



Native Americans and Medicare NIHB 2026

Introductions

Thank you.

I am honored to be here with you all.

SHIBA Program Manager

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Values and Principles

- Sovereignty
- Self-determination

- Do not perpetuate trauma.
- Servant leadership

Some ways SHIBA can help

- Become eligible for Medicare
- Enroll in Medicare
- Transition into retirement
- Switch plans
- Complaints
- Compare or change your “approach” to Medicare
- Apply for Medicaid or *Extra Help*
- Medicare Part D
- **Fraud**

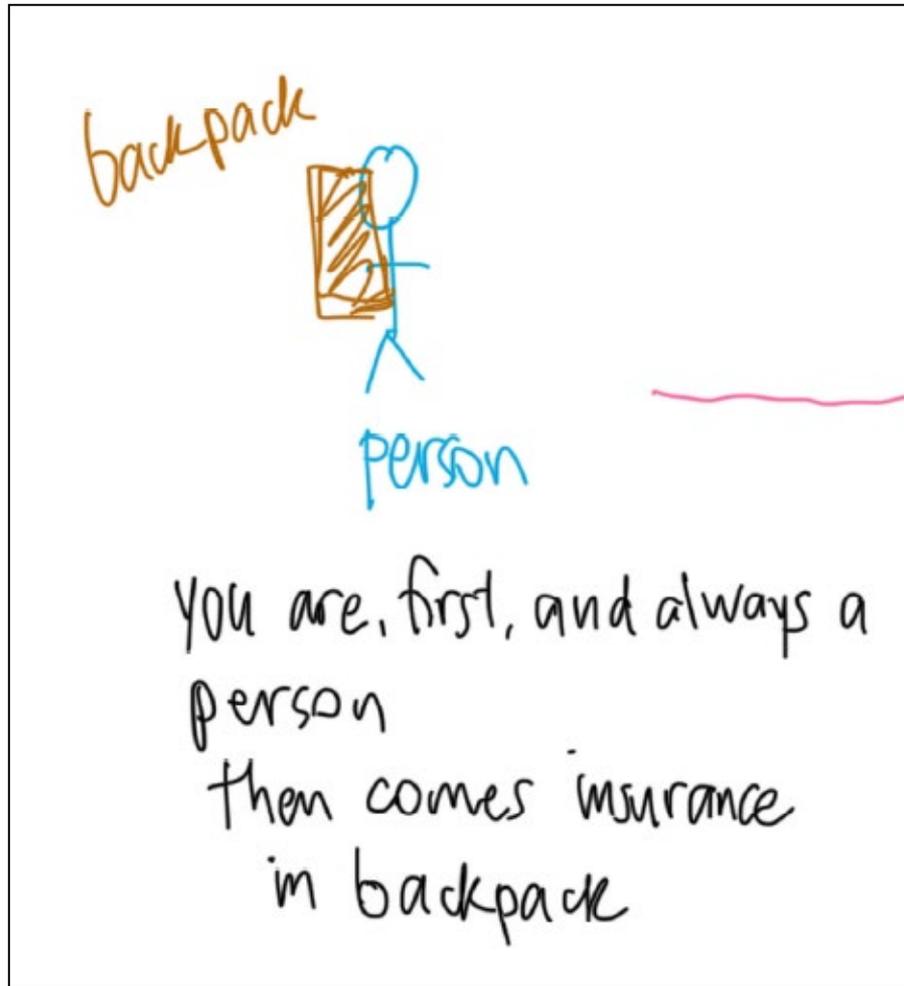
Indian Country and Medicare

- Decisions about Medicare (and Medicaid) affect Tribal medical clinics and Tribal finances.
 - As a general rule, the more insurance you have, the less that IHS or your Tribe pays.
- The rules about countable income and assets (resources) are different for Tribal citizens.
- There is not enough meaningful, effective outreach from programs like mine and people like me.

Learning Objectives

- What is Medicare?
- How does Medicare work with
 - SSA
 - other insurance
 - IHS
 - Medicaid
 - VA
- Resources

Human beings – with insurance



Medicare in context

Two Systems of Care

Original Medicare

Medicare Advantage
(Medicare Part C)

Medicare Part A

Medicare Part A

Medicare Part B

Medicare Part B

* private insurance
* contracts with
Medicare
* paid by Medicare and
you

Medicare Part D

Medicare Advantage -
Prescription Drug plan

Medicare Supplement
(medigap) plan

Three insurance markets

1. Employer group health plans
 - Retiree health insurance
2. Medicaid
 - Dual-eligible people
3. Commercial market plans
 - Medicare Advantage
 - Medicare Supplement

Entitlement means

Your Medicare entitlement is Medicare Part A and Medicare Part B.

