

SHINE Basic Training Exam

This is the SHINE Basic Training exam. This is an open-book exam; you may use any of the materials given to you at your Basic Training class, as well as the Internet and any other resources. A minimum score of 80% correct is required to pass the exam. If you do not pass, you will have the opportunity to retake the exam a second time. If you wish, you may first print out a copy of the exam, and take your time answering the questions on paper. You can then access the module to enter your answers online.

Question #1:

A beneficiary has a guaranteed issue right for Medigap when he leaves his Medicare Advantage Plan, if he joined the plan when he was first eligible at age 65, and

- Leaves the MA plan within one year of joining
- Joins during the Open Enrollment Period after being enrolled for at least one year
- Became disabled after joining
- Any of the above

Question #2:

A beneficiary who has a Medicare Advantage PPO plan must only use in-network providers.

- True
- False

Question #3:

A Medigap policy can supplement which of the following?

- Original Medicare
- A Medicare Advantage Plan
- A Medicare Prescription Drug Plan
- Any of the above

Question #4:

After 10 days in a Skilled Nursing Facility, Robert receives a written plan of care for intermittent, skilled Home Health Care. What is the maximum number of days that Medicare Part A will pay for his eligible care at home?

- 3 days
- 20 days
- 60 days
- Unlimited days

Question #5:

After 5 inpatient days in the hospital, Marie enters a Skilled Nursing Facility (SNF). How many days can she stay without incurring a Part A copayment?

- Unlimited days
- 3 days
- 30 days
- 20 days

Question #6:

All Medicare Advantage Plans must offer at least the same covered benefits as Original Medicare, except hospice.

- True
- False

Question #7:

If Patty is an inpatient at a Medicare-participating hospital, all her doctor bills will be covered by Part A.

- True
- False

Question #8:

All Medigap policy types cover Medicare Part B deductibles.

- True
- False

Question #9:

An authorized Medicare provider that is not a participating provider has the option of accepting assignment for Part B services.

- True
- False

Question #10:

As a SHINE counselor, what should I do if I am not sure of an answer?

- Let the beneficiary know that I will find the correct information and get back to him or her by a specified time or date
- Apologize to the beneficiary and tell him or her that the subject was not covered in my training
- Tell the beneficiary he should call 1-800-Medicare
- Take a guess and hope it is correct

Question #11:

Bill is 70 years old, working, and has Medicare Part A with an employer group health plan. He will retire in July of 2022. How long will his Part B Special Enrollment Period last?

- 8 months after he retires (March of 2023)
- 1 year after he retires (July of 2023)
- 60 days after he retires (September of 2022)
- None of the above

Question #12:

Client Agreement & Authorization forms were created to provide beneficiaries with information regarding the role and responsibilities of the SHINE Counselor.

- True
- False

Question #13:

Medicare requires beneficiaries enrolled in Special Needs Plans to purchase stand-alone prescription drug coverage (PDP).

- True
- False

Question #14:

During the Medicare Advantage Enrollment Period (MA OEP), a client may:

- Switch from one stand-alone Part D plan (PDP) to another PDP
- Switch from a stand-alone Part D Plan (PDP) to a Medicare Advantage Plan with Drug Coverage (MA-PD)
- Switch Medicare Advantage Plans (MAs)

Question #15:

Every Beneficiary Contact form must be entered on the computer into the STARS database as soon as possible.

- True
- False

Question #16:

Frank turns 65 years old on May 21, 2022. When is his Medicare Initial Enrollment Period (IEP)?

- February - August 2022
- May - August 2022
- May 2022
- January - May 2022

Question #17:

Helen is admitted to the hospital on March 1st and discharged on March 15th. She is re-admitted for the same condition on May 20th and discharged on May 30th. She is once again admitted for an unrelated illness on July 15th and discharged on July 18th. How many Part A benefit periods do these represent?

- Four
- Three
- Two
- One

Question #18:

How long does the Part B Late Enrollment Penalty last?

- As long as the person is enrolled in Medicare Part B
- Twice as long as the enrollment was delayed
- Until the cows come home
- One year after the person enrolls

Question #19:

How many SHINE counselors assist clients?

- By telephone, virtual counseling, and in-person
- In a private space provided by a partner agency, and authorized by SHINE leadership
- By doing in-home visits when needed, and authorized by SHINE leadership
- All the above

Question #20:

Medigap plans may cover all of the following, except

- The cost of 365 extra days of hospital care
- Part A co-insurance for inpatient hospital care
- Part B co-insurance or copayment amount
- A pair or eyeglasses each year

Question #21:

Medigap policies may cover which of the following expenses?

- Part A deductible
- Foreign travel emergencies
- Excess charges for non-assignment claims
- All of the above

Question #22:

If you have TRICARE coverage, you generally must enroll in Part A and Part B when you are first eligible to keep your TRICARE coverage.

- True
- False

Question #23:

SHINE counselors should use their home address on the bottom of the Client Agreement & Authorization forms, and when mailing information to clients and caregivers.

- True
- False

Question #24:

The duties of a SHINE counselor include which of the following?

- Assisting clients in understanding Medicare statements
- Helping clients understand the Medicare appeals process
- Assisting clients in deciding how to supplement Medicare
- All of the above

Question #25:

The eight-month Part B Special Enrollment Period (SEP) for the working aged will be extended for time covered under COBRA after employment ends.

- True
- False

Question #26:

The front of all Medigap policies must be clearly labeled with which of the following terms?

