


2023 – Medicare-Eligible Retirees Kent County Public Schools



Frequently Asked Questions (FAQ)

PLAN DESIGN

Carrier	
CareFirst BlueCross BlueShield Group Advantage (PPO)	
MEDICAL	YOU PAY
Deductible	\$0
Medical Maximum Out-of-Pocket	\$0
Primary Care Visit	\$0
Specialist Visit	\$0
Inpatient Hospital Care	\$0
Outpatient Surgery	\$0
Inpatient Mental Health & Substance Abuse	\$0
Outpatient Mental Health & Substance Abuse	\$0
Skilled Nursing Facility	\$0, Days 1-100
Urgent Care Center	\$0
Emergency Room	\$0
Ambulance Services	\$0
Durable Medical Equipment	\$0
Foreign Travel	\$0 Emergency Care, \$0 Urgent Care, \$0 annual Max
Fitness Benefit	SilverSneakers (fitness classes online and at local facilities)

CARRIER			
			
PRESCRIPTION	30-DAY RETAIL MEMBER PAYS UP TO	90-DAY RETAIL MEMBER PAYS UP TO	90-DAY MAIL ORDER MEMBER PAYS 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

MEDICAL QUESTIONS

1. Can I stay on the current plan?

No. All Medicare eligible retirees and/or dependents must change over to the new CareFirst BlueCross BlueShield Group Advantage (PPO) Plan. Your current medical plan will no longer be available for use on January 1, 2023.

2. Are there any plan changes?

Kent County Public Schools did their best to match the plan design to your current plan design and mitigate any disruption. However, there are two plan improvements. You now have access to SilverSneakers, a free fitness program and you have access to \$0 foreign travel benefit that can be used for emergency and urgently needed services, up to \$50,000 maximum benefit.

3. What is a Group Medicare Advantage plan?

Medicare Advantage, also known as Medicare Part C, is a health plan approved by Medicare and offered by private insurance companies like CareFirst. Medicare Advantage pays for services and benefits covered under Part A and Part B, as well as additional benefits, all in one plan through CareFirst.

4. Is there a Part A and/or Part B Deductible?

No, there is no Part A or Part B Deductible on the new CareFirst BlueCross BlueShield Group Advantage (PPO) Plan.

5. Is there Co-insurance or Copays?

There are no copays or co-insurance for Medicare approved services.

6. Does this plan require referrals?

No, this plan does not require referrals.

7. Does this plan require Pre-certifications?

Some services may require Pre-certification.

8. Does this plan have a network?

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

9. Can I go to my current providers?

Most likely yes. If your provider is in the CareFirst BlueCross BlueShield Group Advantage (PPO) Plannetwork (visit www.carefirst.com/findadocmappo), you can continue to see them. If they are not in the network, if they accept Medicare and are willing to bill CareFirst or their local Blues plan, you can continue to see them. If you do not see your provider in our directory, **please contact them directly and ensure they are willing to bill CareFirst before your visit.**

10. Do I still use my Medicare Card?

Prior to January 1, 2023, you will receive a welcome kit and a CareFirst ID card for your CareFirst BlueCross BlueShield Group Advantage (PPO) Plan. This is the ID card you'll bring with you to the doctor. You'll need to present this new ID card to ensure that claims will be filed correctly by your providers. Make sure you keep your original Medicare card somewhere safe and only use it for Covid-19 related testing.

11. 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 or not they are considered in or out-of-network. Please call Retiree First at **410-346-3448 (TTY 711)** or toll-free at **855-236-7152 (TTY 711)** to assist. We can reach out to your provider to explain.

12. Do I need to be enrolled in Medicare Part A and Part B to be enrolled in the new CareFirst BlueCross BlueShield Group Advantage (PPO) Plan?

Yes; to be enrolled in the CareFirst BlueCross BlueShield Group Advantage (PPO) Plan, you must be enrolled in Medicare Part A and Part B. You must also continue to pay your Part B premium.

13. What happens if I do not pay my Medicare Part B premiums?

The Centers for Medicare and Medicaid Services (CMS) will have CareFirst to disenroll you from the CareFirst BlueCross BlueShield Group Advantage (PPO) Plan. You would need to work with Social Security to determine how you can be reinstated with Medicare. You will not have drug or medical coverage through Kent County Public Schools during that time.

PRESCRIPTION QUESTIONS

14. Is my copay structure staying the same?

There are no changes to your copay structure with Express Scripts but please keep in mind the tiers may change from year-to-year as well as the cost of drug copays can vary based on inflation, contracts, supply, etc., so you may see a slight change in copays.

15. Is there a Prescription Deductible?

No, there is no prescription deductible.

16. Does this plan have Donut Hole Coverage?

Yes, this plan has full donut hole coverage. This means you will continue to pay the same copays as show in the chart on page 2.

17. Does this plan have Catastrophic Coverage?

Yes, the plan has custom Catastrophic Coverage. This means you will never pay more than the plan copay shown in the table above.

