

## **2012 PART D CLAIMS PROCESSING UPDATES**

There are changes in the coverage and premiums of Part D Plan offerings, so it is expected that some beneficiaries will be changing plans. Contained in this bulletin are some resources to make this year's transition as easy as possible.

### **Part D Plans for 2012**

Attached is a list of contact information for all Part D Plans serving Vermonters in 2012. To the best of our knowledge, this list contains the correct pharmacy center, member services and eligibility/enrollment contact information, as well as the correct pharmacy billing information (BIN and PCN).

### **Member Enrollment Assistance**

Beneficiaries with questions about their Medicare Part D prescription drug plan options may be directed to do the following:

- Call Medicare at 1-(800)-633-4227; or go to <http://www.medicare.gov/>; or
- Call the State Health Insurance Assistance Program (SHIP) Senior Help Line at 1-(800)-642-5119; or
- To compare plans, go to <https://www.medicare.gov/find-a-plan/questions/home.aspx> and enter the beneficiary's zip code.

### **Medicare/Medicaid Eligibles without a Part D Plan**

#### **Point-of-Sale Facilitated Enrollment (POS FE) Process & Limited Income Newly Eligible Transition Program (LI NET):**

The POS FE process was designed to ensure that individuals with both Medicare and Medicaid, “dual eligibles,” who are not enrolled in a Medicare Part D prescription drug plan, and do not have other insurance that is considered creditable coverage, are still able to obtain immediate prescription drug coverage when evidence of Medicare and Medicaid eligibility are presented at the pharmacy. Other individuals who qualify for the Part D low-income subsidy (LIS) are also able to use the POS FE process. To ensure coverage and allow for billing to a Medicare Part D Plan, follow these steps:

Step 1) Submit an E1 Transaction to the TROOP Facilitator. Note: If you are uncertain about how to submit an E1 or enhanced E1 query, please contact your software vendor.

If the E1 query returns a BIN/PCN indicating the patient has current drug plan coverage, **do NOT submit a claim to the POS FE process**. If the E1 query returns a help desk telephone number, this indicates the individual has been enrolled but the 4Rx data is not yet available. Please contact that plan for the proper 4Rx data.

If the E1 query does not return a BIN/PCN indicating the individual has current drug plan coverage, go to step 2.

Step 2) BIN/PCN to submit claims for the 2012 Limited Income Newly Eligible Transition (LI NET) Program:

BIN: 015599 (Claims billed for the remainder of the 2011 benefit year, should use 610649)

PCN: 05440000

ID Number: Medicare HIC Number

Group Number: may be left blank

More information on the LI NET program is available online at the following location:

[https://www.cms.gov/LowIncSubMedicarePresCov/03\\_MedicareLimitedIncomeNET.asp](https://www.cms.gov/LowIncSubMedicarePresCov/03_MedicareLimitedIncomeNET.asp) or by calling the LI NET help desk at 1-(800)-783-1307.

### **Closing the Part D Coverage Gap and VPharm**

The Affordable Care Act includes provisions to close the Medicare Part D prescription drug coverage gap (also known as the “donut hole”) to make prescription drugs more affordable for people with Medicare.

During 2012, people with Medicare who have Part D, but who do not receive Extra Help (through the low-income subsidy), will continue to receive a 50% discount for brand drugs under the Medicare Coverage Gap Discount Program. However, they will receive an increase (from 7% during 2011) to 14% for generic Part D drugs while they are in the coverage gap.

**IMPORTANT:** VPharm wrap coverage will not be available for the drugs of manufacturers who have not signed an agreement with the federal government to cover the 50% discount on brand drugs. Without this agreement, the manufacturer’s branded drugs are no longer considered Part D covered drugs.

### **Change in Part D Copayments**

Medicare Part D Low Income Subsidy (LIS) copayments in 2012 will be increasing to a maximum amount of \$6.50. Beneficiaries who have been found eligible for the Low Income Subsidy (LIS) at Level 1 will have a Medicare Part D copayment ranging from \$2.50 - \$6.50 (an increase from last year), and those at Level 2 will have a Medicare Part D copayment ranging \$1.10 - \$3.30 (no change from last year).

