Medicare Beneficiary Outreach and Assistance Program (MIPPA)

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MIPPA Grant Requirements and Resources
MIPPA Grant

• Medicare Beneficiary Outreach and Assistance Program (MIPPA) will provide valuable support to eligible Native American elders for the Low Income Subsidy program, Medicare Savings Program, Medicare Part D, Medicare prevention benefits and screenings, and in assisting beneficiaries in applying for benefits.

• The grants are used to coordinate at least one community announcement and at least one community outreach event to inform and assist eligible American Indian, Alaska Native or Native Hawaiian elders about the benefits available to them through Medicare Part D, the Low Income Subsidy, the Medicare Savings Program or Medicare prevention benefits and screenings, and counsel those who are eligible.
Title VI MIPPA Grant Awards

• DUE AUGUST 17, 2018
• 12 month grants from September 30, 2018-September 29, 2019
• MIPPA grantees specifically help low-income seniors and persons with disabilities to apply for two main programs that help pay for their Medicare costs:
  • The Medicare Part D Extra Help/Low-Income Subsidy (LIS/Extra Help), which helps pay for the Part D premium and reduces the cost of prescriptions at the pharmacy, and
  • The Medicare Savings Programs (MSPs), which help pay for Medicare Part B.
• Partnerships and/or collaborations can expand program services for great outreach and impact!
What’s MIPPA?

Medicare Improvements for Patients and Providers Act (MIPPA) enacted by Congress in 2008. MIPPA funded
- State Health Insurance Assistance Programs (SHIPs)
- Area Agencies on Aging (AAAs)
- Aging and Disability Resource Centers (ADRCs)
- Title VI Tribal entities
- National Center for Benefits Outreach and Enrollment (NCOA’s Center for Benefits Access)

Purpose
- Outreach & enrollment of low-income Medicare beneficiaries into the Part D Low Income Subsidy (LIS/Extra Help) and Medicare Savings Programs (MSPs)
- Promote Medicare’s preventive services
Medicare Savings Programs-MSP

• Medicare Savings Programs help you to pay for some of your Medicare costs related to health care (but not prescriptions). These programs go by several different names:
  – QMB--The Qualified Medicare Beneficiary program, sometimes called QMB (KWIM-bee). QMB helps pay for your Parts A and B annual deductible, Part A and B premiums, and other copayments you may have at the doctor/hospital.
  – SLMB--The Specified Low-Income Medicare Beneficiary program, or SLMB (SLIM-bee). SLMB pays for your monthly Part B premium.
  – QI--The Qualified Individual program, or QI. QI pays for your monthly Part B premium.

• The Qualified Disabled and Working Individual program, or QDWI. This program is for people with Medicare who are under age 65, disabled, and do not qualify for free Medicare Part A because they returned to work. QDWI pays for Medicare Part A premiums.

• Medicare Savings Programs are run through your state Medicaid office but help to pay for Medicare, such as your Part B premium and copayments. Even if you do not get other types of Medicaid, you may be able to get help from this program.
What does **not** count as income & resources?

- House you live in
- Car you drive
- Furniture and household items
- Housing, food, energy benefits
- $1,500 set aside for funeral costs
- Land held in trust by the U.S. for an individual or Tribe
- Funds held in trust by the Secretary of the Interior for a Tribe and distributed per capita to members of the Tribe
- Up to $2,000 per year received by a Native American/Alaska/Hawaiian Native that is derived from individual interests in trusts or restricted lands
- Payments to members of specific Tribes as provided by federal legislation
## MSP Eligibility and Coverage - 2018

<table>
<thead>
<tr>
<th>Type of MSP</th>
<th>Financial Eligibility</th>
<th>Effective Date of MSP Enrollment</th>
<th>Benefits Covered by the MSP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qualified Medicare Beneficiary (QMB)</td>
<td>Monthly Income: $1,032/$1,392</td>
<td>The first of the month following the month eligibility is documented</td>
<td>- Part A hospital deductible ($1,340/per benefit period)</td>
</tr>
<tr>
<td></td>
<td>Single/Married</td>
<td></td>
<td>- Part A hospital copays: days 61-90 ($335 daily), days 91-150 ($670 daily)</td>
</tr>
<tr>
<td></td>
<td><em>Alaska:</em> $1,285/$1,735</td>
<td></td>
<td>- Part A SNF copays: days 21-100 ($167.50 daily)</td>
</tr>
<tr>
<td></td>
<td><em>Hawaii:</em> $1,184/$1,598</td>
<td></td>
<td>- Part B annual deductible ($183)</td>
</tr>
<tr>
<td></td>
<td>Resources: $7,560/$11,340</td>
<td></td>
<td>- Part B monthly premium ($134)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Part B 20% coinsurance (amount varies)</td>
</tr>
</tbody>
</table>
# MSP Eligibility and Coverage 2018-SLMB

