

HELP DESK TRAINING QUESTIONS IN RESPONSE TO THE LETTERS

*****BELOW PLEASE FIND THE "HOTTEST TOPICS" FOLLOWED BY GENERAL QUESTIONS*****

HOTTEST TOPICS

What letters went out?

There are FIVE letters that have been mailed, as explained below:

DUALS

1. The State RE-ENROLLED approx. 15,000 DUALS who had the worst drug match into plans that cover all or most of their drugs. The State sent them a letter telling them the name of the new plan.
2. Some DUALS will stay in the plan the feds selected because there is a 100% match. A letter was sent telling them to stay in the plan the feds chose.
3. DUALS who were in a plan that covers most of their drugs 80-99 got a letter from the State outlining the name of a new plan that may more closely match their drug usage.

DELS

4. The State ENROLLED 22,220 DELS into plans. The State sent them a letter telling them the name of the new plan.
5. About 13,000 DELS had file mismatch problems. They were not enrolled. The problems are being fixed. These DELS may stay in the DEL program until the problems are fixed. The State is sending them a letter to tell them they can stay in the DEL program until the problems are fixed – at which time they will be auto enrolled into a plan and a letter will go out telling them what the plan is.

What if I am a DEL and I signed up with a State plan on my own?

You must allow the State to choose a plan for you in order to get the extra help in paying for your drugs. You will not get State benefits if you signed up, on your own, with a plan that the State has an agreement with.

I don't like the Plan the State selected for me. Can I choose one on my own?

DELS

- If you are a DEL, you will not get State benefits if you choose a plan on your own

- If you are a DEL and you let the Help Desk choose a new Plan for you, the new Plan will not take effect until February
- DELS can change plans once between 1/1/06-5/15/06 – however, if you change plans with the State before 1/1/06, it won't take effect until February and it probably will count as the one change you are allowed

DUALS

- You may choose a plan on your own (a plan that is on the PDP List only) and still get State WRAP benefits. However if you choose to select a new Plan with the Help Desk, it will not take effect until February.
- You can change plans once a month on your own and still get the State WRAP benefits as long as you choose a plan that has an agreement with the State

When does the Plan you chose for me (the Plan identified in a letter) go into effect?

1/1/06

What if the Plan you chose for me doesn't cover all my drugs? What do I do?

The plan may not cover all your drugs. If the Plan does not cover all your drugs, you can contact the plan and ask for an exception. Your doctor will have to tell the Plan that you must have the drug and no other will do. It is up to the Plan to agree or not with your doctor.

Remember too that DUALS and DELS may be getting medication OUTSIDE of what the State has paid in the past. The State may not have that/those drugs on their list when they were matching people to plans.

For DUALS all PDP's must cover a one time fill of a prescription drug not covered by the Plan's formulary.

DUALS can ask for an exception and in addition can change plans monthly in order to find a plan that covers most or all drugs.

I am a DEL member. I picked a plan on my own that does not have an agreement with the State to help me with the costs of my drugs. I received a letter from the State telling me that the State has enrolled me in a different plan. What do I do? Do I have to cancel the plan I picked?

For most people, the best choice will be to go with the Plan that the State has picked for you so that you will get help with drug costs. If you choose a plan on your own, whether or not this Plan has an agreement with the State, you will not get financial help from the State. You must allow the State to choose a plan for you in order to get the help.

If you decide to go with the plan that the State has chosen, the State plan overrides the previous selection. Because of the short time frame, it is advisable to contact the plan you selected on your own and let them know you do not want that plan.

I am a DEL member and I picked a plan on my own that is exactly the same as the Plan picked by the State. What do I do?

You do not have to do anything. Your pharmacy will know this plan covers you beginning January 1, 2006.

General Questions

What will I pay for my drugs?

- Refer to the WRAP chart to define the differences between DELs and DUALs
- You will need to contact your PDP (see attached PDP list), here is the number, on generic copays for DELs and other questions involving drugs not covered

I don't pay co-payments now but the pharmacist still gives me my medicine. Will this be the same with this new plan?

No, you will have to pay the 50% co-pay under the State's plan **unless you are in a nursing home or a residential care facility where DHHS sends you a letter telling you what to pay toward the cost of your care every month.** Your pharmacist can tell you what you need to pay.

What help will I get from the State to lower my costs?

