHIP counselors.
 - They understand the eligibility requirements for both programs, the coverage needs of people with HIV, and state-specific programs.
- Training programs and certification requirements may vary by state.
 - Individual SHIP counselors must be associated with a SHIP-certified organization.
 - Contact your state health department for more information.



Audience Poll #3

Is your organization connected with a SHIP counselor?

- Yes, we consult/work with a SHIP counselor to enroll our clients
- Yes, we refer our clients to a SHIP counselor
- No, we are not connected but working to do so.
- No, we are not aware there is a SHIP counselor in our area
- Other (chat in your response)



Audience Poll #4

What are the top challenges at your organization related to Medicare enrollment and coverage? (Check all that apply.)

- Determining whether clients are eligible for Medicare
- Assisting clients with deciding when to enroll
- Assisting clients who are eligible for both Medicare and Medicaid
- Helping clients transition to Medicare from another type of coverage
- Referring clients for external Medicare enrollment support
- Other (chat in your response)



Enrollment challenges



ENROLLMENT CHALLENGE #1: Deferring enrollment without incurring penalties

- Make sure RWHAP clients enroll in Medicare Part A, B, and/or D when they are first eligible, unless they have a legitimate reason to defer, such as:
 - Client is still working and has employersponsored insurance.
 - Client is eligible for a Medicare Savings
 Program.
 - Client has other creditable prescription drug coverage.
 - Client qualifies for the federal Extra Help program.



ENROLLMENT CHALLENGE #1: Deferring enrollment without incurring penalties

Medicare Part A Penalty

- For people who don't qualify for premiumfree Part A, pay an additional 10% on their monthly premium for twice the number of years they were eligible.
- Can be avoided if they have employersponsored coverage.

Medicare Part B Penalty

- Pay an additional 10% for each year they were eligible (a lifetime penalty!)
- Can be avoided if they have employersponsored coverage or qualify for a Medicare Savings Program.
- If incurred prior to age 65, can be reset to \$0 during IEP at age 65.



ENROLLMENT CHALLENGE #1: Deferring enrollment without incurring penalties

Medicare Part D Penalty

- Pay an additional 1% of a national benchmark amount for each full, uncovered month a person did not have Part D or other creditable coverage.
- This is also a lifetime penalty!
- Generally significantly smaller than Part A or B penalties and much easier to resolve
- Can be avoided by having creditable prescription drug coverage or qualifying for the Extra Help program



Knowledge Check #1

Which of the following is a legitimate reason to defer enrollment in Medicare Part B?

- A. Having COBRA coverage
- B. Having employer-sponsored coverage
- C. Having retiree insurance
- D. All of the above

ENROLLMENT CHALLENGE #2: Deferring enrollment if keeping employer coverage

- If a client plans to keep employersponsored coverage, make sure they talk to their employer's Human Resources department first before deferring Medicare enrollment.
- Individuals on employer-sponsored insurance (through their own or a spouse's employer) can generally enroll into Part A and keep their employersponsored plan.
- A retiree plan or COBRA coverage is **NOT** considered qualifying coverage, and does not exempt an individual from the Part B late enrollment penalty.



Knowledge Check #2

What steps should RWHAP clients take if they are considering deferring Medicare enrollment in favor of employer-sponsored insurance?

- A. Contact their employer's Human Resources department to identify any potential conflicts
- B. Contact the Social Security Administration to confirm whether deferring Medicare Part B coverage will incur a penalty
- C. Time their Medicare Part B deferment during their Initial Enrollment Period
- D. All of the above

ENROLLMENT CHALLENGE #3: Transitioning from Marketplace to Medicare

• Enroll in Medicare when first eligible during Initial Enrollment Period (IEP)

• If a client missed the IEP, enroll through the next GEP, a Special Enrollment Period or equitable relief

Marketplace Termination:

- Marketplace coverage usually does NOT terminate automatically.
- Clients will lose APTCs if they are:
 - Eligible for premium-free Medicare Part A and still enrolled in Marketplace coverage
 - Enrolled in Medicare Part A with a premium
- Clients can keep APTCs if they are eligible for but not enrolled in Medicare Part A with a premium.

ENROLLMENT CHALLENGE #3: Transitioning from Marketplace to Medicare

- Encourage clients to do the following:
 - Check mail frequently for notices from the Marketplace or Medicare.
 - Be aware of the start dates for their Medicare Part A, B, and D coverage before terminating Marketplace coverage, in order to avoid any coverage gaps.
 - Contact the Social Security office if they encounter any enrollment issues.





