

OSHIIP NEWS

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

2017 Star Rating Information Available

Important Medicare & Medicaid Services' (CMS) 2017 Star Rating information is now available. This data is associated with CMS' important strategic goal to improve the quality of care and general health status for Medicare beneficiaries. CMS publishes the Part C and D Star Ratings each year to: measure quality in Medicare Advantage (MA) and Prescription Drug Plans (PDPs or Part D plans), assist beneficiaries in finding the best plan for them, and determine MA Quality Bonus Payments. The Star Ratings measures span five broad categories: outcomes, intermediate outcomes, patient experience, access and process.

Medicare Advantage with prescription drug coverage (MA-PD) contracts are rated on up to 44 unique quality and performance measures; MA-only contracts (without prescription drug coverage) are rated on up to 32 measures; and stand-alone PDP contracts are rated on up to 15 measures. Each year, CMS conducts a comprehensive review of the measures that make up the Star Ratings, considering the reliability of the measures, clinical recommendations, feedback received from stakeholders, and data issues. Star ratings also support the efforts of CMS to improve the level of accountability for the care provided by physicians, hospitals, and other providers.

Highlights of Contract Performance in 2017 Star Ratings - Changes in Ratings from 2016

- Approximately 49 percent of MA-PDs (178 contracts) that will be active and rated in 2017 earned four stars or higher for their 2017 overall rating.
- Weighted by enrollment, close to 68 percent of MA-PD enrollees are in contracts with four or more stars.
- The number of active and rated contracts, and the percent of MA-PD enrollees weighted by enrollment in contracts with four or more stars in 2017 is approximately the same in 2017 as compared to 2016.
- In 2017, weighted by enrollment, over 90% of MA-PD enrollees are in contracts with ratings of 3.5 or more stars.

[See detailed Star Rating data.](#)

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Mary Taylor
Lt. Governor / Director

News You Can Use

Medicare Supplement (Medigap) Insurance

What is a Medigap?

A Medigap policy is standardized supplemental health insurance that pays for part or all of the Original Medicare cost-sharing gaps that you owe. You may hear Medigaps referred to as Medicare supplements or supplemental insurance. It is important to know that Medigap policies only work with Original Medicare Parts A and B. Medigaps cover Original Medicare's cost sharing "gaps." These costs include deductibles, coinsurance charges, and copayments (copays). All Medigaps must cover 365 inpatient hospital days in addition to the days that Medicare covers for inpatient hospital stays.

What costs do Medigaps cover?

There are different types of Medigap policies that cover different Original Medicare costs. The policies are lettered Plan A, B, C, D, F, G, K, L, M, and N. Plans E, H, I, and J were sold prior to 2010. Note that insurance companies do not have to offer all ten Medigap policies. Plans with the same letter offer the same benefits, but each insurance company may charge a different monthly premium. Keep in mind that lettered plans that cover more costs are likely to have a higher premium than the lettered plans that cover fewer costs. Some costs are covered by all Medigaps. These include: Part A hospital coinsurance, Part B coinsurance, first three pints of blood and Part A hospice coinsurance or copay. Some Medigaps cover all or part of the following costs: Part A skilled nursing facility coinsurance, Part A deductible, Part B deductible, Part B excess charge and emergency health care abroad.

What happened to Medigap Plans E, H, I, and J?

These Medigap plans were available before June 1, 2010 and are no longer sold. If you already have one of these plans, you can keep it. Insurers must continue to renew Medigap policies issued before 2010.

How does a Medigap work with Original Medicare?

Medigaps pay after Original Medicare pays its share of the cost of covered health care services. If you have Original Medicare and a Medigap, and you receive a Medicare-covered service, Medicare pays first and the Medigap pays second. Let's say you have Original Medicare and a Medigap and you go to a nearby outpatient clinic to get a medically necessary chest x-ray. First, Original Medicare pays 80% of the Medicare-approved amount for your chest x-ray. Then the Medigap covers part or all of the remaining 20% percent coinsurance. If you did not have a Medigap, you would have to pay the coinsurance out of pocket.

How are Medigap premiums set?

Medigap premiums are set in different ways depending on your state. There are three ways insurers price Medigaps: community-rated pricing, issue-age rated pricing and attained-age pricing. Prices also vary between plans of the same letter and plan types. For example, Plan G can have many different costs from insurer to insurer, and Plan C is always more expensive than Plan A because it covers more costs.

When is the best time to buy a Medigap?

Under federal law you only have the right to buy a Medigap if you are 65 or older and you buy your policy during a protected time. The protected enrollment times are during your Medigap Open Enrollment Period or when you have a guaranteed issue right. When you enroll during one of these protected times, Medigap insurers cannot deny you coverage and must offer you a Medigap at the best available rate.

