

# GROUP MEDICARE ADVANTAGE PPO

**Carroll County Government**  
Retiree Education Presentation

Proprietary and Confidential



CareFirst   
Medicare Advantage



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# WHAT'S CHANGING FOR 2026?



## What's Changing:

- Your medical, prescription drug, dental and vision benefits will be offered under a Medicare Advantage plan from CareFirst.
- You will receive a new ID card in mid-December.
- Your new coverage will start January 1, 2026.
- Retirees have support from RetireeFirst for help during and after the transition.



## What's Not Changing:

- You will continue paying your premiums through Carroll County Government, just like you do now.

# RETIREEFIRST MEMBER ADVOCACY

## CareFirst partners with RetireeFirst to support you.

RetireeFirst was founded in 2006 with a mission to simplify retiree healthcare. CareFirst and RetireeFirst work together to ensure a smooth transition for you.



**Member education  
and communication**



**Open enrollment  
engagement session  
support**

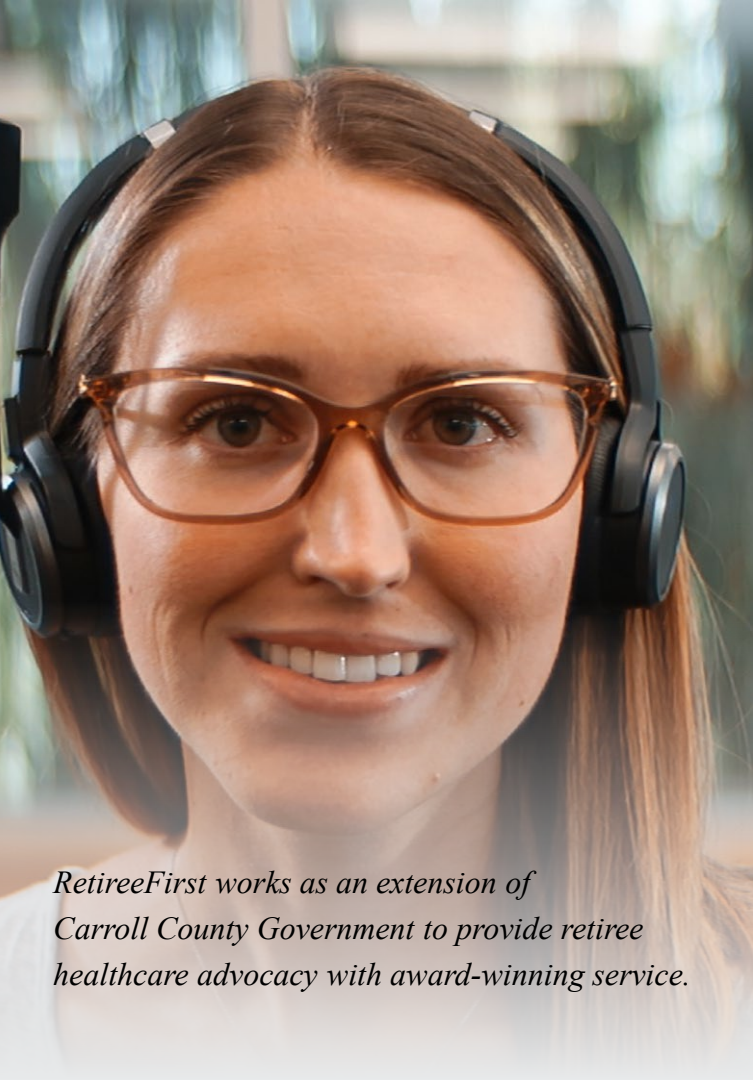


**Dedicated retiree  
advocates available  
to support you**

## About Us

RetireeFirst, headquartered in New Jersey, was designed to provide healthcare navigation and advocacy for retirees like you. For more than 20 years, we've simplified Medicare and improved the retiree benefits experience, resulting in happier and healthier members.

Your own dedicated team will advocate on your behalf with the insurance carrier, provider offices, pharmacies, and government agencies like the Centers for Medicare and Medicaid Services (CMS) to ensure your satisfaction.