- Part A is hospital or inpatient benefits.
- Part B is medical or outpatient benefits.

You have this insurance for the rest of your life.

- *(In practically all cases.)*

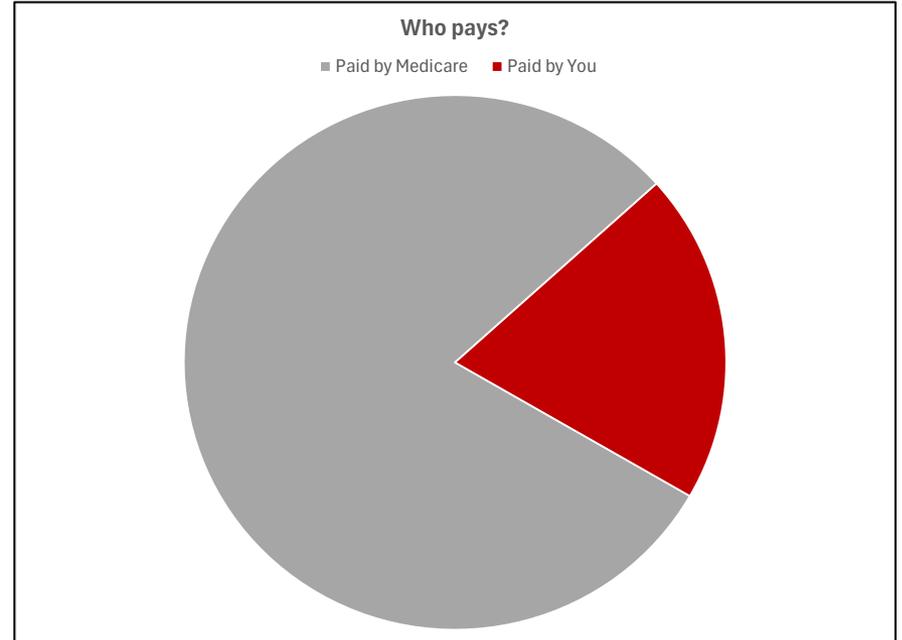
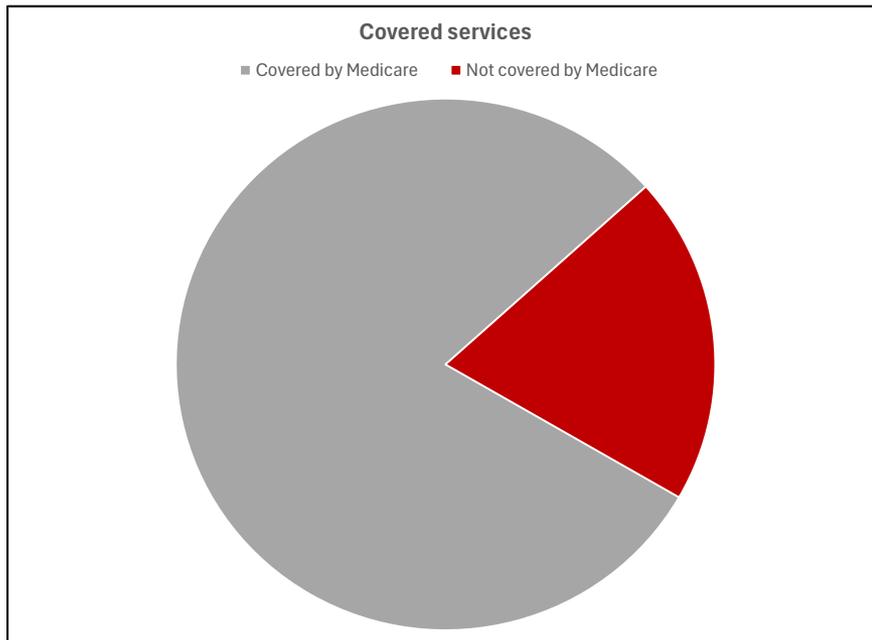
Why additional insurance?

- Medicare benefits are not comprehensive.
 - For example, there is not coverage for prescription drugs.
- Medicare benefits have significant out-of-pocket costs.
 - I mean deductibles, co-insurance and co-payments for both Part A and Part B.

