

Medicare Advantage Prescription Drug Plan for Dually Eligible Consumers ("D-SNP") for 2023

1. What is a D-SNP?

D-SNP stands for Dual Special Needs Plan. A D-SNP is a Medicare Advantage Prescription Drug (MAPD) plan for consumers who are entitled to both Medicare (Title XVIII) and Medical Assistance from a State Plan under Title XIX (Medicaid)*.

D-SNPs are specialized Medicare plans for people who have both Medicare and Medicaid, also known as "dually eligible" consumers. Individuals qualify for Medicaid and Medicare separately. D-SNP eligible consumers can include low-income seniors ages 65 and older, and people with disabilities that are younger than age 65.

A D-SNP provides the same coverage consumers would normally receive under Original Medicare but comes with a prescription drug plan (PDP) and extra benefits. These extra benefits include, but are not limited to, dental, vision and hearing. Those extra benefits are services not covered under Original Medicare. D-SNPs may offer these extra benefits at no additional cost to the consumer.

Most D-SNPs have a \$0 premium, \$0 coinsurance and \$0 co-pay.

*source: https://www.cms.gov/Medicare/Health-Plans/SpecialNeedsPlans/index.html



2. Program Eligibility:

To be eligible for a D-SNP Medicare Advantage Prescription Drug plan, a consumer must:

- Be eligible for Medicare
- Be eligible for Kansas Medicaid coverage. Each D-SNP may have different Kansas Medicaid coverage requirements. You will need to call to determine if your coverage meets the requirements.
- Live in one of the counties served by one of the Medicare Advantage Organizations (MAOs) managing a D-SNP (see page 10)
- The counties served by the MAO (D-SNP) are also referred to as a "service area." The benefit categories and service areas vary by each MAO offering D-SNPs. The MAOs offering D-SNPs in Kansas during 2023 are Aetna, Wellcare by Allwell (A partner of Sunflower Health Plan), and UnitedHealthcare. Please contact the MAO if you are interested in learning more about the D-SNPs offered in the county where you live, including information about whether you qualify for the D-SNP based on your level of Medicaid eligibility.

Phone numbers for the MAOs:

Aetna: 1-833-223-0614 (enrollment); Relay 711

1-866-409-1221 (member services); Relay 711

Wellcare by Allwell (A partner of Sunflower Health Plan):

1-833-402-6707 Relay 711

UnitedHealthcare: 1-866-262-9947 Relay 711

3. Is there a cost to receiving the Extra Benefits as a D-SNP member?

Most D-SNP extra benefits have no premiums, co-pays or co-insurance. Some partial dual plans (SLMB+) may have minimal premiums, co-pays, or co-insurance.

4. What are some examples of D-SNP Extra Benefits?

Benefits like dental, hearing, vision, fitness, and access to over-the-counter catalog items are examples of the extra benefits for D-SNP members. These extra benefits may differ between D-SNPs offered in your county. Please see the comparison sheet, titled "D-SNP Extra Benefits." (see the Extra Benefits page after page 6)

The extra benefits in a D-SNP, "are not designed to replace Medicaid benefits but rather to help bridge the gap between Medicare and Medicaid covered services."*

*source: https://www.cms.gov/Medicare/Health-Plans/SpecialNeedsPlans/index.html



5. How do I apply for D-SNP coverage?

A consumer can check eligibility and enroll in a D-SNP one of these ways:

- With a licensed health insurance agent who helps you make the decision that best meets your personal needs, or
- Calling an enrollment representative with the D-SNP of your choice.
- Call 1-800-Medicare (1-800-633-2273)
- Fill out an application on-line at Medicare Plan Finder at www.medicare.gov

The call centers are open 7 days a week from October - March, and from Monday through Friday from April – September. 8 a.m. to 8 p.m.

