Capturing Beneficiary Cost Savings

Housekeeping Items

- Today's webinar is being recorded.
- If you think of a questions you can raise your hand or type it into the chat box. If I don't have time to answer all questions I will follow up and send out answers after the training.
- I will distribute slides and the recording of the presentation approximately 48 hours after we conclude.

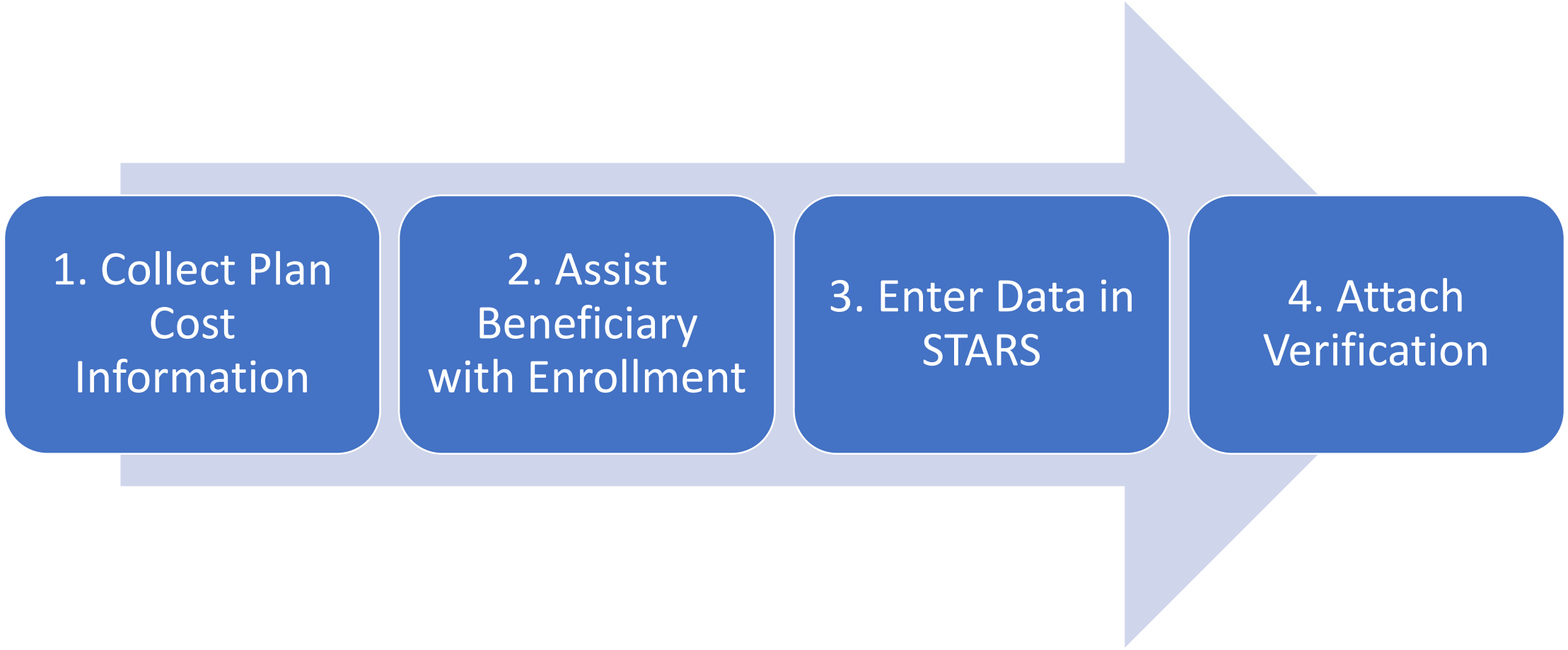
Overview

- ACL uses STARS to collect data related to the cost changes as result of enrollment in Part D prescription drug plans (PDPs) and Medicare Advantage plans with prescription drug coverage (MA-PDs) available through the Medicare Plan Finder (MPF).
- By collecting this data, SHIPs can demonstrate the impact of their work on behalf of beneficiaries in the following ways:
  - Data on the **number of beneficiaries** who received PDP/MA-PD enrollment assistance from RI SHIP;
  - Data on the **average cost change per beneficiary** who received PDP/MA-PD enrollment assistance from RI SHIP;
  - Data on the **reported total** of PDP/MA-PD cost change for RI.
  - Data to **report to Congress** on the importance of the SHIP program to help support funding.

OHA's SHIP Performance Incentive

- **<u>Effective April 1, 2021</u>** –
  - OHA is now requiring that all SHIP Counselors & Volunteers report Part D prescription drug plans (PDPs) and Medicare Advantage plans with prescription drug coverage (MA-PDs) beneficiary cost savings.
  - OHA will award a $1,000 bonus performance incentive to each region for the grant year: 4/1/2021 – 3/31/2022.