Medicare is 'major medical' insurance

Does not cover all benefits

Does not pay 100%



Does not cover all benefits

When you were working, you had coverage for things like vision, dental, hearing, and other medical treatments.

Medicare coverage is not as complete as that.

Does not pay 100%

This can be ten's of thousands of dollars per year, without more insurance.

For example, 20% of the cost of a doctor's office visit, without additional insurance after Medicare.

Getting started

Part 1: Getting started

Your entitlement:

Medicare Part A, Medicare Part B

- Eligibility
- Enrollment

Eligibility and Enrollment

Eligibility \neq Enrollment

- But they are related
- There are consequences for not taking action timely

- Being eligible is not *really* a choice
- Enrollment is absolutely a choice
- I'd like to help you make informed choices

Eligibility

Decisions about eligibility for Medicare are made by the Social Security Administration (SSA)

Why?

Medicare (and Medicaid) amend the Social Security Act – and borrow organizational footings

Eligibility, cont.

You are...

- US Citizen
- Legal Permanent Resident

You are...

- Age 65
- Disabled
 - ALS
- ESRD

Eligibility, cont.

Regardless of

- Work history
- Insurance status
- Income
- Tribal citizenship

How do we help?

People ask

- about eligibility for their parents who are not (yet) citizens
- about whether they will have to pay a premium for Medicare
- if they can stay enrolled in an ACA plan
- can I be eligible but not enroll right now

Enrollment

Enrollment into Medicare is through the Social Security Administration (SSA)

Why?

Medicare (and Medicaid) amend the Social Security Act – and borrow organizational footings

Enrollment periods

- Initial Enrollment Period
- Special Enrollment Period
- General Enrollment Period

Why does it matter when?

Insurance principles

- Adverse Selection
- Moral Hazard

Initial Enrollment Period, disabled

24 months of payments from SSA

25th month

Initial Enrollment Period, age 65

Jan	Feb.	March	6-Apr	May	June	July
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Late enrollment?

Part A – no, you can start anytime after becoming eligible (entitled)

Part B – you *might* have a special enrollment period

Part D – it depends: do you have other 'creditable coverage'?

Indian Health Service is always creditable coverage

You will need to complete an attestation

Special Enrollment Period

February	Eight (8) months after last month working and covered by employer plan
	ICEP for MA-PD

Special Enrollment Period, cont.

- You are working – or covered by spouse (not domestic partner)
- You are covered by employer group health plan – not some other kind of insurance (not VA, not IHS)

Special Enrollment Period, cont.

- When it's time to enroll, you will need to provide 'paperwork' from the former employer to prove you had coverage

General Enrollment Period

Jan	Feb	March
<i>Feb</i>	<i>March</i>	<i>April</i>

General Enrollment Period, cont.

For most people, this means 'late enrollment' and late enrollment penalties will apply.

Important exception: for people that qualify for **Medicaid**, the State will pay the premium for Medicare Part B and the penalties, too.

Automatic enrollment?

If you are already receiving your SSA 'pension', SSA will automatically enroll you

- You can send back the red/white/blue card and defer – use your special enrollment period

If you are not receiving your SSA cash benefit, you will not be automatically enrolled.

- It's up to you to take action.

Premiums for Medicare

Part A: premium-free for most people

Part B: depends upon income

Part D: private market rates, low-income subsidy

Part C / Medicare Advantage plans: private market rates

For MA-PD plans, there can be a surcharge for high-income earners

Medicare Part B premiums

Medicare Savings Program		
Low-Income	Standard	IRMAA
State pays the premium	\$202.90	Based on income

About Part B timing, cont.

It can feel like a 'take-away' for some people

- ACA plans – especially for people with subsidies
 - Some people can stay in their ACA plan – they don't qualify for premium-free Part A – but they will face late-enrollment penalties later
- Medicaid (Apple Health, MediCal, Oregon Health Plan, DenaliCare)
 - In general, not optional at age 65 and reduced benefits and higher cost sharing and less support

About Part B timing

It's often about the value and sometimes about confusion or other objections

- I want to wait – still working
- I have VA – that's enough
- I have IHS – they take care of me