True or false? Clients who are currently enrolled in Marketplace coverage will automatically be terminated from their plans once they enroll in Medicare coverage.

- A. True
- B. False

Financial help



How the RWHAP can help

• RWHAP funds may be used to pay for Medicare premiums and cost sharing associated with Medicare Parts B, C, and D coverage:



Outpatient/ambulatory health services
 (Medicare Part B)



- Prescription drug coverage (Medicare Part D) that includes at least one drug in each class of core antiretroviral therapeutics
- Note: RWHAP funds cannot be used to pay for Medicare Part A premiums, per <u>HRSA HAB PCN #18-01</u>



Tips for helping clients use **RWHAP** with Medicare coverage

- Remind clients that ADAP is always the payor of last resort.
 - For clients with Medicare Advantage or Medicare Part D deductibles, clients should direct pharmacies to bill their Medicare, not ADAP, in order to meet their deductible requirements.

• Premium amounts can change throughout the year.

 To avoid coverage termination or accruing past due amounts, keep an eye out for notices in the mail about changes to their premiums so that RWHAP can help clients pay their premiums in full and on time.



Medicare Savings Programs (MSP) for dually eligible clients

- Federally-funded, state-administered programs for low-income beneficiaries that help pay for some or all of the enrollee's Medicare premiums and out-of-pocket expenses.
- Some dually eligible people will qualify.
- 4 types of MSPs (varies by state):
 - Qualified Medicare Beneficiary (QMB)
 - Specified Low-Income Medicare Beneficiary (SLMB)
 - Qualifying Individual (QI)
 - Qualified Disabled and Working Individuals (QDWI)



Extra Help Program: Part D Low-Income Subsidy (LIS)

- A federal program that helps individuals pay for some or most of the out-of-pocket costs associated with Medicare Part D prescription drug coverage.
- Individuals can qualify for either full or partial assistance depending on their income and assets.
- Enrolling in the Extra Help program will eliminate any Medicare Part D late enrollment penalties that an individual may have incurred.



Other sources of financial help

- State Pharmaceutical Assistance Programs (SPAPs) can help eligible people pay for their prescription drugs based on financial need, age, or medical condition.
- Some major drug manufacturers offer Patient Assistance Programs (PAPs), which provide free or low-cost medications for people with Medicare drug coverage who meet certain requirements.
- Programs of All-Inclusive Care for the Elderly (PACE) are state-administered programs for dually eligible individuals who require a nursing home-level of care.



Other sources of financial help

- Low-Income Newly Eligible Transition (LINET) program provides temporary, sometimes retroactive, Part D coverage for those who were on Medicaid and are waiting for Part D to start.
- Other state and local resources, such as financial assistance programs through clinics, hospitals, and FQHCs.





What information would be most helpful for staff in your program to understand about dual eligibility for Medicaid and Medicare? Check all that apply.

- Basics (eligibility criteria, benefits and coverage, etc.)
- Integrated care options
- Financial assistance programs
- Billing and payor requirements
- Role of RWHAP/ADAP
- State-level variations
- Other (chat in your response)

Resource round-up



ACE TA Center Medicare resources

ARE YA CENTER MEDICARE TOOL	ACE TA CENTER MEDICARE TOOL	<section-header><section-header> <</section-header></section-header>
Approximately de arrengen Medicates leing and HVV has covere traiter Historically most Medicate belazia de arrend by the revenue, traiter and de ang utility most and traiter and the second of the second of the arrendom and the second of the second of the arrendom and the second of the secon	Comparing Madicare Pari U - Vana B Traditional Compared Digital Digitad Digital Digit	And part 8 and need to enrol an X-regional Medical events before supplementatic coverage for Original Medical events for Supplementatic coverage for Original Medical events Enrolling and Conference at age 65 requires products stops to avoid problems. The Medical Product of Conference and Provide and Applementation of the Supplementation of th
Served by vears and older.	 The second second	 bit Learn more and an important provide an encessary work may will have a subscription of the subscription having the necessary work may will have a subscription of the subs
69% are dually eligible for Medicare and Medicad	Part D plan later: Part D plan later: Standard Level of Coverage for Ail Medicare Drug Plans: All Medicare drug plans must provide a standard well of coverage and by Medicare both may obler start of the start	Coverage begins For individuals that have not yet sagned to the second provided to the same benefits, Madicare olders in Initial Enrollment Period starts. They can show for Part A cover their Initial Enrollment Period starts. But they make under the same of the same the subset to the window sign to for Part 9, they will be subject to allow environ to each surface quarks to the same to allow environ to each content of class—a period that Part 10, the same the surface of class—a period that The same the surface of content of class—a period that The same the same of content of class—a period that Part 10, the same content of class
ACE TA CENTER The Basics of Medicare for RWHAP Clients	ACE TA CENTER Modicare Prescription Brug Coverage for RWIAP Clients	Porf B premium vo. continues Gower. ACE TA CENTER How Medicare Exercitment Works

targethiv.org/ace/medicare



Tool: **One-on-One** Medicare Enrollment Assistance

targethiv.org/ace/medicare

One-on-One Medicare Enrollment Assistance for Ryan White HIV/AIDS **Program Clients** This resource provides Ryan White HIV/AIDS Program (RWHAP) staff and program administrators with an overview of the State Health Insurance