Part D/MA-PD Enrollment Data Steps



Step 1:
Collect PDP/MA-PD Cost Data

Overview

- **Track when you actively assist a beneficiary with PDP/MA-PD enrollment:**
  - Online through the MPF or the plan website, or
  - Over the phone with a plan customer service representative or 1-800-Medicare, or
  - With a paper application

- **Two types of enrollment:**
  - Switching from one plan to another
  - New to Medicare PDP/MA-PD

MPF - Switching Plans (Current Plan vs. New Costs)

MPF - Switching Plans (Current Plan vs. New Costs)

Your current plan

Cigna-HealthSpring Rx Secure-Essential (PDP)

Cigna | Plan ID: S5617-298-0

Star rating: ★★★½☆

MONTHLY PREMIUM

$22.10 Includes: Only drug coverage

YEARLY DRUG & PREMIUM COST

$231.80 Retail pharmacy: Estimated total drug + premium cost

Clear Spring Health Premier Rx (PDP)

Clear Spring Health | Plan ID: S6946-045-0

Star rating: Plan too new to be measured

MONTHLY PREMIUM

$17.10 Includes: Only drug coverage

YEARLY DRUG & PREMIUM COST

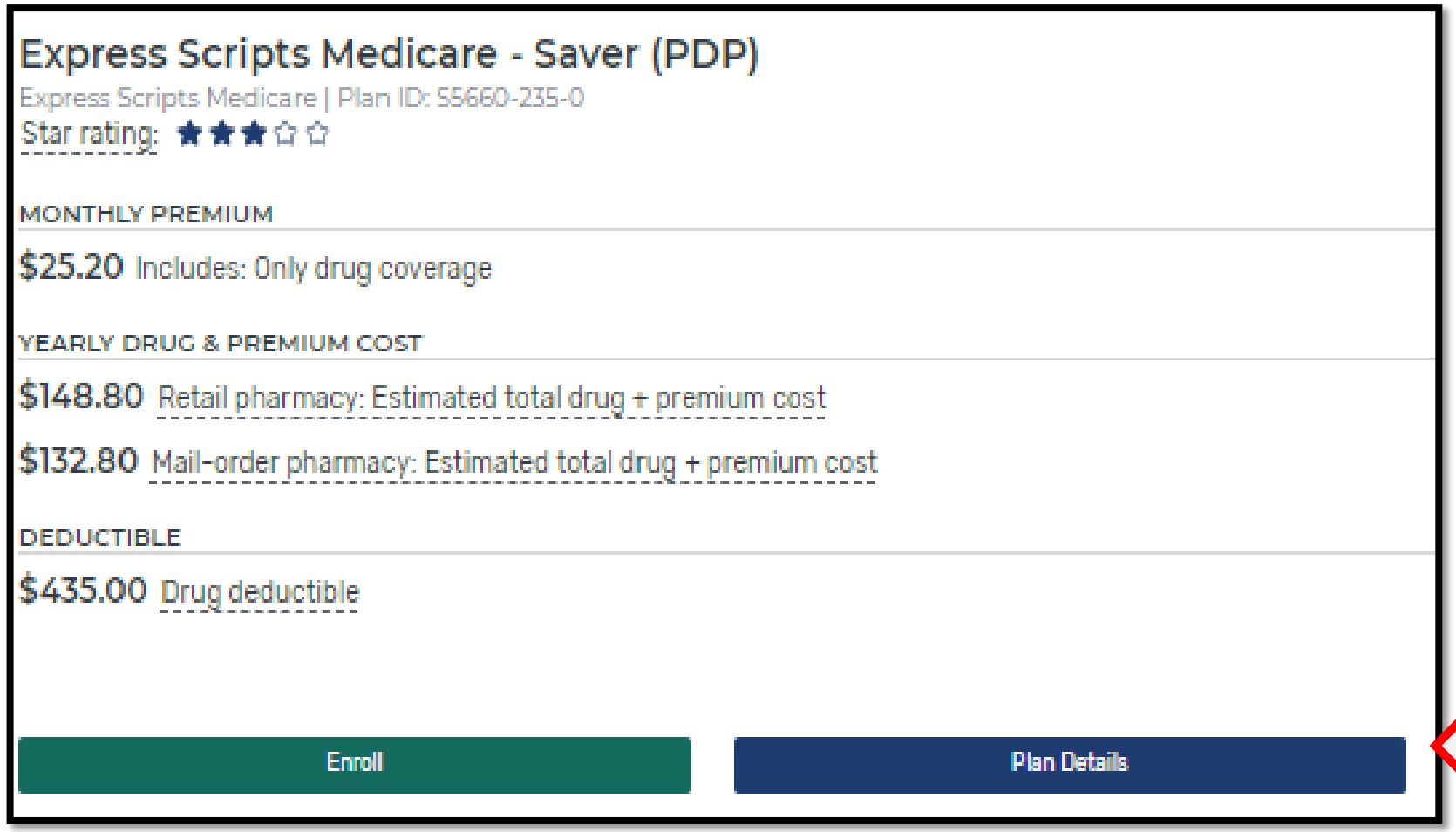
$116.40 Retail pharmacy: Estimated total drug + premium cost

1.1 STARS SUFs Example Entry:

Special Use Fields	
Original PDP/MA-PD Cost	231.80
New PDP/MA-PD Cost	116.40

New to Medicare
(Original Cost Calculation)

