



PACE and MEDICARE PART D FREQUENTLY ASKED QUESTIONS 2018

The following Questions and Answers address program policies and procedures as they relate to how the PACE Program is working with Medicare Part D in 2018:

1. If I have PACE or PACENET, why should I enroll in Part D?

Many PACE or PACENET cardholders will save money by being enrolled in both programs at the same time. Having both Medicare Part D and PACE or PACENET helps the program save money that can be used to help more Pennsylvanians.

2. Are all PACE/PACENET cardholders enrolled in Part D?

No. We will not enroll the following cardholders into a Part D plan: those who are not Medicare Part D eligible, those in Medicare Advantage Plans, and those in employee retirement plans with creditable drug coverage. The PACE/PACENET program will not enroll anyone who notifies us that they do not want to be enrolled in a Part D plan for 2018.

3. How do I know if PACE/PACENET has enrolled me in Medicare Part D?

If PACE/PACENET enrolls you in a Part D plan, you will receive a letter from the program telling you the the Medicare Part D plan and the effective date of enrollment. In order to select the best Medicare Part D plan on your behalf, the program reviews your information and selects a plan that will cover your medications at the lowest cost while also allowing you to go to the pharmacy that you prefer.

4. I have not received any letter or other information from PACE or PACENET about how they will work with my Part D plan. Does that mean that I will not get any help from PACE or PACENET with Part D costs?

If you have not received information from the program, we may not be enrolling you in Part D as mentioned in Question 2; or we may not know that you have a Part D plan.

All PACE/PACENET cardholders get help with their Part D deductibles, co-pays and costs during the coverage gap. If you have any questions about how PACE/PACENET can work with your Part D plan, you should call the program at 1-800-225-7223.



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5. Will I receive an identification card from the Part D plan PACE/PACENET enrolled me in?

Yes. You will receive an identification card from the Part D plan. You will use your Part D plan's identification card along with your PACE/PACENET identification card at the pharmacy.

6. I am not currently enrolled in PACE or PACENET. If I enroll in the program, will I automatically be enrolled in Part D?

If you do not have a Part D plan when you enroll in PACE or PACENET, we will not assign you to one immediately, but we may provide recommendations to you within a few months.

7. Who will pay the Part D premium?

That depends on whether you are in PACE or PACENET.

PACE:

The PACE Program will pay the Part D premiums for PACE cardholders enrolled in one of the plans that has a premium assistance agreement. The premium assistance plans can be found on the PACE/PACENET website. For 2018, PACE will pay up to the regional benchmark, which is \$37.18. If you enroll in a plan with a Part D premium higher than \$37.18 you must pay the difference.

The Program will not be able to help pay the Part D plan premium for individuals who are enrolled in a Part D plan that are not on the premium assistance list with PACE/PACENET.

PACENET:

PACENET cardholders enrolled in one of the program's Partner Part D plans will have to pay the Part D plan's premium at the pharmacy. You will never be charged more than the cost of your medication at one time. Therefore, if the cost of your medication is less than the amount of premium you owe, you only pay the cost of the medication and the remaining amount of the premium you owe will be carried over until you need another medication filled (that same month or the next month).

EXAMPLE: Part D plan's monthly premium is \$32.00.

Prescription filled on 1/12/18 – cost of the drug was \$8.25 – cardholder charged \$8.25 and this amount goes toward the premium of \$32.00 (\$23.75 remaining).

Prescription filled on 1/13/18 – cost of the drug was \$14.20 – cardholder charged \$14.20 and this amount goes toward the remaining premium of \$23.75 (\$9.55 remaining).



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Prescription filled on 1/13/18 – cost of the brand drug was \$153.24 – cardholder charged \$9.55 to meet the remaining amount of the premium plus a \$15 co-payment for the brand name medication.

PACENET cardholders not enrolled in a Partner plan will have to pay the Part D plan's premium directly to the Part D plan each month. These PACENET cardholders will not have to pay a PACENET deductible at the pharmacy.

