

# 2024 – Bexar County Medicare Advantage with Prescription Drug Plan (MAPD)



## Frequently Asked Questions

### Plan Design

Medical Carrier:



Medical	You pay
Deductible	\$0
Maximum Out of Pocket (MOOP)	\$2,500
Office Visit: Primary Care	\$5
Office Visit: Specialist	\$15
Inpatient Hospital	\$175 per stay
Outpatient Care	\$50
Home Health Care	\$15
Skilled Nursing Facility	\$0, Days 1-20 \$50 per day, Days 21-100
Emergency Room	\$65
Urgent Care	\$15
Ambulance Service	\$50
Radiology and Lab Services	\$15

Durable Medical Equipment	20%
Preventative Screenings	\$0
Chiropractic	\$15 Medicare covered benefits only
Acupuncture	\$15 Medicare covered benefits only
Podiatry	\$15 Medicare covered benefits only
Foreign Travel (World-wide) Coverage	\$65 for emergency room and
Hearing	\$0 Routine Hearing Exam- Every 12 Months
Vision	\$0 Routine Eye Exam-Every 12 Months
Fitness Benefit	SilverSneakers

## Prescription Carrier



Prescription	Preferred Retail Pharmacy 30 Day Supply You Pay Up To	Standard Retail Pharmacy 30 Day Supply You Pay Up To	Retail Pharmacy 90 Day Supply You Pay Up To	Mail Order 90 Day Supply You Pay Up To
Annual Deductible: \$0				
Tier 1 Generic	\$2	\$4	\$0	\$0
Tier 2 Preferred Brand	\$25	\$25	\$50	\$50
Tier 3 Non-Preferred Brand	\$40	\$40	\$80	\$80
Tier 4 Specialty	33%	33%	N/A	N/A

## Plan Questions

**1. Can I stay with the current plan?**

No, all Medicare-eligible retirees and/or dependents must change over to this plan. Your current plan will no longer be available.

**2. When will I receive my ID card and welcome kit?**

Cards and welcome kits should arrive in the month prior to your start date. Retirees and Medicare-eligible dependents will each receive their own card. Please note that each enrollee may not receive their plan information on the same day; this is normal.

**3. What do I do if I lose my card?**

Please call RetireeFirst at **210-338-8874 (TTY 711) or Toll-free at 855-433-1673 (TTY 711)** and we will obtain a new one on your behalf, mail you a temporary card, and call your pharmacy and/or providers if needed.

**4. If I leave the plan, will it affect any of my other benefits?**

No, you can keep any ancillary benefits you already have with Bexar County.

**5. How much do I have to pay for the plan?**

Bexar County can be reached at 210-335-3374 to answer any billing questions.

**6. Who do I call if I need assistance with the plan?**

Please call RetireeFirst at **210-338-8874 (TTY 711) or Toll-free at 855-433-1673 (TTY 711)** to reach your dedicated Bexar County Retiree Advocacy Team, Monday-Friday, 8am-5pm, CST.

## Medical Questions

**7. Is there a medical deductible?**

No, this plan has no medical deductible.

**8. Is there co-insurance or copays?**

Yes, dependent on procedure type.

**9. Does this plan require referrals?**

No, this plan does not require referrals.

**10. Does this plan require pre-certifications?**

Some services may require pre-certifications.

**11. Does this plan have a network?**

Yes, but you can go to any willing Medicare provider, hospital, or facility. This plan's in and out of network benefits are the same.

**12. Can I go to my current providers?**

Yes, you can see any provider that accepts Medicare and is willing to bill Aetna.

**13. Do I still use my Medicare card?**

No, put your Medicare card in a safe place in case you need it later. You will only use your Aetna ID Card for medical and prescriptions.

**14. What if my provider says they do not accept this plan?**

If your provider accepts Medicare, the portion you are responsible for will remain the same whether they are considered in or out of network. You can go to any willing Medicare provider, hospital, or facility. Please call RetireeFirst at **210-338-8874 (TTY 711) or Toll-free at 855-433-1673 (TTY 711)** to assist; we can reach out to your provider to explain.

## Prescription Questions

**15. Is there a prescription deductible?**

No, this plan does not have a prescription deductible.

**16. Is there co-insurance or copays?**

Yes, dependent on the tier level.

**17. Are my prescriptions covered?**

Most likely yes, the prescription list is a comprehensive formulary just as before. Please call RetireeFirst at **210-338-8874 (TTY 711) or Toll-free at 855-433-1673 (TTY 711)** if you need help looking up your prescriptions.

**18. Can I go to the same retail pharmacy?**

Most likely, yes. There should be little to no pharmacy disruption. Aetna has over 66,000 pharmacies in network. You do NOT need new prescriptions for retail pharmacy refills.

## **19. Is there a mail order pharmacy?**

There is a mail order pharmacy called CVS Caremark which can be reached at 1-833-620-8808. You can also call RetireeFirst at **210-338-8874 (TTY 711) or Toll-free at 855-433-1673 (TTY 711)** with questions about mail order prescriptions.

## **20. Will my prescriptions transfer from the old plan?**

If you use the retail pharmacy, and have refills remaining, you do NOT need to obtain new prescriptions. If you use mail order, you WILL need to obtain new prescriptions from your provider.

## **21. Can I still go to the Veterans Affairs (VA) for my prescriptions?**

Yes, if you obtain some prescriptions from the VA, you may continue to do so.

## **22. Do I need prior authorizations for certain prescription medicines?**

Some prescriptions may require a prior authorization. Please contact RetireeFirst at **210-338-8874 (TTY 711) or Toll-free at 855-433-1673 (TTY 711)** if you have questions or need assistance with prior authorizations as well as any other requirements such as step therapy, quantity limit, or formulary exceptions.

## **23. What is the donut hole and is there donut hole coverage?**

The coverage gap/donut hole begins after the total yearly prescription cost (including what our plan has paid and what you have paid) reaches a certain dollar amount. While most Medicare Part D plans have a gap/donut hole, you have full donut hole coverage with this plan. This means you will never pay more than the plan copays shown in the table above.

## **24. What is the catastrophic phase and is there coverage?**

The catastrophic phase is a phase of coverage designed to protect you from having to pay very high out-of-pocket costs for prescription drugs. It is the final phase in your prescription drug plan and your copays will be \$0. You will remain in this phase for the rest of the plan year. You may have cost sharing for excluded prescriptions that are covered under this plan.

# RetireeFirst

## County of Bexar Card Sample:

Front:



**aetna**  
Bexar County  
Medicare Advantage P01 ESA PPO

**Medicare PPO**

**RxGRP# RXAETD**

**ISSUER (80840)**

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**MedicareRx**  
Prescription Drug Coverage

PCP \$5  
ER \$65  
AS \$50  
HO \$175/A  
SP \$15  
**H5521-802**

Back:



**AetnaRetireePlans.com**

Customer Service	<b>1-888-267-2637</b>
Prescription Drug	<b>1-866-241-0357</b>
24 Hour Nurse Line	<b>1-855-493-7019</b>
Provider Services	<b>1-800-624-0756</b>
TDD/TTY	<b>711</b>

Send claims to:  
Aetna Medicare  
PO Box 981106  
El Paso, TX 79998-1106

**Payer ID# 60054**

This card does not guarantee coverage.  
**Medicare limiting charges apply.**

Disclaimer: For complete benefit details please refer to the carrier issued materials. This document includes a simplified summary of benefits and does not create any contractual rights.