MPF – New to Medicare (Original Cost Calculation)



Click Plan Details and scroll to cost at beneficiary's pharmacy

MPF – New to Medicare (Original Cost Calculation)

ROLAND'S DRUG STORE - Drug costs during coverage phases

✔ Standard in-network pharmacy

Selected drugs	Retail cost	Cost before deductible	Cost after deductible	Cost in coverage gap	Cost after coverage gap
Amlodipine besylate 5mg tablet	$1.45	$1.45	$1.45	$0.36	$1.45
Clopidogrel bisulfate 75mg tablet	$2.95	$2.95	$2.95	$0.74	$2.95
Hydralazine hcl 25mg tablet	$7.15	$7.15	$7.15	$1.79	$3.60
Latanoprost 0.005% solution	$6.58	$6.58	$6.58	$1.64	$3.60
Losartan potassium 100mg tablet	$4.15	$4.15	$4.15	$1.04	$3.60
Metoprolol tartrate 50mg tablet	$2.95	$2.95	$2.95	$0.74	$2.95
Monthly totals	$25.22	$25.23	$25.23	$6.31	$18.15

$25.22 X 12 months = $302.64

MPF – New to Medicare (Original Cost Calculation)

New Cost SUF 2 $148.80

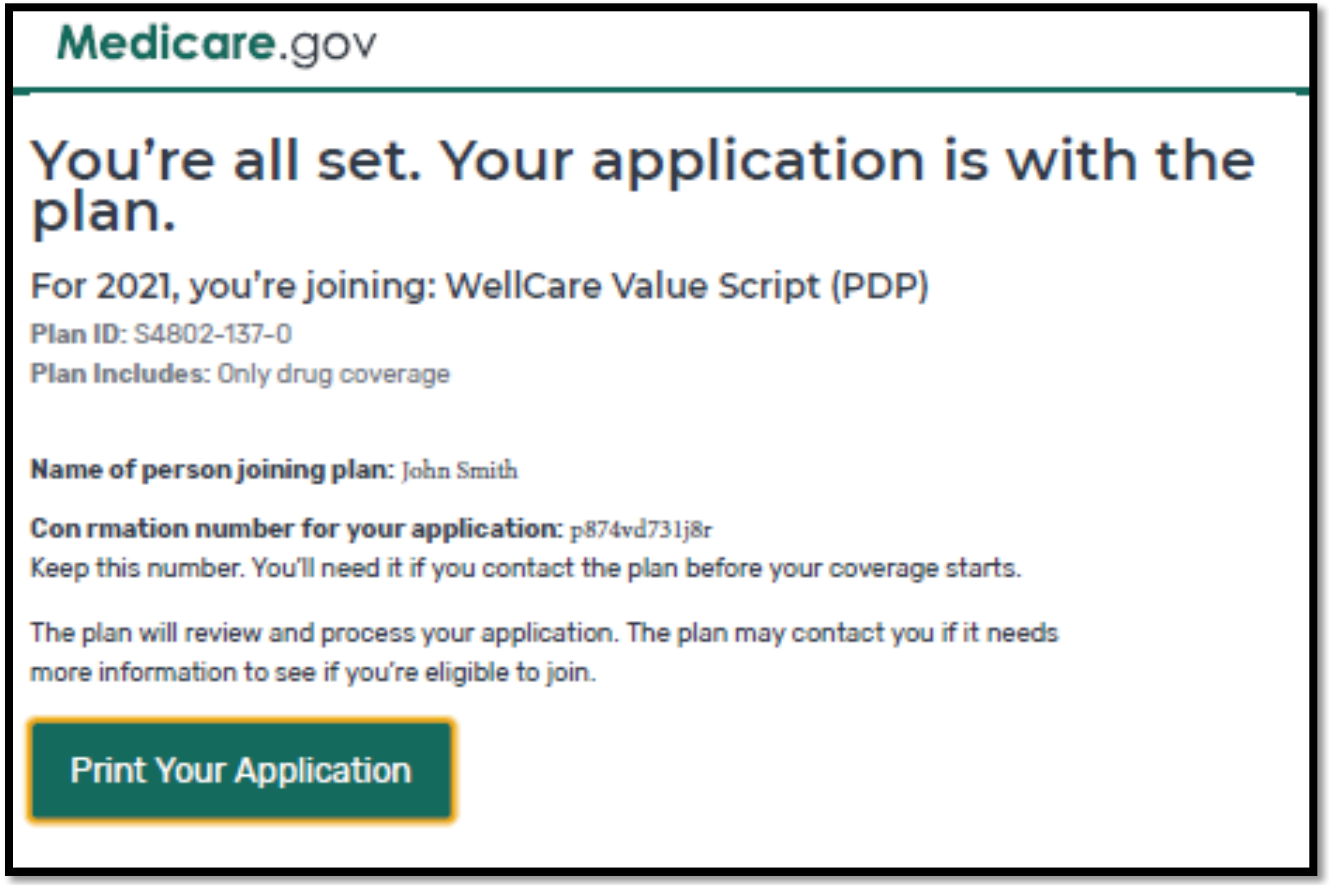
1.2 STARS SUF Example Entry:

Special Use Fields	
Original PDP/MA-PD Cost	302.64
New PDP/MA-PD Cost	148.80

Step 2:
Enrollment Assistance & Application Confirmation

Enrollment Assistance & Application Confirmation

- If enrolling by another method (plan's website, phone, etc.) an enrollment confirmation information must be saved
- If using MPF, upload the MFP application confirmation



Medicare.gov

You're all set. Your application is with the plan.