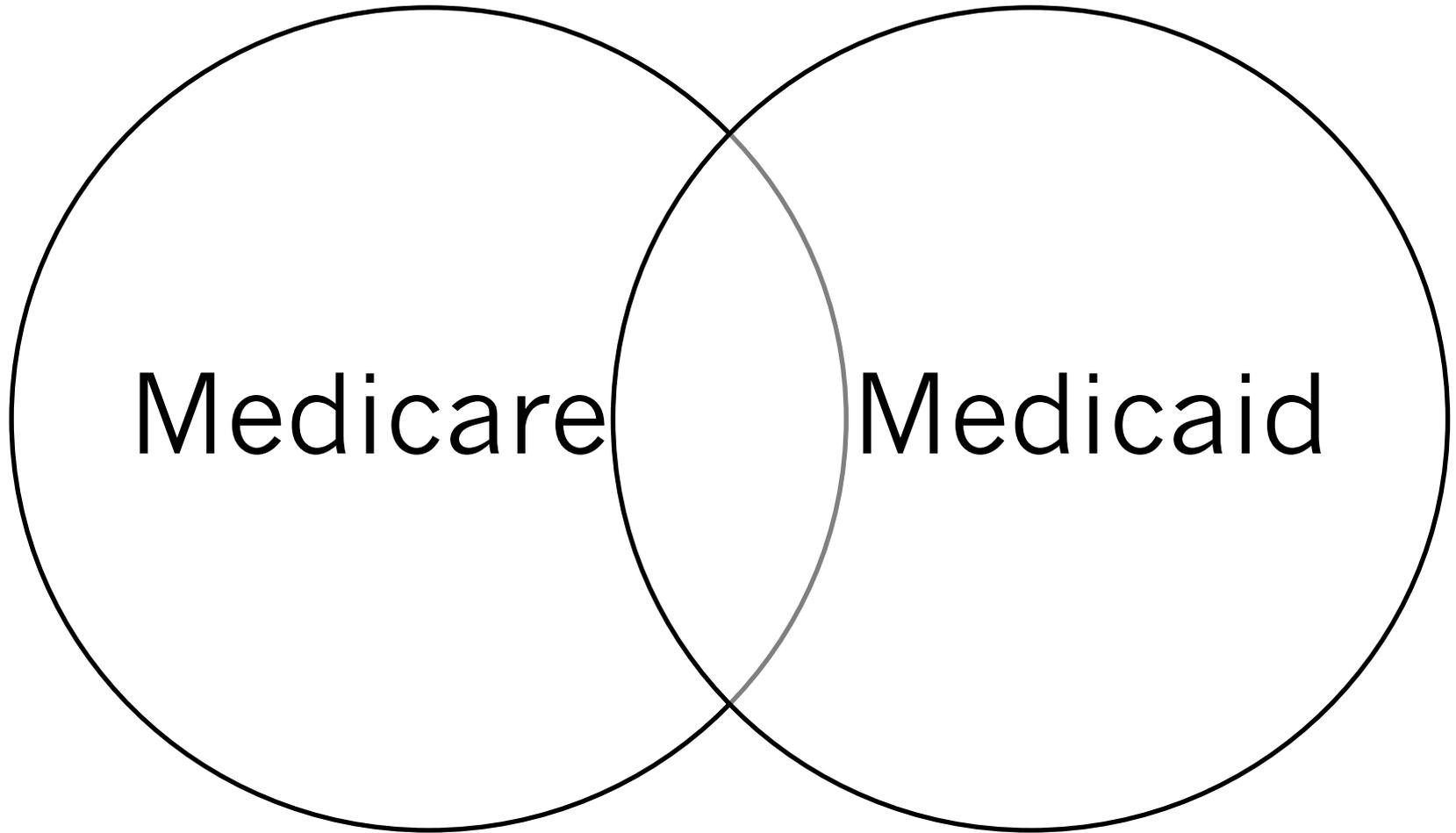
Also: 'I have treaty rights and resent paying'

How do we help?

People ask

- can I be eligible but not enroll right now
- do I need proof if I want to wait
- how do I enroll
- what does it cost
- what if I'm late – penalty
- can I appeal the IRMAA

Dual-Eligible person



Medicaid means -

- Financial assistance programs for elderly and disabled
- Functional assistance programs for elderly and disabled
- Programs that are for people who are not elderly or disabled

Financial assistance

Categorically-needy (CN)

'full-benefit' Medicaid

- 'Aged, Blind, and Disabled'

Medicare Savings Programs

'partial-benefit' Medicaid

- QI-1
- SLMB
- QMB

Functional assistance

- Skilled Nursing Facility (SNF)
- Home & Community-Based Care

Medicaid expansion

MAGI Medicaid

- ACA plans, 'Obamacare', qualified health plans
- Health Benefits Exchange
- Navigators

