

# OSHIIP News

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

**JANUARY 2012**

## *Medicare introduces new preventive benefit*

In November of last year, the Centers for Medicare & Medicaid Services (CMS) announced Medicare's new coverage for preventive services to reduce obesity, adding to Medicare's existing portfolio of preventive services that are now available without cost sharing.

The new benefit complements the Million Hearts initiative led jointly by CMS and the Centers for Disease Control and Prevention to prevent one million heart attacks and strokes in the next five years.

"Obesity is a challenge faced by Americans of all ages, and prevention is crucial for the management and elimination of obesity in our country," said CMS Administrator Donald M. Berwick, MD. "It's important for Medicare patients to enjoy access to appropriate screening and preventive services."

More than 30% of both men and women in the Medicare population are estimated to be obese. Obesity is directly or indirectly associated with many chronic diseases, including those such as cardiovascular disease and diabetes, that disproportionately affect racial and ethnic minorities. Addressing the

prevention of obesity-related disparities can help reduce obesity prevalence and close the health disparity gap among Medicare beneficiaries.

Screening for obesity and counseling for eligible beneficiaries by primary care providers in settings such as physicians' offices are covered under this new benefit.

For a beneficiary whose body mass index screens positive for obesity, the benefit includes one face-to-face counseling visit each week for one month, and one face-to-face counseling visit every other week for five additional months.

If the beneficiary achieves a weight reduction of at least 6.6 pounds during the first six months of counseling, the individual may receive one face-to-face counseling visit every month for an additional six months — a total of 12 months of counseling.

Through the end of October 2011, 22.6 million people with Original Medicare had received one or more of Medicare's free covered preventive services.

***Inside: 2012 Medicare amounts, page 2.***

*Medicare premium, deductible  
and copay amounts for 2012*

<i>Part A</i>	<i>2011</i>	<i>2012</i>
Hospital deductible (per benefit period)	\$1,132	\$1,156
Hospital copayments (in-patient days 61-90)	\$283/day	\$289/day
Lifetime Reserve Day copay (in-patient days 91-150)	\$566/day	\$578/day
Skilled Nursing Facility copay	\$141.50/day	\$144.50/day
Premium 40 quarters or more	\$0	\$0
Premium 30-39 quarters	\$248	\$248
Premium less than 30 quarters	\$450	\$451
<i>Part B</i>	<i>2011</i>	<i>2012</i>
Monthly premium Standard premium applies to individuals with modified adjusted gross income (MAGI) of \$85,000 or less; married couples with MAGI of \$170,000 or less.	\$115.40	\$99.90
Individuals MAGI of \$85,001 - \$107,000 Married couples MAGI of \$170,001 - \$214,000	\$161.50	\$139.90
Individuals MAGI of \$107,001 - \$160,000 Married couples MAGI of \$214,001 - \$320,000	\$230.70	\$199.80
Individuals MAGI of \$160,001 - \$214,000 Married couples MAGI of \$320,001 - \$428,000	\$299.90	\$259.70
Individuals MAGI above \$214,000 Married couples with MAGI above \$428,000	\$369.10	\$319.70
Annual Deductible	\$162	\$140
Coinsurance amount Medicare pays 80% of the allowed amount for most Part B services	20%	20%

## Volunteer Profile

# *Greene County's Brenda Pollock appreciates the rewards of volunteering*

Volunteer counselor Brenda Pollock of Greene County would encourage any person to volunteer for OSHIIP.

"Everyone can use the information our program provides," Brenda said.

But that's not the best thing about counseling for OSHIIP: "Helping clients is so very rewarding," she said.

Born in Dayton, Brenda moved at age 10 with her family to Cedarville, where she's lived since.

She retired from Ameritech in 2001 and has worked for the Greene County Council on Aging in Xenia since 2003.

Brenda joined OSHIIP in July 2009.

Among her favorite program activities is helping the clients she meets who have limited incomes.

Brenda said, "I've realized that many people don't know programs offering financial assistance even exist."

Once aware of the available help, these clients react in ways that

never fail to make Brenda smile.

One gentleman she helped told her, "You're worth your weight in gold!"

Brenda gives high praise to OSHIIP's Greene County Volunteer Coordinator Susan Millward. Susan works with Brenda at the Council on Aging.