For 2021, you're joining: WellCare Value Script (PDP)

Plan ID: S4802-137-0

Plan Includes: Only drug coverage

Name of person joining plan: John Smith

Con rmation number for your application: p874vd731j8r

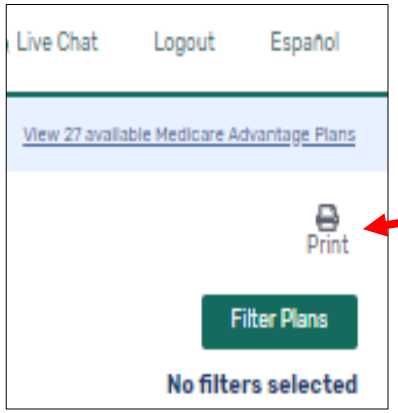
Keep this number. You'll need it if you contact the plan before your coverage starts.

The plan will review and process your application. The plan may contact you if it needs more information to see if you're eligible to join.

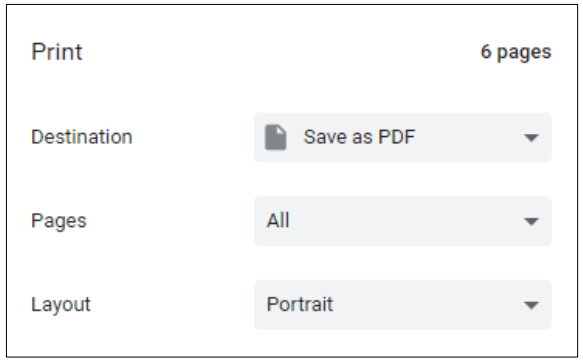
Print Your Application

MPF Printing Tips for Supporting Documentation

1. You can go to the top of MPF page where there is an option to print the page

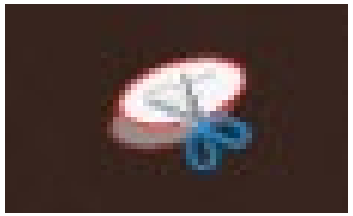


2. You can also save “Print to PDF”



3. You can Print a screen shot and save on a word document

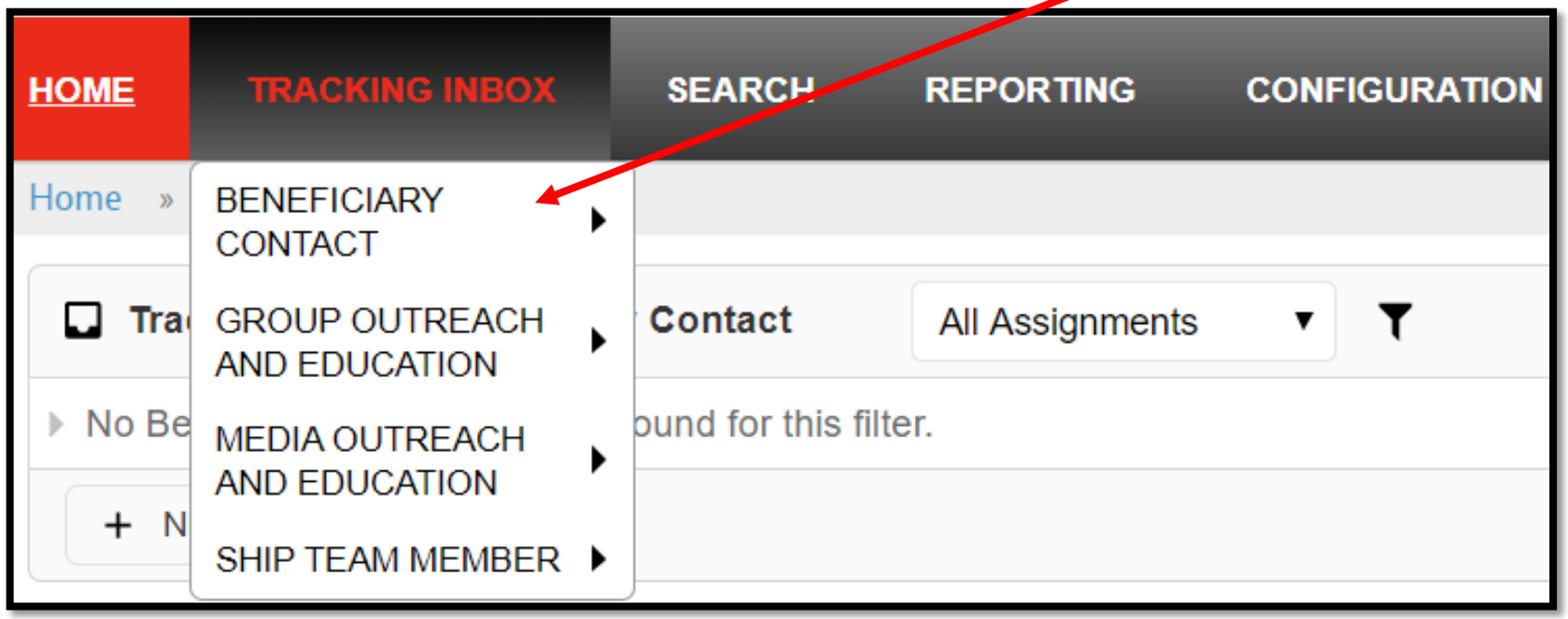
4. Lastly, you can use the snipping tool



