

Frequently Asked Questions - Medicare Advantage

Who is eligible for CBIA's Medicare program?

A CBIA Health Connections participant is eligible for either plan if they are qualified for Medicare Part A are enrolled in and continue to pay for Medicare Part B.

Medicare beneficiaries must be Medicare primary to enroll in the CBIA plans. Please refer to CBIA.com/Medicare/TEFRA DEFRA chart to determine if you meet this qualification.

If a beneficiary has End Stage Renal Disease (ESRD), they can enroll in a Medicare Advantage plan during Open Enrollment.

When can I enroll?

Participants can enroll when they are new to Medicare or with a valid Special Election Period. Medicare rates renew on Jan 1 regardless of a company's renewal date. Enrollment forms must be signed by the enrollee and dated no later than the day before their effective date or December 31 to be effective the following January 1.

All Medicare-eligible family members must enroll in the same plan option.

Can I switch plans after the January 1 effective date?

Without a qualifying event, enrollees may not switch plans during the year.

What are the advantages of a Medicare Advantage plan?

For **Medicare Advantage** (MA) plans, an enrollee continues with Original Medicare Part A & Part B. The MA plan will pay for covered medical expenses in place of Original Medicare.

Enrollees are still part of the Medicare program and continue to have all the rights and protections offered by Original Medicare. Medicare Advantage plans are health plans approved by Medicare and run by private companies. They are part of the Medicare Program and are also referred to as Medicare Part C. The enrollee must continue to pay his/her Medicare Part B premium in addition to the plan premium which is paid to CBIA.

Medicare Advantage plans can offer many advantages – cost savings with lower premiums than most supplement plans, additional benefits and services, including annual physical exams and wellness programs, and financial protection with out-of-pocket limits. *CBIA Health Connections' Medicare Advantage plans are offered by ConnectiCare.*

ConnectiCare’s plan is a network product which uses contracted providers for in-network services. Enrollees also have the flexibility to seek covered medical services from any Medicare-approved provider in the United States. The cost is the same when services are received from an in-network provider or a provider that accepts assignment with Original Medicare. (A provider who accepts assignment agrees to accept Medicare level of reimbursement for services.)

The ConnectiCare plans offered to CBIA participants include Part D prescription drug coverage (also referred to as a Medicare Advantage with Prescription Drug or MAPD).

For a listing of the covered medical services available on a national basis and for details about the Part D prescription drug plan (see question in “Questions Specific to Medicare Advantage” below), please refer to the Summary of Benefits and Evidence of Coverage online at CBIA.com/Medicare.

How can I join?

You must complete a CBIA Health Connections enrollment form as well as a ConnectiCare Medicare Advantage enrollment form. Forms and additional information can be found online at CBIA.com/Medicare. **These forms must be signed and dated by the enrollee no later than December 31 to be effective the following January 1.**

Do I have to reside in Connecticut to enroll in the ConnectiCare plan?

No. The CBIA Health Connections MAPD plan offered by ConnectiCare is an HMO-POS plan with a national service area; you can reside anywhere in the United States.

What happens if I see a doctor in another state on an emergency basis; will I have to pay the full cost for the service?

No. The ConnectiCare High Option plan offers Worldwide Emergency Care at a cost share of \$30 and the Low Option plan offers Worldwide Emergency at a cost share of \$75; up to a \$50,000 limit.

What happens if I see a doctor in another state for routine care; will I have to pay the full cost for the service?

No. The ConnectiCare plans offer national coverage for services provided by Medicare- approved providers. When you receive services from a provider who accepts Medicare- assignment; the cost to you is the same if you had received the services from an in-network provider.

While most Medicare-approved providers accept Medicare-assignment, there are some providers that do NOT accept assignment. If you receive services from a Medicare- approved provider that does NOT accept assignment, the provider may balance bill you up to an additional 9.25%.

Do the ConnectiCare plans cover the same services that a Medicare Supplement covers?

Yes. The ConnectiCare plans cover the same services as a Medicare Supplement plan AND include more services such as an annual physical exam. This annual physical exam is in addition to the Annual Wellness Visit covered by Medicare. The ConnectiCare plans also include:

- Health and wellness support services
- Vision discount program
- SilverSneakers® fitness program

How big is ConnectiCare's Provider Network? How do I find out if a specific doctor participates?

The ConnectiCare Medicare Advantage Provider Network includes more than 29,000 fully-credentialed health care providers and all Connecticut hospitals except for Connecticut Children's Medical Center.

The ConnectiCare plans allow the flexibility to use any Medicare-approved provider. This allows enrollees to seek services from any Medicare-approved provider nationally.

Please refer to <https://my.connecticare.com/ccimember/s/find-care-plans>

for the link to ConnectiCare's provider directory to find out if your doctor participates in the Connecticut network.

Are prescription drugs covered under this plan?

Yes. The Medicare Advantage plan automatically includes a Part D prescription drug plan (MAPD). The plan has cost shares for generic, brand-name, and specialty drugs. You may save money on your prescription drugs by using ConnectiCare's Home Delivery Pharmacy (Mail Order) through Express Scripts.

Please refer to the Evidence of Coverage for specific benefit information. You may view ConnectiCare's Medicare Drug Formulary by visiting CBIA.com/medicare.

Do the ConnectiCare plans include Silver Sneakers?

Both ConnectiCare Medicare Advantage plans include the Silver Sneakers Fitness Program at no additional charge. Please refer to silversneakers.com for more information.