- o Aetna:
 - 1-833-233-0614 Relay: 711
 www.aetnamedicare.com
- **o** Wellcare by Allwell (A partner of Sunflower Health Plan):
 - 1-833-402-6707 Relay: 711
 https://wellcare.sunflowerhealthplan.com/new-to-plan/enroll-in-a-plan.html
- UnitedHealthcare:
 - 1-866-262-9947 Relay: 711
 www.uhccommunityplan.com/enroll-in-plan.html/welcome

If contacting a licensed insurance agent, the agent sets up an appointment for an in-person meeting to educate the consumer and make sure the consumer is eligible for the D-SNP. This includes making sure the consumer's doctors are in the D-SNP network of physicians and that the consumer's prescription drugs are covered under the prescription drug formulary. The agent also explains the extra benefits and guides the consumer through the enrollment application process.

Enrollment in a D-SNP is typically done in a face-to-face meeting but can also be done over the phone or online.

If the consumer wants to meet with a licensed health insurance agent and does not know who to contact, consumers can call the D-SNP, Medicare Advantage Organization, or MAO and enroll over the phone **or** be referred to a licensed health insurance agent in the consumer's area.

Referral Cards - This is another way to be contacted by a licensed health insurance agent:



A consumer can fill out a CMS-approved referral lead card and send to the D-SNP. The D-SNP will then contact a licensed health insurance agent in the consumer's area who will then reach out to the consumer. The CMS-approved referral lead card is the compliant way a licensed sales agent can reach out to a consumer. The consumer lead cards are also available at consumer events or information sessions at locations across the service areas.

6. What happens once I'm approved for D-SNP coverage?

The D-SNP sends a letter to the member indicating he or she has been approved for enrollment into the D-SNP. The new member also receives a welcome packet and D-SNP Identification Card (ID) card.

The new member will also receive a welcome call from their new D-SNP. The welcome call is a time to begin talking about the member's care plan.

If the consumer hasn't received a letter from the D-SNP within 2-3 weeks after completing the enrollment application, the consumer should call the D-SNP's enrollment team:

• **Aetna:** 1-833-233-0614 Relay: 711

Wellcare by Allwell (A partner of Sunflower Health Plan):

1-833-402-6707 Relay: 711

• **UnitedHealthcare:** 1-866-262-9947 Relay: 711

7. How do I maintain D-SNP coverage?

D-SNP coverage depends on Medicare coverage, Medicaid eligibility (determined by the State, specific to the MAO administering the D-SNP), and living in the service area covered by the MAO.

Loss of D-SNP coverage can occur by:

- 1. Moving outside the service area covered by your D-SNP
- 2. A change in Medicaid eligibility. For questions about this contact your D-SNP plan.



8. Other Frequently Asked Questions

Question: What do I do with my Original Medicare ID card (the red, white and blue ID card) that I received from the federal government after I became eligible for Medicare?

Answer: Put it away in a safe place, but do not throw it away! You will begin to use the D-SNP ID card as your medical ID card. The D-SNP coverage replaces what you had with Original Medicare *PLUS* adds extra benefits.

Question: Do I have to show both my Medicare (D-SNP) and Medicaid (KanCare) ID cards when I go to the doctor and pharmacy?

Answer: Yes. You need to present the D-SNP ID card at the doctor's office and pharmacy along with your Medicaid (KanCare) ID card. The D-SNP ID card is used by the provider to receive primary payment for Medicare-covered services, and your KanCare ID card pays secondarily for the remaining portion of those services. You must also present both your Medicare (D-SNP) and Medicaid (KanCare) ID cards at the pharmacy.

Question: Am I required to enroll with the same insurance company (D-SNP) that I have for my Medicaid (KanCare) coverage?

Answer: No. You may enroll in any one of the Medicare plans offered by Aetna, Allwell from Sunflower or UnitedHealthcare, regardless of who your Medicaid coverage is with. What matters is that your category of Medicaid eligibility meets the MAO-specific eligibility criteria.

Question: Will I lose any of my Medicaid benefits as a result of enrolling in D-SNP?

Answer: No. Your Medicaid benefits will not change as a result of you enrolling in D-SNP. If you are part of <u>Working Healthy</u> (WH) and/or WORK, please contact your WH benefits specialist.



Question: How do I enroll, dis-enroll or switch plans?

