



Tribal Assistors & SHIBA

May 2026

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Agenda

Introductions

Part 1: Qualified Health Plans and Medicaid

Part 2: Medicare eligibility

Part 3: Medicare enrollment

Part 4: Medicare systems of care

Part 5: SHIBA support and resources for beneficiaries

Part 6: Tribal Assistors & SHIBA as partners

Discussion / Q&A

Topics of special interest

- Medicare Part D formularies
- Prescription formularies at IHS
- Medical referrals with Part C
- Payment coordination (MCR, Part C, Medicaid)

Rx drug formularies

- Stand-alone Medicare Part D plans
- Medicare-Advantage Prescription Drug (MA-PD) plans
- IHS
- VA
- Employer plans
- LI NET
- <https://provider.humana.com/pharmacy-resources/medicare-linet>

Referrals

- IHS clinics are 'in network' for rates for managed care plans
- Medicare Advantage (MA) plans do typically require prior authorization and pre-approval and referrals
- Read the 'fine print' – Evidence of Coverage – for details about coverage, exclusions, limitations

Payment coordination

- Medicare, other insurance, Medicaid, IHS
- Medicare BCRC

<https://www.cms.gov/medicare/coordination-benefits-recovery/overview>

Contemporary challenges

SSA – getting started

Medicare Part B – late enrollment

Medicare Part D – late enrollment, attestations

Part 1: Qualified health plans and Medicaid

Qualified health plans

- Marketplace
 - Subsidies, MAGI Medicaid
- Enrollment and SEP's
 - Dis-enrollment
- Appeals
- Outreach & Education
 - Person -centered, trauma-informed counseling
- Different rules for AI/AN

Part 2: Medicare eligibility

Entitlement

One of these - and

- Citizen
- Legal Permanent Resident

One of these

- Age 65 +
- Disabled
- ESRD
- ALS

Requirements

- SSA determines eligibility
- Also, monthly premium for Medicare Part A or not

Medicare 1.0

Medicare Part A

- Hospital insurance (HI)

Medicare Part B

- Supplemental medical insurance (SMI)

Your Medicare entitlement

- **Part A** – Hospital (inpatient)
 - No monthly premium (for most people)
 - payroll taxes to trust fund
- **Part B** – Medical (outpatient)
 - monthly premium = 25% of cost
 - Standard premium = \$185/mo. (2025)
 - Indexed to income
 - Some pay more or less

Medicare: 'major medical' insurance

1. Does not cover all medically needed services
2. Does not pay 100% for all covered services
 - There is cost sharing for patients
 - Deductibles
 - Co-insurance
 - Co-pays

Not covered by Original Medicare

- **Prescription drugs**
- Eye exams
- Hearing aids
- Therapies
 - Acupuncture
 - Chiropractic
 - Massage
 - Naturopathy
- Dental care

Before enrollment...

This does not feel good at all.

Part 3: Medicare enrollment

“Map of the world”

Before Medicare		After Medicare
Employer group health plan		Employer group health plan
Small group, Individual market		Commercial insurance market
Qualified Health Plan, in Washington, that’s the “Health Benefits Exchange”	Eligibility & Enrollment	with subsidies (MSP, LIS)
Medicaid, in Washington, that’s “Apple Health”		Medicaid (CN, MN)
Other		
No health insurance		
<i>Other assistance programs (IHS, VA, etc.)</i>		
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Special Medicare Notice for People Turning 65

Informs you:

- That you may be eligible for Medicare and can change your health coverage when you turn 65
- There are different ways to sign up for Medicare
- There may be late enrollment penalties if you don't sign up when you're first eligible
- That you may cancel your Marketplace plan when you sign up for Medicare

Sample notice

<https://www.cms.gov/marketplace/applications-and-forms/notice-for-consumers-turning-65.pdf>

Turn age 65

Remember: there are **two** conditions

So, you might not be eligible for Medicare – or you might be eligible for Medicare, but not for premium-free Medicare Part A

Can I keep my Marketplace coverage?

You can keep your Marketplace plan after your Medicare Part A coverage starts (generally through the end of the year).

But, you'll no longer be eligible for the premium tax credit or other cost savings you may be getting for your Marketplace plan.

- You'll pay full price for your Marketplace plan if you keep it.
- You may have to pay back any tax credits you get after your Medicare coverage starts when you file your federal taxes.

Penalties

- You may have to pay a monthly late enrollment penalty for as long as you have Part B coverage.
 - The penalty goes up the longer you wait.
- You may also have to pay a penalty if you have to pay a Part A premium, but don't enroll when first eligible.

Handout

<https://www.cms.gov/marketplace/outreach-and-education/medicare-and-the-health-insurance-marketplace.pdf>

Which scenario?

