



Colorado Department
of Public Health
and Environment

Medicare and Bridging the Gap, 2013

Information for people enrolled in the Bridging the Gap, Colorado (BTGC) program, as well as persons enrolled in ADAP who will become Medicare eligible in the coming year.

Medicare Annual Election Period (AEP) is October 15th through December 7th. This is the time of year when all Medicare recipients can evaluate their drug coverage and elect to choose a different, more cost effective plan or a plan that better suits their medical needs. While BTGC members can switch to a cheaper plan at any time during the year, we encourage you to take this time to evaluate your options. For more details on BTGC, please read through the Summary of Assistance included in this packet. Make sure to fill out the included BTGC Application and return it to the Colorado ADAP before the beginning of the year.

CHANGES FOR 2013:

Three insurance companies will no longer operate in Colorado **Many BTGC members are on these plans. If you are on one of these plans, pay close attention to any mailers to prevent loss of coverage in January 2013:**

- Community CCRx
- Health Net Orange- ALL plans
- Medco- ALL plans

If you are enrolled in one of these plans, you will be receiving a change notice in the mail from Medicare. Make sure to read this notice, as it will tell you what action you need to take, if any. If you are told you must enroll in a different plan or are unsure, please call the ADAP HelpDesk at (303) 692-2716 for guidance.

Benchmark Plans for 2013:

The following plans are available at no cost to clients who receive “Extra Help” through Social Security. If you choose to stay on a plan that is no longer benchmark, you will have to submit your premium invoice if you would like BTGC to pay your monthly premium:

- — Envision Rx Silver
- — Humana Walmart Preferred
- ----SmartD Rx Saver
- — AARP MedicareRx Saver Plus

LIS and Medicare Savings Programs (MSP) Financial Limits 2013

LIS (Low-Income Subsidy, or “Extra Help”) is a program to help Medicare beneficiaries with the cost of their prescription drugs. If you make less than \$1,396 a month you qualify and are required to apply for LIS if you have not already done so. Once approved, LIS will significantly lower your drug costs for any of your drugs not covered by BTGC.

Medicare Savings Programs (MSPs) help clients making less than \$1,277 a month and have less than \$8,440 in resources (not counting your house or vehicles). MSPs cover your Part B premium (the amount taken out of your Social Security check each month for Medicare and can often help with your office visit co-pays and co-insurance. If you qualify financially and are not already enrolled, you can apply for LIS and an MSP enrollment packet will be automatically sent to you OR you can call your county’s Health and Human Services office for more information. This is a great way to save almost \$1,200 a year in medical costs and premiums for those who qualify!

Part D Prescription Drug Plans (PDPs)

These are the PDP's offered in Colorado for 2013. The plan names that are bold and italicized are plans below the LIS benchmark. That means that clients receiving "Extra Help" through Medicare will pay no premium on these plans and their drugs will be covered at the lowest possible price.

Stand-Alone Prescription Drug Plans (PDPs)

