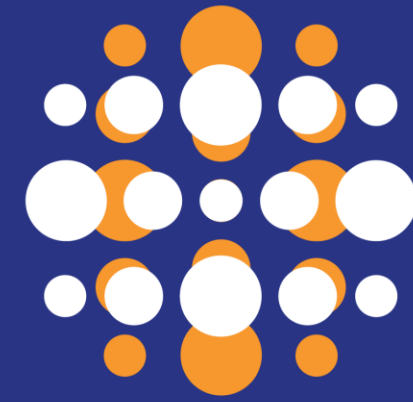


Medicare



ICBN

INDEPENDENT COMMUNITY BROKER NETWORK



Maximize 2024:
Assist Dual Eligibles
Before AEP

ICBN

myicbn.com

888-341-4314

Would **YOU** like to **earn \$20,000.00** over the next 16-months by doing the work during the next **six (6) weeks**?

Interested?

The Overview

WHAT DOES IT ALL MEAN? →

Individuals who receive both Medicare and Medicaid benefits

- Many of the same services are covered by both plans
- Medicare pays FIRST for services covered by Medicare and Medicaid
- Medicaid covers the remaining fees

Dual Eligible

The Overview

WHAT DOES IT ALL MEAN? →

Dual Eligible Special Needs Plans (D-SNPs)

- A type of Medicare Advantage plan designed to serve individuals who are dually enrolled in Medicare and Medicaid
- Offer a variety of services and benefits including:
 - Supplemental benefits like transportation assistance, OTC allowances for food, utilities, and health products
 - Care coordination
 - Facility based services like personal emergency response systems (PERS)
- Covers all medically necessary & preventative services offered under Part A and Part B of Medicare plus prescription drugs under Part D
- Little to no cost plans; may have \$0 monthly premiums
- PPO vs. HMO
 - PPO fewer network restrictions
 - PPO helps alleviate referral issues

Dual Eligible

The Overview

WHAT DOES IT ALL MEAN? →

Special Enrollment Periods (SEP) for Dually Eligible

- Runs for the first nine (9) months of the year
- People who qualify may enroll or change plans every three (3) months; changes take place the first day of the following month
- People may also enroll during Medicare Annual Enrollment Period which runs October 15 – December 7th
- To remain eligible for a dual health plan, people must recertify for Medicaid annually. As long as they remain eligible for Medicaid, their D-SNP will automatically renew each year

Dual Eligible

The Overview

PUTTING IT ALL TOGETHER →

Dual Eligible

Individuals who receive both Medicare and Medicaid benefits

- Many of the same services are covered by both plans.
- Medicare pays FIRST for services covered by Medicare and Medicaid.
- Medicaid covers the remaining fees.

Dual Eligible Special Needs Plans (D-SNPs)

- A type of Medicare Advantage plan designed to serve individuals who are dually enrolled in Medicare and Medicaid
- Offer a variety of services and benefits including:
 - Supplemental benefits like transportation assistance, OTC allowances for food, utilities, and health products
 - Care coordination
 - Facility based services like personal emergency response systems (PERS)
- Covers all medically necessary & preventative services offered under Part A and Part B of Medicare plus prescription drugs under Part D
- Little to no cost plans; may have \$0 monthly premiums
- PPO vs. HMO
 - PPO fewer network restrictions
 - PPO helps alleviate referral issues

Special Enrollment Periods (SEP) for Dually Eligible

- Runs for the first nine (9) months of the year
- People who qualify may enroll or change plans every three (3) months; changes take place the first day of the following month
- People may also enroll during Medicare Annual Enrollment Period which runs October 15 – December 7th
- To remain eligible for a dual health plan, people must recertify for Medicaid annually. As long as they remain eligible for Medicaid, their D-SNP will automatically renew each year

The Overview

HOW DO I KNOW? →

How can I identify a potential Medi-Medi client?

\$0 copays is a good indicator

Dual Eligible

The Patient Path

What To Look For? →



- **Original Medicare (Part A + B) + Standalone Part D Plan with Medicaid** as a secondary insurer
 - Medicaid covers out of pocket costs; \$0 copays
- **Dual Special Needs Plan (D-SNP)**
 - If fully subsidized, Medicaid covers out-of-pocket costs; \$0 copays
 - Additional benefits like OTC, food stipends, dental, vision, and hearing
 - *Is the pharmacy set up to process the \$120 - \$175 / month in OTC or food stipends?*

- Direct contracting with Express Scripts Med D = most aggressive brand reimbursements; worse than Wholesaler Acquisition Costs (WAC) – 10%
- Check for patients with \$0 copays on brand medications
- Search for a Humana or United Healthcare PPO D-SNP in your area
- Use SEP to enroll clients in the D-SNP, if client thinks it will be a better plan for their needs
- Get paid at WAC or better; in many cases this may be a 10%+ margin swing*
 - *Must earn full 11% MAPD Humana rebate for them to be your best payer**

Name	Region	BIN	PCN	Group	Preferred	Network
Centene Plans (PDP): Wellcare Classic (PDP), Wellcare Medicare Rx Value Plus (PDP), Wellcare Value Script (PDP)	National	610014	MEDDPRIME	2FGA	N	NPN

The scenario (example use only):

2024 Commissions for clients that switch plans: $\$306/12 = \25.50 per month

2025 Renewal Commissions: $\$313/12 = \26.08 per month

- Plans written in August, coverage starts September 1st (4-months commissions)
- Plans written in September, coverage starts October 1st (3-months commissions)
- October – December use AEP

Let's do some rough math:

25 patients transferred in August for September 1st start & 25 patients transferred in September for October 1st start.

$$(25 * (\$25.50 * 4)) + (25 * (\$25.50 * 3)) = \$2550 + 1912.5 = \mathbf{\$4,462.50}$$

As of January 1, 2025:

50 patients * $\$26.08 = \mathbf{\$1,304}$ per month; equivalent to $\mathbf{\$15,648}$ for the full year

After 16-months, you've earned a total of \$20,110.50



ICBN

INDEPENDENT COMMUNITY BROKER NETWORK



Thank you!