	Drawing SSA benefits	NOT drawing SSA benefits
Stop work at age 65	1	2
Work past age 65	3	4

There are several scenarios

- We're going to presume a person is not drawing a cash benefit (retirement) from SSA
- Not covered as a subscriber or dependent in an employer group plan

Take action to enroll in Medicare

If you are NOT drawing a SSA retirement benefit when you reach age 65, you will be NOT automatically enrolled into Medicare Part A + Medicare Part B

You need to take action to enroll on-time

- [SSA.gov](https://www.ssa.gov)

The start date of coverage is the 1st day of the month when you turn age 65

Instructions

1. Sign up for Medicare through Social Security

www.ssa.gov

2. Choose which way you want to get your Medicare coverage

- www.medicare.gov

- **End** your HBE coverage

When can I sign up for Medicare?

Initial Enrollment Period

Lasts for 7 months, starting 3 months before you turn 65 and ending 3 months after the month you turn 65.

Initial enrollment period (IEP)

January	February	March	April 6th	May	June	July

This is your **ideal** plan.

Part B premium (per person per month, 2025)

Low-Income	Standard	High-income
MSP		IRMAA
State pays	\$185/mo	Depends on income

Part 4: Medicare systems of care

Starting coverage

- Employer group health plan
- Small group insurance, Individual market insurance
- Qualified Health Plan
 - in Washington, that's the "Health Benefits Exchange"
- Medicaid
 - in Washington, that's "Apple Health"
- No health insurance

Medicare systems of care

Original Medicare

Part A



Part B



You can add:

Part D



You can also add:

Supplemental coverage



This includes Medicare Supplement Insurance (Medigap). Or, you can use coverage from a current or former employer or union, or Medicaid.

Medicare Advantage (also known as Part C)

Part A



Part B



Most plans include:

Part D



Some extra benefits

Some plans also include:

Lower out-of-pocket costs

Coverage **in addition to** Medicare

- Employer group insurance programs
 - Offered through (former) employer or union
- Commercial market insurance
 - Medicare Advantage plans
 - Medicare Supplement plans
- **Medicaid**
 - Full-benefit programs
 - Partial-benefit programs

MAGI v non-MAGI

- Aged, Blind, and Disabled (ABD) – this is a CN program
- MN – this is “spenddown”
- Institutional care and HCBS (and waivers) – this is nursing home and in-home care
- Medicare Savings Programs (MSP) – this is
 - QMB
 - SLMB
 - QI-1
 - QWDI

Your options for Medicare coverage

Original Medicare

- Medicare Part A
 - Hospital (inpatient)
- Medicare Part B
 - Medical (outpatient)
- Medicare Part D
 - Prescription drug plans
- **More insurance**

Medicare Advantage **Medicare Part C**

- MA-PD plans
 - Consolidate in one package
 - Hospital (inpatient)
 - Medical (outpatient)
 - **Prescription drugs**
 - **Additional benefits**