<table>
<thead>
<tr>
<th>Type of MSP</th>
<th>Financial Eligibility</th>
<th>Effective Date of MSP Enrollment</th>
<th>Benefits Covered by the MSP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specified Low-Income Medicare Beneficiary (SLMB)</td>
<td>Monthly Income: $1,234/$1,666 Single/Married</td>
<td>3 months retroactive from the date of Application, if your client meets eligibility criteria during those months.</td>
<td>-Part B monthly premium ($134)</td>
</tr>
<tr>
<td></td>
<td>Alaska: $1,538/$2,078</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hawaii: $1,416/$1,913</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Resources: $7,560/$11,340</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## MSP Eligibility and Coverage 2018-QI

<table>
<thead>
<tr>
<th>Type of MSP</th>
<th>Financial Eligibility</th>
<th>Effective Date of MSP Enrollment</th>
<th>Benefits Covered by the MSP</th>
</tr>
</thead>
</table>
| Qualifying Individual (QI)      | **Monthly Income:** $1,386/$1,872 (Single/Married)  
Alaska: $1,728/$2,336  
Hawaii: $1,591/$2,150  
Resources: $7,560/$11,340 | 3 months retroactive from the date of Application, if your client meets eligibility criteria during those months. | -Part B monthly Premium ($134) |

## Program Names of Note

<table>
<thead>
<tr>
<th>State</th>
<th>Program</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alaska</td>
<td>QI</td>
<td>SLMB Plus</td>
</tr>
<tr>
<td>Nebraska</td>
<td>QMB</td>
<td>Replaced with full Medicaid</td>
</tr>
<tr>
<td>Nebraska</td>
<td>SLMB and QI</td>
<td>QMB</td>
</tr>
<tr>
<td>Oregon</td>
<td>SLMB</td>
<td>SMB</td>
</tr>
<tr>
<td>Oregon</td>
<td>SLMB and QI</td>
<td>SMF</td>
</tr>
<tr>
<td>Wisconsin</td>
<td>QI</td>
<td>SLMB Plus</td>
</tr>
</tbody>
</table>
LIS/Extra Help

- Extra Help helps you pay for your Medicare Part D (prescription drug) costs. If you get Extra Help, you will have either no or a reduced premium for your drug plan, and will pay between $1.25 and $8.35 for your medicine at the pharmacy.
- Extra Help is sometimes called LIS, which stands for the Part D Low-Income Subsidy.
- To get Extra Help, you must meet the following guidelines for 2018:

<table>
<thead>
<tr>
<th>Individual Income</th>
<th>Married Couple Income</th>
<th>Individual Resources</th>
<th>Married Couple Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>$18,450/year</td>
<td>$24,930/year</td>
<td>$14,100</td>
<td>$28,150</td>
</tr>
</tbody>
</table>

Note: If you have Medicaid, Supplemental Security Income (SSI), or a Medicare Savings Program (except QDWI), you do not have to apply for Extra Help. You will get it automatically.
Funding Requirements

• All expenditures must be properly documented and allowable under the cost principles of the grant.
• Minimum requirements:
  – One Community Announcement
  – One Community Outreach Event
• Announcement and Outreach must be to eligible Native Americans about:
  – Medicare Part D
  – LIS
  – MSP
• Do you know your local SHIP office?!
Unallowable Costs

- Construction and/or major rehabilitation of buildings
- Basic research (ex: scientific or medical experiments)
- Continuation of existing projects without expansion or new and innovative approaches
- Bad debts
- Contributions and donations
- Fines and penalties
- Interest and other financial cost
- Legislative expenses and financial cost
- Under-recovery of costs under grant agreements
MIPPA Reports

• Narrative report and SF425s are due within 90 days of occurrence.
• Narrative report should contain a brief description of:
  – the event
  – date
  – location
  – number of participants (no list of names, please)
  – activities including speakers, flyers, and/or handouts
• All funds must be obligated no later than the end of the one year project period. Funds must be drawn down from the Payment Management System (PMS) within 90 days following the event.
Things to Consider for your Report