**Vermont Medicare Part D PDP Pharmacy Contact List – 2012**

<b>Company Name</b>	Aetna	BC/BS	Bravo Health	Cigna	Community CCRx	Envision
<b>Contract #</b>	S5810	S2893	S5998	S5617	S5803	S7694
<b>PBM</b>	CVS					
<b>Pharmacy Center</b>	800-238-6279	800-364-6331	800-875-3162	800-558-9363	866-684-5395	800-361-4542
<b>PA Phone</b>	800-414-2386	800-294-5979	877-813-5595	800-558-9363	866-684-5353	800-361-4542 x-8101
<b>PA Fax</b>	800-408-2386	888-836-0730	800-390-9745	800-390-9745	866-868-0858	330-405-8081
<b>Member Services</b>	877-238-6211	877-479-2227	800-723-9209	800-735-1459	866-423-5040	866-250-2005
<b>Eligibility-Enrollment</b>	800-832-2640	888-496-4178	800-723-9209	800-222-6700	866-423-5040	800-361-4542
<b>BIN</b>	610502	00 4336	610014	012353	610211	0 12312
<b>PCN</b>	00 670000	ADV	MEDDPRIME	3490000	PDP	PARTD
<b>Group</b>	353456	RX8592	BRAVOHLTH	N/A	COMCCRX	EICS
<b>Company Name</b>	First Health (Part D)	First Health (Coventry)	HealthNet	Health Spring	Humana	Medco
<b>Contract #</b>	S5768	S5674	S5678	S5932	S5884	S5660
<b>PBM</b>						
<b>Pharmacy Center</b>	800-922-1557	800-922-1557	888-865-6567	800-331-6293	800-522-7487	800-922-1557
<b>PA Phone</b>	800-551-2694	800-551-2694	800-867-6564	800-331-6293	800-555-2546	800-753-2851
<b>PA Fax</b>	800-639-9158	800-639-9158	916-463-9754	866-593-4407	877-486-2621	800-711-5673
<b>Member Services</b>	800-882-3822	800-882-3822	800-606-3604	877-357-1685	800-706-0872	800-758-3605
<b>Eligibility-Enrollment</b>	866-823-5177	866-823-5177	800-806-8811	800-331-6293	888-445-8678	800-758-4531
<b>BIN</b>	610014	610014	00 4336	0 12353	610649	610014
<b>PCN</b>	MEDDPRIME	MEDDPRIME	ADV	0 359000	0 3200000	MEDDPRIME
<b>Group</b>	CVTYRTL	CVTYRTL	RX6270	N/A	P5405	RXMEDD1
<b>Company Name</b>	SilverScript	Unicare	United American	United Health Care	United Health Care	Wellcare
<b>Contract #</b>	S5601	S5960	S5755	S5820	S5921	S5967
<b>PBM</b>	Caremark	Wellpoint	Medco	Caremark	Caremark	CatalystRX
<b>Pharmacy Center</b>	800-364-6331	800-662-0210	800-922-1557	877-889-6481	877-889-6481	888-550-5252
<b>PA Phone</b>	800-294-5979	800-338-6180	800-753-2851	800-711-4555	800-711-4555	888-550-5252
<b>PA Fax</b>	888-836-0730	800-601-4829	800-711-5673	800-527-0531	800-527-0531	866-388-1767
<b>Member Services</b>	866-235-5660	877-541-7382	866-524-4169	888-867-5564	888-867-5564	888-293-5151
<b>Eligibility-Enrollment</b>	866-552-6106	800-928-6201	800-596-4645	877-710-5083	877-710-5083	888-293-5151
<b>BIN</b>	00 4336	610575	610014	610097	610097	603286
<b>PCN</b>	AVD	00 890000	MEDDPRIME	9999	9999	MEDD
<b>Group</b>	RX9110	180077D205	PDP13697	PDPIND	PDPIND	788257