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News You Can Use... Cont'd

Medicare Supplement (Medigap) Insurance

What is the Medigap Open Enrollment Period?

If you have Original Medicare you have the right to buy a Medigap for up to six months, beginning with the month you are 65 or older and enrolled in Medicare Part B. This six-month period, in which you are both 65 and enrolled in Part B, is known as the Medigap Open Enrollment Period. If you want to purchase a Medigap during your Medigap Open Enrollment Period, insurance companies cannot turn you down based on pre-existing conditions. However, if you have a medical condition or illness prior to purchasing the Medigap, Medigap insurers can impose a pre-existing condition waiting period.

What is a guaranteed issue right?

A guaranteed issue right means that you have the right to buy a Medigap outside of your Open Enrollment Period, and insurance companies cannot deny you coverage. If you are 65 or older, you have a guaranteed issue right to purchase a Medigap within 63 days of losing or ending certain kinds of health coverage. When you have a guaranteed issue right, companies must sell you a policy at the best available rate, regardless of your health status, and cannot deny you coverage. Note that depending on the reason you have a guaranteed issue right, you may be limited to only purchasing certain lettered plans. There are multiple circumstances when you may have a guaranteed issue right. In many cases, you have a guaranteed issue right when you lose or experience changes to other types of health insurance.

Do Medigaps cover pre-existing conditions?

Medigap insurers can refuse to cover your prior medical conditions for up to six months after issuing a policy. A prior or pre-existing condition is a condition or illness you were diagnosed with or were treated for before your new coverage began. The wait time for coverage to start is called a pre-existing condition waiting period. You can avoid waiting periods if you buy your policy while you have a guaranteed issue right. If you buy your policy when you have a guaranteed issue right, insurers can never refuse to cover prior medical conditions coverage for any period of time. You can shorten a pre-existing condition waiting period if you buy your policy during your Open Enrollment Period and you have creditable coverage before you buy the Medigap. Creditable coverage can include various types of health insurance such as employee coverage or military benefits.

How do I choose a Medigap?

You should think about your monthly budget and expenses while considering if a Medigap is the right choice for you. Although all Medigaps offer slightly different benefits and have different premiums, some generalizations can be made. Plan A covers the fewest benefits and usually charges a lower monthly premium. Plans that cover more benefits usually charge a higher premium. The most popular plans are C and F. They cover key benefits. Plans K and L may have lower monthly premiums. However, unlike other Medigaps, Plans K and L only pay part of the cost of most Medicare coinsurance charges and deductibles until you reach a yearly out-of-pocket maximum. After that, they pay the full cost.

What is the 30-day free look period?

You have the right to a 30-day free look period when you first purchase a Medigap, or if you want to switch your Medigap policy. If you decide to apply for a second Medigap, you will have to pay for both Medigap premiums during this 30-day period. Your 30-day period begins on the day you enroll in your new Medigap policy. You should not cancel your first Medigap policy during this time because you may not be able to get it back.

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News You Can Use ... Cont'd

Medicare Supplement (Medigap) Insurance

What is Medicare SELECT?

Medicare SELECT is a type of Medigap policy. A Medicare SELECT policy may require that you use hospitals, and in some specific circumstances, doctors within its network in order to receive full benefits. If you purchase a Medicare SELECT policy, you are still buying a standardized plan that offers the same cost coverage as a non-SELECT plan with the same letter. The difference is that Medicare SELECT policies have network restrictions. These policies are usually less expensive than other Medigap policies, but if you do not use a SELECT hospital or doctor for non-emergency services, your cost will be higher because you will have to pay some or all of what Original Medicare does not pay.

Do Medigaps work with Medicare Savings Programs (MSPs)?

Medicare Savings Programs and Medicaid are assistance programs that help you with your health care costs. MSPs pay for your Part B premium and Medicaid pays for some of your health care costs after Medicare and any other insurance has paid. In general, it is illegal for someone to sell you a Medigap if you already have Medicaid or an MSP. However, if you purchase a Medigap before you enroll in an MSP or Medicaid, then you are allowed to keep your coverage. If you are over the limit for Medicaid or an MSP, your Medigap premium can be used to lower your monthly income by the amount you pay for the premium, but you cannot purchase a Medigap after you are enrolled.

Can I buy a Medigap during Medicare's Open Enrollment Period?

You can make changes to your Medicare coverage during Medicare's Open Enrollment Period, which runs from October 15 to December 7 each year. If you switch from a Medicare Advantage Plan to Original Medicare, you may be limited in your ability to buy a Medigap depending on where you live. Some states have more flexible enrollment rules than the federal government, and you can purchase a Medigap outside of your Medigap Open Enrollment Period or when you do not have a guaranteed issue right.