Terminology



- **Dual Eligibles** - The following describes the various categories of individuals who, collectively, are known as dual eligibles. Medicare has two basic coverages: Part A, which pays for hospitalization costs; and Part B, which pays for physician services, lab and x-ray services, durable medical equipment, and outpatient and other services. Dual eligibles are individuals who are entitled to Medicare Part A and/or Part B and are eligible for some form of Medicaid benefit.
- **Qualified Medicare Beneficiaries (QMBs) without other Medicaid (QMB Only)** - These individuals are entitled to Medicare Part A, have income of 100% Federal poverty level (FPL) or less and resources that do not exceed twice the limit for SSI eligibility, and are not otherwise eligible for full Medicaid. Medicaid pays their Medicare Part A premiums, if any, Medicare Part B premiums, and, to the extent consistent with the Medicaid State plan, Medicare deductibles and coinsurance for Medicare services provided by Medicare providers. Federal financial participation (FFP) equals the Federal medical assistance percentage (FMAP).
- **QMBs with full Medicaid (QMB Plus)** - These individuals are entitled to Medicare Part A, have income of 100% FPL or less and resources that do not exceed twice the limit for SSI eligibility, and are eligible for full Medicaid benefits. Medicaid pays their Medicare Part A premiums, if any, Medicare Part B premiums, and, to the extent consistent with the Medicaid State plan, Medicare deductibles and coinsurance, and provides full Medicaid benefits. FFP equals FMAP.
- **Specified Low-Income Medicare Beneficiaries (SLMBs) without other Medicaid (SLMB Only)** - These individuals are entitled to Medicare Part A, have income of greater than 100% FPL, but less than 120% FPL and resources that do not exceed twice the limit for SSI eligibility, and are not otherwise eligible for Medicaid. Medicaid pays their Medicare Part B premiums only. FFP equals FMAP.
- **SLMBs with full Medicaid (SLMB Plus)** - These individuals are entitled to Medicare Part A, have income of greater than 100% FPL, but less than 120% FPL and resources that do not in exceed twice the limit for SSI eligibility, and are eligible for full Medicaid benefits. Medicaid pays their Medicare Part B premiums and provides full Medicaid benefits. FFP equals FMAP.

Terminology

There's More... 



- **Qualified Disabled and Working Individuals (QDWIs)** - These individuals lost their Medicare Part A benefits due to their return to work. They are eligible to purchase Medicare Part A benefits, have income of 200% FPL or less and resources that do not exceed twice the limit for SSI eligibility, and are not otherwise eligible for Medicaid. Medicaid pays the Medicare Part A premiums only. FFP equals FMAP.
- **Qualifying Individuals (1) (QI-1s)** - This group is effective 1/1/98 - 12/31/02. There is an annual cap on the amount of money available, which may limit the number of individuals in the group. These individuals are entitled to Medicare Part A, have income of at least 120% FPL, but less than 135% FPL, resources that do not exceed twice the limit for SSI eligibility, and are not otherwise eligible for Medicaid. Medicaid pays their Medicare Part B premiums only. FFP equals FMAP at 100%.
- **Qualifying Individuals (2) (QI-2s)** - This group is effective 1/1/98 - 12/31/02. There is an annual cap on the amount of money available, which may limit the number of individuals in the group. These individuals are entitled to Medicare Part A, have income of at least 135% FPL, but less than 175% FPL, resources that do not exceed twice the limit for SSI eligibility, and are not otherwise eligible for Medicaid. Medicaid pays only a portion of their part B premiums (\$2.23 in 1999). FFP equals FMAP at 100%.
- **Medicaid Only Dual Eligibles (Non QMB, SLMB, QDWI, QI-1, or QI-2)** - These individuals are entitled to Medicare Part A and/or Part B and are eligible for full Medicaid benefits. They are not eligible for Medicaid as a QMB, SLMB, QDWI, QI-1, or QI-2. Typically, these individuals need to spend down to qualify for Medicaid or fall into a Medicaid eligibility poverty group that exceeds the limits listed above. Medicaid provides full Medicaid benefits and pays for Medicaid services provided by Medicaid providers, but Medicaid will only pay for services also covered by Medicare if the Medicaid payment rate is higher than the amount paid by Medicare, and, within this limit, will only pay to the extent necessary to pay the beneficiary's Medicare cost sharing liability. Payment by Medicaid of Medicare Part B premiums is a State option; however, States may not receive FFP for Medicaid services also covered by Medicare Part B for certain individuals who could have been covered under Medicare Part B had they been enrolled. FFP equals FMAP.