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OFFICE OF AIDS
AIDS Drug Assistance Program (ADAP)

Management Memorandum
Memorandum Number: 2015-20

Date: November 6, 2015

TO: LOCAL ADAP COORDINATORS
ADAP ENROLLMENT WORKERS

SUBJECT: MEDICARE PART D OPEN ENROLLMENT FOR 2016
October 15 – December 7, 2015

The purpose of this memo is to remind enrollment workers that the Medicare Part D Annual Coordinated Election Period (ACEP) began on October 15, 2015, and continues through December 7, 2015, for coverage that starts on January 1, 2016. It is important to note that Medicare eligible ADAP clients who failed to enroll in a Part D Plan for 2015 will have their ADAP eligibility suspended, starting in mid-October, until they provide proof of enrollment in a Part D plan for 2016.

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 2015 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 2016 to enroll in Part D, and may face a federal late enrollment penalty unless they qualify for a special enrollment period. Individuals who qualify for the Part D Low Income Subsidy (including all full and partial dual eligible) can 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 2016 Benchmark 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 \$2.95 for generics and up to \$7.40 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.

Please note that, incarcerated individuals will now be automatically removed by Medicare from their Part D Plan. However, upon release, these individuals will have a special enrollment period in which they have 60 days to re-enroll in a Part D plan. Additionally, individuals that were not lawfully present in the United States, but are now lawfully present, will have a special enrollment period of 60 days from the date of lawful presence to enroll in a Part D plan.

Also, ADAP clients who enrolled in the *OA Medicare Part D Premium Payment Program (MDPP)* for 2015 must reapply for **premium payment assistance in 2016**. These clients will be receiving re-enrollment information in the mail in the near future. For clients who were not enrolled in MDPP for 2015 and want to apply for assistance in 2016, the application is available at [Medicare Premium Payment Program 2015 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://www.cdph.ca.gov/programs/aids/Documents/ADAPStaffLHJAssignments.pdf>



Celia Banda-Brown, Chief
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Attachment



CALIFORNIA HEALTH ADVOCATES
 Medicare Policy, Training and Advocacy

2016 California Medicare Part D Benchmark Plans

- The 6 Medicare Part D plans listed below have basic benefits with monthly premiums below the CA benchmark of \$31.05.
- If you have Medicare and full Medi-Cal (with no Share of Cost), 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 \$2.95 for generic drugs and up to \$7.40 for brand name drugs.
 - You may change plans once a month, anytime during the year.
 - You may enroll in a Part D plan not listed below, but may have to pay a premium and/or deductible and higher copays.
- If your income is low but you don't qualify for full 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/TDD
Aetna Medicare aetnamedicare.com	Aetna Medicare Rx Saver S5810-066	1-888-247-1028	1-888-247-1028	711
EnvisionRx Plus envisionrxplus.com	EnvisionRxPlus Silver S7694-032	1-866-250-2005	1-866-250-2005	711
Humana Insurance Co. humana-medicare.com	Humana Preferred Rx S5884-114	1-800-611-1481	1-800-886-8061	711
SilverScript silverscript.com	SilverScript Choice S5601-064	1-866-362-6212	1-866-362-6212	1-866-552-6288
Symphonix Health symphonixhealth.com	Symphonix Value Rx S0522-034	1-800-220-6773	1-800-220-6773	711
UnitedHealthCare aarpmedicareplans.com	AARP Medicare Rx Saver Plus S5921-376	1-877-699-5710	1-877-699-5710	711

If you have questions about Medicare Part D or other Medicare topics, contact HICAP at 1-800-434-0222.