"Anytime I get a question I can't answer, I take it to Susan," Brenda said.

This way, not only is the client's question answered; Brenda learns as well.

She said, "If it weren't for Susan, I probably couldn't do this."

Brenda has two grown sons living in the area, and a grandson. She loves spending time with her grandson, and always enjoys going to live theatre and the movies.

Thank you, Brenda, for all you do for OSHIIP.

Thanks as well to the Greene County Council on Aging and Coordinator Susan Millward.



*Brenda Pollock loves helping LIS clients*

## Federal Employee Health Benefits

### News You Can Use

#### → **Do Federal Employee Health Benefit (FEHB) Plans and Medicare cover the same types of expenses?**

In general, yes. Some FEHB plans may provide coverage for certain items that Medicare doesn't cover, including but not limited to:

- Routine physicals and emergency care outside of the United States
- Some preventive services
- Dental and vision care

Medicare may cover some services and supplies that some FEHB plans may not cover, including but not limited to:

- Some orthopedic and prosthetic devices, and durable medical equipment
- Home health care
- Limited chiropractic supplies

#### → **Since I have FEHB coverage, do I need Medicare coverage?**

The decision to enroll is yours.

**Part A** — If you are entitled to Part A without paying the premium, consider taking it even if you're still working. It may help cover some of the hospital related costs that your FEHB plan may not cover, such as deductibles, coinsurance, and charges that exceed the plan's allowable charges.

**Part B** — If you are retired and enrolled in a fee-for-service (FFS), Part B and your FFS plan may combine to provide almost complete coverage for all medical expenses.

If you are enrolled in an HMO, you may not need Part B. HMOs provide most medical services for small copays. However, you may want to consider Part B:

- It pays for costs involved with seeing doctors outside the Plan's network
- It pays for costs for non-emergency care in the U.S. if travel involved
- Required for Medicare Advantage & Tricare

If you are working and have FEHB or you are covered under your spouse's group health insurance plan, you do not have to enroll in Part B when you turn 65. You'll have a special enrollment period when you retire or your spouse retires to enroll in Part B with no penalty.

**Part C** — Medicare Advantage is another way to get Medicare benefits. You may receive extra benefits such as vision or dental that Part A and Part B don't cover. If you wish to enroll in a Medicare Advantage plan, you must be enrolled in Part A and Part B. Contact your retirement office to discuss the option of suspending your FEHB enrollment.

**Part D** — Federal retirees and employees will likely not benefit from enrolling in Part D as comprehensive drug coverage is included in their FEHB plan. However, retirees with limited resources may want to consider enrolling in Part D if they qualify for the Extra Help.

#### → **Is my FEHB plan or Medicare the primary payer?**

Under most circumstances, your FEHB Plan must pay benefits first when you are an active Federal employee or reemployed annuitant and either you or your covered spouse has Medicare.

Medicare must pay benefits first when you are an annuitant and either you or your covered spouse has Medicare

#### → **Can I change my FEHB enrollment when I become eligible for Medicare?**

Yes, you may change your FEHB enrollment to any available plan or option at any time beginning 30 days before you become eligible for Medicare.

You may use this enrollment change opportunity only once. You may also change your enrollment during Medicare's Annual Enrollment Period or because of another event that permits enrollment changes, such as a change in family status.

#### → **Should I change plans?**

Once Medicare becomes the primary payer, you may find that a lower cost FEHB plan is adequate for your needs, especially if you are currently enrolled in a plan's high option. Also, some plans waive deductibles, coinsurance, and copayments when Medicare is primary.

Carefully review your plan's benefits before you make any changes.

**Information for this article provided by CMS.**

*Copy & paste News You Can Use items into your newsletter, then complete a PAM form.*

# OSHIIP SUCCESS STORIES !

*We don't mean to blow our own horn —  
but some successful client contacts demand nothing less!*

A client who met with **OSHIIP Volunteer Jill Schafer of Huron County** at the county's Nov. 9 Medicare Check-Up event takes a medication that costs \$11,000 / month at full price. The client was coming off COBRA and was very concerned about being able to afford the prescription. Jill ran a comparison of Medicare drug plans.