- Medigap Supplemental Insurance
- Medigap Supplement Insurance
- Medicare Supplement Insurance
- Medicare Supplemental Insurance

Question #27:

The Medicare Part B Special Enrollment Period for the working aged and covered by an Employer Group Health Plan ends eight months after which of the following events?

- The covered employee stops working
- The covered employee loses employer-provided coverage
- Whichever (1) or (2) occurs first
- COBRA runs out

Question #28:

The Medicare.gov Plan Finder Tool can only be used to compare hospitals and nursing homes during the Open Enrollment Period.

- True
- False

Question #29:

To be eligible for a Medigap policy, a beneficiary must have

- Medicare Part A or Part B
- Medicare Part A and Part B
- Medicare Part C
- Any of the Above

Question #30:

What are Beneficiary Contact forms used for?

- Documenting excess charges for non-assignment claims
- Collecting and reporting details of counseling activities
- Filing claims for the Part A blood deductible
- Filing claims for foreign travel emergencies

Question #31:

Using the cms.gov website, one may determine that the acronym "HIPAA" stands for:

- Health Information Protection and Access Act
- Health Insurance Portability and Accountability Act
- Health Insurance Protection and Accountability Act
- None of the Above

Question #32:

What is it called when a plan requires that a doctor contact them before a drug will be covered?

- Prior authorization
- Step therapy
- Quantity limits
- Formulary

Question #33:

What is the benefit of Extra Help/Low-Income Subsidy (LIS)?

- It lowers the costs associated with prescription drugs
- It lowers the Part B premium amount
- It provides Medicare coverage in England
- It pays all the Part A deductible

Question #34:

What is the co-insurance charge for clinical diagnostic laboratory services under Part B?

- 20%
- 10%
- 0%

Question #35:

What is the income level at which the Part B premium begins to increase for a single person?

- \$25,000
- \$45,000
- \$50,000
- \$88,000

Question #36:

When does a beneficiary have a trial right to switch from a Medicare Advantage Plan to Original Medicare?

- If beneficiaries are willing to pay extra, they can change whenever they wish
- Anytime during the first year of initial Medicare Advantage Plan coverage
- Never
- Only during the Open Enrollment Period

Question #37:

When does your coverage take effect if you enroll during the Part B General Enrollment Period?

- April 1
- July 1
- At the beginning of the month after you enroll
- At the beginning of the month in which you enroll

Question #38:

When is Open Enrollment for Medicare Supplement Insurance?

- An eight-month window of time in which a 60-year-old who has been enrolled in Part B for years can switch from one supplement plan to another
- A twelve-month window of time in which a 65+ year old who has enrolled in Part B for the first time can purchase ANY of the standardized plans
- A six-month window of time in which a person who is at least 65 years old, and enrolled in Part B for the first time, can purchase ANY of the standardized plans
- A four-month window of time in which ANY Medicare beneficiary of ANY age, who is enrolled in Part B for the first time, can purchase any of the plans

Question #39:

When is the Initial Enrollment Period (IEP) for Medicare Part B?

- January 1 through February 14
- Six months after enrolling in Medicare Part A
- The same as that for Medicare Part A
- January 1 through March 31

Question #40:

When is the Medicare Open Enrollment Period?

- October 1 - November 15
- October 15 - December 31
- October 15 - December 7
- November 15 - December 31

Question #41: (Change answer)

When using the Plan Finder Tool, you should always encourage the beneficiary to save their drug list on their Medicare.gov account.

- True
- False

Question #42:

Which of the following factors does not affect the cost of a Medicare Part D plan?

- Mail order pharmacies
- Location
- Brand name versus generic drugs
- Beneficiary's sex

Question #43:

Which of the following is a qualification for a Medigap guaranteed issue right?

- Enroll during Medicare Open Enrollment Period
- Enroll 89 days after employer group health coverage ends
- Have no pre-existing health conditions
- Move out of an Advantage Plan's service area

Question #44:

Which of the following is a requirement for Medicare Part D enrollment?

- You must have Part A and/or Part B.
- You must live in the plan's service area.
- You must enroll in a plan.
- All of the above

Question #45:

Which of the following is a typical requirement of HMO plans?

- All plan members must have a chronic medical condition.
- Plan members cannot be seen by a specialist.
- Plan members must work for, or be retired from, a company with at least 25 employees.
- Plan members must choose a Primary Care Physician.

Question #46:

Which of the following is not a type of Medicare Advantage Plan?

- ABN
- PPO
- PFFS
- HMO

Question #47:

Which of the following is not a valid Medicare Part D cost?

- Copayments and co-insurance
- Annual Deductible
- Monthly premium
- Excess charges for non-assignment providers

Question #48:

Which of the following is true for Medicare Part B?

- It is funded by premiums and federal taxes.
 - The premiums may change yearly.
- The premiums are based on income.
- All of the above.

Question #49:

What will the penalty be if you delay enrolling in Part D for 24 months without creditable coverage?

- 10% of the national average premium for 4 years
- 20% of the national average premium for as long as you have Medicare Part D
- 24% of the national average premium for as long as you have Medicare Part D
- No penalty

Question #50:

Which Medicare Savings Program(s) will pay a beneficiary's 20% Part B coinsurance?

- Qualified Medicare Beneficiary (QMB) Program
- Specified Low-Income Medicare Beneficiary (SLMB) Program
- Qualifying Individual (QI) Program
- SLMB and QI
- All of the above