Company Name	Plan Name	Monthly Drug Premium	Annual Drug Deductible
Aetna Medicare	Aetna Medicare Rx Essentials (PDP) S5810-061	\$61.40	\$325
Anthem Blue Cross and Blue Shield	Blue MedicareRx Standard (PDP) S5596-059	\$35.70	\$325
	Blue MedicareRx Plus (PDP) S5596-060	\$84.40	\$0
Cigna Medicare Rx	Cigna Medicare Rx Plan One (PDP) S5617-133	\$51.00	\$325
Colorado Access Advantage	<i>Colorado Access Vista Medicare PDP (PDP) S3706-001</i>	\$28.50	\$325
Destiny Health Insurance Company	Destiny Health MedSaver Part D Plan (PDP) S2978-011	\$39.30	\$325
EnvisionRx Plus	<i>EnvisionRxPlus Silver (PDP) S7694-027</i>	\$32.20	\$325
	EnvisionRxPlus Gold (PDP) S7694-097	\$54.00	\$150
Express Scripts Medicare	Express Scripts Medicare - Value (PDP) S5660-129	\$57.30	\$325
First Health Part D	First Health Part D Premier (PDP) S5768-119	\$46.00	\$325
	First Health Part D Value Plus (PDP) S5768-150	\$32.30	\$0
HealthMarkets Medicare	Reader's Digest Value Rx (PDP) S0128-028	\$37.90	\$325
HealthSpring	HealthSpring Prescription Drug Plan-Reg 27 (PDP) S5932-026	\$52.10	\$325
Humana Insurance Company	Humana Enhanced (PDP) S5884-085	\$47.50	\$0
	<i>Humana Walmart-Preferred Rx Plan (PDP) S5884-111</i>	\$18.50	\$325
SilverScript	SilverScript Basic (PDP) S5601-054	\$34.00	\$325
	SilverScript Choice (PDP) S5601-136	\$29.10	\$0
SmartD Rx	<i>SmartD Rx Saver (PDP) S0064-027</i>	\$33.20	\$325
	SmartD Rx Plus (PDP) S0064-062	\$73.50	\$0
United American Insurance Company	United American - Enhanced (PDP) S5755-030	\$61.10	\$130
	United American - Select (PDP) S5755-098	\$42.90	\$325
UnitedHealthcare	AARP MedicareRx Preferred (PDP) S5820-026	\$48.10	\$0
	<i>AARP MedicareRx Saver Plus (PDP) S5921-372</i>	\$15.00	\$325
WellCare	WellCare Classic (PDP) S5967-164	\$35.30	\$0
	WellCare Extra (PDP) S5967-198	\$49.00	\$0

*****Only plans that BTGC will cover at 100% are shown. *****

If you choose to enroll in a plan not listed here, you will be required to pay any costs above what BTGC will cover. Not all plans may cover all your medications. Please make sure to consult your plans formulary and read all correspondence to make sure your drugs are covered.

Medicare Advantage – Prescription Drug Plans

These plans are available to clients who are enrolled in Medicare Part B and resemble most private large group health plans. Instead of being subject to the 20% co-insurance not covered by Medicare, enrollees in these plans pay standard co-pays for medical services (doctors visits, lab work, radiology, specialty visits, etc.).

Organization Name	Plan Name	Monthly Premium (Includes Part C + D)	Annual Drug Deductible	In-network MOOP Amount **
Aetna Medicare	Aetna Medicare Select Plan (PPO) H5521-028	\$68.00	\$0	\$6,700
	Aetna Medicare Select Plan (HMO) H6923-001	\$0.00	\$0	\$4,400
Anthem Blue Cross and Blue Shield	Anthem Medicare Preferred Standard (PPO) H2997-008	\$44.00	\$90	\$5,700
	Anthem Medicare Preferred Standard (PPO) H2997-009	\$55.00	\$90	\$5,700
	Anthem Medicare Preferred Standard (PPO) H2997-010	\$53.00	\$90	\$5,300
	SureValue Select (HMO) H5679-003	\$35.00	\$60	\$5,500
Colorado Access	Colorado Access Advantage Peak Plan (HMO) H0621-006	\$31.90	\$325	\$6,700
Denver Health Medical Plan, Inc.	Denver Health Medicare Select (HMO) H5608-002	\$18.70	\$325	\$5,000
Humana Health Plan, Inc.	Humana Gold Plus H5291-001 (HMO) H5291-001	\$27.00	\$0	\$3,400
	Humana Gold Plus H5291-002 (HMO) H5291-002	\$0.00	\$325	\$5,500
Humana Insurance Company	HumanaChoice (PPO)H0623-001	\$70.00	\$0	\$5,500
	HumanaChoice (PPO) H0623-011	\$39.00	\$325	\$5,500
Kaiser Permanente	Kaiser Permanente Senior Advantage Core (HMO) H0630-013	\$0.00	\$0	\$3,400
	Kaiser Permanente Senior Advantage Silver (HMO) H0630-015	\$48.00	\$0	\$3,400
	Kaiser Permanente Senior Advantage Core (HMO) H0630-017	\$0.00	\$0	\$3,400
	Kaiser Permanente Senior Advantage Silver (HMO) H0630-018	\$44.00	\$0	\$3,400
	Kaiser Permanente Senior Advantage Core Plan (HMO) H0630-020	\$0.00	\$0	\$3,400
	Kaiser Permanente Senior Advantage Silver Plan (HMO) H0630-021	\$40.00	\$0	\$3,400
Rocky Mountain Health Plans	Rocky Mountain Thrifty Plan + Rx (Cost) H0602-039	\$74.30	\$0	\$6,000
	Rocky Mountain Green Plan + Rx (Cost) H0602-043	\$56.00	\$125	\$6,700
UnitedHealthcare	AARP MedicareComplete SecureHorizons Plan 1 (HMO) H0609-002	\$40.00	\$0	\$5,700
	AARP MedicareComplete SecureHorizons Plan 1 (HMO) H0609-007	\$45.00	\$0	\$3,900
	AARP MedicareComplete SecureHorizons Plan 2 (HMO) H0609-012	\$0.00	\$0	\$4,200
	AARP MedicareComplete SecureHorizons Plan 2 (HMO) H0609-020	\$0.00	\$0	\$5,900