Step 3:
Enter Data in STARS

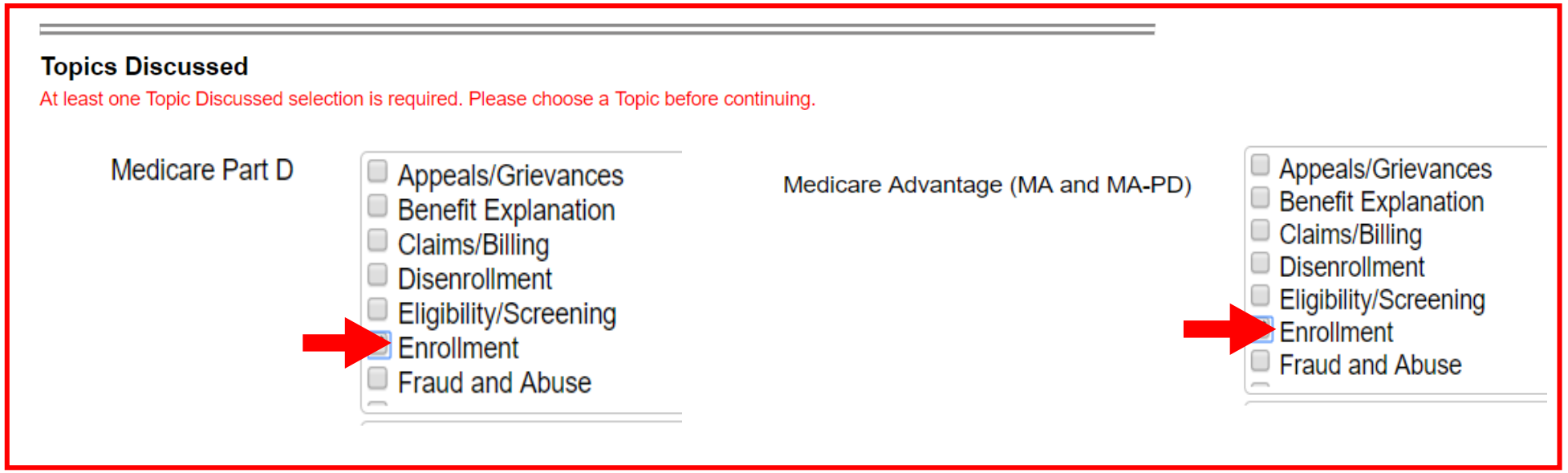
Beneficiary Contact Form (BCF)

- All Part D cost changes are entered on the Beneficiary Contact Form (BCF) in the Tracking Inbox



Topic Discussed - “Enrollment”

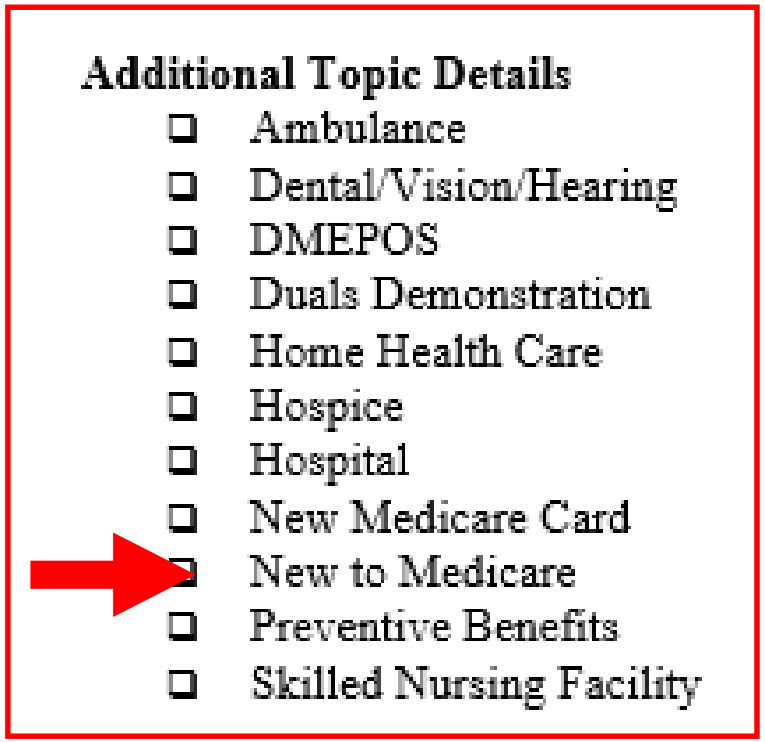
- **Topic Discussed:** “Medicare Part D” category or “Medicare Advantage (MA and MA-PD)” category
  - Check **“Enrollment”** in either the Medicare Part D or Medicare Advantage category depending on what enrollment was conducted in order to report enrollment assistance.



