COMMONWEALTH OF MASSACHUSETTS
Office of Consumer Affairs and Business Regulation
DIVISION OF INSURANCE

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JULIANNE M. BOWLER
COMMISSIONER OF INSURANCE

Bulletin 2005-11

To: **Commercial Health Insurers, Blue Cross and Blue Shield of Massachusetts, Inc. and Health Maintenance Organizations**

From: **Commissioner Julianne M. Bowler** Julianne Bowler

Re: **Addendum to "2005 Guide to Health Insurance for People with Medicare"**

Date: **November 15, 2005**

Attached please find a copy of the Massachusetts Addendum to the "2005 Guide to Health Insurance for People with Medicare." The Massachusetts Addendum must be provided along with the "2005 Guide to Health Insurance for People with Medicare" to those people eligible for Medicare pursuant to Massachusetts regulations 211 CMR 42.09(4) and 211 CMR 71.13(2)(d)4. Please note that the Massachusetts Addendum is in 14-point type.

Questions regarding this bulletin may be directed to Nancy Schwartz, Director, Bureau of Managed Care at the Division of Insurance at (617) 521-7347.

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The Commonwealth of Massachusetts
Executive Office of Elder Affairs
One Ashburton Place, Boston, MA 02108

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Governor

Kerry Healey
Lieutenant Governor

Jennifer Davis Carey
Secretary

Phone (617) 727-7750
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TTY/TTD 1-800-872-0166

Massachusetts Bulletin for People with Medicare

Medicare beneficiaries and others have options for receiving their health care. Major health care options include:

- The Original Medicare Plan (Parts A and B)
- Medicare Supplement Insurance (Medigap)
- Medicare Advantage Plans
- Medicare Prescription Drug Coverage *(program starting January 1, 2006)*
- Employee Group Health Plans (employer, union, retiree or other group plan)
- MassHealth (Medicaid) (healthcare for people with limited income and resources
- Senior Care Options (SCO) (an option for people on MassHealth)
- PACE (Program of All-inclusive Care for the Elderly)
- Free Care (Uncompensated Care Pool) for people with low income
- Veterans' health benefits, Tricare and other programs

This Bulletin provides basic information about Medicare Health Plans, Medicare Prescription Drug Coverage, Medigap (Medicare Supplement Insurance), MassHealth (Medicaid) and other health care programs for people with Medicare.

If you have employer, union, retiree, or other group health coverage, contact the benefits administrator of your health plan for information about coverage and other questions. If you are a veteran, contact your local Veterans Agent for information about veterans health care services.

SHINE Counseling Program of the Executive Office of Elder Affairs
November, 2005

Included in this Bulletin are:

- Charts showing Medicare A and B benefits, copayments and deductibles
- Charts detailing standard Massachusetts Medigap policies, carriers, and premiums
- Charts listing Medicare HMOs with premiums and co-payment amounts

Medicare

Medicare is a health insurance program for:

- people age 65 or older,
- people under age 65 with certain disabilities, and
- people of all ages with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant)

Medicare has three parts:

Part A (Hospital Insurance) helps pay for hospital care, skilled nursing care, home health care, hospice care and other services.

Part B (Medical Insurance) helps pay for outpatient medical services such as doctors' services, x-rays and tests, physical, occupational and speech therapy, outpatient hospital care, ambulance service, medical supplies and equipment and other medical services.

Medicare Prescription Drug Coverage Beginning January 1st 2006, Medicare prescription drug coverage helps pay for prescription drug costs.

Medicare Options

People with Medicare can select health care coverage under the Original Medicare Plan or one of the Medicare Advantage Plans. Both options cover all Part A and Part B benefits. People with Medicare can get Medicare prescription drug coverage under Original Medicare or a Medicare Advantage Plan. Medicare prescription drug coverage starts January 1st 2006.

Original Medicare

The Original Medicare Plan is a fee-for-service plan managed by the Federal Government. You can go to any doctor, hospital or other provider that accepts Medicare. The Original Medicare Plan does not pay for all the costs for Medicare covered services.