Have Questions?

Call 1-888-686-8657

Volunteer Feature

Marilyn Hobson, Ashland County



Since becoming part of the OSHIIP family in 2015, Marilyn has been a huge help to beneficiaries in Ashland County through the Council on Aging. Friendly, courteous and dedicated, she turns over every stone to find a solution. Last year she assisted more than 100 clients.

"I got involved with seniors long before I became one. I worked as a nurse at the Veterans Home in Sandusky and at Norwalk Memorial Home in Norwalk. I then moved to California where I became the Director for several Assisted Living Communities. After fifteen years and my husband passing it was time to return to Ohio, and I chose Ashland."

Most surprising working with OSHIIP:

"I find that without our help most seniors would not receive the correct information to make an informed choice based on their income."

Most fulfilling volunteering with OSHIIP:

"Helping people get the best coverage at the most affordable rate based on their income. Each client is unique and no two have the same issues. You develop a rapport with them that gives them a sense of security and trust."

Memorable accomplishments volunteering for OSHIIP:

"There was a client who was on 35 medications and Diane Cawood – of the Ashland County Council on Aging – helped me to get her on two prescription drug plans. It saved her over \$3,000. I had several clients who were on insulin and were not taking their medication because they could not afford it. I was able to help them get their prescriptions by comparing drug plans or by going with Medicare Advantage."

Hobbies and fun:

"I do volunteering with North Central Hospice as a vigil volunteer. I'm on the Board of Directors for Council on Aging and I'm secretary of the S.A.L.T. Council. For fun, I work in my yard and enjoy jigsaw puzzles. I also am raising my 3 ½ year-old great granddaughter, who is a joy. I recently began working at Barrister Title Group for my daughter. It is a completely different career for me, but I love the interaction with people."

Family:

"I have three grown children. My son and one daughter live in Ashland and the other daughter lives in New London. I have six grandchildren that are grown and 14 great grandchildren ranging in age."

About OSHIIP volunteerism:

"It's a very fulfilling volunteer position and it makes me wonder about the clients we don't see because they are not aware of us. I would strongly encourage someone to do this if you like helping people."

OSHIIP Roadshow

Check the list below for public OSHIIP events you can attend. Attendance is voluntary and there is no need to register in advance. Just let the designated OSHIIP representative know you are there to lend a hand.

New to Medicare

Delaware County

November 5 & 9, 10 a.m.

November 30, 6 p.m.

SourcePoint

800 Cheshire Rd.

Delaware, OH 43015

To RSVP call: 740-363-6677

Franklin County

OPERS Open Enrollment Event

Wednesday, November 2, 1 p.m.

Holiday Inn

175 E. Town St.

Columbus, OH 43215

Montgomery County

Wednesday, November 9, 1 p.m.

Holiday Inn

2800 Presidential Dr.

Fairborn, OH 45324

Medicare 101 for PERI Groups (Public Employee Retirees, Inc.)

Franklin County

Wednesday, November 9, 1pm

Reynoldsburg Library

1402 Brice Rd.

Reynoldsburg, OH 43048

**Don't forget!! Medicare Check-Up
Events are in full swing!
Click [here](#) to see the calendar.**

Medicare 101

Hamilton County

Wednesday, November 9, 1 p.m.

St. Paul Village

5515 Madison Rd.

Cincinnati, OH 45227

Monday, November 21, 10 a.m.

AHEPA 127-II

7825 Affinity Place

Cincinnati, OH 45231

Monday, November 21, 2 p.m.

AHEPA 127

14 Easley Dr.

Milford, OH 45150

Warren County

Thursday, November 10, 1 p.m.

Mason Senior Ctr.

6050 Mason Montgomery Rd.

Mason, OH 45040

Butler County

Thursday, November 10, 4 p.m.

Chesterwood Village

8073 Tylersville Rd.

West Chester, OH 45069

Butler County

Tuesday, November 29, 10 a.m.

Mercy Health Fairfield Hospital

3000 Mack Rd.

Fairfield, OH 45014

Franklin County

Tuesday, November 29, 2 p.m.

Forum at Knightsbridge

4590 Knightsbridge Blvd.

Columbus, OH 43214

Webinar Trainings

OSHIIP hosts webinars each month. Choose a convenient session and receive great information. You will need a computer and phone to participate. Call 1-877-820-7831. Enter passcode 896960.

Wednesday, November 16 – Medicare 101

To register for the 10 a.m. session click here: <https://attendee.gotowebinar.com/register/4106974273486896386>

To register for the 2 p.m. session click here: <https://attendee.gotowebinar.com/register/8269457015410080258>

Thursday, December 15 – Refresher Wrap-up

To register for the 10 a.m. session click here: <https://attendee.gotowebinar.com/register/7089264323101215746>

Wednesday, December 21 – Refresher Wrap-up

To register for the 2 p.m. session click here: <https://attendee.gotowebinar.com/register/7412217276458167554>

New Crew - Welcome!