Additional Topic Details

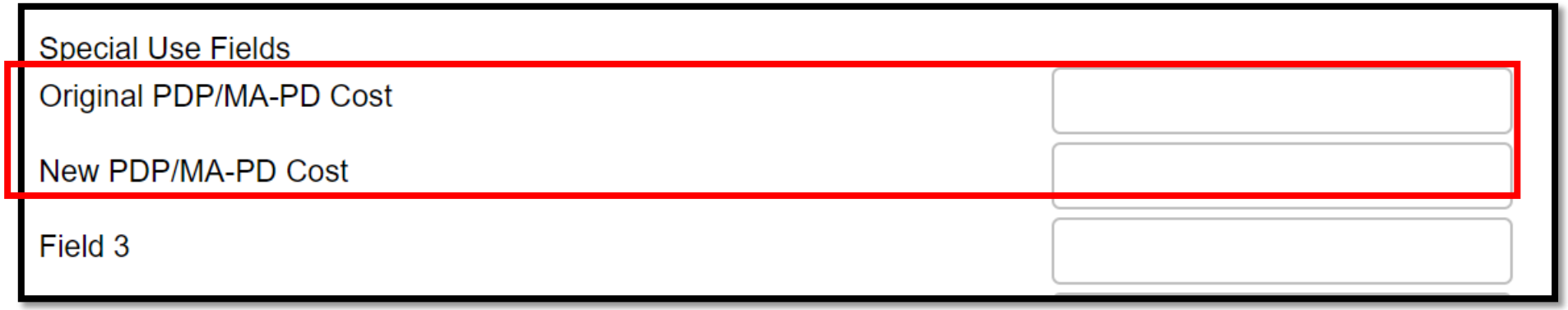
- Go to Topics Discussed → **"Additional Topic Details"** category
- Select → **"New to Medicare"**

  *If the beneficiary is new to PDP/MA-PD, select the New to Medicare topic in the Additional Topics Group. Select this even if the beneficiary has been enrolled in other parts of Medicare previously. This will allow ACL to track cost changes based on the plan's negotiated price vs. switching from one PDP-MA-PD to another.



Entering Original vs. New PDP/MA-PD Cost

- The first two Special Use Fields (SUFs) on the BCF are designated (*Original* and *New*).
- Enter the cost change amounts. *Note you can enter dollar signs, numbers, and punctuation, but **do not** enter letters



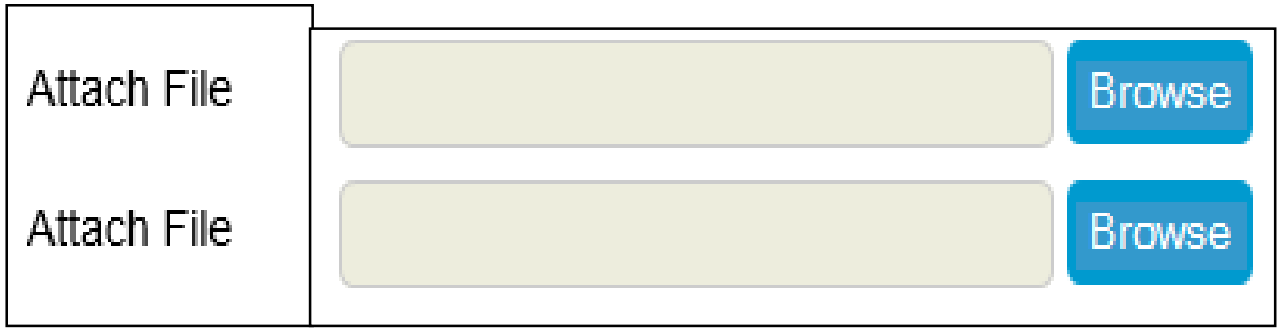
Original vs. New – Two Previous Examples

- Examples based on our previous slides are compared here:

Attach Cost Verification Sources

- Attach the following verification in the Beneficiary Contact Form:
  1. Application Confirmation
  2. Cost Changes verification detailing Original and New Cost

***Note: ACL requires supporting documentation when cost change data are reported**



- **File types accepted:** pdf, png, jpeg, rtf, doc/docx; ppt/pptx; xls/xlxs, m4a, csv, html, xml, bmp
- File size limit: 500MB per file.

Application Confirmation

Medicare.gov

You're all set. Your application is with the plan.

For 2021, you're joining: WellCare Value Script (PDP)

Plan ID: S4802-137-0
Plan Includes: Only drug coverage

Name of person joining plan: John Smith

Con rmation number for your application: p874vd731j8r
Keep this number. You'll need it if you contact the plan before your coverage starts.