*RetireeFirst works as an extension of Carroll County Government to provide retiree healthcare advocacy with award-winning service.*



# Advocates Put Retirees First

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- Our 160+ in-house, US-based Retiree Advocates are available Monday through Friday from 8 am–5 pm
- All Advocates receive extensive training; many previously worked in healthcare
- Many Advocates are bi-lingual and can partner with a HIPAA-compliant service offering translation in 300+ languages
- Retirees receive a dedicated group phone number and Advocate team
- Advocates provide:
  - **Real-time assistance** to resolve issues end-to-end through outbound calls with a completion call to close the loop
  - **Education on your health plan**, including preventative care and additional health benefits offered through your insurance carrier
  - **Support retirees** through real-time assistance, issue resolution, gaps in care closures, and wellness visit scheduling, backed by training in Medicare benefits

**160+**  
IN-HOUSE,  
US-BASED ADVOCATES

**15 sec**  
AVERAGE SPEED  
TO ANSWER

**2x**  
OUTBOUND VS INBOUND  
CALLS MADE TO RESOLVE  
MEMBER ISSUES

# Service You Need, When You Need It

## Common Needs We Address

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- “I received a bill, and I’m unsure if these services should be covered.”
- “I need help finding a specialist.”
- “I need help making an appointment.”
- “What does this benefit mean for me and how can I take advantage of it?”
- “I need to know if a specific drug my doctor prescribed is covered.”
- I’m at the pharmacy and my medication costs more than normal.”

## How Advocates Help You

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- Outreach to providers
- Medical prior authorizations
- Medical reimbursements
- Medical billing/Benefits questions
- Pharmacy outreach
- Mail order assistance
- Formulary lookup
- Prescription prior-authorization/step therapy
- Prescription billing/benefits questions
- House Call Appointment Scheduling

# Meet Joe...

## Points of Member Interaction

*Advocates make almost twice as many outbound calls vs inbound calls to resolve issues on members' behalf.*

Joe calls RetireeFirst saying the Pharmacist is saying his drug isn't covered. The Advocate can see it is covered but the plan requires a Prior Authorization.

Advocate calls Joe to update him.

Advocate calls Joe to notify him that the Prior Authorization was approved and his drug was filled and will be ready for pickup.

Completion call to ensure Joe is satisfied. This opportunity is also used to discuss any open GAPS in Care Joe may have.

Advocate gathers the medical details and the provider information from Joe.

The Advocate calls the provider's office to provide the information on how to submit the Prior Authorization and assist the provider with the process if necessary.

Advocate tracks the Prior Authorization and reaches out to the provider to check in. If not submitted yet, continues to track until a final decision is made.

Once decision is made Advocate speaks with Pharmacist to let them know they can fill the script.

## Advocacy Behind the Scenes

# Testimonials from Maryland Retirees

**“She even called me back quickly and when I got to the primary care, I let them know it was preauthorized which really helped me. Otherwise, I don’t know how long it would have taken me to get the medication I needed.”**

**“My husband recently talked multiple times with Jaime to resolve a persistent billing issue with a physical therapy company. She was an excellent advocate & even more persistent than the PT company.”**

**“After at least 5 attempts by me to resolve this problem. Samantha solved it in a matter of minutes, thank you.”**

**“It is extremely gratifying to reach out to RF advocates & have any & all concerns handled effectively and thoroughly. Thank you to the advocates who have assisted me.”**

