The MIIA Health Benefits Trust

Issue No. 2

Retiree Review



IN THIS ISSUE

- 02 Q&A with Kawanda
- 03 Who to Contact
- 04 Decoding Medicare
- 05 Update your Contact Info
- 06 IRMAA Costs
- **07 Transitioning to Medicare**
- 08 Tips to Boost Brain Health

Welcome to the MIIA Health Benefits Trust Retiree Review newsletter. MIIA is an acronym for the Massachusetts Interlocal Insurance Association (MIIA). The Health Benefits Trust (HBT) within MIIA provides assorted benefits to employees and retirees of more than 150 cities, towns, and other municipal entities across the state. We are the leader in municipal group health insurance and along with our partner, Blue Cross Blue Shield of Massachusetts, we've provided innovative benefit coverage for over 30 years.

In this issue, we continue to cover topics that impact our health insurance members who either are nearing retirement or are already retired – such as questions related to durable medical equipment and income-related monthly adjustment amount (IRMAA) charges, ways to help make the process of switching to Medicare a smooth one and the importance of updating your contact information in the Medicare system.

As part of our goal to help you make informed healthcare and wellness choices, we also provide some important information about cognitive function and how to boost overall brain health.

We want to extend a warm welcome to our newest Health Benefits Trust retiree team member, Barbara Deveau, who contributed to this newsletter in addition to our returning team authors, Matt Johnson and Sam Trafidlo.

Have a question you'd like us to address in a future issue? Please email us at miia.retiree.team@mma.org.

Thank you,

Kawanda Boyd

Kawanda Boyd

MIIA Medicare Operations Program Manager Massachusetts Interlocal Insurance Association



with Kawanda

Kawanda Boyd, Medicare Operations Program Manager for MIIA Health Benefits Trust





Durable Medical Equipment (DME) consists of medically necessary items such as oxygen and portable oxygen equipment, CPAP machines, wheelchairs, walkers, and hospital beds.







DME is covered by Medicare Part B when your Primary Care Physician (PCP) writes an order or prescription for use in your home. DME requires your provider to determine equipment to be medically necessary and to withstand repeated use.

It is important to ask medical equipment suppliers if they *participate* in Medicare before ordering DME. DME must be ordered from suppliers who contract with Original Medicare (Medicare A and B). If DME suppliers are <u>not</u> participating providers with Medicare, there is no limit to the amount they can charge.





Most items can be rented, but they can also be purchased. Some items become your property after a certain number of rental payments are made. If a brace is fitted to you, it must be purchased, not rented.

Please note: There are special rules for oxygen equipment and CPAP machines. Please refer to your evidence of coverage or call the number on the back of your medical card to learn more.





Does DME include other items besides walkers, wheelchairs, and oxygen?



Under the DMEPOS category (Durable Medical Equipment, Prosthetics, Orthotics, and Supplies), Medicare Part B also covers:

- Prosthetic devices that replace all or part of an internal bodily organ
- Prosthetics such as artificial legs, arms, and eyes
- Orthotics, such as rigid or semi-rigid leg, arm, back, and neck braces

Certain medical supplies are covered by Medicare's Part B DME benefit even if they are disposable or only used once. Diabetes self-testing equipment, such as some test strips and lancets, fall into this category.



Where can I find out more information about DME?



To find out if Medicare covers the equipment or supplies you need, or to find a DME supplier in your area, call 1-800-MEDICARE or visit www.medicare.gov.

Have a Question? Here's who to contact:

For questions about health coverage, call

Blue Cross Blue Shield of Massachusetts (BCBSMA): 1-800-782-3675

For questions about prescription drug coverage, call

CVS Caremark: 1-888-543-4917

To reach the MIIA Health Benefits Trust Team or provide newsletter suggestions, email:

miia.retiree.team@mma.org

Place the magnet in this mailer on your fridge so that you have these numbers handy.



Decoding Medicare: A, B, C, and D Explained

By Barbara Deveau, Medicare Specialist

Medicare is divided into four parts - each covering a different aspect of healthcare. In Massachusetts, retirees 65 and over are required to enroll in Parts A and B, and municipalities offer additional Medicare insurance plans with a range of benefits. Know the basics of A, B, C, and D as you make decisions about additional coverage.