The plan will review and process your application. The plan may contact you if it needs more information to see if you're eligible to join.

Print Your Application

Contact the plan directly if you have any questions.

WellCare Value Script (PDP)
Attn: Pre Enrollment
PO Box 31685
Tampa, FL 33631

Phone: 1-888-550-5252
Website: http://www.wellcare.com/PDP

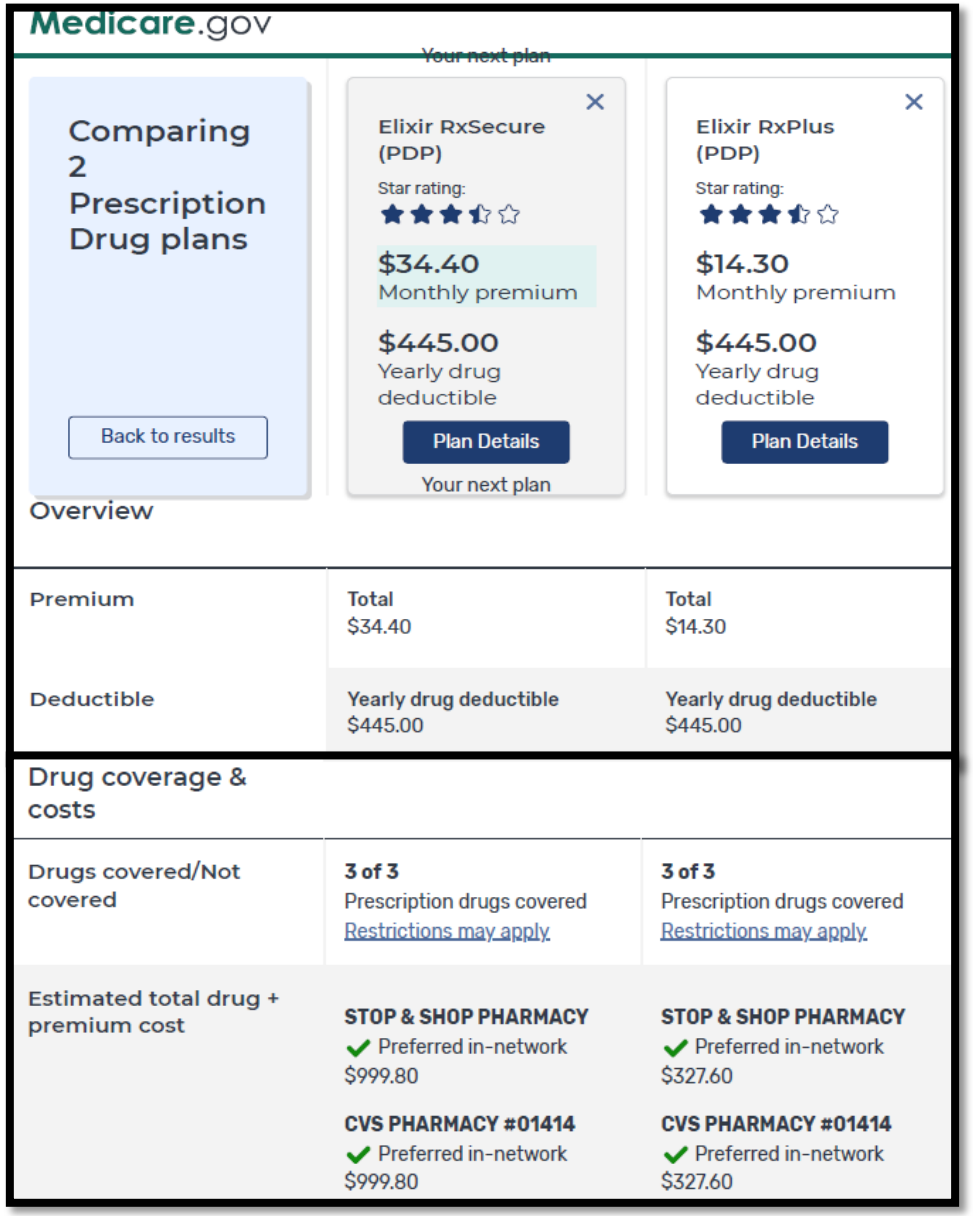
What to expect now

- **It takes at least 10 days for your new plan to show in your account.** After 10 days, call the plan if you haven't heard from them about your application. You'll need the confirmation number listed above when you talk to the plan.
- **The plan will notify you whether your application is approved.** They'll tell you when your plan coverage will start. And, they'll send you additional materials and your plan member card.
- **If you need to fill a prescription before you get your plan member card:**
  - Tell the pharmacy your new plan's name and bring proof that your application was approved, like a welcome letter from the plan.
  - If you have both Medicare and Medicaid: Bring your Medicare card (or Medicare Number) and your Medicaid card or recent letter from the state about your Medicaid benefits.
  - If you get Extra Help paying for drugs: Bring a copy of your yellow or green letter from Medicare or your approval letter from Social Security saying you qualify.
  - If you have to pay the full cost for your drug: Save your receipts and work with your plan to get a refund.