She found a special pharmacy that carries the medication and identified a plan with that pharmacy in the plan's network. The client would enter the donut hole early in the year, and earn catastrophic coverage soon after. Jill's client told her, "I can actually go eat lunch now. I was afraid I would be tied up in knots wondering how to afford my prescriptions for 2012." Savings for the year: \$125,890! Thank you, Jill!



During Jackson County's Check-Up event Nov. 22, **OSHIIP Trainer Assistant Josh**

**Jones** compared prescription drug plans (PDPs) for a client who receives Extra Help. The man had been auto-enrolled for 2012 but scheduled a comparison appointment to exercise his choice. Good thing: the plan in which he'd been enrolled does not cover several costly prescriptions, leaving the client with a projected out-of-pocket cost of more than \$30,000 in 2012. Josh compared PDPs and identified the client's best plan, one that covers all the man's prescriptions. His savings: \$29,620 over the auto-enrolled plan. Thank you, Josh!



At the Nov. 15 Check-Up event in Vinton County, **OSHIIP Trainer Kendra Thompson** helped a client compare Medicare prescription drug plans. They identified a plan that would save about \$200 / month compared to the client's 2011 plan. Kendra also assisted the client in applying for Extra Help from the Social Security Administration. With savings from the new plan and the addition of Extra Help, this client will save \$3,600 on prescription drugs in 2012! Thank you, Kendra!



In a case of going beyond our usual assistance, **OSHIIP Trainer Assistant Tanya**

**Simpson** saved a man's life — literally. At a Dec. 2 counseling event in Franklin County, a man's heart stopped while using the facility's exercise equipment. Tanya performed CPR and used a defibrillator to get the man's heart beating again, then continued to help until paramedics arrived. **Thank you, Tanya!**



## Medicare Advantage plans in 2012

Below is a list of Medicare Advantage plans available in Ohio in 2012. Plans are listed by type; companies may have multiple plans of each type. Use the Medicare Plan Finder at [www.medicare.gov](http://www.medicare.gov) to identify the plans serving your county, or call OSHIP at 1-800-686-1578. Call the company for plan information.

### Health Maintenance Organization (HMO)

AARP MedicareComplete (SecureHorizons by UnitedHealthcare): 1-800-547-5514

Aetna Medicare: 1-800-832-2640

Anthem Senior Advantage: 1-800-797-5957

Humana Gold Plus: 1-800-833-2364

Kaiser Permanente Medicare Plus: 1-877-408-3495

MediGold: 1-800-964-4525

Molina Medicare Options: 1-866-403-8293

Paramount Elite : (419) 887-2525

PrimeTime Health Plan: (330) 363-7407

SummaCare Secure: 1-800-328-7305

SecureCare (The Health Plan): 1-877-236-2290

Wellcare Value: 1-877-232-7119

### Preferred Provider Organization (PPO)

Aetna Medicare: 1-800-832-2640

Anthem Medicare Preferred and Blue Medicare Access: 1-800-797-5957

HumanaChoice: 1-800-833-2364

MediGold Choice: 1-800-964-4525

PrimeTime Health Plan: 1-800-577-5084

SecureChoice (The Health Plan): 1-877-847-7915

UMPC for Life: 1-877-381-3765

Universal Hassle-Free: 1-800-965-7034

WindsorSterling Gold Plus: 1-888-900-4305

### Private Fee-for-Service (PFFS)

Any, Any, Any Gold (Universal Health Care): 1-800-965-7034

Humana Gold Choice: 1-800-833-2364

Today's Options Premier (Universal American): 1-866-418-1923

### Special Needs Plan (SNP)

*Special Needs Plans are generally available only to people who are covered by both Medicare and Medicaid (dual eligibles).*

Advantage by Buckeye Community Health Plan (HMO): 1-866-389-7690

CareSource Advantage (HMO): 1-800-488-0134

Humana Gold Plus (HMO): 1-800-457-4708

Molina Medicare Options Plus (HMO): 1-866-403-8293

UnitedHealthcare Dual Complete (HMO): 1-888-834-3721

United HealthCare Nursing Home Plan (HMO): 1-888-834-3721

Wellcare Access (HMO): 1-877-270-0612

### Programs for All-Inclusive Care for the Elderly (PACE) Plan

*PACE plans help eligible people age 55 or older who need chronic care stay independent as long as possible.*

McGregor PACE (Cuyahoga Co. only): (216) 791-3580 or (216) 957-3518

TriHealth Senior Link (Hamilton Co. only): (513) 531-5110

*Please note: [www.medicare.gov](http://www.medicare.gov) is the source for this information.*

## *Scheduled training sessions for 2012*

### Refresher training

#### **Franklin Co. — Columbus**

Thursday, March 1; 9 a.m. - noon  
State Library of Ohio; 274 E. First Ave.

