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OFFICE OF AIDS
AIDS Drug Assistance Program (ADAP)

Management Memorandum
Memorandum Number: 2013-16

Date: October 30, 2013

TO: LOCAL ADAP COORDINATORS
ADAP ENROLLMENT WORKERS

SUBJECT: MEDICARE PART D OPEN ENROLLMENT FOR 2014
October 15 – December 7, 2013

The Office of AIDS (OA), ADAP, would like to remind you that the Medicare Part D Annual Coordinated Election Period (ACEP) began on October 15, 2013 and continues through December 7, 2013 for coverage that starts on January 1, 2014. It is important to note that Medicare eligible ADAP clients who failed to enroll in a Part D Plan for 2013 will have their ADAP eligibility suspended, starting in mid-October, until they provide proof of enrollment in a Part D plan for 2014.

During the ACEP, Medicare beneficiaries who do not yet have a Part D plan may enroll in a Prescription Drug Plan (PDP) or a Medicare Advantage Prescription Drug plan (MA-PDs). Those who are already enrolled in a plan may also switch to a different PDP or MA-PD. Additionally, beneficiaries who were not satisfied with their plans in 2013 need to review their options to avoid remaining in a plan that no longer works for them.

Beneficiaries who miss the new ACEP deadline may have to wait until open enrollment in the fall of 2014 to enroll in Part D, and may face a federal late enrollment penalty unless they qualify for a Special Enrollment Period (SEP). Individuals who qualify for the Part D Low Income Subsidy (including all full and partial dual eligibles) have a continuous SEP that allows them to enroll in or change plans at any time of year, regardless of the ACEP. For more detailed information on the Medicare Part D benefits, log on to www.medicare.gov.

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Part D Full Subsidy beneficiaries (including those with both Medicare and Medi-Cal with no share of cost) must enroll in a Benchmark Plan. A list of the 2014 plans is attached for your reference. Once enrolled in a Benchmark Plan, ADAP will cover the full cost of the beneficiaries' Part D copayments for ADAP formulary drugs. If Part D Full Subsidy beneficiaries enroll in a *Standard* Part D plan, ADAP will only be able to pay up to the prescription copays associated with Benchmark Plans (up to \$2.55 for generics and up to \$6.35 for brand drugs). This copayment restriction is due to both state and federal mandates that ADAP be the payer of last resort. The client will be responsible for paying any difference in the higher copayment amount due under a Standard Part D Plan.

Also, please remember that ADAP clients who enrolled in the *OA Medicare Part D Premium Payment Program (MDPP)* for 2013 must reapply for premium payment assistance in 2014. These clients will be receiving a re-enrollment packet in the mail in the near future. For clients who were not enrolled in MDPP for 2013 and want to apply for assistance in 2014, the application packet is available at [Medicare Premium Payment Program 2014 Enrollment Packet](#). Please make these forms available to your clients.

Please contact your OA ADAP Advisor if you have any questions regarding the content of this memo. The most current "OA/ADAP Staff Assignments by LHJ" list is available on the OA website at: <http://cdphinternet/programs/aids/Documents/ADAP-LHJStaffAssignments.pdf>



Celia Banda-Brown, Chief
ADAP Section
Office of AIDS

Attachment



CALIFORNIA HEALTH ADVOCATES
Medicare Policy, Training and Advocacy

2014 California Medicare Part D Benchmark Plans

- The 7 Medicare Part D plans listed below have basic benefits with monthly premiums below the CA benchmark of \$28.10.
- If you have Medicare and free Medi-Cal, or you qualify for full Extra Help (also known as the Low-Income Subsidy):
 - You don't have to pay a premium or deductible if you enroll in one of these plans. You may have a copayment for each prescription, up to \$2.55 for generic drugs and up to \$6.35 for brand name drugs.
 - You may change plans once a month, anytime during the year.
 - You may enroll in a Medicare Part D plan not listed below, but you may have to pay a premium and/or deductible and higher copayments.
- If your income is low but you don't qualify for Medi-Cal, you may qualify for Extra Help which helps pay for your Medicare Part D plan. **Please call your local HICAP (Health Insurance Counseling & Advocacy Program) for more info: 1-800-434-0222.**

Company	Plan Name and ID	To Enroll	Customer Service	TTY/TTDD
EnvisionRx Plus envisionrxplus.com	EnvisionRxPlus Silver S7694-032	1-866-250-2005	1-866-250-2005	711
HealthMarkets Medicare hmic-medicare.com	HealthMarkets Value Rx S0128-033	1-888-625-5531	1-888-625-5531	711
Humana Insurance Co. humana-medicare.com	Humana Preferred Rx S5884-114	1-800-611-1481	1-800-886-8061	711
Symphonix Health symphonixhealth.com	Symphonix Rite Aide Value Rx S0522-034	1-800-220-7892	1-855-355-2280	711
United American Insurance Company uamedicarepartd.com	United American Select S5755-103	1-877-577-3874	1-877-577-3874	1-866-524-4170
UnitedHealthCare aarpmedicareplans.com	AARP Medicare Rx Saver Plus S5921-376	1-877-699-5710	1-877-699-5710	711
Wellcare wellcareppdp.com	Wellcare Classic S5967-169	1-866-765-4390	1-888-550-5252	1-888-816-5252

If you have questions about Medicare Part D or other Medicare topics, contact

HICAP at 1-800-434-0222