A How to Guide: Medicare Enrollment for Older Adults Living with HIV

Presenters:

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Moderator:

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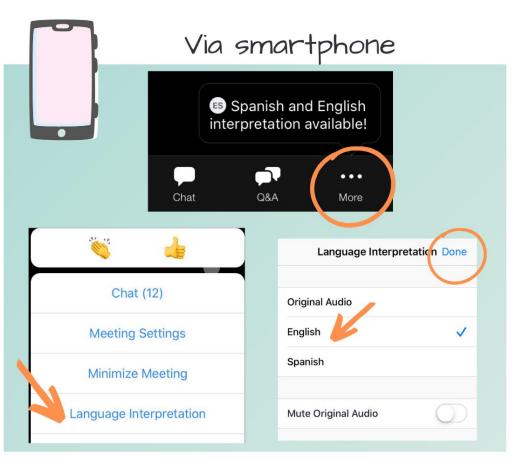
Spanish Translation

Spanish translation will be available for today's webinar by José A. Romero



TO ACCESS INTERPRETATION







PARA ACCEDER A LA INTERPRETACIÓN









Capacity
Building/Technical
Assistance

Policy and Advocacy

About ANAC

Founded in 1987, we achieve our mission by:

- Creating an effective network of nurses and others in HIV care
- Studying, researching and exchanging information, experiences and ideas leading to improved care for persons with HIV/AIDS
- Providing leadership to the nursing community in matters related to HIV/AIDS
- Advocating for people living with HIV
- Promoting social awareness of issues related to HIV/AIDS

Inherent in these goals is the abiding commitment to the prevention of further HIV infection.



Association of Nurses in AIDS Care (ANAC) Mission

ANAC fosters the professional development of nurses and others involved in the delivery of health care for persons at risk for, living with, and/or affected by the human immunodeficiency virus (HIV) and its comorbidities. ANAC promotes the health, welfare and rights of people living with HIV around the world.





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ANAC will provide 1 contact hour of NCPD upon completion of this activity

To receive a certificate of completion, attendees must:

- Be registered to attend
- View today's webinar presentation
- Complete the online, post-activity evaluation. You will receive a link to the evaluation by email.

The deadline to claim contact hours is 12/31/23.



ANAC is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.

NCPD questions? Email Sheila@anacnet.org



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To be awarded contact hours for this webinar, complete the evaluation found at:

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Email Sheila at Sheila@anac.net

The Association of Nurses in AIDS Care (ANAC) is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.

Desired Learning Outcomes

On completion of today's activity, participants will be able to:

- Participants will be able to discuss the process for enrolling in Medicare for adults turning 65 years of age.
- Participants will be able to describe the basic steps to enroll in Medicare.
- Participants will be able to identify financial assistance programs to which Medicare beneficiaries can apply



Presenters



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The Basics of Medicare Enrollment for Older Adults Living with HIV

June 21, 2023

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The ACE TA Center helps organizations:





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.

The demographics of Medicare beneficiaries with HIV

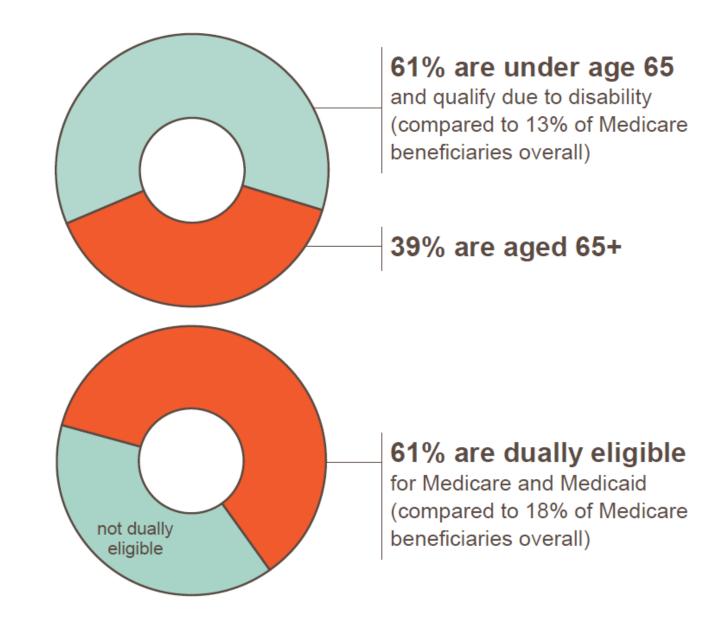


More people with HIV are aging into Medicare

- Medicare is the second largest source of federal funding for HIV/AIDS care in the U.S.
- More than a quarter (28%) of people with HIV get their health coverage through Medicare.
- Over one-third (39%) of Medicare beneficiaries with HIV are aged 65 and older.