Refer to the WRAP table

What do I bring to the pharmacy in January?

DELS

- The letter you get from the State telling you the Plan the State picked for you AND the letter that has a picture of the DEL card on it. This says that you will get help from the State with your drug costs

DUALS

- If the State enrolled you in a Plan, you need to bring the letter you get from the State telling you what Plan you are enrolled in
- If the State did not enroll you, you need to bring the yellow letter from Medicare telling you the plan Medicare enrolled you in
- If you enrolled yourself in a plan, bring whatever info you have on this

Will you be sending me a new DEL card?

No. keep del card for future use

I get my drugs from the VA (or other private coverage). Do I need to get this Medicare Prescription Drug Plan too?

- Probably not, as long as the plan you have is equal to or better than the State's plan (creditable coverage.) Keep your VA plan or any other outside plan if the State plan is not equal to or better than the plan you currently have
- To find out if the Plan you have is at least equal to a Medicare Prescription Drug Plan you will need to call the VA or other private insurer to make sure that their plan is equal to or better than the State plan.

I get some of my drugs from Canada or a Patient Assistance Program. Does the plan you put me in cover those drugs too?

If helpful, you may refer to the Patient Assistance Program document in your packet.

However, please advise the caller to check directly with the plan. CMS is advising DUALS to do this too. If these drugs were not using these when we were matching you into your plan, there is a possibility they will not be covered by your plan.

DUALS = can change plans every month to find a plan that covers the drugs from Canada or Patient Assistance Program

DELS = can choose a new plan ONCE before 5/15/06 to find a plan that covers the drugs from Canada or Patient Assistance Program. After that, the DEL can change plans only during the open enrollment period. ****Remember that if a DEL selects a new plan with you, it won't take effect until February and it may count as the one allowed change****

This is too confusing, just leave me alone, I am doing fine.

- If you do not enroll in a Medicare Prescription Drug Plan you will not have any help to pay for your drugs as of 1/1/06. MaineCare or DEL will not pay for your drugs starting in January unless you have enrolled in a prescription drug plan. Do you want me to enroll you in a plan now? If not, is there someone you'd like me to call who can help you decide?
- There will be no DEL benefits starting in January and no drugs paid for by DEL. Please make sure you have other drug coverage

Is RX Maine changing?

No, it is remaining the same

What if I can't afford the premiums and deductibles and copays. Are there other options?

Refer to the WRAP chart

When am I going to get the autoenrollment letter? You said I would have it by 12/15.

Letters are being mailed out over the next few days. If you do not receive a letter and feel you should have, call the Pharmacy Help Desk at 1-866-796-2463.

I received a letter autoenrolling me into a State Plan, and I am not on Medicare. What do I do?

- Our records may have indicated that you are on Medicare
- You do not have to do anything now
- The Plan will still send information to Medicare that you have been enrolled. Medicare will not enroll you in a Plan and will let you know this.

I didn't get a letter. I am on Medicare. Did you autoenroll me?

Check:

- Medicare eligibility
- If we autoenrolled the caller
- Tell the caller which plan
- Give the phone number of the plan to the caller so that he/she can check directly with the plan to make sure the plan has their info

What if we missed them and didn't autoenroll them?

You will need to listen to each caller's circumstances. There are several.

For DUALs, the feds should have enrolled them into a plan. Even if it doesn't cover all their drugs, they have a plan. For the time being, they have the option of speaking with their doctor to change drug names in order to get a drug that is covered by their plan. Docs also have a tool in ePocrates whereby via their PDA's (personal digital assistant) they can see all fed plan formularies at their disposal (if they use a PDA).

If DUALS got missed by the feds:

- 1) Best option: DUALS have the option of being enrolled into a plan at the pharmacy after Jan. 1. This plan will cover them until they are enrolled in a Plan or for up to 30 days. This Plan will cover their drugs.
- 2) They can choose a plan with you over the phone but make sure they know coverage will not begin until February because of technology programming.

If they are part of the DUALS who were scheduled for autoenroll, they should be in a new plan. If they aren't, the caller has a couple of options. They can stick with the fed plan or they can select a new plan with you – but the new plan will not go into effect until February.

If a DEL was somehow missed, the only option that the DEL has right now (we are working on contingency planning plans) is to enroll into a plan with you but the new plan will not go into effect until February.