Spark

Medicare

Understanding Dual Eligible Plans & HIDE/FIDE Plans









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Agenda

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02	How does DE work and fit with LIS?
03	Dual Eligible Plans
04	HIDE/FIDE Plans
05	The Opportunity



Medicaid/Dual Eligibility

What does Dual Eligible Mean?

Dually eligible (DE) beneficiaries are eligible for both Medicare and Medicaid.

Medicare pays first when a DE receives Medicare-covered services.

Medicaid pays after Medicare and any other health insurance they may have.

Medicare covers prescription drugs for DE.

DE beneficiaries can choose Original Medicare or Medicare Advantage to receive their Medicare coverage

State Medicaid

States design and administer their own Medicaid programs within federal rules.

- The rules around who's eligible for Medicaid are different in each state.
- Medicaid offers benefits not normally covered by Medicare, like nursing home care.
- Medicaid also helps cover medical costs.
- States determine how they will deliver and pay for care for Medicaid beneficiaries. Nearly all states have some form of managed care in place.

Medicaid delivery systems

The way a state Medicaid program provides benefits to enrollees is referred to as a delivery system

State Medicaid programs may provide benefits:

- On a fee-for-service basis, in which states reimburse health care providers a payment for each service
- Through managed care organizations (MCO's), in which Medicaid pays a predetermined fee to another entity to deliver a specified set of benefits.



Medicare Savings Programs

Medicare Savings Programs

Beneficiaries can get help from their state paying their Medicare Part A and Part B premiums through a Medicare Savings Program (MSP). If they quality , MSP's may also pay Part A & B deductibles, coinsurance and copayments.

There are 4 "levels" or "MSA programs" - QMB, SLMB, QI, QDWI

To qualify for a MSP, they must have income and resources below a certain limit. The limits change each year.

The beneficiary must apply for MSP's through their state Medicaid office.

They may still qualify for other state programs even if their income and/or resources are above the limits listed. They should check with their state Medicaid Agency.

QMB (Qualified Medicare Beneficiary)

The state helps pay for Part A and Part B premiums, deductibles, coinsurance, and copayments(for Medicare services). These beneficiaries automatically get Extra Help. (pay no more than $12.15 in 2025 for each covered drug).

QMB+ is an individual who meets all of the standards for QMB eligibility and ALSO meets the financial criteria for full Medicaid coverage from their state.

https://www.medicare.gov/basics/costs/help/medicare-savings-programs

INDIVIDUAL (2025)

$1,325	$9,660
Monthly income limit	Resources limit

MARRIED COUPLE (2025)

$1,783	$14,470
Monthly income limit	Resources limit

*AK and HI - have slightly higher income limits

SLMB (Specified Low-Income Medicare Beneficiary)

The state helps pay for Part B premiums (they must have both Part A & Part B to qualify). Automatically get Extra Help (pays no more than $12.15 in 2025 for each covered drug).

SLMB+ is an individual who meets all of the standards for SLMB eligibility and ALSO meets the financial criteria for full Medicaid coverage from their state.

https://www.medicare.gov/basics/costs/help/medicare-savings-programs

INDIVIDUAL (2025)

$1,585	$9,660
Monthly income limit	Resources limit

MARRIED COUPLE (2025)

$2,135	$14,470
Monthly income limit	Resources limit

*AK and HI - have slightly higher income limits

QI (Qualifying Individual Program)

They must apply every year to stay in the QI Program. States approve applications on a first-come, first-served basis – priority is given to people who got QI benefits the previous year.

Help from the state to pay for Part B premiums only (they must have both Part A & Part B to qualify). Automatically gets Extra Help (pay no more than $12.15 in 2025 for each covered drug). Does not meet the criteria for Full Medicaid benefits.

https://www.medicare.gov/basics/costs/help/medicare-savings-programs

INDIVIDUAL (2025)

$1,781	$9,660
Monthly income limit	Resources limit

MARRIED COUPLE (2025)

$2,400	$14,470
Monthly income limit	Resources limit

*AK and HI - have slightly higher income limits

QDWI (Qualified Disabled & Working Individual Program)

Help from the state to pay for Part A premiums only.

They may qualify if:

- they have a disability
- Are working
- Lost their SS disability benefit and premium-free Part A because they returned to work.

They **will** have to apply for Extra Help and usually don't qualify for Full Medicaid benefits.

https://www.medicare.gov/basics/costs/help/medicare-savings-programs

INDIVIDUAL (2025)

$5,302	$4,000
Monthly income limit	Resources limit

MARRIED COUPLE (2025)

$7,135	$6,000
Monthly income limit	Resources limit

*AK and HI - have slightly higher income limits

Care in dual systems

Dual-eligible individuals with full Medicaid benefits

Usually have Medicare benefits covered under Original Medicare or Medicare Advantage

Separately have Medicaid benefits covered through Medicaid fee-for-service or Medicaid managed care.