8. I am enrolled in PACENET. If I do not enroll in Part D, what will I have to pay?

When you first use your PACENET card, and in the months that follow, you will have to pay a monthly deductible that is equal to the regional benchmark premium for Part D, which is \$37.18 for 2018. After you pay this deductible at the pharmacy, you will pay the PACENET copays for your medications (\$8 for generics and \$15 for name brand medications).

If you have not used your PACENET card and you do not currently take medications, you will not have to pay this deductible until you activate your card at the pharmacy. Once you activate your PACENET card, the monthly deductible will accumulate if it is not met each month. This process is only for PACENET cardholders that do not enroll in Part D.

EXAMPLE: I sign up for PACENET in January 2018, but do not use my card until March, 2018. In March, I pay a deductible of \$37.18. If I do not purchase any medications in April, my deductible in May will be \$74.36 (\$37.18 from April plus \$37.18 for May) and so forth.

9. Should I sign up for automatic Part D premium deductions from my Social Security?

No, there are many instances in which the program will send payment to your Part D plan on your behalf. By signing up for automatic deductions from Social Security, you may be overpaying for your Part D services. Please check with the program prior to making this decision.

10. What should I do if I receive a coupon booklet or a bill for my premium payments from my Part D plan; should I send them payments?

No, you should not send any money to the Part D plan without checking with PACE/PACENET first. Please call the program's toll-free number at 1-800-225-7223 to review any coupon booklets or invoices you may have received.



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11. If I am enrolled in Part D, will I still use my PACE or PACENET card?

Yes, show both cards at the pharmacy. This will let your pharmacist know to bill your Part D plan first and bill PACE or PACENET second. It will also let your pharmacist know that you are entitled to all of the drugs that are available under PACE and PACENET.

12. Will my co-payments be higher with PACE/PACENET and Medicare Part D?

No, not for medications that are covered by PACE/PACENET. If your Part D plan charges higher co-payments than you were paying under PACE/PACENET, the program will pay the difference if the pharmacy has the capability to bill more than one payer for a prescription claim. If you are taking medications that are not covered by PACE/PACENET, you will pay your Part D plan's co-pay for those drugs.

If you run into any confusion at your pharmacy, call the program's toll-free number at 1-800-225-7223..

13. What happens if my Part D plan charges lower co-payments than PACE/PACENET?

You will pay the lower co-payments when the Part D plan pays for the medication.

14. Many Part D plans stop their coverage after you reach a certain dollar limit. This is referred to as the “donut hole” or “coverage gap.” How will this work if I have PACE/PACENET?

You will not experience a “donut hole” or period of time when you have no prescription drug coverage. Instead, the PACE/PACENET program will fill in the gaps for covered medications, so that you can continue to get your prescriptions by only paying the PACE/PACENET co-pays.

15. What happens if my Part D plan doesn't cover all of the drugs that PACE/PACENET covers?

If your Part D plan has a restrictive drug formulary, PACE/PACENET will cover your prescription medications or work directly with the plan to process a prior authorization on your behalf so the drugs will be covered by your Part D plan.



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16. Can I go to any pharmacy I choose if I am in PACE and Medicare Part D?

No. You must use the pharmacies that are in your Part D plan's network and participating with PACE/PACENET. We picked a plan for you that contracts with the pharmacy where you usually get your prescriptions filled. If you decide to change pharmacies, check with your new pharmacy to make sure they participate in your Part D plan and PACE.

17. If my Part D plan offers a mail-order service, can I use it?

Yes. However the mail-order pharmacy **must** participate with the PACE Program in order for the program to help pay for your extra co-payments. Please have your doctor's office verify if the mail-order pharmacy is in the PACE network prior to submitting prescriptions for processing. Also, when you receive a three-month supply of your drug(s) by mail, you will pay up to three PACE/PACENET co-payments at once. For example, a PACE cardholder would pay up to \$18 for a 90-day supply of generic medications.

18. Where can I get a list of the mail-order pharmacies that I can use?

PACE/PACENET cardholders enrolled in Part D will have to use the pharmacies in the Part D plan's pharmacy network and participating with PACE/PACENET. If your Part D plan offers mail-order services, the plan will provide information regarding these pharmacies in their Welcome Kit and enrollment documents that will be sent to you.