#### **Warren Co. — Lebanon**

Thursday, March 1; 9 a.m. - noon  
Warren Co. Services; 570 N. St. Rte. 741

#### **Lawrence Co. — South Point**

Thursday, April 26; 10:30 a.m. - 1:30 p.m.  
Southern Branch Library; 317 Solida Rd.

#### **Franklin Co. — Columbus**

Wednesday, May 30; 9 a.m. - noon  
State Library of Ohio; 274 E. First Ave.

### Complete training

#### **Franklin Co. — Columbus**

Feb. 2, 9, 16, 23; 9 a.m. - 3 p.m.  
State Library of Ohio; 274 E. First Ave.

#### **Cuyahoga Co. — Euclid**

March 21, 28, April 4, 11; 9 a.m. - 3 p.m.  
Euclid Community Center; One Bliss Lane

#### **Scioto Co. — Portsmouth**

April 3, 10, 17, 24; 9 a.m. - 3 p.m.  
Area Agency on Aging #7; 1644 11th St.

#### **Franklin Co. — Columbus**

May 2, 9, 16, 23; 9 a.m. - 3 p.m.  
State Library of Ohio; 274 E. First Ave.

Register online for sessions shown above at

[https://secured.insurance.ohio.gov/ConsumerApps/OSHIIP\\_Train\\_Reg/training\\_reg.aspx](https://secured.insurance.ohio.gov/ConsumerApps/OSHIIP_Train_Reg/training_reg.aspx)

### OVAB face-to-face meeting

**Columbus, Friday, March 23, 9 a.m. - 2 p.m.**

State Library of Ohio, 274 E. First Ave.

## *The OSHIIP Road Show:*

### *Volunteers Welcome!*

Here's our monthly list of OSHIIP speaking events you can attend. Attendance is voluntary. There's no need to register in advance. Simply inform the trainer you're there before the presentation so you can be introduced. See you there!

#### Medicare 101

##### **Montgomery Co. — Trotwood**

Feb. 28; 5 p.m. - 7 p.m.  
Trotwood Library Branch  
651 E. Main St.

##### **Cuyahoga Co. — Westlake**

March 9; 1:30 p.m. - 3:30 p.m.  
Westlake Public Library  
27333 Center Ridge Rd.

##### **Montgomery Co. — Englewood**

March 13; 10 a.m. - 3 p.m.  
Northmont Library  
333 W. National Rd.

#### Medicare 101

##### **Franklin Co. — Columbus**

March 14; 9 a.m. - 1:30 p.m.  
Meadow Park Church of God  
2425 Bethel Rd.

##### **Montgomery Co. — Dayton**

March 27; 1 p.m. - 3 p.m.  
Wilmington Stoop Branch  
3980 Wilmington Pike

##### **Montgomery Co. — Dayton**

April 10; 1 p.m. - 3 p.m.  
Westwood Library  
3207 Hoover Ave.

## *2012 Medicare Advantage disenrollment period runs Jan. 1 through Feb. 14*

If you're in a Medicare Advantage (MA) plan and want to return to Original Medicare, you can make this change anytime from Jan. 1 through Feb. 14.

If your MA plan includes prescription drug coverage, you can also choose a stand-alone Part D plan. Your new coverage will begin the first day of the month after the plan gets your enrollment form.



### *How to contact OSHIIP:*

- Call 1-888-686-VOLS (686-8657)
- Fax to: (614) 752-0740
- email to [oshiipmail@insurance.ohio.gov](mailto:oshiipmail@insurance.ohio.gov)



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This publication has been created or produced by Ohio with financial assistance, in whole or in part, through a grant from the Centers for Medicare & Medicaid Services, the Federal Medicare agency.



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