**“I was stunned as to the same day response & solving my questions and concerns.”**



Wall of Appreciation at  
Offices in Mt. Laurel, NJ

# Access Your Resources Online

RetireeFirst

## Call Your Advocates

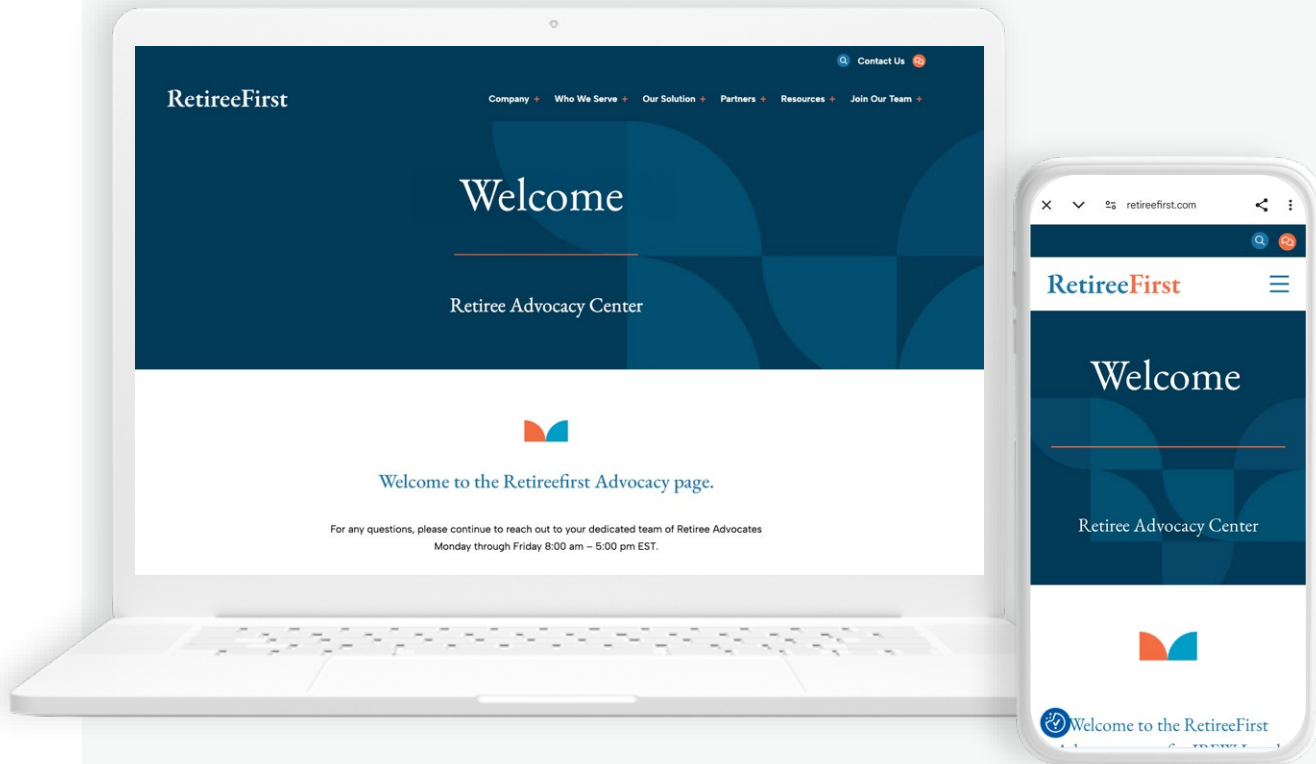
Your Dedicated Line:

**410-376-5577**  
(TTY 711)

**Toll free 855-460-7495**  
(TTY 711)

**Monday–Friday**  
**8 AM–5 PM EST**

We have an emergency and  
after-hours line available



Your Dedicated Website:  
**[www.RetireeFirst.com/carrollcountygov](http://www.RetireeFirst.com/carrollcountygov)**

# WHAT IS MEDICARE ADVANTAGE?

- **Medicare Advantage (MA) plans (also called Part C Plans)** are health plan options approved by Medicare and run by private companies, like CareFirst.
- MA plans are **part of the Medicare program**. Medicare pays private companies a certain amount for each member's care.
- MA plans offer the **same benefits as Original Medicare (Part A & Part B)** covers and **includes prescription drug (Part D)** coverage as well.
- MA plans offer **additional benefits** such as hearing aids, in-home assessments, fitness benefits, worldwide emergency coverage and more.



# PLAN TERMINOLOGY: A REFRESHER

- **Copay:** An amount you pay as your share of the cost for a medical service or supply, like a doctor's visit, hospital outpatient visit, or a prescription drug. A copayment is a set amount (for example \$10), rather than a percentage.
- **Coinsurance:** An amount you may be required to pay, expressed as a percentage (for example 20%) as your share of the cost.
- **Annual Out-of-Pocket Maximum:** The maximum dollar amount you will pay out-of-pocket in copays and/or coinsurance in a calendar year for your Medicare-covered medical expenses. Once this amount is met, the plan pays 100% for Medicare-covered medical expenses for the remainder of the calendar year. There is a separate out-of-pocket maximum for prescription drugs.

