



# SENIOR HEALTH NEWS



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The Pennsylvania Health Law Project Help-Line  
-800.274.3258



## Medicare Prescription Drug Benefit Marketing Guidelines Released

Prescription Drug Plans that are approved by Medicare to offer drug coverage under the new benefit will be allowed to start marketing on October 1, 2005. We do not yet know who will offer a Medicare Prescription Drug Plan yet. Medicare will announce the approved Plans in late September. In the meantime, the Centers for Medicare & Medicaid Services (CMS) released Final Marketing Guidelines that all plans must follow when they market their prescription drug benefits.

### Marketing Rules

Medicare Prescription Drug Plans will be allowed to market their benefits in a number of ways. They can develop written information to mail to consumers, they can advertise their benefits on the television or radio, and they can call Medicare consumers to tell them about their benefits over the phone and encourage them to enroll. Medicare has a process in place to review and approve the marketing materials that Medicare Prescription Drug Plans will use.

The following rules apply to all Medicare Prescription Drug Plans when they market their benefits:

- ? Plans cannot identify themselves as “Medicare-approved”, or discuss their specific plan or enrollment, until October 1, 2005.

- ? Plans cannot use misleading or confusing terms within their marketing materials, or misrepresent their Medicare prescription drug benefits and services.
- ? Plans must include in all written materials information on how consumers can get the information in alternate formats such as Braille, foreign languages, a u-dio tapes, and large print.
- ? Plans cannot call anyone who is on the National Do-Not-Call List.
- ? If a Plan representative calls you and you ask them not to call you again, the Plan must honor your request.
- ? Plans cannot sign anyone up over the phone.
- ? Plans cannot ask you for personal identification such as Social Security Number, bank account numbers, or credit card numbers over the phone.
- ? Plans that violate the rules will be subject to penalties and/or fines.

### How to Sign-Up for the Do-Not-Call Registry

PHLP encourages anyone who does not want to receive calls from Medicare Prescription Drug Plans to sign up for the Pennsylvania “Do Not Call” List. Individuals who sign up for this list will also be placed on the National Do-Not-Call Registry. People can sign up for the

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## Changes to Medical Assistance Benefits for Dual Eligibles

Changes to the Medical Assistance (MA) program, which include some service limits and co-pays resulted from this year's budget process. People on both MA and Medicare, also known as dual eligibles, **are** affected by some of these changes. Effective August 29, 2005, there is a limit on the number of doctor visits MA will pay for each year. Many adults with disabilities or those who are over 65 will only have 18 doctor visits paid for by MA per year. However, for dual eligibles, the limit on the number of visits to a doctor will only apply to visits not covered by Medicare. Services not covered by Medicare would include visits to a doctor for check-ups, when the person is not sick. These visits are charged to MA and would be limited to 18/year.

Another change to MA effective August 29, 2005 is a co-pay for prescription drugs. The co-pay for prescription drugs is \$1 for generics and \$3 for brand name drugs. All consumers affected by the new co-payment should already have received a notice from the Department of Public Welfare. For people currently in a MA Managed Care Organization, the limits and co-pays may be different and will not go into effect yet. Those consumers will receive a notice from their MA Managed Care Organization about any changes that may occur, before the changes are implemented.

A huge change for dual eligibles will be the switch for people in MA Managed Care Organizations to Fee-for-Service/Access. This will take effect in early 2006, although the state has not yet announced precisely when this change will occur. It will only effect physical health services and people who will be affected by it will receive a notice in the mail explaining what will happen. This means that dual eligibles in HealthChoices counties and in voluntary Managed Care Organizations will no longer use their MA HMO for physical health services. Dual eligibles are already allowed to go to **any** Medicare doctor for Medicare covered services, even if the provider does not take MA, so for many people, this will not affect their choice of provider. However, dual eligibles will not be able to go to the Managed Care Organization if they have trouble finding a provider and their appeal rights for services denied by MA will be different.

One last change for dual eligibles is the implementation of a preferred drug list. This will only affect dual eligibles until the Medicare Prescription Drug benefit begins on January 1, 2006. Please see the article on page 5 for more information on the Preferred Drug List. We will keep you updated regarding all of the changes for people with Medical Assistance and Medicare (dual eligibles) in future issues of the Senior Health News. Please call the Pennsylvania Health Law Project helpline at 1-800-274-3258 (voice) or 1-866-236-6310 (TTY) if you have any questions about any of these changes.

Do you or someone you work with have Medicare and Medical Assistance? Are they having problems accessing services? Let us know! We are trying to find out what kinds of problems people with both Medicare and Medical Assistance face when trying to accessing medical services. Please e-mail us with the problems you see most at [jnix@phlp.org](mailto:jnix@phlp.org).

## Medicare Prescription Drug Benefit Update

Medicare is still in the process of approving Plans to offer prescription drug coverage under the new benefit. On August 29, the Center for Medicare and Medicaid Services said that it expects that there will be 23 organizations offering stand alone prescription drug plans in Pennsylvania. Of these, there are expected to be 13 plans with no monthly premium. Dual Eligibles (people with Medical Assistance and Medicare) will be automatically enrolled into one of the zero premium plans. These plans should be announced before October 1, 2005. This is the date when Prescription Drug Plans approved by Medicare will start to market their benefits. See our article on page 1 for more information about the marketing rules Plans must follow.