Part A: Hospital Insurance

- Helps cover inpatient care in hospitals, skilled nursing facility rehab care, hospice care, and home health care
- Typically, there's no premium for Part A, as most individuals (or their spouse) already paid for it via payroll while working 40 quarters in their lifetime typically 10 years
- May require a monthly premium set by Centers for Medicare & Medicaid Services if you didn't work for 40 quarters



Part B: Medical Insurance

• Helps cover medically necessary services from doctors and other health care providers, outpatient care, home health care, durable medical equipment (e.g., wheelchairs, walkers, hospital beds, and other equipment), and many preventive services (e.g., screenings, shots or vaccines, and yearly "Wellness" visits)



• Requires a monthly premium set by CMS

Part C: Medicare Advantage

- A private company offered Medicare-approved plan that's an alternative to original Medicare and provides Part A, Part B, and usually Part D "bundled" coverage
- Typically, you need to use doctors who are in the plan's network
- Plans may have lower out-of-pocket costs than original Medicare and offer extra benefits like vision, hearing, and dental services



Part D: Prescription Drug Coverage

- Helps cover the cost of prescription drugs (including many recommended shots or vaccines)
- You join a Medicare drug plan in addition to original Medicare, or get it by joining a Medicare Advantage Plan with drug coverage
- Plans that offer Medicare drug coverage are run by private insurance companies that follow rules set by Medicare





If your name changes due to a change in marital status, your address changes with a move, or your phone number or email address changes, you must update all contact information in the Medicare system. This ensures that your Medicare ID cards contain your correctly spelled name AND that they – and any other important Medicare information – are sent to the right place.

To update your contact information, follow these steps:

- 1. Visit the Social Security Administration (SSA) website at ssa.gov and click on "change name" and/or "change contact information." You may be able to answer a few questions and make changes online, or you can search by zip code for a SSA office near you to make changes in person.
- 2. Next, contact your former employer (municipality or school district) to let them know of the name, mailing and/or email address, or phone number change.

Remember: it is important to complete both of these steps.

Be Informed about IRMAA Costs

By Matt Johnson, Medicare Coordinator

One aspect of Medicare that often catches beneficiaries off-guard is the Income-Related Monthly Adjustment Amount (IRMAA), a provision that can significantly affect your Medicare Part B and Part D premiums. IRMAA is solely the retiree's responsibility to manage and understand these adjustments.

IRMAA is triggered when an individual's modified adjusted gross income exceeds certain thresholds – currently \$103,000 per year for individuals and \$206,000 per year for married couples. Often, this situation arises when a beneficiary sells off assets such as a home or boat, realizes capital gains from selling stocks or receives unexpected income like lottery winnings. It's crucial to remember that the Social Security Administration examines your tax filings from the past two years, every year in perpetuity, to determine if IRMAA applies – making it an ongoing consideration.

The consequences of triggering IRMAA are more than just a temporary premium increase, as failing to pay this additional charge could result in losing your Medicare health coverage. Once Medicare is lost for non-payment, it can be complicated to reinstate.

Tracking IRMAA charges can be challenging, as income levels tend to fluctuate year-to-year post-retirement and therefore penalties do as well. For example, a retiree who wins a substantial lottery prize would face a higher Medicare premium for only that year.

In cases where higher income is ongoing, such as a significant pension, IRMAA penalties will extend over all those years. Unfortunately, some enrollees are surprised by higher-than-expected premiums because they weren't aware of or forgot about IRMAA. Because there can be other, unrelated costs such as a late enrollment penalty, it can be confusing. Therefore, it is crucial to review statements carefully and make sure all premiums and adjustments are paid.

If you have a life event that changes household income and ability to pay, you can ask to lower your IRMAA amount by completing and submitting form SSA-44 (either online at www.ssa.gov or in person at a local SSA office).



Transitioning to Medicare: Plan Ahead & Be Proactive

By Sam Trafidlo, Medicare Specialist

When transitioning from an employer-sponsored health plan to Medicare, it is a common misconception that letting healthcare providers know about the change in coverage can wait until retirement is imminent or even after the fact. However, this delayed approach can lead to unnecessary headaches, including gaps in care or unexpected out-of-pocket expenses.

It is critical to proactively inform your <u>primary care physician</u>, <u>hospital</u>, <u>and pharmacy</u> of your change in coverage ahead of time. This will help ensure that you:

- Avoid approval delays. Certain treatments and medications require prior authorization under Medicare. When you switch from your employer plan to Medicare – or between Medicare plans – previous authorizations do not transfer. Start the conversation early to prevent interruptions in treatment.
- **Ensure continuous coverage.** By notifying your healthcare providers about your transition to Medicare, it enables them to update records and billing systems. This minimizes the risk of billing errors and ensures that coverage continues smoothly.
- Manage medications. If you are on maintenance medications for diabetes or other chronic conditions or are undergoing treatment that requires medication (such as infusions for cancer treatment) it is important to confirm that the drugs are covered under your new Medicare plan.