Answer: Medicare and Medicaid eligible members may enroll, dis-enroll or switch plans once, per calendar Quarter, during the first 9 months of the year. The calendar quarters are as follows:

- January through March
- April through June
- July through September

This enrollment opportunity follows the Centers for Medicare & Medicaid Services (CMS) regulatory requirements. To make these changes, you can contact the agent who helped enroll you into the D-SNP plan or you can call the Member Services number on the back of your D-SNP ID card. You can also call 1-800-Medicare (1-800-633-4227) to dis-enroll from the D-SNP.

Aetna: 1-866-409-1221 Relay: 711

Wellcare by Allwell (A partner of Sunflower Health Plan)

1-833-402-6707 Relay: 711

UnitedHealthcare: 1-866-262-9947 Relay: 711

Question: As a D-SNP member, who do I contact when I have questions?

Answer: For existing D-SNP members, contact Member Services at the number printed on the back of your D-SNP ID Card.

Aetna: 1-866-409-1221 Relay: 711

Wellcare by Allwell (A partner of Sunflower Health Plan):

1-833-402-6707 Relay: 711

UnitedHealthcare: 1-866-262-9947 Relay: 711

This information represents a collaborative effort between the KanCare Ombudsman Office, SCHICK (Senior Health Insurance Counselors of Kansas), with plan information reviewed by Aetna, UnitedHealthcare and Wellcare by Allwell (A partner of Sunflower Health Plan).



Medicare Advantage Prescription Drug / Dual Special Needs Plan

3 DSNPs in Kansas - Not Offered in All KS Counties

(See County Listing-page 4)

2023 Extra Benefits - \$0 Copay

Services below are not comprehensive. See each plan's **Summary of Benefits** for a full list of services they provide.

	***aetna** 1-833-223-0614 (enrollment) 1-866-409-1211 (DSNP member services)	A partner of Sunflower Health Plan 1-833-402-6707	UnitedHealthcare® Community Plan 1-866-262-9947
Dental	Up to \$4,000* every calendar year towards dental services. Includes exams, cleanings, fluoride treatments and x-rays. Also includes dental care for fillings, crowns, dentures, extractions and more. (*\$2,500 for Saline and McPherson counties.)	Ranging from up to \$3,000 to *no annual maximum allowance every calendar year for comprehensive dental services. Includes 2 cleanings, 1 x-ray. Also, includes dentures, bridges, extractions, fillings restorative services, periodontal services, root canals and more. *Depending on which plan you enroll in.	\$4,000 every calendar year toward preventive dental services. Includes regular exams, w-rays and cleaning. Comprehensive services include crowns, root canals, extractions, dentures, implants and more have a \$0 copayment.
Flex Card	A quarterly allowance of \$270 to use towards the purchase of approved food and produce items, utilities, gas, and non-medical transportation. May purchase items at a large network of local grocers and retailers. Unused allowance does not roll over to the next quarter.	\$300 to 1,000 loaded on a Flex Card debit card that can be used to reduce out of pocket costs at dental, vision, or hearing providers that accept the card.	