Additionally, people currently in a MA Managed Care Organization may be enrolled into a Special Needs Medicare Managed Care Organization instead of into a stand alone Prescription Drug Plan. We will give you more details as we know them— see our PA Health Law Newsletter, due out in mid-September, or our website, [www.phlp.org](http://www.phlp.org) for more information.

### **“Extra Help” Applications Now Being Processed**

The Social Security Administration and the Department of Public Welfare are now processing the applications to provide people with limited income and assets help with the costs of the new benefit.

The Social Security Administration has been mailing out applications to people who meet the income guidelines for the subsidy throughout the summer. They mailed the last batch of applications earlier this month. If a consumer has not received an application and would like to apply for the low-income subsidy or “extra help”, they can get an application from the local Social Security Office or local County Assistance Office.

As a reminder, to qualify for the subsidy individuals have to meet the following guidelines:

- ? Single Person: income below \$1,197/mo and assets below \$10,000
- ? Married Couple: income below \$1,604/mo and assets below \$20,000

After consumers apply for the subsidy, they will receive a notice telling them whether they qualify for the subsidy and how much help they will get. Consumers who are denied a subsidy can appeal that decision. The notice should explain the appeal options. The subsidy will start once the consumer joins a Medicare Prescription Drug Plan. Information about enrollment into these Plans will be sent later this Fall.

### **Notices to People with Both Medicare and Medical Assistance**

If you are dual eligible, you will automatically get the help with the Medicare Prescription Drug Plan costs. Medicare sent a notice to everyone on Medicare who also has Medical Assistance earlier this summer telling them about the changes. This notice had blue stripes across the top of the letterhead and was titled, “Important Information From Medicare About Paying for Prescription Drugs”. If someone has a Representative Payee, then the notices were only sent to the Repe-

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Please feel free to copy and post or distribute this announcement.

The Pennsylvania Health Law Project presents:

## **BIG Changes to the Medical Assistance Program**

The Pennsylvania Health Law Project will be conducting presentations to discuss the details of the changes to Medical Assistance

Attend one of our trainings to learn more about the service caps, co-pays, premiums and more.

**The Briefing is FREE!**

Please Call the Pennsylvania Health Law Project to RSVP so that we know how many people to expect:  
1-800-274-3258

Visit us online at  
[www.phlp.org](http://www.phlp.org)

### **Locations, Dates and Times**

#### **Philadelphia**

Tuesday, September 27, 2005  
9am—11am  
Philadelphia Bar Association  
1101 Market St, 11th flr  
Philadelphia, PA

#### **Pittsburgh**

Friday, September 16, 2005  
10am—12pm  
Carnegie Library of Pittsburgh-Downtown  
First Floor Meeting Room  
612 Smithfield Street  
Pittsburgh, PA 15222

#### **Harrisburg**

To Be Announced

## Office of Mental Health and Substance Abuse Services Looks at Older Adults

When the Office of Mental Health and Substance Abuse Services (OMHSAS) changed its advisory committee structure in May 2004 it created three different advisory committees to address the three different populations OMHSAS is responsible for: Children, Adults and Older Adults. Since then, the Older Adult committee has been advising OMHSAS on ways to improve the availability and quality of mental health services for older adults.

Mental health is a serious and important issue for older adults. While many older adults suffer from mental health conditions, such as depression, their conditions are often ignored or misdiagnosed. The Older Adult committee has been focusing on limiting the barriers to care that older adults face and increasing the quality of the care that older adults receive. To try to reach these goals, the committee has made several recommendations to OMHSAS. For example, the committee has recommended that OMHSAS find a way to provide mental health services in the home. The committee has also pushed the Department to adjust the priority definition to ease older adults' access to services.

The Older Adult Advisory Committee meetings are "sunshine" meetings so anyone can attend. Check the Department of Public Welfare's website <http://www.dpw.state.pa.us/Family/MentalHealthServ/AdvisoryCommittee/> for the meeting schedule.

## Preferred Drug List to be Implemented in Pennsylvania

The Department of Public Welfare plans to implement a Preferred Drug List (PDL) for all consumers on Medical Assistance (MA) in order to control costs for the MA program. The PDL is a statewide formulary and will apply to consumers in both Fee-for-Service and Managed Care. Both physical health and behavioral health drugs will be included in the PDL. Once the PDL is implemented, it will apply to everyone on MA (including kids and dual eligibles). The expected start date for the PDL is October 1, 2005.

The Department recently selected Provider Synergies as the Contractor for the PDL program. The Contractor will implement the program along with the Pharmacy and Therapeutics (P&T) Committee. The P&T Committee decides which drugs will be included on the PDL. There is consumer representation on the P&T Committee.

