

# OSHIIIP NEWS

Published by the Ohio Department of Insurance to serve our dedicated OSHIIIP volunteers throughout Ohio

## A Look Back at 2017



January 2018  
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OSHIIIP has remained diligent in providing objective educational information and unbiased counseling opportunities to diverse populations throughout the state. 2017 was no exception. In fact, we had a phenomenal year despite a few setbacks.

### Here are a few highlights:

**National Performance Report:** For the third consecutive year, OSHIIIP received "Excellent" in all five performance measures.

**Money Saved:** OSHIIIP saved Ohioans \$23,000,912 (and counting)

**Counseled:** Our awesome staff and volunteers helped 383,413 Ohio beneficiaries.

**Educated:** 291,353 Ohioans learned about their Medicare options and eligibility for financial assistance programs.

**Welcome To Medicare Series:** OSHIIIP staff and volunteers experienced a 7% increase in attendance. The series entailed 44 seminars and 12 webinars.

**Medicare Check-Up Events:** OSHIIIP experienced a huge volunteer presence at each event. Our site and partner relationships are outstanding and our one-on-one counseling appointment slots filled up quickly.

**Good News Story:** We received hundreds of updates from volunteers reporting clients expressing their gratitude for our assistance with their Medicare questions/concerns.

To learn more about OSHIIIP's 2017 accomplishments and 2018 goals be sure to tune into "State of the SHIP" webinars January 17, 2018, **10:00am** and **2:00pm** presented by Chris Reeg, director of OSHIIIP.

# News You Can Use

## Troubleshooting Medicare

Learn ways to avoid common Medicare coverage problems, as well as what you can do to address problems that have already occurred.

### **Beneficiaries should:**

#### **Make sure their provider accepts Medicare or works with their plan**

- If a beneficiary sees a provider who works with their Medicare coverage, they are not responsible for paying the full cost for their care out of pocket.
- If they have Original Medicare, they should see a provider who accepts Medicare coverage and takes assignment. Taking assignment means the provider accepts Medicare's approved amount for a service as full payment. Some Original Medicare providers do not take assignment and can charge your client up to 15% more for services. (Ohio has a balanced billing ban). Your client may pay more out of pocket, but Medicare still covers some of the cost of the care they receive.

On the other hand:

- If a beneficiary sees a provider who has formally opted out of Medicare, they will be responsible for paying the full cost of the services they receive. Medicare will not pay for any care they receive from a provider who has opted out, and these providers can charge any amount they wish for services.
- If a client has a Medicare Advantage Plan, make sure they understand their plan's network. Many plans require beneficiaries to use their network of providers to have care covered. If a client has that type of plan and they see an out-of-network provider, their plan may not cover some, or all of the cost of their care.

#### **Understand Medicare Coverage Rules**

Clients do not need to know all of Medicare's coverage rules, but there are two main rules they should keep in mind:

1. Medicare covers medically necessary care.
2. Medicare excludes some services from coverage, such as cosmetic surgery.

Before receiving a service, your client should check to make sure Medicare covers it and if there are any steps they must take to receive it. If Original Medicare or their Medicare Advantage Plan does not cover a service, it may be because they did not follow coverage rules. For example, Medicare only covers certain preventive screenings if they meet the criteria. Also, some Medicare Advantage Plans require a referral from a primary care physician before covering a visit to a specialist.

To learn about Original Medicare's coverage of a needed service, beneficiaries can call 1-800-MEDICARE, visit [www.medicare.gov](http://www.medicare.gov), read the relevant sections of their Medicare & You handbook, talk to a SHIP counselor, or speak with their provider. When providers do not think Medicare will cover a client's care, they should receive a notice called an Advance Beneficiary Notice. If Medicare denies payment, your client can appeal to ask Medicare to reconsider their decision.

# News You Can Use

## Troubleshooting Medicare Con't

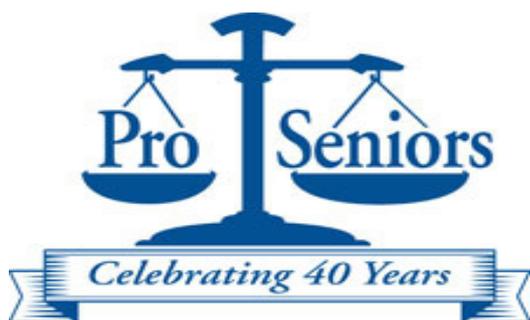
### **Know your right to an appeal**

Original Medicare or your Medicare Advantage Plan may at some point deny coverage for a service or item your client received in the past, such as a doctor's office visit, or a service they want to receive in the near future, such as a lab test. They will receive a denial notice explaining the outcome. When denials happen, beneficiaries can appeal to ask that the service or item be covered. They can also ask their provider for help filing the appeal according to instructions on the denial notice. A SHIP counselor may also be able to help them.