Enrolling in Medicare — including understanding the different parts of Medicare, the distinction between Original Medicare and Medicare or medicare, the distinction between Unginal Medicare and Medic Advantage plans, and the various enrollment timelines — can be

Providing one-on-one enroliment assistance is an important way to Proviuing one-on-one entoiment assistance is an important way to ensure that your Ryan White HIV/AIDS Program (RWHAP) clients enroll ensure that your regard white reveaus enough the best Medicare coverage option to meet their health care needs.

In the best Medicare coverage option to meet their hearth care needs. One-on-one enrollment assistance also supports coverage affordability

Une-on-one enroument assistance also supports coverage and/oac and promotes coordination with other RWHAP program resources. Medicare Counseling from your local State Health Insurance Assistance

To support Medicare enrolment, RWHAP programs can work with their Program (SHIP) to support meascare enrorment, revenare programs can work with mit local State Health Insurance Assistance Program (SHIP). SHIPs are iocal State means insurance Assistance mogram (Smir). Smir's are state-based programs that receive funding from the federal government state-based programs that receive funding from the receival governme to provide free, local, and unbiased health coverage counseling and to provide mee, rocal, and unclased nearn coverage counseling and information to people who are enrolled in Medicare or who are about to

information to people who are entrolled in medicate of who are about to become eligible for Medicate. There are SHIP programs in all 50 states. become engine for medicare, mere are orme programs in an ou states, as well as Washington, D.C., Puerto Rico, Guam, and the U.S. Virgin Islands.

 People who are aging into Medicare at age 65 (or who are leaving SHIP programs can help:

- reopie wno are aging into medicare at age oo tor who are reaving work-sponsored insurance after age 65) navigate the enrollment work-sponsored insurance after age b5) navigate the enrolin process, including what Medicare does and does not cover. People who are under the age of 65 and newly Medicare eligible reopie who are under the age or to and newly wearcare englished because of a disability but not yet enrolled in all the parts of
- People who are already enrolled in Medicare and want to change
- or better understand their options and coverage. Family members or caregivers that need help supporting
- a Medicare beneficiary.

become trained SHIP counselors. Find the answers to ? these questions: 1. How can the SHIP program help clients who are eligible for Medicare? 2. How can RWHAP program staff become trained SHIP counselors?