Lake Co.

Jennifer McLaughlin

Mercer Co.

Amy Buening

Miami Co.

Jaime Brown

Delaware Co.

Sandy Gardner

Susan Packard

Portage Co.

Janet Mather

Warren Co.

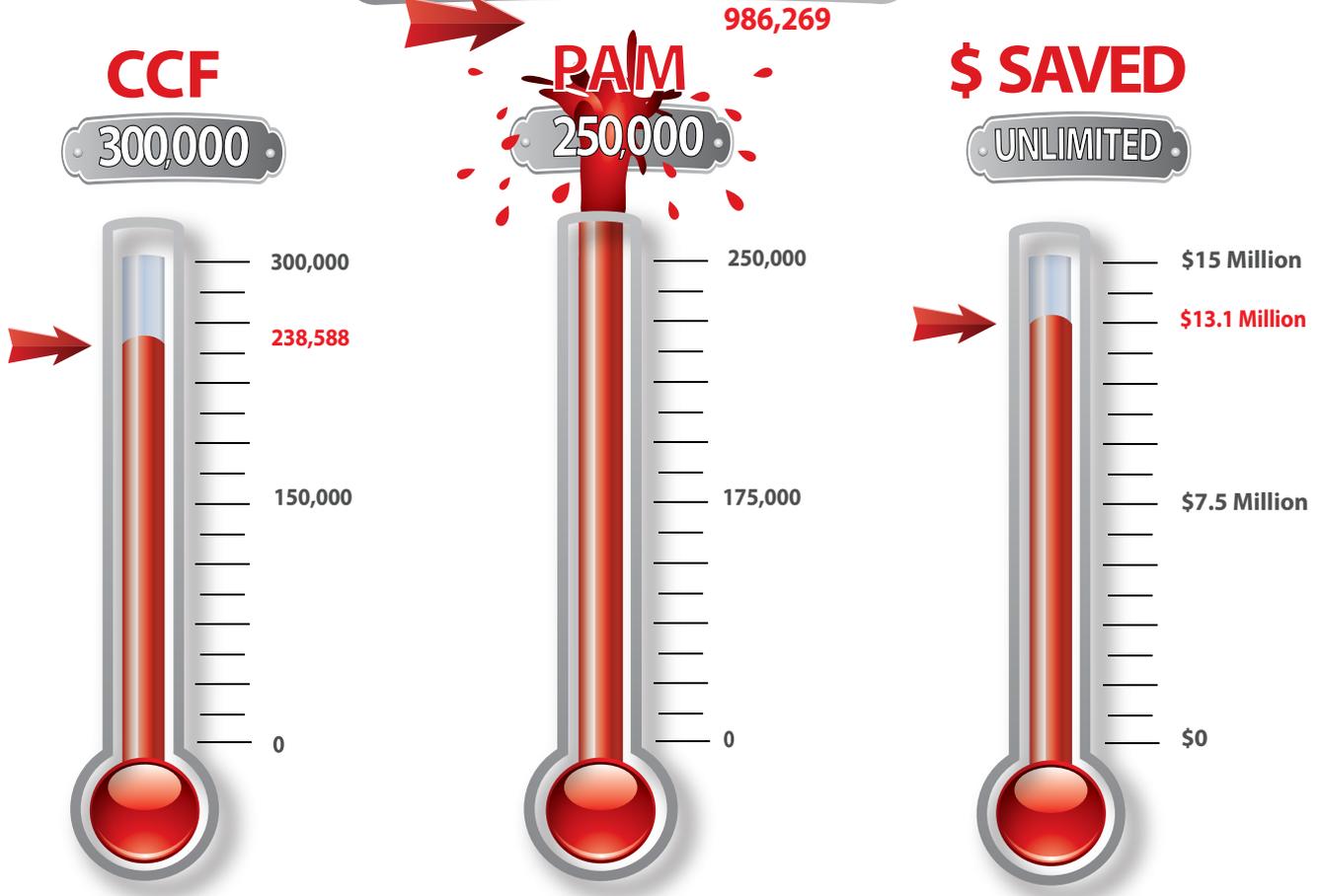
Theresa Gilmore

OSHIIP: 1-800-686-1578 | Fax: 614-752-0740

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Our Progress as of November 2016!

OSHIIP 2016 Goals



ODI
Ohio Department
of Insurance

50 West Town Street
Suite 300
Columbus, Ohio 43215

John R. Kasich
Governor

Mary Taylor
Lt. Governor / Director