If a client is receiving certain care—such as inpatient hospital, skilled nursing facility, home health, or hospice care—their provider may decide to end care because they do not think Medicare will pay for the service. If this happens, your client can appeal their provider's decision if they think continued care is medically necessary. Appeal instructions will be on notices they receive about their care ending.

### **Take Action**

1. Clients should speak with their provider about Medicare's coverage of the services they need. Advise them to call 1-800-Medicare, their Medicare Advantage Plan, or OSHIP at 1-800-626-1578 if they have any questions.
2. Clients should contact Ohio Pro Seniors at 1-800- 488-6070, if they receive any notices or bills that seem suspicious. A representative can teach them how to spot and protect themselves from potential Medicare fraud.
3. Clients should also read notices they receive in the mail to make sure their services were covered. If a service was not covered, they can follow instructions to appeal.



## On Medicare and Need Assistance?

KEPRO offers **FREE** services:

**Patient Navigation** – A program to help you navigate through your treatment and better understand your care. KEPRO's Patient Navigators can:

- Help coordinate your care and help you understand your diagnosis or treatment plan.
- Offer tips on how to manage your medications.

**Immediate Advocacy** – A process to quickly resolve a complaint or concern about medical care or services. KEPRO can help with situations such as:

- My doctor ordered a wheelchair, but I have not gotten it yet.
- I need to refill my prescription but can't get an appointment to see my doctor.

Call **855-408-8557** or visit  
[www.KEPROqio.com](http://www.KEPROqio.com) for information.



# 2017 Good News Stories

Here is just a small sample of OSHIIP's Good News Stories that our staff and volunteers have shared from the field. We look forward to sharing more stories like these below in 2018!

**From a Volunteer:** *"We counseled about 20 individuals today, enrolled nine people in plans and saved these Medicare beneficiaries a total of about \$40,000 for 2018! Three of the new enrollments amounted to around \$38,000 of the total savings!*

*We are stoked!! How enjoyable to see the shock and appreciation these beneficiaries exhibited!*

*As always, I learned a lot from Connie and Karen - they are so experienced and knowledgeable. I'm happy they are excellent teachers as well!*

*I am excited and proud to be a part of OSHIIP.*

*Thanks for the coaching, encouragement and opportunity you provide to us and to other volunteers across the state."*

A beneficiary referred by the Dayton-area Social Security Administration was unable to get immunosuppressive drugs billed to Part B. A ROCHIDMO was entered and the beneficiary received his medications immediately, and they were paid by Part B.

Two Medicare beneficiaries contacted OSHIIP saying they were sold Medigap policies under false pretenses by an Anthem Blue Cross/Blue Shield agent. We worked with Anthem to obtain a refund in the amount of \$350 for the couple.



A beneficiary contacted OSHIIP because his Medicare Drug Plan did not cover his prescription for a FlexPen. We helped file an online Low Income Subsidy application for him. We also connected him with a disease specific program, and now he is receiving a quantity of the pens for \$50 per month.

A beneficiary was using a number of medications to treat a chronic condition and many of her medications were not covered by her Advantage Plan. OSHIIP also discovered that her income qualified her for Extra Help. An application was submitted for the Extra Help (LIS) benefit and Social Security approved the full subsidy for the beneficiary. We also connected her with disease specific patient assistance programs.



# OSHIP Roadshow

## Medicare 101

### **Summit County**

January 24, 6pm  
Nordia Hills Library  
9458 Olde 8 Rd.  
Northfield, Ohio 44067

## Welcome to Medicare

### **Butler County**

January 16, 6pm  
Hamilton Lane Library  
300 N. Third St.  
Hamilton, Ohio 45011

## New to Medicare

### **Delaware County**

January 6, 10 am  
January 24, 6 pm  
SourcePoint  
800 Cheshire Rd.

Delaware, Ohio 43015

\*For Delaware County Residents only.

RSVP at 740-363-6677

## Health Fair

### **Medina County**

January 12, 9:30am-12:30pm  
Brunswick Recreation Ctr.  
3637 Center Rd.  
Brunswick, Ohio 44212

### **Columbiana County**

January 25, 9am-12pm  
Columbiana County JFS  
7989 Dickey Dr.  
Lisbon, Ohio 44432

## Welcome the Newest OSHIP Volunteers!

Michael Milgrom – Cuyahoga County

Brittney Daugherty – Preble County

Angela Muchmore – Butler County

Rachel Fall – Ottawa County

Ainura Aitubarova – Hamilton County

Ann Ghazarayan – Hamilton County

# Webinar and Volunteer Training

## **2018 OSHIIP Volunteer Training Webinars**

Attendance at a monthly OSHIIP training webinar counts toward your OSHIIP volunteer training recertification. Register for a training below. For audio call 1-877-820-7831, use passcode: 896960.