A small percentage have most of their Medicare and Medicaid benefits covered through a single plan

Care may be fragmented and poorly coordinated across the Medicare and Medicaid programs, contributing to lower quality care and higher costs.

Separate coverage arrangements make it more difficult for dual-eligible individuals to navigate different coverage rules and provider networks.



Dual Eligible Plans

D-SNP

Dual Eligible Special Needs Plan

- Are a type of Medicare Advantage private plan designed for dual-eligible individuals (have Medicare and Medicaid)
- Provide Medicare-covered services and in most cases supplemental benefits.
- The degree of coordination and coverage of Medicaid benefits depends on the type of dual eligible special needs plan.
- D-SNPs are required by Medicare to have contracts with Medicaid programs in the states in which they operate and meet minimum requirements.

Special Enrollment Period (SEP)

- If the dual eligible beneficiary **gains, loses, or has a change in Medicaid status**, they have a SEP that lasts 3 months from notification of change or change date.
- **Prior to doing an enrollment, make sure you check the carrier website for eligibility.** Most carries have a look up tool on your agent portal and/or a phone number to call to verify.
- Sunfire is adding a **lookup feature** in the near future.

Prior to doing an enrollment, make sure you check the carrier website for eligibility. Most carries have a look up tool on your agent portal and/or a phone number to call to verify.

The MAPD plans designed for Dual Eligible beneficiaries are called D-SNP Plans.

Usually, it's the MSP categories that have full Medicaid that qualify: QBM and QMB+, SLMB+ and FBDE. Extra Help without full Medicaid won't qualify for a D-SNP Plan.

2025 SEP Changes for D-SNP

Prior Quarterly SEP

The quarterly SEP that many beneficiaries who are dual eligible or receiving Part D LIS/Extra Help used in the past is no longer available.

New Integrated SEP

- Full benefit Dual Eligible beneficiaries have a new monthly SEP (SEP-INT)
- Allows full benefit dual eligible beneficiaries to enroll into a highly or fully integrated Dual Special Needs Plan (HIDE/FIDE SNP's).
- Any beneficiary qualified for LIS or Medicaid can disenroll from their MAPD plan, return to Original Medicare, and enroll in a PDP.

https://sparkhelpcenter.super.site/compliance



HIDE/FIDE

HIDE PLANS

Highly Integrated Dual Special Needs Plan

The Goal of HIDE-SNP's is to improve coordination of care, enhance access to services, and potentially reduce healthcare costs for dual-eligible individuals.

- Created to implement new requirements for D-SNP's in the Bipartisan Budget Act of 2018
- Less integrated than FIDE-SNP
- Must cover behavioral health or long-term services and supports(LTSS)
- May exclude some other Medicaid services

FIDE PLANS

Fully Integrated Dual Special Needs Plan

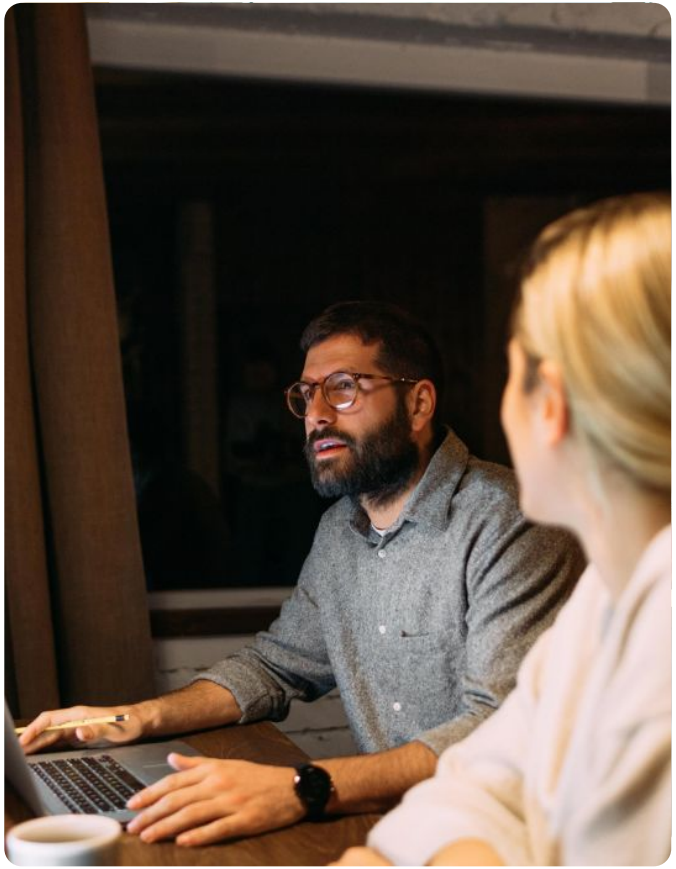
FIDE-SNP's fully integrate care for dually eligible beneficiaries under a single managed care organization.

