

2025 – Dorchester County Public Schools Medicare Advantage and Prescription Drug Plans



Frequently Asked Questions

Plan Design

Medical Carrier:



Medical	You pay
Deductible	\$0
Maximum Out of Pocket (MOOP)	\$0
Office Visit: Primary Care	\$0
Office Visit: Specialist	\$0
Inpatient Hospital	\$0
Outpatient Surgery	\$0
Skilled Nursing Facility	\$0, Days 1-100
Emergency Room	\$0
Urgent Care	\$0
Ambulance Service	\$0
In Patient Mental Health and Substance Abuse	\$0
Out Patient Mental Health and Substance Abuse	\$0
Durable Medical Equipment	\$0

Acupuncture	\$0 copay for each non-Medicare-covered routine acupuncture visit (up to 24 visits a calendar year).
Foreign Travel (World-wide) Coverage	\$0 Emergency Care, \$0 Urgent Care, \$50,000 annual Max
Fitness Benefit	SilverSneakers

Prescription Carrier



Prescription	30-day Retail You pay up to	90-day Retail You pay up to	90-day Mail Order You pay up to
Annual Deductible: \$0			
Tier 1 Generic	\$7	\$7	\$7
Tier 2 Preferred Brand	\$24	\$24	\$24
Tier 3 Non-Preferred Brand	\$24	\$24	\$24
Tier 4 Specialty	\$24	N/A	N/A
Insulin Medications	\$35		

Plan Questions

- 1. How do I enroll in this plan?** To finalize your enrollment into the plan, the enclosed application and authorized representative form need to be completed and returned to RetireeFirst in the included pre-paid envelope.

Opt-out:

We are required by law to give you the choice of opting out of the new plan. Since you are enrolled in the current medical and prescription drug plan it is unlikely that you would not be able to participate in this new robust plan. However, you have the option to opt-out and decline this coverage. Nevertheless, if you would like to opt-out, please call RetireeFirst at **410.346.3448(TTY 711) or toll free 855.236.7152(TTY 711)**, Monday-Friday, 8am-5pm EST.

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. Are there any plan changes?

Client name did their best to match or enhance your current benefits. Below are a few highlights of your new plan:

- Medicare covered services are \$0 cost to you
- Fitness Benefit through Silver Sneakers
- Medical Maximum Out of Pocket \$0
- In Patient/Out Patient Mental Health and Substance Abuse
- Access to RetireeFirst Advocates for assistance with understanding and using your benefits.

3. 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.

4. What do I do if I lose my card?

Please call RetireeFirst at **410.346.3448(TTY 711) or toll free 855.236.7152(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.

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

Yes, if you cancel or opt out of the Dorchester County medical and drug coverage, you will also be waiving the Dorchester County vision and dental benefits. Once you cancel coverage, you will not be able to re-enroll.

Yes, **How much do I have to pay for the plan?**

Dorchester County Public Schools can be reached at 410.228.4747 to answer any billing questions.

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

Please call RetireeFirst at **410.346.3448(TTY 711) or toll free 855.236.7152(TTY 711)** to reach your dedicated Dorchester County Public Schools Retiree Advocacy Team, Monday-Friday, 8am-5pm, EST.

Medical Questions

7. Is there a medical deductible?

No

8. Is there co-insurance or copays?

No.

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 CareFirst Medicare Advantage.

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 CareFirst 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 **410.346.3448(TY 711) or toll free 855.236.7152(TTY 711)** to assist; we can reach out to your provider to explain.

Prescription Questions

15. Is there a prescription deductible?

No

Is there co-insurance or copays?

No,

Are my prescriptions covered?

Most likely yes, the prescription list is a comprehensive formulary just as before. Please call RetireeFirst at **410.349.3448(TTY 711) or toll free 855.236.7152(TTY 711)** if you need help looking up your prescriptions.

16. Can I go to the same retail pharmacy?

Most likely, yes. There should be little to no pharmacy disruption. CareFirst has over 65,000 pharmacies in network. You do NOT need new prescriptions for retail pharmacy refills.

17. Is there a mail order pharmacy?

There is a mail order pharmacy through Express Scripts which can be reached at (888) 345-2560 (EST). You can also call RetireeFirst at **410.349.33448(TTY 711) or toll free X855.236.7152(TTY 711)** with questions about mail order prescriptions.

18. 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.

19. 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.

20. Do I need prior authorizations for certain prescription medicines?

RetireeFirst

Some prescriptions may require a prior authorization. Please contact RetireeFirst at **410.346.3448(TTY 711)** or **toll free 855.236.7152(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.

21. 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 \$2,000. 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.



CareFirst BlueCross
BlueShield Group
Advantage w/out
Drugs (PPO)

Member Name		PCP Office	IN: \$0	OON: \$0
JON DOE		Specialist Office	IN: \$0	OON: \$0
Member ID		Urgent Care Center	IN: \$0	OON: \$0
EGE 900028805		Emergency Room	IN: \$0	OON: \$0
Group Number	2MMJ0000	Part B products processed at participating pharmacies:		
		RxBIN	004336	
Effective Date	01/01/2023	RxPCN	PARTBADV	
BC/BS Plan	193/963	RxGRP	RX5520	
Issuer	(80840)			CMS-H7379-802



www.carefirst.com



**CareFirst BlueCross BlueShield Group
Advantage w/out Drugs (PPO)**

**Medical Claim Submission Address for
CareFirst Service Area Providers**

Medicare Medical Claims
PO. Box 4495
Scranton, PA 18505



CareFirst BlueCross BlueShield Medicare Advantage is the
business name of CareFirst Advantage PPO, Inc., an
independent licensee of the Blue Cross and Blue Shield
Association.

CST MA0962 19/22)

Member/Provider Services

Member/Provider Services: 833-939-4103

Medical Emergency: 911

TTY/TDD: 711

24-Hour Nurse Advice Line: 833-968-1773

To locate a CareFirst contracted medical provider,
visit www.carefirst.com/findadocmappo

Medical Professional & Hospital Providers:

Toll-free Precertification: 833-707-2287

File claims with local Blue Cross and/or Blue
Shield Plan. Medicare limiting charges apply.

PROVIDERS MUST NOT BILL MEDICARE.

MA PPO products provided by CareFirst
Advantage PPO, Inc. an independent licensee of
the Blue Cross and Blue Shield Association.

IN=In-network OON=Out-of-network

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.