January 17 Webinar: State of the SHIP

10am: <https://register.gotowebinar.com/register/602322074107197107>

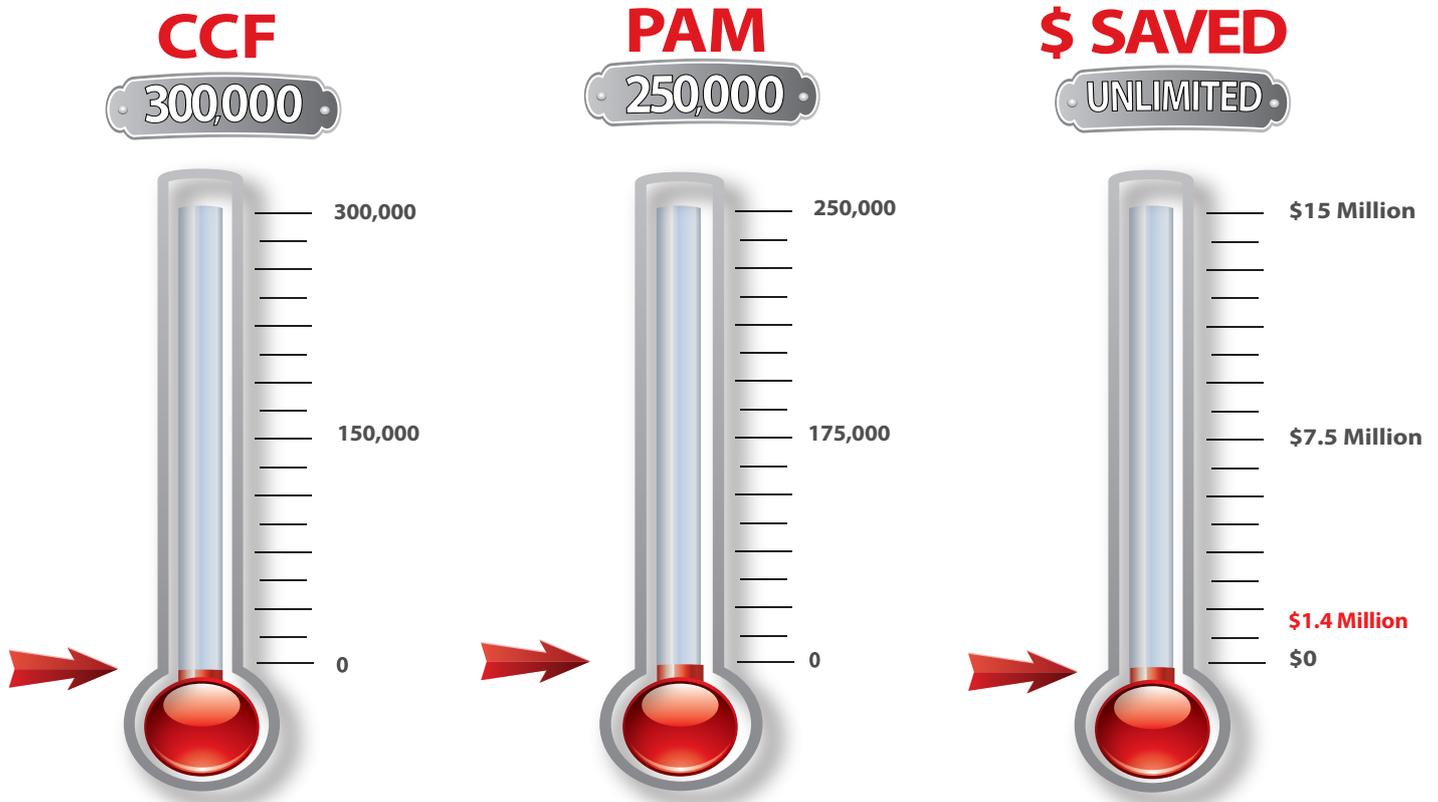
2pm: <https://register.gotowebinar.com/register/8333930188750214146>

## **Welcome to Medicare Webinar**

This webinar is for those turning 65 and new to Medicare. There is no phone number to call. Attendees will need to access their computer speakers for audio and can type in questions for the moderators to answer. Click on the date to register: 1/16/2018, 4:00pm.

We're Ready for Another Goal-Breaking Year!

## OSHIIP 2018 Goals



**ODI**  
Ohio Department  
of Insurance

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Columbus, Ohio 43215

John R. Kasich  
Governor

Jillian Froment  
Director