# LOCAL AND NATIONAL PROVIDER PARTNERS

CareFirst's Passive PPO allows you to access in- and out-of-network Medicare providers at the same rate.



## Local providers

High-quality providers available throughout Maryland and the District of Columbia.



## Nationwide providers

Robust, nationwide PPO network available through BlueCross BlueShield Network Sharing.





## Broad provider choice

Members can see any Medicare provider at the same in-network rates.\*

\*Out-of-network providers must participate in Medicare and be willing to bill CareFirst or their local Blues Plan.

# VISITING A PROVIDER

Use your CareFirst ID card at the provider's office or pharmacy. You won't need your red, white and blue Medicare card to use this plan.

 <b>CareFirst</b> Medicare Advantage		<b>CareFirst BlueCross BlueShield Group Advantage (PPO)</b>	
Member Name <b>F_NAME M_INIT L_NAME</b>	PCP Office <b>IN: \$X OON: \$X</b>		
Member ID <b>EGE SBSB_ID</b>	Specialist Office <b>IN: \$X OON: \$X</b>		
Group Number <b>GRGR_ID</b>	Urgent Care Center <b>IN: \$X OON: \$X</b>		
	Emergency Room <b>IN: \$X OON: \$X</b>		
	RxBIN <b>RXBIN</b>		
	RxPCN <b>RXPCN</b>		
	RxGRP <b>RX_GROUP</b>		
Effective Date <b>M_R_DT</b>			
BC/BS Plan <b>193/963</b>			
Issuer <b>(80840)</b>			
			CMS-H7379-801
		<b>MA-PPO</b>	

**Tells providers you have nationwide PPO coverage**

## Network statistics:

- ~98% of providers participate in Medicare nationwide
- 8,000 primary care doctors, 57,000 specialists and 55 hospitals in Maryland and DC participate in the CareFirst Medicare Advantage PPO network
- Members also have access to the nationwide BlueCross BlueShield Medicare network

# PROVIDER COMPARISON

97% of providers who Carroll County Government retirees visited in the past year participate in the CareFirst Medicare Advantage PPO network.

Top Providers	In-Network
WellSpan Medical Group	✓
Carroll Hospital Center	✓
WellSpan York Hospital	✓
WellSpan Gettysburg Hospital	✓
Frederick Health Hospital	✓
Sinai Hospital of Baltimore	✓
U.N.I. Urgent Care	✓
ExpressCare Urgent Care	✓
Airpark Primary Care	✓
Carroll Health Group	✓



YOUR MEDICAL

AND RX BENEFITS

# MEDICAL BENEFITS AT A GLANCE

	UHC Group Medicare Advantage (PPO)	CareFirst Group Advantage (PPO)
<b>Medical Deductible</b>	\$0	\$0
<b>Maximum Out-of-Pocket (MOOP)</b>	\$0	\$0
<b>Primary Care Provider Copay</b>	\$0	\$0
<b>Physician Specialist Copay</b>	\$0	\$0
<b>Annual Routine Physical Exam</b>	\$0	\$0
<b>Physical, Speech and/or Occupational Therapy</b>	\$0	\$0

# MEDICAL BENEFITS AT A GLANCE

	UHC Group Medicare Advantage (PPO)	CareFirst Group Advantage (PPO)
<b>Inpatient Coverage</b>	\$0 per admit	<b>\$0 per admit</b>
<b>Outpatient Hospital Services</b>	\$0	<b>\$0</b>
<b>Emergency Room Copay</b> (waived if admitted in 24 hours)	\$0	<b>\$0</b>
<b>Urgent Care Center Copay</b> (waived if admitted in 48 hours)	\$0	<b>\$0</b>
<b>Lab Tests Copay</b>	\$0	<b>\$0</b>
<b>X-ray Services</b>	\$0	<b>\$0</b>
<b>Durable Medical Equipment</b>	\$0	<b>\$0</b>

# PRIOR AUTHORIZATION

Approval in advance may be required to obtain select services or prescription drugs.