The list of drug classes for the PDL has not been finalized, but the Department has announced that HIV/AIDS drugs will be excluded from the PDL. If someone needs a medication that is not on the PDL, there will be an exceptions process. The Department has also said that patient protections will be in place for all drugs. We will continue to update you on the implementation of the PDL in future editions of the Senior Health News.

## Changes Coming on Counting Income and Resources for Home and Community Based Services

Starting this year, the rules on counting a spouse's income and resources for people applying for the home and community based waiver programs will change. For the past few years, only the income and resources of the person applying for the services has counted. If the husband or wife did not need services, his or her own income and resources were not counted. Soon, Pennsylvania will begin counting some of the income and assets of a spouse who is not applying for services when a married person applies for a home and community based waiver program. These rules, also known as the "spousal impoverishment rules," are already in effect for people who enter a nursing home and apply for Medical Assistance coverage for the nursing home.

The spousal impoverishment rules mean that the resources and income of the spouse who does not need services will be counted against the spouse applying for services and the person applying for services will not be eligible for home and community based waiver services until the resources fall below the resource and income limits. However, some of the resources and income owned by the spouse not needing services will not be counted. When someone is applying for Medical Assistance coverage in a nursing home, about half of the resources owned by the spouse still at home is not counted towards the person in the nursing home, though the actual amount depends on how much the couple has in resources. It is expected that the rules will be the same for people applying for home and community based waivers though we do not yet know for sure. The people to be affected are people who are newly applying for home and community based services and people who have applications pending when the rule goes into effect. This is expected to take effect some time in the fall, with an exact date to be announced soon. Watch our website [www.phlp.org](http://www.phlp.org) for updates. We will update you with how this rule will apply to home and community based services in our next Senior Health News.



### **PHLP's Philadelphia Office has moved!**

On August 1, 2005, the Pennsylvania Health Law Project's Philadelphia office moved to a new location. The new office is at the Lafayette Building, Suite 900, 437 Chestnut St, Philadelphia, PA 19106. Our helpline number and other phone numbers have remained the same. Please note our new address in anything you send to us.

## Important Dates coming up for Medicare Part D

- Early Fall 2005:** Medicare will notify **full dual eligibles** that they will be automatically enrolled into a Prescription Drug Plan (PDP) if they fail to enroll in a plan on their own before December 31, 2005. **Full dual eligibles** get their prescription drug coverage through MA.
- Fall 2005:** Department of Public Welfare will send notices to **full dual eligibles** to tell them they will be losing their prescription drug coverage through MA on December 31, 2005.
- October 1, 2005** Medicare PDPs will start to market their benefits.
- October 13, 2005** Consumers can compare plan benefits on [www.medicare.gov](http://www.medicare.gov) or by calling 1-800-MEDICARE. CMS will mail consumers information about Medicare PDPs available to them.
- November 15, 2005** Consumers start to enroll in Medicare PDPs.
- January 1, 2006** Medicare Prescription Drug Benefit begins. **Full dual eligibles** now get their prescription drugs through Medicare instead of MA.



## Upcoming Medicare Part D Trainings in the SW

PHLP's Pittsburgh Office is conducting free trainings on Medicare Part D across Southwestern Pennsylvania. These trainings include an overview of the Part D program, information about who is eligible for a subsidy, how to apply for the subsidy and how it will work, and how to choose a Part D Plan.

- ? 9/10 at 10:15 am- Mercy Hospital Parish Nurse Conference, Pittsburgh, PA
- ? 9/14 at 9 am- Presbyterian Senior Care, Allegheny County
- ? 9/15 at 10:30 am-Western Region Dom Care Meeting, Indiana, PA
- ? 9/19 at 10 am- Westmoreland County Area Agency on Aging
- ? 9/27 at 8:30 am- Washington Hospital, Washington, PA (open)
- ? 9/30 ay 9:45 am -Be Utility Wise event, Indiana, PA (open)

Some of these trainings are open to the public, as noted. If you are interested in scheduling a training for your staff and/or the consumers you work with, or attending a training in the SW part of Pennsylvania, please call PHLP at **(412) 434-5779** or **1-800-274-3258**. For trainings in other parts of the state, please call the PHLP Helpline at 800-274-3258.

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PA “Do Not Call” list by calling the PA Office of Attorney General’s hotline at 1-888-777-3406 or by going to [www.nocallsplease.com](http://www.nocallsplease.com). The number registered on the “Do-Not-Call List” will remain on the List for five years unless the person wishes to remove it. If someone is not sure whether their phone number is registered on the list, they can call the toll-free number listed previously to find out.

People can sign up for the National Do-Not-Call registry by calling the 1-888-382-1222 or 1-866-290-4236 (for TTY users). Individuals must call from the phone number they wish to register on the National Do-Not-Call List.

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sentative Payee and not the individual consumer.

If you have not received that notice, you should call 1-800-MEDICARE (1-800-633-4227 or 1-877-486-2048 for TTY users) or your caseworker at the County Assistance Office. If you have questions regarding the notices or if you were denied the help with Medicare Prescription Drug Plan costs, please call the PA Health Law Project Helpline at 1-800-274-3258 (voice) or 1-866-236-6310 (TTY).



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