18. Are my prescription drugs covered?

Most likely yes. The Express Scripts plan covers basic Medicare part D medications as well as Non-Medicare Part D medications. This includes but is not limited to, hair loss, weight loss, erectile dysfunction, cough medicine and vitamins. You can call Labor First at **410-346-3448 (TTY 711)** or toll-free **855-236-7152 (TTY 711)** to look up your medications, see if there are any restrictions and learn your copay price.

19. Can I go to the same Retail Pharmacy?

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

20. Is there a Mail Order Pharmacy and will my prescriptions transfer over?

There is Mail Order Pharmacy through Express Scripts Home Delivery. Your mail order prescriptions will transfer over as long as there are active refills, and the

prescription is still valid. You DO need new prescriptions if you prefer to use the Mail Order Service.

21. Can I still go to the Veteran Affairs (VA) for my medications?

Yes. If you obtain some medications from the VA, you may continue to do so. This is a separate benefit and may have separate formularies, copays or restrictions.

22. Do I need Prior Authorizations for certain prescription medications?

Some drugs may require a Prior Authorization. Please contact Labor First at [410-346-3448 \(TTY 711\)](tel:410-346-3448) or toll-free [855-236-7152 \(TTY 711\)](tel:855-236-7152) 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.

PLAN QUESTIONS

23. Will I be automatically enrolled in the new CareFirst BlueCross BlueShield Group Advantage (PPO) Plan? Do I need to do anything to enroll?

All Medicare eligible retirees and/or dependents will be automatically enrolled into the plan. There is nothing you need to do to be enrolled.

24. What is this opt-out?

While you are going to be automatically enrolled, you can choose to opt-out of the plan. However, if you do opt-out you will have no medical or drug coverage through Kent County Public Schools. Please call Labor First at [410-346-3448 \(TTY 711\)](tel:410-346-3448) or toll-free [855-236-7152 \(TTY 711\)](tel:855-236-7152) if you would like to opt-out.

25. When will I receive my CareFirst ID card / Welcome Kit for the 2023 plan year?

You will get your new CareFirst BlueCross BlueShield Group Advantage (PPO) Plan ID card and Welcome Kit prior to your effective date of January 1, 2023. Each Medicare-eligible retirees and dependents will receive their own ID card. Please note that each enrollee may not receive their plan information on the same day. This is normal. Under the CareFirst BlueCross BlueShield Group Advantage (PPO) Plan, you will receive one card for your medical needs. Please continue using your ESI ID card for your prescription needs. If you are enrolled into the Kent County Public Schools Dental and Vision today, your coverage will remain in place. No action is needed to re-elect the Dental and Vision plan.

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

Please call Labor First at [410-346-3448 \(TTY 711\)](tel:410-346-3448) or toll-free [855-236-7152 \(TTY](tel:855-236-7152)

[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.

27. Can I leave the plan and come back?

No. Once you leave the Kent County Public Schools Retiree Medical and Prescription Plans you are not eligible to return.

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

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

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

Kent County Public Schools is pleased to advise there will be a premium reduction. Retirees will receive information about their new lower premium, in the meantime, for any additional premium inquiries please contact Kent County Public Schools at **(410) 778-3644**.

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

Please call Labor First at **410-346-3448 (TTY 711)** or toll-free **855-236-7152 (TTY 711)** to reach your Dedicated Kent County Public Schools Retiree Advocate Team from the hours of 8:00am-5:00pm EST.

31. CARD SAMPLES

Medical: CareFirst

FRONT

		CareFirst BlueCross BlueShield Group Advantage w/out Drugs (PPO)	
Member Name	PCP Office	IN: \$X	OON: \$X
Member ID	Specialist Office	IN: \$X	OON: \$X
	Urgent Care Center	IN: \$X	OON: \$X
	Emergency Room	IN: \$X	OON: \$X
Group Number	Part B products processed at participating pharmacies:		
	RxBIN	004336	
	RxPCN	PARTBADV	
	RxGRP	RX5520	
Effective Date	CMS-H7379-<VAL1>		
BC/BS Plan	193/963		
Issuer	(80840)		

BACK

www.carefirst.com	
CareFirst BlueCross BlueShield Group Advantage w/out Drugs (PPO) Medical Claim Submission Address for CareFirst Service Area Providers Medicare Medical Claims P.O. Box 4405 Scranton, PA 18505	Member/Provider Services Member/Provider Services: 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/findadocmap
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. <small>CST MA0808 (7/22)</small>	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.
<small>IN= In-network OON= Out-of-network</small>	

Prescription: Express Scripts

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Labor First Member Advocate Line 1.866.302.7770 TTY 711	
Patient Customer Service: TDD:	1.888.345.2560 1.800.716.3231
Pharmacist Use Only:	1.800.922.1557
SUBMIT PHARMACY CLAIMS TO: Express Scripts ATTN: Medicare Part D P.O. Box 14718 Lexington, KY 40512-4718	

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