Assistance Program (SHIP), how SHIP can support

Medicare-eligible clients, and

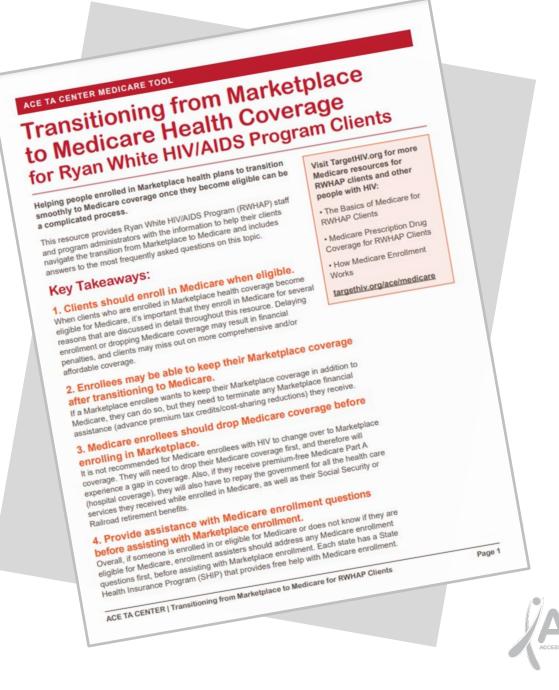
how RWHAP program staff can

Page 1

ACE TA CENTER | One-on-One Medicare Enrollment Assistance for RWHAP Clients

Tool: Transitioning from Marketplace to Medicare

targethiv.org/ace/medicare



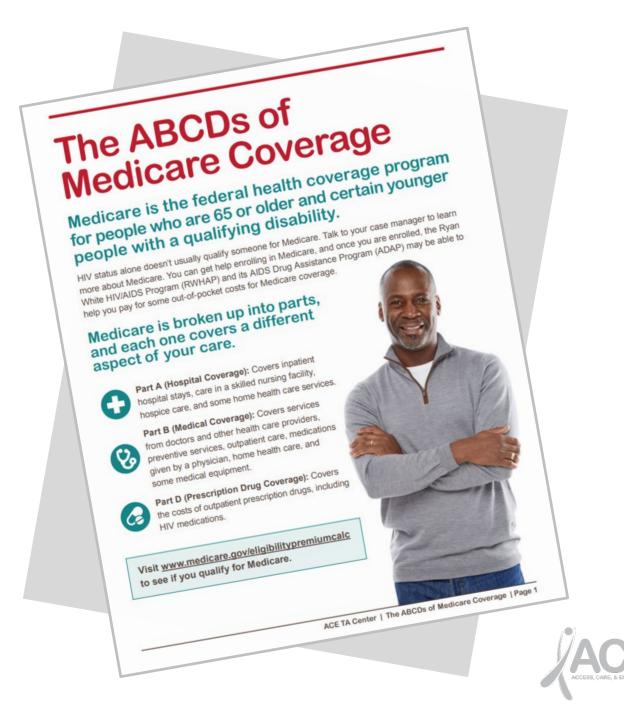
Tool: Financial Help for Medicare

targethiv.org/ace/medicare

Financial Help for Medicare Medicare Savings Programs and the Extra Help Program for Ryan White HIV/AIDS Program Clients This resource provides Ryan White HIV/AIDS Program (RWHAP) staff What is a Medicare Savings Program? and program administrators with and program eummenteners with an overview of Medicare Savings Programs and Extra Help eligibility Medicare Savings Programs (MSPs), also known as Medicare and coverage for RWHAP clients. Buy-In programs or Medicare Premium Payment programs, are federally funded programs administered by each individual state for income NITION PROGRAM BUTTERINGTON OF CALL INTERVIEWED STARS OF INTERVIEWED STARS OF SOME OF ALL Bigible Medicare beneficiaries. These programs help pay for some of all of an encolorie beneficiaries exeminate and out-of product expenses because Find the answers to these of an enrollee's Medicare premiums and out-of-pocket expenses. MSPs . What are the different Medicare questions: Savings Programs? help people with limited income and assets.¹² Clients who are approved for an MSP (with one exception, described below), are then automatically eligible for Extra Help, a federal program 2. What is the Extra Help below), are usen automatically engine to Extra neith, a reueral program that helps pay for some or most of the out-of-pocket costs associated 3. How can you support RWHAP war neips pay for some or most or the our-or-pocket costs assoc with Medicare prescription drug coverage (Medicare Part D).¹² clients to enroll in Medicare Medicare Savings Programs are paid for by state Medicaid programs. Savings Programs? 4. What are other sources of financial help for Medicare What Types of Medicare Costs Are Covered? premiums and out-of-pocket Medicare Savings Programs may be able to pay the monthly premium Medicare Savings Programs may be able to pay the montrary Premote for Original Medicare (Medicare Parts A and B) and other out-of-pocket expenses? tor Unginal Integritare (Integritare Parts A and b) and other out-or-protect costs (such as deductibles, co-insurance, and copayments), depending Learn more about the Most enrollees may already qualify for premium-free Medicare Part A Medicare Savings MUSE REMAINESS THAY ALL BODY QUARTY OF PREMIUM-MED MEDICARE PART A Coverage if they or their spouse paid Medicare taxes while working for Ð Program: www.medicare.gov/ cuverage in uney or mem spouse part metocare taxes write will a certain amount of time (roughly 10 years of full-time work). your-medicare-costs/ get-help-paying-costs/ medicare-savingsprograms Page 1 ACE TA CENTER | Financial Help for Medicare for RWHAP Clients

Consumer Resource: The ABCDs of Medicare Coverage





Q&A Panelists



Michelle Dawson



Liesl



Molly Tasso





Callachan



Join us for the series!

- Basics of Medicare Eligibility on demand
- Medicare Enrollment and Coverage today!
- Medicaid 101 for RWHAP Recipients and Providers

February 14, 2:00-3:00 PM ET

 Medicaid-Medicare Dual Eligibility February 28, 2-3:30 PM ET

targethiv.org/ace/webinars





Thank you.



Sign up for our mailing list, download tools and resources, and more: **targethiv.org/ace**

Contact us at acetacenter@jsi.com