Medicaid for SSI clients

Younger, disabled people

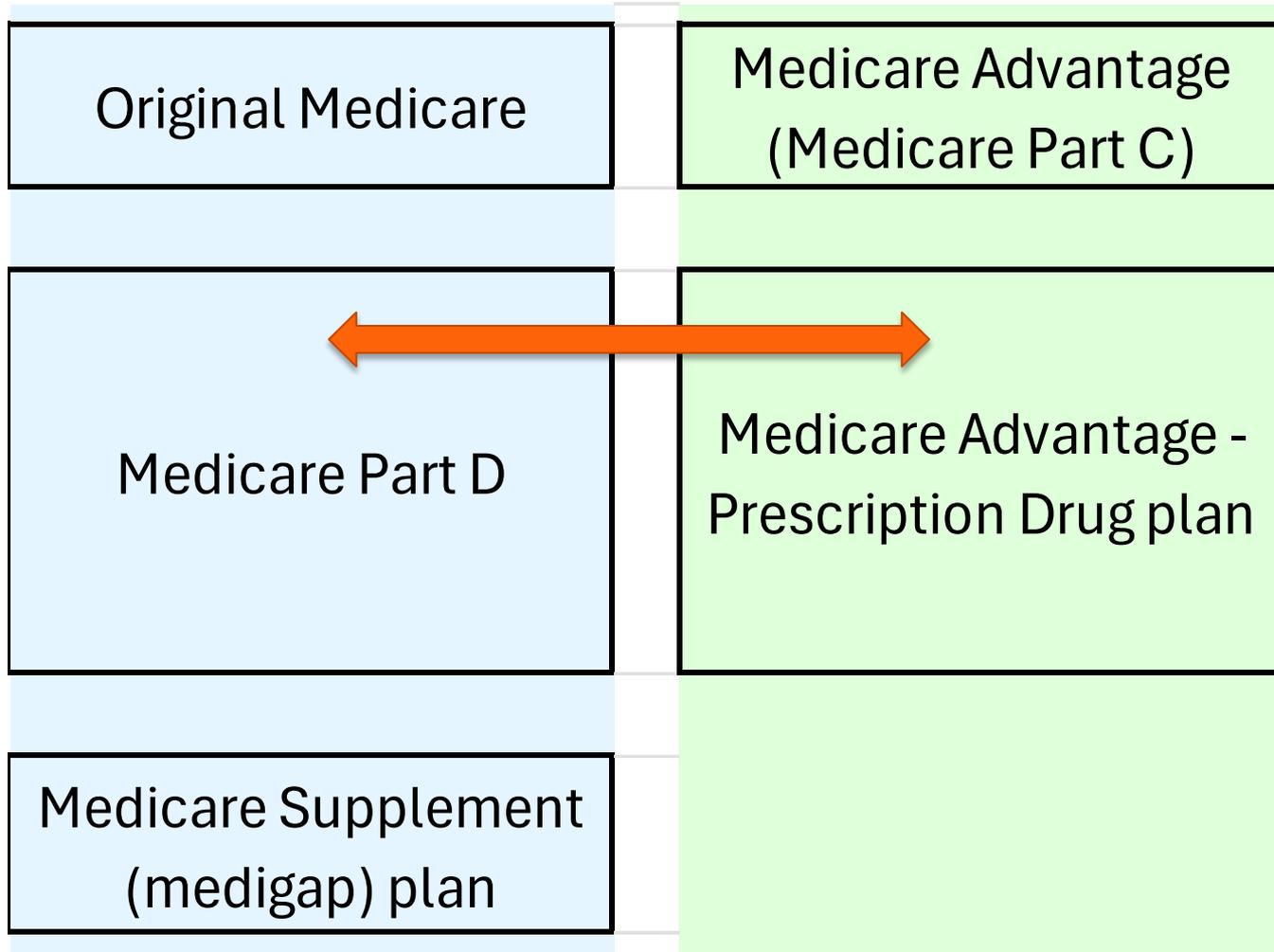
Medicare OEP

Medicare Open Enrollment Period

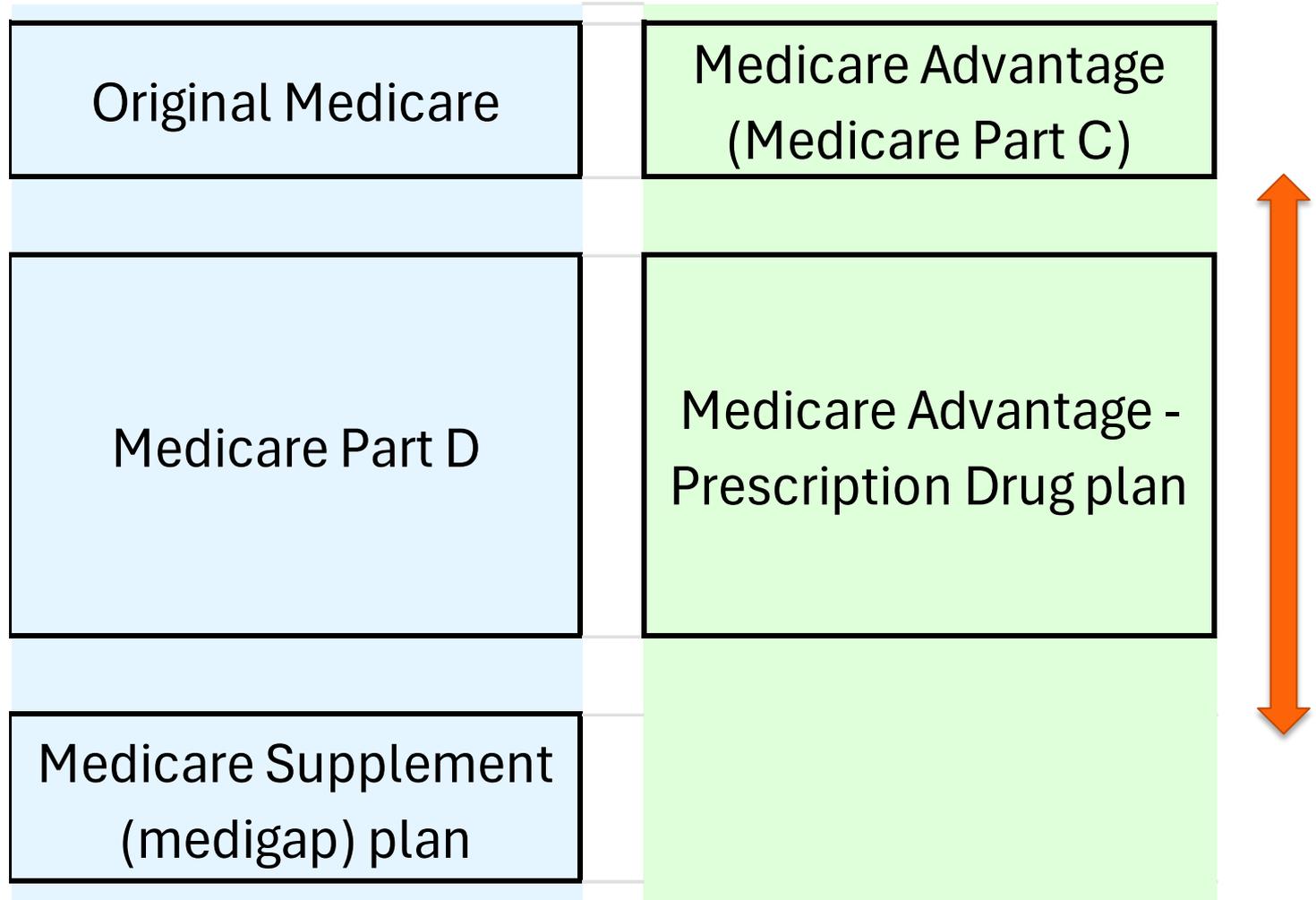
October 15 – December 7

- Switch your insurance
- Change your insurance company
- Get insurance – Medicare Part D

Switching insurance



Changing insurance



How do we help?

People ask

- my plan quit for next year
- can I save money
- I don't want Medicare Advantage anymore
- better Rx drug coverage
- I'm not sure about provider network
- can you help me with the web sites

Medicare is 'icky'

You're not wrong

- Create and use on-line accounts
 - SSA.gov
 - Medicare.gov
- Fraud does happen. Be vigilant.
- You have rights !
 - Complaints
 - Appeals
- Ask for help with details – get curious

How do we help?

People ask

- file a complaint
- change my insurance (now)
- get a service paid for
- get a Rx drug covered
- investigate fraud
- explain technical details

Resources

Resources

To partner with SHIP in your community, visit shiphelp.org or call 877-839-2675.

<https://eldercare.acl.gov/home>

ElderCare Locator