Making the transition to Medicare can seem daunting. By being proactive and communicative ahead of time, you can ensure a smooth transition with continuity of care and coverage.

Transition to Medicare Checklist:

Once you are officially approved for Parts A & B, inform your PCP, pharmacy, and hospital about your upcoming switch to Medicare. After you receive Medicare ID cards, share those with your PCP, pharmacy, and hospital to ensure billing accuracy.
Check medications and treatment coverage to see if prior authorizations are required.
Verify physician and pharmacy network status to ensure they are in your new plan's network to avoid out-of-network charges.

Tips for Boosting Your Brain Health

By Wendy Gammons, Wellness/Health Promotion Consultant

Doing the daily Wordle can help get the brain going for the day, but truly enhancing brain health over the long term can be much more complex. With the prevalence of cognitive and dementia issues, it is worth focusing on what brain health truly means and what we can to do to stay sharp – particularly as retirees who are getting older and transitioning to Medicare.

Brain health refers to how well our brains perform with respect to four overall functions: motor, cognitive, emotional, and tactile. As we age, brain health impacts many aspects of our lives, from mental health and happiness to physical ability and day-to-day productivity.

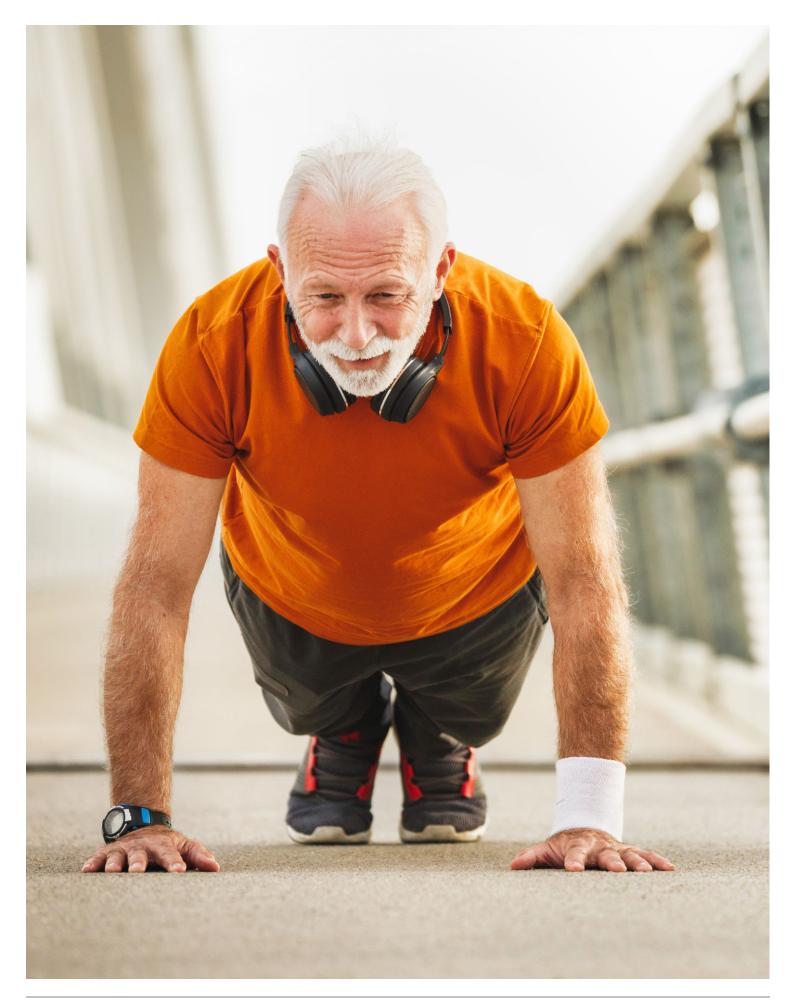
According to the Dementia Society of America, more than 9 million Americans live with some form of dementia – ranging from the mildest stage, when it is just starting to impact functioning, to severe dementia where independent living is no longer possible. It is estimated that about half of all cases are related to Alzheimer's-type dementia. Today, Alzheimer's ranks as the seventh leading cause of death in the U.S.