If you want to find out whether a mail-order pharmacy also participates with PACE/PACENET, you can contact the PACE program at 1-800-225-7223.

19. How did the program decide which Part D plan to enroll me in?

We reviewed the drugs that you take and the pharmacy you use most often. Then, we matched you up with a partner plan that covers your medications, offers you the lowest possible costs for your prescription drugs and works at the pharmacy you use.

20. Which Part D plans are partnering with PACE/PACENET?

During 2018 the PACE/PACENET program will be partnering with the SilverScript Choice and the WellCare Classic Part D plans.



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21. Are these the only plans that I can enroll in?

No. The program has signed agreements with many Part D plans for 2018 that make it easier for the PACE program to coordinate with them and avoid confusion. Enrolling in one of these plans guarantees that you get the most help with your Part D plan costs.

22. Where can I get more information about the Part D plans available in PA?

Information about premiums, participating pharmacies and covered drugs for these companies, and any other Part D plan operating in Pennsylvania, is available by calling 1-800-Medicare (1-800-633-4227 or 1-877-486-2048 (TTY)) or by going on the internet at: www.medicare.gov.

Also, the Medicare & You Handbook mailed to all Medicare beneficiaries in the fall has a list of all the available plans in Pennsylvania.

23. Can I pick a different plan from the one that the program has chosen for me?

During the Annual Enrollment Period from October 15 through December 7, anyone on Medicare can change their Part D plan. The PACE/PACENET program sends its members a notification regarding their personal plan selection before the start of this period.

PACE/PACENET cardholders are also eligible for one Special Enrollment Period per year. This means you can change the Part D plan in which you are enrolled or were assigned to one time outside the Annual Enrollment Period.

If you want to enroll in a Part D plan that is not one of our Part D Partner plans, let us know and call the Part D plan directly or Medicare at 1-800-MEDICARE or 1-800-633-4227.

24. If I am already enrolled in a Part D plan and have been paying my monthly premium to the plan, will I still be switched to the Part D plan that the PACE program picked for me?

Not necessarily. Shortly before the Annual Enrollment Period, you will receive a letter from the program telling you whether they will be assigning you to a different plan. If you receive a letter, the choice of Part D plans is yours. You can either be assigned to the plan the program picks for you or notify the program that you want to stay in your current plan.



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25. If I am in a Medicare Advantage Plan without prescription drug coverage, do I have to change plans to enroll in Part D?

If you are in a Medicare Advantage Plan (HMO/ PPO) without prescription drug coverage and you would like to enroll in Part D, you need to contact your Medicare Advantage Plan to see if they offer a Part D benefit. If they do, you should enroll through your Medicare Advantage Plan in order to keep your doctor and other health care providers. If you are in PACE (as opposed to PACENET), the program will pay the Part D premium portion for you (up to \$37.18) if the plan has signed a premium payment agreement with the program.

If your Medicare Advantage Plan does not offer a Part D benefit, then you may need to join a different Medicare Advantage Plan to get Part D. Keep in mind that changing Medicare Advantage Plans may affect your choice of doctors.

26. Do I have to enroll in Part D if I am enrolled in PACE/PACENET?

No. This program is voluntary. If you are in PACE/PACENET and you choose not to enroll in Part D, PACE/PACENET will continue to pay for your drugs as it has in the past.

27. I am enrolled in PACE/PACENET and receive benefits from the Veteran's Administration (VA). Do I need to enroll in Medicare Part D?

No. The VA is considered creditable coverage (as good as or better than Medicare Part D), and so is PACE/PACENET. However, you can enroll in Medicare Part D and keep your other benefits. That way, you will have extra prescription coverage in case you cannot get to a VA facility.

28. I am a State Employee Retiree and have health coverage through PEBTF/REHP. Should I enroll in a Medicare Part D plan?

If you are enrolled in PEBTF/REHP and PACE/PACENET, the PACE Program will not enroll you into a Medicare Part D plan. The PEBTF/REHP will offer Part D coverage in 2018 through a retiree SilverScript Part D plan. For more information, you should contact PEBTF at 1-800-522-7279 or REHP/SilverScript at 1-866-329-2088.