## What you need to know:

- Before your visit, your provider will coordinate with CareFirst if approval in advance is required.
- You don't need to get prior authorization when you get care from out-of-network providers.
- If we say we will not cover your services, you, or your provider, have the right to appeal our decision.
- Prior authorization is required for certain services like:
  - Hospital services
  - Skilled nursing
  - Home health
  - Prosthetic devices
  - Physical therapy
  - Chiropractic (Medicare covered)
  - Ambulance (Non emergent)
  - Medical supplies



# PRESCRIPTION DRUG BENEFITS AT A GLANCE

	UHC Group Medicare Advantage (PPO)	CareFirst Group Advantage (PPO)
<b>Part D Prescription Drug Deductible</b>	\$0	\$0
<b>Part D Out-of-Pocket Drug Costs Cap</b>	\$2,100	\$2,100
<b>Tier 1—Generic (30-day)</b>	Preferred Generic: \$10	\$10
<b>Tier 2—Preferred Brand (30-day)</b>	\$20	\$20
<b>Tier 3—Non-Preferred Drug (30-day)</b>	\$30	\$30
<b>Tier 4—Specialty (30-day)</b>	\$30	\$30
<b>90-Day* Mail Order Supply</b> <i>*100-day supply available for Tier 1 drugs</i>	1x copay	1x copay <i>(excluding Specialty)</i>

**Note: Part D cost-sharing does not count toward the overall medical out-of-pocket maximum (MOOP) for your plan.**

# ADDITIONAL RX INFORMATION



## Retail Pharmacy

If you use the retail pharmacy and have refills remaining into 2026, you do **NOT** need to obtain new prescriptions. When you pick up your prescription for the first time in 2026, show the pharmacy your new CareFirst ID card.



## Mail Order

If you use mail order today, you **WILL** need to obtain new prescriptions from your provider to enroll in mail order from CVS / CareFirst. Call CVS directly at 888-970-0917 to enroll or RetireeFirst can help once you receive your CareFirst ID card.



## Prior Authorization

If any of your current prescriptions require a prior authorization, a new authorization **WILL** be needed. Call CVS directly at 888-970-0917 to initiate the request or contact RetireeFirst for assistance once you receive your new CareFirst ID card.



# TRANSITION POLICY

## A transition fill is typically a one-time, one-month supply of a drug



Transition fills let you get temporary coverage for Part D drugs that are not on your plan's formulary or that have certain coverage restrictions (such as prior authorization or step therapy).



We may cover your drug in certain cases during your first 90 days of membership. You can only get transition fills for drugs you were already taking before switching plans or before your existing plan changed its coverage.



The transition supply gives you time to talk to your doctor or other prescriber about pursuing other options available to you within our formulary.

Please refer to your Evidence of Coverage for more information on the CareFirst BlueCross BlueShield Medicare Advantage transition process.





**EXTRAS INCLUDED**

**IN YOUR PLAN**

# DENTAL HIGHLIGHTS



## An overview of the plan's dental coverage

To find a dental provider, visit [carefirst.com/learn/groupma](https://www.carefirst.com/learn/groupma) and select *Find a Doctor* in the middle of the page. Then select the Medicare Advantage Dental (PPO) network.

Dental Benefit	Member Cost (in-network and out-of-network combined)
Deductible (applies to Basic and Major services)	\$50
Maximum Annual Benefits	Plan pays \$1,000
Class I: Preventive and diagnostic treatment	0% coinsurance
Class II: Basic dental services (i.e. fillings)	20% coinsurance, after deductible
Class III: Major surgical services	50% coinsurance, after deductible
Class IV: Major restorative services	50% coinsurance, after deductible

# VISION HIGHLIGHTS



## An overview of the plan's vision coverage provided by Davis Vision

To find a vision provider, visit [carefirst.com/learn/groupma](https://carefirst.com/learn/groupma) and select *Find a Doctor* in the middle of the page. Then select the Medicare Advantage Vision (PPO) network.

Vision Benefit	<u>In-Network</u>	<u>Out-of-Network</u>
Annual Routine Eye Exam w/ Dilation	\$0 copay	\$40 allowance
Frames	\$0 copay for Davis Collection \$130 annual allowance + 20% off balance for other frames	\$58 allowance
Clear Spectacle Lenses	\$0 copay	\$40–\$100 allowance depending on lens type
Contact Lenses (in lieu of eyeglasses)	\$175 allowance + 15% discount off balance for contact lens materials	\$119 allowance

# HEARING HIGHLIGHTS



## An overview of the plan's hearing coverage provided by NationsHearing

To find a hearing provider, visit [carefirst.com/learn/groupma](https://carefirst.com/learn/groupma) and select *Find a Doctor* in the middle of the page. Then select the Medicare Advantage Hearing (PPO) network.