	aetna 1-833-223-0614	A partner of Sunflower Health Plan 1-833-402-6707	UnitedHealthcare* Community Plan 1-866-262-9947
Meals	Members can receive 42 meals after an inpatient hospital, inpatient psychiatric, and/or skilled nursing facility discharge, every time they are hospitalized.	Post-Acute Meals You pay nothing for meals immediately following an inpatient hospital stay to aid in recovery with a maximum of 3 meals per day for up to 14 days with a maximum of 42 meals per occurrence for an unlimited number of occurrences per year.	Post-Discharge Meal Delivery benefit is offered to members to help ensure proper nutrition after an inpatient hospitalization or skilled nursing facility discharge. \$0, 28 meals over 14 days, unlimited times per year. Members are sent home- delivered, refrigerated meals.
ОТС	Over the Counter (OTC) items include up to \$225 every three months (each quarter) for purchase of over-the-counter medications and supplies. Products will be mailed directly to you at no extra cost.	Over the Counter (OTC) - \$350 to \$395 every three months (each quarter) for Health Products used for oral care, eye care, First Aid, cold remedies, vitamins, foot care, Home health items, adult briefs, blood pressure cuff and more. Products will be mailed directly to you at no extra cost or purchase items from participating CVS locations.	Combined Over the Counter (OTC), Healthy Food and Utilities program. \$205-\$230 credits each month are added to a preloaded credit card called the UCard. Unused credits expire on the last day of the month. The credits can be spent toward healthy food, over-the-counter products and certain utility bills. These benefits can be used for home delivery or in-store purchases at many convenient store locations in their national retail network.
Prescription Drugs	\$0 drug copays on all tiers of covered generic and name brand prescription medications at network pharmacies with the option of home delivery.	\$0 drug copay on all Part D all tiers of covered generic and name brand prescription medications. Mail order option is available for most drug tiers.	\$0 drug copays on all tiers of covered generic and name brand prescription medications with option for home delivery.



	→actna ® 1-833-223-0614 (enrollment) 1-866-409-1211 (DSNP member services)	A partner of Sunflower Health Plan 1-833-402-6707	UnitedHealthcare° Community Plan 1-866-262-9947
Chiropractor / Acupuncture	Chiropractic coverage: 12 visits per year with \$0 copay. Acupuncture coverage:12 visits per year with \$0 copay.	Chiropractic/Acupuncture services: May be eligible for up to 12 visits per year with \$0 copay.	Chiropractic coverage. Up to 20 visits per year with \$0 copay.
Hearing	Hearing services includes \$5000 hearing aid benefit (\$2500 per ear each year); one routine hearing exam and hearing aid fitting evaluation every year.	Hearing services includes one hearing and fitting exam and two hearing aids per calendar year with a \$2,000-\$5,000 allowance for hearing aids. Includes a 3-year warranty, 60-day evaluation period, 2-year supply of batteries and routine in-office service visits for one year.	Hearing coverage includes routine annual hearing exam and \$3,600 hearing aid benefit, up to 2 hearing aids every year.
Vision	Vision coverage includes one routine eye exam and \$500* toward eyewear every year. (*\$400 for Saline and McPherson counties.)	Vision care includes one routine eye exam per year. Included is \$400 - \$600 toward the purchase of lenses, frames and contact lenses.	Vision coverage includes a yearly routine eye exam and \$600 credit toward contact lenses or eyewear in stores or by home delivery.
Fitness	Silver Sneakers Fitness Program. Covers a basic membership to any participating Silver Sneakers fitness facility. At home fitness kits are also available for members who do not reside near a participating club or prefer to exercise at home.	Silver & Fit membership includes access to over 14,000 fitness locations, a home-based fitness program, classes taught by certified instructors and a program for fitness guidance and assistance. Home fitness kits and fitness devices are also available.	Renew Active® is a fitness program that gives gym membership, a personalized fitness plan. Offer a Fitbit® device at no cost to members. The device helps members reach their health/ fitness goals by tracking their activity, sleep, stress levels and more.