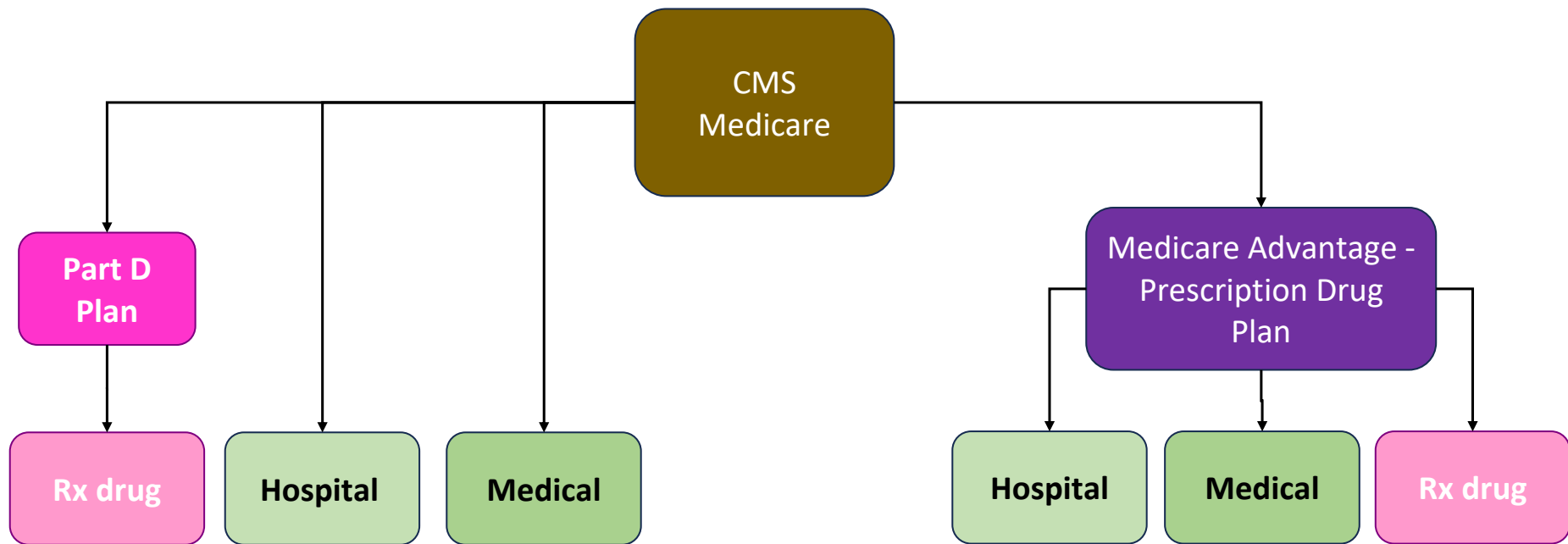
Rainbow chart

https://www.insurance.wa.gov/sites/default/files/documents/2025-rainbow-chart_1.pdf

This is a tool that our volunteer advisors use to help in screening people for eligibility.

They can also help with the application at wacconnection.org

Medicare in context



D-SNP's

- Dual-eligible, special needs plans
- These are a form of Medicare Advantage plans – they align to that system of care.
- All people with MSP can choose these. Some plans are only for some kinds of Medicaid coverage.

Let's compare?!



Part 5: SHIBA support & resources

Who we are

SHIBA is free, confidential, unbiased service of the Washington State Office of the Insurance Commissioner

Statewide

Health

Insurance

Benefits

Advisors

Some ways we help

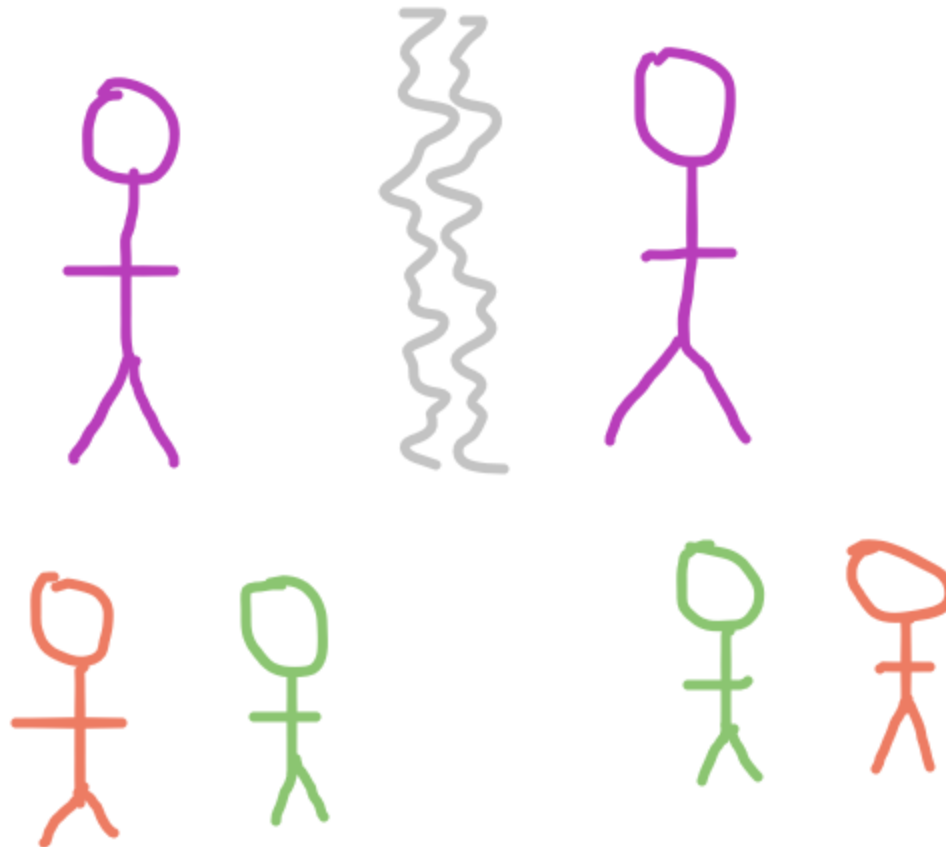
- Become eligible for Medicare
- Enroll in Medicare
- Transition into retirement
- Switch plans
- Complaints
- Compare or change your “approach” to Medicare
- Apply for Medicaid or Extra Help
- Medicare Part D
- Fraud

What we do

- Train volunteer advisors to help
- Educate about rights and options
- Explain how to compare plans
- Introduce programs that might save people money

Part 6: Navigators and SHIBA as partners

Connector organizations



Equity

We need your help - today - to get our own selves ready to be better.

Access (5 A's)

- Affordability
- Availability
- Accessibility
- Accommodation
- Acceptability

Opportunities

- SHIBA volunteers are winged unicorns!
- We're made to help each other.

Discussion / Q&A

Thank you !