- Provide nearly all Medicaid services, including LTSS, behavioral health, home health, and durable medical equipment (DME)
- Require Exclusively Aligned Enrollment (EAE)
- Plan may be eligible for payment adjustments to account for the cost of serving a high concentration of frail individuals

Applicable Integrated Plans

States can create AIP's

- They are a subtype of HIDE SNP's and CO D-SNP's and all the FIDE SNP's
- D-SNP's are considered an AIP if they have exclusively aligned enrollment and cover at least some of the Medicaid benefits
- All FIDE SNP's are required to have exclusively aligned enrollment and will therefore be considered AIP's



Coordination-only
Dual Eligible Special Needs Plan

This type of D-SNP

- Provides Medicare-covered services
- Is required to coordinate the delivery of benefits with the Medicaid program, contract with state Medicaid programs, and notify states when enrollees are admitted to inpatient facilities.



Scenarios

LIS only

Cannot change from one Medicare Advantage Plan to another on a quarterly basis

Partial Dual

Cannot change from one Medicare Advantage Plan to another on a quarterly basis

Full Dual

Can enroll or change from one Integrated D-SNP to another on a monthly basis
The D-SNP must have a level of integration

- All levels can change back to Original Medicare and a drug plan on a monthly basis
- All levels can change stand alone drug plans on a monthly basis.

Levels/Types of D-SNP Integration

“Integration” SEP

Can be used with the following D-SNP Plans

- FIDE - Fully Integrated DSNP
- HIDE - Highly Integrated DSNP
- AIP - A DSNP that is an Applicable Integrated Plan

SEP Not available

The “Integration” SEP is not available to enroll in

- CO D-SNP - Coordination only DSNP that is not an AIP.
- Standard MAPD

Both SEP’s

What if they use both the monthly SEP and the Integrated SEP in the same month?

The SEP chosen last will the one effective

There must be an affiliated MCO(Medicaid Managed Care Organization) for the plan to be FIDE, HIDE or AIP

Working with Beneficiaries:

Clients that are currently full benefit dual eligible and inquire about a switch:

- Educate them on the SEP-INT changes
- Know the MCO’s in the state(s) you sell in
- Ask the client which carrier currently provides their Medicaid Services - they may need to call the State if they don't know.
- From Carrier Broker Portals: Look up HIDE/FIDE/AIP plans
- Determine if your client can make a change to an integrated plan and if it’s in their best interest to do so.
- Lookup in coming soon in Sunfire

Spark Resources

Spark Help Center Agent

Training & Compliance Pages

Demo



Opportunity

The Opportunity

Get involved in the Community!

- Food Banks, Senior Centers, Bingo Halls, etc.
- Offer Educational Seminars to understand new SEP Rules
- Offer “benefits checkups”

Maximize Opportunities Through Education & Support

- Help the client save on their Part D costs and possibly their Medicare costs if they qualify for MSP
- If they qualify for assistance and have a SEP, you have an opportunity for an enrollment.
- Educating clients leads to more referrals!

ASK QUESTIONS TO UNCOVER NEEDS:

Ex: “How much are you making a month on your Social Security Income”?

- If below state income threshold, educate them on available programs.
- Assist with Extra Help applications at **SSA.gov**, or provide the resources they need.

Resources

- Medicare.gov
- Your state Medicaid website
- LIS Guide from SSA - https://www.ssa.gov/pubs/EN-05-10508.pdf
- Carrier portals - can check eligibility and get CMS approved marketing materials and resources
- Sunfire - coming soon!
- Benefits Checkup site: https://benefitscheckup.org/
- Spark - reach out if you need assistance!



Questions?

Upcoming Webinars

We hope you'll join us for another upcoming webinar:

- **5/20/25-** Grassroots Marketing
- **5/28/25-** Client Retention Strategies
- **6/4/25-** Running an effective Seminar
- **6/11/25-** How to present a M101 Seminar
- **6/17/25-** The Life of a Lead
- **7/9/25-** Social Media Strategies

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https://lu.ma/sparkteam



Thank You

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