If you have questions, call your plan directly.

Done

Cost Changes Verification



Medicare.gov

Your next plan

Comparing 2 Prescription Drug plans

Back to results

Elixir RxSecure (PDP)

Star rating:

$34.40
Monthly premium

$445.00
Yearly drug deductible

Plan Details

Your next plan

Elixir RxPlus (PDP)

Star rating:

$14.30
Monthly premium

$445.00
Yearly drug deductible

Plan Details

Overview

Premium	Total $34.40	Total $14.30
Deductible	Yearly drug deductible $445.00	Yearly drug deductible $445.00

Drug coverage & costs

Drugs covered/Not covered	**3 of 3** Prescription drugs covered Restrictions may apply	**3 of 3** Prescription drugs covered Restrictions may apply
Estimated total drug + premium cost	**STOP & SHOP PHARMACY** ✔ Preferred in-network $999.80 **CVS PHARMACY #01414** ✔ Preferred in-network $999.80	**STOP & SHOP PHARMACY** ✔ Preferred in-network $327.60 **CVS PHARMACY #01414** ✔ Preferred in-network $327.60

Part D Enrollment Outcomes Accuracy Checklist

1. **Topics Discussed**
   - ❑ Check *Enrollment* in **either (not both)** the "Medicare Part D" or "Medicare Advantage (MA and MA-PD)" category
   - ❑ If the beneficiary is new to PDP/MA-PD, select the *New to Medicare* topic in "Additional Topic Details" category
2. **Special Use Field: Original PDP/MA-PD Cost**
   - ❑ Enter the Estimated Drug Cost* of the plan the beneficiary's **current plan** listed on MPF
   - ❑ If beneficiary has no current Medicare PDP/MA-PD plan, then enter the drug costs displayed for Original Medicare on MPF
3. **New PDP/MA-PD Cost**
   - ❑ Enter the Estimated Drug Cost* of the **new plan** the SHIP team member helped the beneficiary enroll in, as listed on the MPF
4. **Attach Cost Verification**

PII and PHI

Personally Identifiable Information (PII)	Protected Health Information (PHI)
Information which can be used to **distinguish or trace an individual's identity**, such as their name, social security number, biometric records, etc. alone or when combined with other personal or identifying information which is linked or linkable to a specific individual, such as a data and place of birth, mother's maiden name, etc."[1]	Individually **identifiable health information** that is explicitly linked to a particular individual, and health information which can allow individual identification.[2] PHI includes many common identifiers (e.g., name, address, birth date, Social Security Number) when they can be associated with the health information listed above.

Tips for Handling Sensitive Data

- Use private spaces to ensure sensitive data is safeguarded
- Store all hard copies securely in locked filing cabinets or offices with a maintained filing system
- Password protect electronic formatted documents and equipment (phones, computers, USB drives)
- Do not leave files of documents with PII on desks, printers, personal computers, phones or other devices
- Send and forward only encrypted emails with PII
- Clear web browser history
- Disable auto-fill on web browser

Q&A on PDP/MA-PD Cost Data

1) **Should I report when a SHIP helps enroll a client in a new PDP/MA-PD plan, but the client doesn't experience savings, or pays more for the new PDP/MA-PD plan?**
   - **Answer:** Yes, report the data. There are a number of reasons a beneficiary might select a higher cost plan. ACL collects cost change data on all PDP/MA-PD enrollments, including those that did not results in savings for the beneficiary.

2) **What should be reported if I provide a beneficiary with Part D savings by assisting the beneficiary in switching to another pharmacy, but the beneficiary does not change plans?**
   - **Answer:** Do not report any data in the Original or New PDP/MA-PD cost fields. ACL collects cost change data only on instances where the SHIP assisted the beneficiary in enrollment, and no enrollment took place in this instance.

Q&A on PDP/MA-PD Cost Data(Cont.)

3) **What should be reported if I provide a beneficiary with Extra Help/LIS application assistance?**
   - **Answer:** Do not report any data in the Original or New PDP/MA-PD cost fields because no PDP/MA-PD enrollment occurred. This assistance is tracked and reported as part of MIPPA Performance Measures.

4) **What should I report if I help a beneficiary enroll in a plan but the beneficiary doesn't take any medication?**
   - **Answer:** Enter the annual premium cost only for the Current/Original plan and the new plan. For example, the WellCare value Script (PDP) monthly premium is $18.70 a month x 12 months = $224.40 annual cost.

5) **Will we be able to pull a report showing the amount of money our SHIP Counselors saved beneficiaries during open enrollment?**
   - **Answer:** ACL is developing Enrollment Outcomes and Quality Assurance Reports that will be available this year.

Resources

- Enroll Outcomes PDP MA-PD Job Aid - 9/20/20 *Includes a section FAQs about Reporting PDP/MA-PD Cost Data where it provides common questions an answers

- SHIP TA STARS Resource: PDP and MA-PD Cost Reporting Job Aid - 9/20/20

Thank You!

This project was supported, in part by grant number 90SAPG0073-01-00*, from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201.*