Hearing Benefit	Member Cost
Annual Routine Hearing Exam	\$0 copay
Annual Hearing Aid Fitting	\$0 copay
Hearing Aid Coverage	<b>Entry level:</b> \$0 copay per aid <b>Basic level:</b> \$175 copay per aid <b>Prime level:</b> \$475 copay per aid <b>Preferred level:</b> \$775 copay per aid <b>Advanced level:</b> \$1,075 copay per aid <b>Premium level:</b> \$1,475 copay per aid
3 Follow Up Visits within First Year of Initial Fitting Date	\$0 copay
100% Money-back Guarantee	60 day
12- and 18-Month Financing Options	0% APR, no money down



VALUE-ADDED

PROGRAMS

# SUPPORT WHEN YOU NEED IT



## Post-Discharge Meals

\$0 copay for 28 home delivered meals (2 meals per day for 14 days) per discharge within 30-days following a qualified hospital or SNF stay.



## Post-Discharge Transportation

\$0 copay for 12 one-way trips for medically related appointments and the pharmacy post discharge.



## Personal Emergency Response System (PERS)

\$0 copay for one personal emergency response device every year.



# FITNESS BENEFITS PROGRAM

**SilverSneakers® is an opportunity for you to improve your health, gain confidence and connect in your community.**



## At home or on the go:

- SilverSneakers On-Demand™ fitness classes available 24/7
- SilverSneakers LIVE™ virtual classes and workshops
- SilverSneakers GO™ mobile app with workout plans and more



## In participating fitness locations:

- A large network of gyms like:
  - *Planet Fitness – Westminster & Eldersburg*
  - *CoreLife – Westminster*
  - *Anytime Fitness – Westminster & Taneytown*
- Classes for all fitness levels



## In your community:

- Group activities and classes offered outside the gym
- SilverSneakers.com online resources like a fitness location directory, articles and more

# VIRTUAL-FIRST CARE—CLOSEKNIT

Advanced primary care practice where you can connect to a clinician online 24/7 and:



**Get care where it's most convenient**—at home, through pop-up clinics, community events, or practice partners.



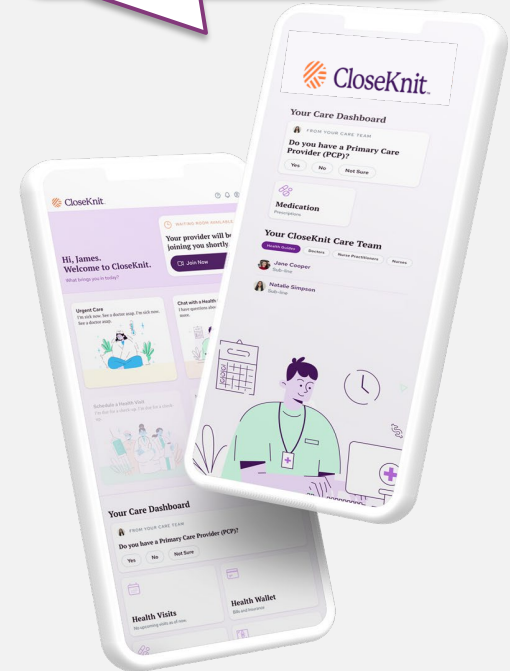
**Get predictable costs**—copay will be the same amount as an in-office visit.



**Get support from an advocacy team**—to create a frictionless experience.

CloseKnit offers advanced primary care, urgent care, mental healthcare, and nutrition services.

"I love having access to urgent care from my phone through CloseKnit. I was able to get the care I needed without leaving my home."



# IN-HOME HEALTH—PORTER

CareFirst BlueCross BlueShield Medicare Advantage and Porter have teamed up to offer you care concierge services to help remove barriers to care.

"I love that Porter is helping members with preventive care. I really enjoyed speaking with Julia, her knowledge and thoroughness. She was just wonderful. 10/10."