Only plans that BTGC will cover at 100% are shown

MOOP is the Maximum Out of Pocket expense that a member in that plan will pay in a calendar year. These totals do not include drug costs (paid by BTGC). Past this threshold, you will have no cost for covered medical expenses. Refer to your Medicare Advantage Plan Summary for details.

Open Enrollment Checklist, 2013

Please take a very close look at this list
and mark off each item as you complete it.

√	What To Do:	Why?	How?
<input type="checkbox"/>	Decide whether you want to stay with your current Medicare Advantage or Medicare Part D Plan, or if you need to change	Are all your drugs on your plan? Is your plan still offered where you live? Does your doctor(s) or pharmacy still accept it?	Check your mail to see if you got notice of plan change or cancellation. Work with a Case Manager or Social Worker, or specialized SHIP counselor (1-888-696-7213 to reach the office closest to you) . You may also review or choose from available plans at www.medicare.gov .
<input type="checkbox"/>	Complete the included BTGC 2013 application and submit to the Colorado ADAP for approval.	Without a 2013 application, your coverage will end on December 31st. Even if you have not received a premium invoice, at least return Page 1 of the application.	Return this application to: BTGC A3 -3800 4300 Cherry Creek Dr. South, Denver, CO 80246 Fax: (303) 782-5393
<input type="checkbox"/>	If your monthly income is <u>\$1396 or less</u> , make sure you are receiving the Low Income Subsidy (LIS, also known as Extra Help).	If eligible for LIS, you have to prove you have applied for it to be on BTGC.	Check your status and/or apply by calling Social Security (1-800-772-1213) or visit: www.MyMedicare.gov or www.ssa.gov
<input type="checkbox"/>	Make sure that your ADAP enrollment is current.	BTGC helps pay many of the costs for your Part D plan. You must have ADAP to get BTGC.	ADAP is renewed yearly in the month of your birth and 6 months following. Call ADAP at (303-692-2716 to confirm your status. BTGC applications must be completed prior to December 28th.
<input type="checkbox"/>	If your plan has a premium , once you receive a premium invoice or coupon book, send along with Page 3 of the application completed to BTGC.	It is very important that you notify Bridging the Gap of your plan's details. They need this information so they can pay your premiums!	If you have any questions regarding your plan or correspondence you receive from Medicare or Part D plan, please call the regular ADAP help desk number at 303-692-2716 for assistance.
<input type="checkbox"/>	If your monthly income is <u>\$1277 or less</u> , make sure you are enrolled in a Medicare Savings Program and that it is up to date.	This program pays your Medicare Part B premiums and often can help with medical co-pays and coinsurance.	Contact your county department of social services, or human services, depending on where you live. Your case manager or social worker should have this contact info.
<input type="checkbox"/>	Read your mail regularly throughout the year. If you receive a past-due premium bill make sure BTGC is aware of it.	If your plan is cancelled due to non-payment of premium, you may lose access to Medicare.	Call Dwayne Hickman at (303) 962-4494 if you get a late notice (only if you have already arranged for BTGC to pay for it).