Age, Disability, and Dual Eligibility



Medicare basics: Eligibility, coverage, and enrollment pathways



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 (ESRD)



Medicare Parts A, B, and D



Medicare Part A Hospital Coverage

Covers:

- Inpatient hospital care
- Skilled nursing facility care
- Hospice care
- Home health care



Medicare Part B Medical Coverage

Covers:

- Services from doctors and other health care providers
- Preventive services
- Outpatient care
- Medications administered by a physician
- Home health care
- Durable medical equipment



Medicare Part D Prescription Drug Coverage

Covers:

 Cost of outpatient prescription drugs, including all HIV antiretroviral medications



Comparing coverage and costs

Shop and compare
 Original Medicare and
 Medicare Advantage
 Plans at
 www.medicare.gov

Original Medicare (Parts A and B)





Medicare Advantage (also called Part C)



Includes:

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

Clients can purchase:

- □ Part D (prescription drug coverage)
- Supplemental coverage to help pay out-of-pocket costs—such as a Medicare Supplement Insurance (Medigap) policy

Plans adminstered by:

The federal government

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

Initial Enrollment Period (IEP) for people about to turn 65

Medicare Initial Enrollment Period (IEP)



If a person signs up for Medicare during the first 3 months of their Initial Enrollment Period, their Medicare coverage will begin on the first day of their birthday month (the fourth month of the IEP*). If a person signs up for Medicare during their birthday month (the fourth month of the IEP*) or during the last 3 months of their Initial Enrollment Period, their Medicare coverage will begin on the first day of the month after they enroll.

^{*}If a person's birthday falls on the first of the month, their IEP is shifted one month earlier to include the 4 months prior to the birthday month, the month the person turns 65, and the 2 months after the birthday month.



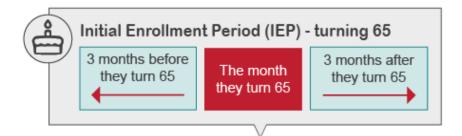
Claiming Social Security Disability Insurance (SSDI) – under age 65

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

65





Basic steps to enroll in Medicare





Basic steps to enroll in Medicare

- ✓ Work with an enrollment specialist one-on-one
- ✓ Ensure continuity of coverage
- ✓ Actively enroll during your Initial Enrollment Period (IEP)
- ✓ Avoid penalties



State Health Insurance Assistance Programs (SHIP)

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

Work with an enrollment specialist one-on-one

- Contact your case manager and/or find a SHIP counselor who is knowledgeable about the needs of people with HIV, or who can work with your case manager.
- Questions to ask yourself:
 - What are essential, required items that you must have in your health coverage? Such as coverage for particular services, specialists and/or medications.



Questions to ask your case manager and/or SHIP counselor

- Is it more cost effective for me to enroll in a Medicare Advantage plan that has co-pays and co-insurance vs a Medicare Supplement plan?
- Do my healthcare providers work with any of the Medicare Advantage plans I am considering?
- How does my state ADAP work with Medicare? What premiums can they pay, if any?
- If I am still working, am I offered affordable employer sponsored insurance that might allow me to delay enrollment into Medicare for now?
- Does my employer (or former employer) offer any plans that work with Medicare? If so, are these plans better than what I might be able to purchase from Medicare directly?
- If I am currently enrolled in Medicaid, will I maintain my Medicaid eligibility after I enroll in Medicare?
- Could I be dually eligible for Medicare and Medicaid?

Ensure continuity of coverage

- Confirm that your current providers accept Medicare: <u>medicare.gov/care-compare</u>
- Compare Medicare drug plans in your area and choose one that covers your HIV medications and other non-HIV medications: medicare.gov/plancompare/



Actively enroll during your IEP

Note: If you are already receiving Social Security retirement benefits (from as early as age 62), you will be automatically enrolled in Original Medicare.

- Option 1: If you choose to enroll in Original Medicare (Parts A and B), you will need to actively enroll via the Social Security Administration (ssa.gov/medicare/sign-up)
 - You can choose to add on a standalone Medicare Part D prescription drug plan. Enroll through Medicare.gov
 - You can choose to add on a Medigap plan. Enroll through Medicare.gov
- Option 2: If you choose to enroll in a Medicare Advantage plan, you will need to actively enroll via Medicare.gov

Avoid penalties

- Make sure you enroll in Medicare
 Part A, B, and/or D as soon as you
 are eligible to avoid late enrollment
 penalties and minimize gaps in
 coverage.
- Keep in mind:
 - Some are lifetime penalties!
 - Some can be avoided if you have a legitimate reason to defer enrollment.



Enrollment challenges



ENROLLMENT CHALLENGE #1: Deferring enrollment without incurring penalties

Medicare Part A Penalty

- This penalty only applies if you don't qualify for premium-free Part A.
- Can be avoided if you have employersponsored coverage, in most cases.

Medicare Part B Penalty

- This is a lifetime penalty!
- Can be avoided if you have employersponsored coverage or qualify for a Medicare Savings Program.