	**************************************	A partner of Sunflower Health Plan 1-833-402-6707	UnitedHealthcare® Community Plan 1-866-262-9947
Personal Safety	Personal Emergency Response System (PERS) provided through LifeStation, to provide 24/7 access to help in the event of an emergency. This benefit includes the equipment (in- home or mobile with GPS).	Personal Emergency Response System (PERS), designed to be used in all situations 24/7, including emergencies, assistance with prescription refills, arranging transportation, scheduling a doctor's appointment and more. Device can be home-based or mobile.	Personal Emergency Response System (PERS). Gives you an in-home monitoring device. Quickly get in contact with a trained operator who can help in an emergency situation. Operator available 24-hours a day at no additional cost to you.
Foot Care	Foot Care Services includes 12 visits every year for routine non-Medicare covered Foot Care.	Foot Care Services includes unlimited visits for routine non-Medicare covered Foot Care for some plans.	Foot Care Services includes 6 visits every year for routine non-Medicare covered Foot Care.
Transportation	Transportation Services includes up to 40 one-way trips every year to doctor's appointments, pharmacies, adult day care locations, senior centers, and Silver Sneakers gym locations.	Transportation includes up to 12-36 one-way trips. Some plans may be eligible for 12 non-medical trips which include trips to approved locations such as the grocery store, banking, fitness, community centers and for social events.	Flexible Transportation Assistance includes 48 one- way trips to or from approved locations including medical related appointments, supplemental benefits, going to the grocery store, fitness center, place of worship or community center.
24/7 Nurse Line	Nurse Line: Talk to a registered nurse 24-hours a day, 7 days a week. 1-855-493-7019	Nurse Line: Talk to a registered nurse 24-hours a day, 7 days a week.	Nurse Line: Talk to a registered nurse 24-hours a day, 7 days a week. 1-877-440-9407
Cessation	Smoking and tobacco use cessation (counseling to stop smoking or tobacco use). Nicotine replacement available through the OTC benefit.	Smoking and tobacco use cessation (counseling to stop smoking or tobacco use).	Smoking and tobacco use cessation (counseling to stop smoking or tobacco use).



To be eligible for a D-SNP Medicare Advantage Prescription Drug (MA-PD) plan, a consumer must:

- Be eligible for Medicare,
- Be eligible for Kansas Medicaid coverage. Each DSNP may have different Kansas Medicaid coverage requirements. You will need to call to determine if your coverage meets the requirements.
- Live in a county served by one of the Medicare Advantage Organizations (MAOs) managing a D-SNP.

2023 Service Areas for each Dual Special Needs Plan (DSNP) in Kansas.

Aetna	Wellcare by Allwell - A partner of Sunflower Health Plan	United
(H5325-001/002/009)	(H6550-004, H6550-009, & H9387-004)	(H5322-029 & H0169-004)
Allen	Allen	Allen
Anderson	Anderson	Anderson
Atchison	Atchison	Atchison
		Barber
Bourbon	Bourbon	Bourbon
	Brown	Brown
Butler	Butler	Butler
Chase	Chase	Chase
Chautauqua	Chautauqua	Chautauqua
Cherokee	Cherokee	Cherokee
		Clay
		Cloud
Coffey	Coffey	Coffey
Cowley	Cowley	Cowley
Crawford	Crawford	Crawford
	Dickinson	Dickinson
Doniphan	Doniphan	Doniphan
Douglas	Douglas	Douglas
Elk	Elk	Elk
		Ellsworth
Franklin	Franklin	Franklin
	Geary	Geary
Greenwood	Greenwood	Greenwood
		Harper
Harvey	Harvey	Harvey
Jackson	Jackson	Jackson
Jefferson	Jefferson	Jefferson
		Jewell



Aetna	Wellcare by Allwell	United
(H5325-001/002/009)	(H6550-004, H6550-009, & H9387-004)	(H5322-029 & H0169-004)
Johnson	Johnson	Johnson
	Kingman	Kingman
Labette	Labette	Labette
Leavenworth	Leavenworth	Leavenworth
		Lincoln
Linn	Linn	Linn
Lyon	Lyon	Lyon
Marion	Marion	Marion
		Marshall
McPherson	McPherson	McPherson
Miami	Miami	Miami
		Mitchell
Montgomery	Montgomery	Montgomery
	Morris	Morris
	Nemaha	Nemaha
Neosho	Neosho	Neosho
Osage	Osage	Osage
		Osborne
		Ottawa
Pottawatomie	Pottawatomie	Pottawatomie
		Pratt
	Reno	
		Republic
		Rice
	Riley	
Saline	Saline	Saline
Sedgwick	Sedgwick	Sedgwick
Shawnee	Shawnee	Shawnee
		Smith
		Stafford
Sumner	Sumner	Sumner
Wabaunsee	Wabaunsee	Wabaunsee
		Washington
Wilson	Wilson	Wilson
Woodson	Woodson	Woodson
Wyandotte	Wyandotte	Wyandotte