**Schedule an in-home visit** to help identify any care gaps.



**Help schedule any necessary appointments** based on needs assessed during the visit.











**Facilitate necessary medical equipment.**



**Support transitions** of care from the hospital or skilled nursing care.

# CARE MANAGEMENT OUTREACH

CareFirst works with partners to provide other services to you at no cost.

Program	Partner(s)	Why take the call?
Medication adherence	 AdhereHealth ADHERENCE RESOLVED 	Get medication reminders
Medication review		Have a pharmacist review your medications to improve adherence and prevent drug-related risks
Home visits		Get in-home health assessment to identify care gaps, provide testing, support with appointment scheduling, and connect to community resources
Preventive screening and annual wellness visit reminders	CareFirst 	Get help with scheduling appointments, acquiring medical equipment, arranging transportation and more
Screening kits	 cologuard  Quest Diagnostics* CareFirst 	Get screening or testing kits mailed to your home

# BLUE365 DISCOUNT PROGRAM

This exclusive program offers savings on health and wellness products and services from a number of retailers.

Reebok 

*SKECHERS*

AVIS®

**crocs™**

GARMIN.

 Expedia

Hertz

*chewy*

PHILIPS  
sonicare

! Sign up at [blue365deals.com/CareFirstBCBS](https://blue365deals.com/CareFirstBCBS)  
and check the site often as deals can change.



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# 24-HOUR NURSE ADVICE LINE

You can call 833-968-1773 for general questions about health issues or where to go for care.



Staffed by registered nurses 24/7.



Needs or symptoms can include cough, cold, rashes and medication questions.



Included at no added cost.





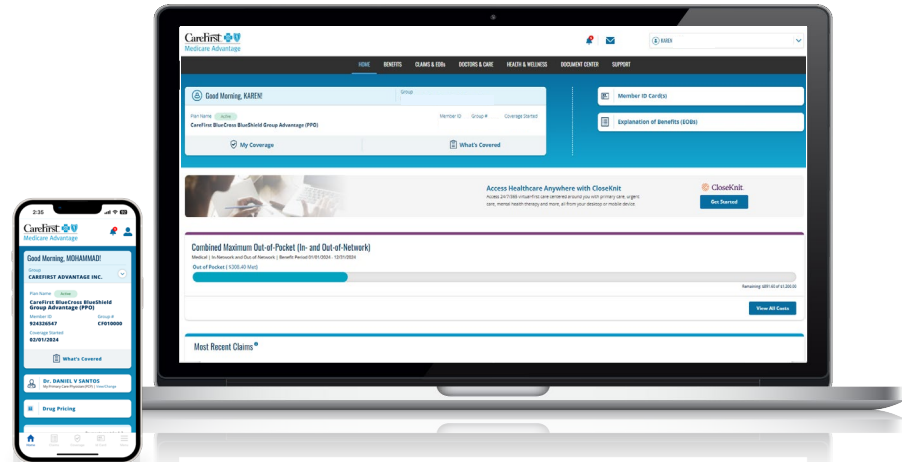
RESOURCES

AND REMINDERS

# MY ACCOUNT MEMBER PORTAL

You have access to a secure personalized account where you can:

- View claims and Explanation of Benefits (EOBs)
- Find a doctor, facility or pharmacy
- Check your benefits
- View, order and print ID cards
- Estimate medical expenses
- Confirm drugs are covered and check pricing at local pharmacies
- Email CareFirst directly with questions



Visit [carefirst.com/myaccount](https://carefirst.com/myaccount) to login or register for an account.

# MEMBER COMMUNICATIONS

Each new member is sent materials that describe how to use your plan benefits.

**These include:**

- Welcome package that includes a robust booklet
- A personalized member ID card

Visit [carefirst.com/learngroupma](https://carefirst.com/learngroupma) year-round for more information.