Medicare Part D Penalty

- This is a lifetime penalty!
- Can be avoided by having creditable prescription drug coverage or qualifying for the Extra Help program.

ENROLLMENT CHALLENGE #2: Deferring enrollment if keeping employer coverage

- If you plan to keep employersponsored coverage, make sure to talk to your employer's Human Resources department first before deferring Medicare enrollment.
- Generally, if you have employersponsored insurance (through your own or a spouse's employer) you can enroll into Part A and keep your employersponsored plan.
- A retiree plan or COBRA coverage is
 NOT considered qualifying coverage, and
 does not exempt you from the Part B late
 enrollment penalty.

ENROLLMENT CHALLENGE #3: Transitioning from Marketplace to Medicare

- Enroll in Medicare when first eligible during your Initial Enrollment Period (IEP)
- Marketplace coverage usually does NOT terminate automatically.
- If you <u>qualify</u> for Premium-free Part A:
 - Enroll in Medicare Part A during your IEP, ideally the month before your birthday.
 - As soon as your Medicare coverage is active, contact the Marketplace to disensell.
- If you <u>don't qualify</u> for Premium-free Part A:
 - Carefully consider whether Marketplace coverage or Medicare is the best option for you.
 - You can keep Advance Premium Tax Credits
 (APTCs) if you decide to keep your Marketplace coverage instead of transitioning to Medicare Part A with a premium.

ENROLLMENT CHALLENGE #3: Transitioning from Marketplace to Medicare

Make sure to do the following:

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



ENROLLMENT CHALLENGE #4: Transitioning from Medicaid to Medicare

- Medicaid unwinding began on April 1.
- Tips to avoid gaps in coverage:
 - 1. Make sure you update your contact information with your state Medicaid agency.
 - 2. Check their mail frequently for letters from your state Medicaid agency.
 - 3. Complete your Medicaid renewal form, if you receive one.
 - 4. If you are found ineligible for Medicaid, contact your case manager, health care provider and/or SHIP Counselor for help enrolling into Medicare.



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 HRSA HAB PCN #18-01

Tips for using RWHAP with Medicare coverage

- Reminder: ADAP is always the payor of last resort.
 - If you have Medicare Advantage or Medicare Part D deductibles, you should direct pharmacies to bill your Medicare, not ADAP, in order to meet your 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 your premiums so that RWHAP can help you pay your premiums in full and on time.

Find out if your state Medicaid program can help you pay for some of all of your Medicare costs

- Medicare Savings Programs (MSPs) are 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 Medicare Savings Programs (MSPs) types vary 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 LowIncome Subsidy (LIS)

- A federal program that can help you pay for some or most of the out-ofpocket costs associated with Medicare Part D prescription drug coverage.
- You can qualify for either full or partial assistance depending on your income and assets.
- Enrolling in the Extra Help program will eliminate any Medicare Part D late enrollment penalties that you may have incurred.



Other sources of financial help

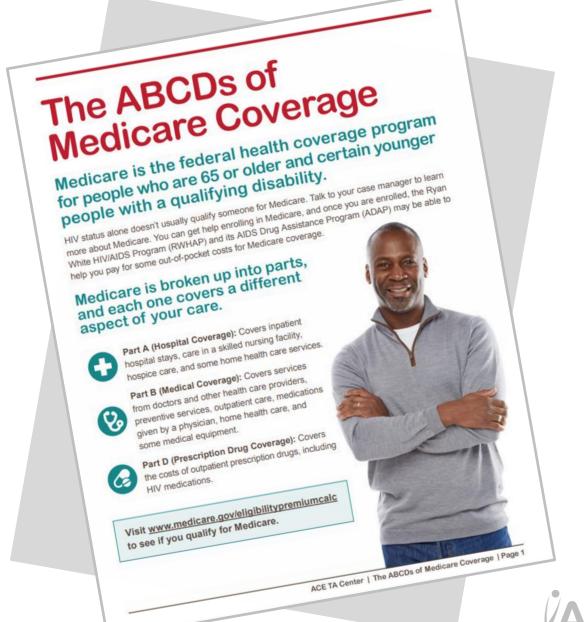
- Talk to your case manager and/or SHIP counselor to see what other programs you may qualify for that can help you with the costs of Medicare.
- Depending on where you live and your unique circumstances, there may be programs such as:
 - State Pharmaceutical Assistance Programs (SPAPs)
 - Patient Assistance Programs (PAPs)
 - Programs of All-Inclusive Care for the Elderly (PACE)
 - Low-Income Newly Eligible Transition (LINET) program
 - Financial assistance programs through clinics, hospitals, and federally qualified health centers



Resource round-up



Consumer Resource: The ABCDs of Medicare Coverage



FIND US AT:



targethiv.org/ace

Email us: acetacenter@jsi.com