What we can do

Although there are some factors that we cannot control – such as hereditary influences – there are certain things we can do to help protect and promote overall brain health.

- **Physical health** Eating healthfully, exercising regularly, limiting alcohol, avoiding smoking, and getting a restful night's sleep can all contribute to better brain health. Of course, many dietary recommendations for dementia such as eating leafy greens, fish high in omega-3s, and whole grains are also beneficial for preventing other common conditions like heart disease and diabetes.
- **Mental health** Addressing mental health concerns such as depression, as well as finding activities that add purpose and meaning to life, helps boost emotional well-being and cognitive function.
- **Social health** The National Institute on Aging reports that social isolation and loneliness are linked to higher risk for a variety of diseases, including cognitive decline and Alzheimer's as well as depression and heart disease, among others. People who engage more with others live longer and feel a higher sense of purpose.
- **Intellectual health** Studies show that intellectual stimulation through lifelong learning extra years of education or learning a second language is also associated with cognitive benefits and lowers the risk of dementia.

In addition to these factors, optimizing everyday health including effective medication management, disease control, and preventive health screenings, goes hand in hand with maintaining cognitive function and brain health. For more information about these topics, check out the MyHealthfinder tool on health.gov.



THE MIIA HEALTH BENEFITS TRUST

YOU'RE IN GOOD COMPANY

Acton WSD

Amesbury

Amherst - Pelham Athol Royalston RSD

Avon

Ayer Shirley RSD

Barre Becket Berkley

Berkshire RPC

Berlin

Berlin - Boylston RSD

Blackstone

Blackstone Millville RSD

Blandford Boxford Boylston Brimfield Bristol County Brookfield

Byfield Water District

Carlisle Chelmsford

Cherry Valley Rochdale WD

Clarksburg Cohasset Dalton

Dalton Fire District

Danvers Dartmouth

Dighton Rehoboth RSD

Dracut
Dracut WSD
Dunstable
East Brookfield
Egremont

Farmington River RSD

Florida

Essex

Foxborough

Freetown

Freetown Lakeville RSD

Georgetown Granville

Greater Lawrence SD

Hamilton

Hampden County RB

Hardwick Harvard

Haverhill Retirement Board

Hinsdale
Holden
Hopedale
Hudson
Ipswich
Lancaster
Lee
Leicester

Leicester WSD Lincoln

Littleton Ludlow Lunenburg

Lunenburg Water District Lynnfield Center WD Lynnfield Water District Manchester By The Sea

Mansfield Marion

Masconomet RSD Mattapoisett Maynard Medfield Mendon

Metacomet Emergency CC Middlesex County Sheriff

Middleton Millbury

OVER 90,000 COVERED LIVES IN MORE THAN 150 CITIES, TOWNS AND PUBLIC ENTITIES

Millville

Monterey

Montgomery

Nahant

Nashoba Associated Board of Health

Nashoba RSD

Newbury

Newburyport

Norfolk

North Adams

North Brookfield

Northern Middlesex CG

Northern Middlesex Emergency CC

Norwell

Oakham

Old Colony Regional Vocational Technical HS

Oxford Rochdale Sewer District

Palmer Fire and Water

Pathfinder Regional Technical School

Paxton

Peabody

Petersham

Pilgrim Area Collaborative

Pittsfield

Princeton

Quaboag RSD

Ralph C. Mahar RSD

Raynham Center Water District

Reading

Richmond

Rockport

Rowley

Royalston

Salem Beverly Water Supply Board

Sandisfield

Sandwich

Saugus

Scituate

Seekonk Water District

Sherborn

Shirley

Shirley Water District

Southbridge

Southeastern MA Regional 911 District

Southwick Tolland Granville RSD

Spencer

Sterling

Sturbridge

Sudbury Water District

Suffolk County Sheriff's Department

Sunderland

Sutton

Swansea

Swansea Water District

Taunton

Templeton

The Education Cooperative

Three Rivers Fire District

Tolland

Topsfield

Townsend

Triton RSD

Tyngsborough

Upton

Uxbridge

Wales

Walpole

Warren

Wenham

West Boylston

West Brookfield

West Newbury

Winchendon

Winchester

Woburn

Worthington

Wrentham



MEET THE TEAM

MIIA HEALTH BENEFITS TRUST MEDICARE TEAM



Chris Bailey Health Benefits Trust Director



Kawanda Boyd Medicare Operations Program Manager



Barbara Deveau Medicare Specialist



Matt Johnson Medicare Coordinator



Sam Trafidlo Medicare Specialist