CareFirst Medicare Advantage		CareFirst BlueCross BlueShield Group Advantage (PPO)	
Member Name		PCP Office	IN: \$X OON: \$X
F_NAME M_INIT L_NAME		Specialist Office	IN: \$X OON: \$X
Member ID		Urgent Care Center	IN: \$X OON: \$X
EGE SBSB_ID		Emergency Room	IN: \$X OON: \$X
Group Number	GRGR_ID	RxBIN	RXBIN
		RxPCN	RXPCN
		RxGRP	RX_GROUP
Effective Date	M_R_DT		
BC/BS Plan	193/963		
Issuer	(80840)		
			CMS-H7379-801
			MA-PPO MedicareRx

# IMPORTANT ELIGIBILITY REMINDERS

## To be eligible for a Group Medicare Advantage plan, you must:

- ✓ Be retired from the group and meet all employer eligibility guidelines
- ✓ **Be enrolled in Medicare (Parts A & B)** and continue to pay your Part B premium as well as any Part B or Part D income related monthly adjustment amount
- ✓ Live in CareFirst's Group Medicare Advantage service area, which includes all 50 United States, DC, and all U.S. territories
- ✓ **Provide a physical address within the service area** to establish permanent residence (cannot be a PO Box)

**!** You can only be in one Medicare Advantage plan at a time. Medicare will automatically terminate you from this plan if you enroll in any other Medicare Advantage plan or standalone Part D prescription drug plan.

# NEXT STEPS

- ❑ Review all the information in your 2026 Healthcare Benefit Guide that was mailed to you.
- ❑ Call RetireeFirst at **410-376-5577** or toll-free at **855-460-7495** to check that your doctors and medications are covered.
  - ❑ Or you can search the provider directory and formulary available online at [carefirst.com/learngroupma](https://carefirst.com/learngroupma).
- ❑ **If you are currently enrolled in a Carroll County Government group retiree medical plan, there is nothing you need to do to enroll in the plan. If you previously opted out of the coverage and would like to enroll in the Medicare Advantage plan, you will need to complete an enrollment form and send it to RetireeFirst.**
- ❑ In early December, you will start receiving communications from CareFirst confirming your enrollment in the plan – and you will receive your Welcome Kit and your new member ID card in the mail by mid-December.

# KEY CONTACTS

Name	I have questions related to...	Contact Information
<b>Carroll County Government HR Department</b>	<ul style="list-style-type: none"> <li>▪ Eligibility for the plan</li> <li>▪ Monthly premium</li> </ul>	<b>Phone:</b> <a href="tel:410-386-2129">410-386-2129</a> , M-F, 8am-5pm EST
<b>RetireeFirst</b> (Your <u>Primary</u> Member Services Contact)	<ul style="list-style-type: none"> <li>▪ Enrollment status</li> <li>▪ Medicare and Social Security</li> <li>▪ Plan benefits</li> <li>▪ Claims</li> <li>▪ Prior authorization</li> <li>▪ Provider bills or requests for provider outreach</li> </ul>	<b>Website</b> (where this presentation and a recording of the webinar on Nov. 6 will be posted by Nov. 13): <a href="http://www.retireefirst.com/carrollcountygov">www.retireefirst.com/carrollcountygov</a> <b>Phone:</b> <a href="tel:410-376-5577">410-376-5577 (TTY 711)</a> or toll-free <a href="tel:855-460-7495">855-460-7495 (TTY 711)</a> , M-F 8am-5pm EST
<b>CareFirst</b> (Your <u>Secondary</u> Member Services Contact)	<ul style="list-style-type: none"> <li>▪ Plan benefits</li> <li>▪ Claims</li> <li>▪ Prior authorization</li> </ul>	<b>Website</b> (to find doctors, pharmacies, and search drugs on our formulary): <a href="http://www.carefirst.com/learngroupma">www.carefirst.com/learngroupma</a> <b>Phone:</b> <a href="tel:833-939-4103">833-939-4103 (TTY 711)</a> , M-F, 8am-6pm EST

# SHARE YOUR FEEDBACK

**Your feedback is very important to us!**

Please complete a short 5-minute survey using the QR code here or the link shared in the chat.

Thank you!





THANK YOU

CareFirst BlueCross BlueShield Medicare Advantage is a PPO plan with a Medicare contract. Enrollment in CareFirst BlueCross BlueShield Medicare Advantage depends upon contract renewal. CareFirst BlueCross BlueShield Medicare Advantage is the business name of CareFirst Advantage, Inc., an independent licensee of the Blue Cross and Blue Shield Association. BLUE CROSS®, BLUE SHIELD® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

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