- Any partnerships or collaborations that were helpful?
- Any challenges or actions taken to address challenges?
- What was produced as part of this grant? (articles, fact sheets, newsletters, videos)
- What impact did these activities have on the community?
- What are your lessons learned completing this project?
MIPPA Report Submission

1. Narrative and financial reports should be submitted via email to MIPPA.Grants@acl.hhs.gov. Include the words “SF-425 and/or Progress Report: State, Name of Tribe, MIPPA Grant Number” on the subject line;

or

2. Hardcopies can also be sent by overnight mail to:

   Administration for Community Living
   Office of Grants Management
   330 C Street, SW, Room 1136B
   Washington, DC 20201
   Attention: Yi-Hsin Yan
   Phone: 202-795-7474
Problems with MIPPA Reports

- Timeliness of submission
  - Due 90 days after your event
- Not including detail of event
- Not identifying partner organizations
- No attachments, flyers, or handouts included
- Including the attendance list
  - Please do NOT include any personal identifying information!
Resource Links

- https://www.ncoa.org/centerforbenefits/
- https://www.ncoa.org/centerforbenefits/mippa/
- https://www.ncoa.org/centerforbenefits/becks
Title VI and MIPPA Benefits Resources 2018
NCOA’s Center for Benefits Access

- Funded through cooperative agreement with ACL
- Help low-income Medicare beneficiaries access benefits through community & online solutions
- MIPPA Resource Center (see next slide)
- BenefitsCheckUp® online screening tool
- Support network of community organizations and state agencies serving as Benefits Enrollment Centers (BECs)
State Specific MIPPA Flyer

Getting Help with Medicare Costs
Information for American Indians and Alaska Natives

Health care can be expensive. If you have Medicare and have trouble paying for your health care and prescriptions, you may be able to get help from several programs.

Two Programs That Can Save You Money

Extra Help

Extra Help helps you pay for your Medicare Part D (prescription drug) costs. If you get Extra Help, you will have either no or a reduced premium for your drug plan, and will pay between 25% and 75% of the cost of your prescribed medicines.

Where to Get Help

Every state has its own State Health Insurance Assistance Program. In Nebraska, this program is called the Senior Health Insurance Information Program (SHIIP) and is run through the Nebraska Department of Insurance.

The SHIIP provides free information and assistance to people with Medicare and their families. You can ask your SHIIP if you qualify for Extra Help or the Medicare Savings Programs. Even if you cannot get help from these programs, your SHIIP may be able to help you select a prescription drug or health plan that can save you money.

Contact your SHIIP by calling 1-800-234-7119 or visit: http://www.doi.ne.gov/shiip.
Map Visualizations

Native Americans & Medicare Visualization

Using data from the American Community Survey 2012 5-Year Sample, this map presents information on Native American households with at least one household member enrolled in Medicare and with incomes below 150% of the Federal Poverty Level (FPL), which makes them potentially eligible for many core benefits. This map does not indicate whether households are already receiving benefits; instead, it is meant to indicate areas where there are high concentrations of poverty among Native populations.
Map Visualization
www.BenefitsCheckUp.org

- Free online screening tool with 2,500+ public and private benefits
- Direct data bridge to Social Security for Extra Help application
69 BECs in 36 States
Provide seamless systems of outreach, enrollment, and follow-up into:
- Part D LIS/Extra Help
- Medicare Savings Programs (MSPs)
- Medicaid
- Supplemental Nutrition Assistance Program (SNAP)
- Low Income Home Energy Assistance Program (LIHEAP)
- Other benefits
Connecting Older Indians to Benefits

- NCOA is happy to facilitate introductions to our BECs and state MIPPA leads at SHIPs, AAAs, ADRCs if you would like to connect with them.
- We can also provide further training on how to use BenefitsCheckUp®.
Join Us!

- **Contact:** [NAME/EMAIL]

- **Visit ncoa.org** and sign up for news

- **Follow @NCOAging** on social media

- **Share** NCOA’s free, trusted tools with older adults
  - [BenefitsCheckUp.org](http://BenefitsCheckUp.org)
  - [MyMedicareMatters.org](http://MyMedicareMatters.org)
Contact Information

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