Medicare Advantage Plans (HMOs, PPOs etc)

Medicare Advantage is insurance provided by private companies that contract with Medicare to provide Medicare Part A and Part B services. Medicare Advantage Plan

members generally get all of their Medicare covered health care through the plan's network. Most plans provide limited drug coverage through December 31, 2005. Many plans are offering Medicare prescription drug coverage to start January 1, 2006. Some plans provide additional services not covered by Medicare such as routine physical examinations, health screenings and vision services etc. Medicare Advantage Plans include Medicare Health Maintenance Organizations (HMOs), Medicare Preferred Provider Organization Plans (PPOs) and other Medicare plans.

Medicare Prescription Drug Coverage (coverage starts January 1, 2006)
Medicare prescription drug coverage is insurance provided by private companies that have been approved by Medicare. Starting January 1, 2006, new Medicare prescription drug coverage will be available to everyone with Medicare. The drug coverage will help pay for prescription drugs costs. Most beneficiaries will pay a monthly premium, an annual deductible and copayments. People with limited income and resources may qualify for help paying for their monthly premium and other costs.

Who is eligible to enroll in Medicare Prescription Drug Coverage?
You are eligible for Medicare prescription drug coverage if you are eligible for Medicare Part A or enrolled in Medicare Part B.

Do I have to join a Medicare prescription drug plan?
No. Joining a Medicare prescription drug plan is your choice.

However, *if you don't join a Medicare prescription drug plan by May 15, 2006, and you do not currently have drug coverage that is at least as good as standard Medicare prescription drug coverage, you will have to wait until November 15, 2006 to join. When you do join, your premium cost will go up at least* ***1% per month*** *for every month that you wait to join.* ***You must pay this penalty as long as you have Medicare prescription drug coverage.***

When can I join?
If you are already Medicare eligible, you can join a Medicare prescription drug plan between **November 15, 2005 and May 15, 2006.** If you join by December 31, 2005, Medicare prescription drug coverage will begin January 1st 2006. If you join after that, coverage will be effective the first day of the month after the month you join. The next open enrollment period is November 15th 2006 to December 31, 2006 for coverage to take effect January 1, 2007.

How much will a Medicare prescription drug plan cost?
You will pay:

- a monthly premium (generally around $30 in 2006)
- a yearly deductible (up to $250 in 2006)
- a copayment for your prescriptions

Costs will vary depending on which drug plan you choose. If you have limited income and resources and qualify for extra help, you may not have to pay a premium or deductibles.

Where can you get help or more information if you need it?
For detailed information or help choosing a Medicare health plan and prescription drug coverage that works for you:

- Read the "Medicare & You 2006" official government handbook which is mailed to all Medicare beneficiaries during October 2005.
- Look at **www.medicare.gov**, Medicare's official consumer website. You can find the most up-to-date information, answers to your questions and order Medicare publications anytime.
- Call **1-800-MEDICARE (1-800-633-4227).** TTY users call **1-877-486-2048.** This toll-free helpline is available 24 hours a day, seven days a week to answer your questions.
- Call **MassMedline** at **1-866-633-1617** for information and questions about medications. (TTY users should ask the operator to call the MassMedline toll-free number) or visit their website at **www.massmedline.com** . MassMedline can assist you choosing the Medicare prescription drug plan that meets your needs. Pharmacists on staff can answer questions about medicines you take.
- Call **SHINE** (Serving the Health Information Needs of Elders) at **1-800-AGE-INFO (1-800-243-4636)** (TTY users call **1-800-872-1066**) for health insurance information, counseling and help choosing a Medicare health plan, buying Medigap insurance and information regarding Medicare rights and protections.

Medicare Supplement Insurance ("Medigap")
A Medigap policy is a health insurance policy sold by private insurance companies to individuals enrolled in the Original Medicare Plan to cover the "gaps" in the Original Medicare Plan such as, coinsurance, copayments and deductibles. Some Medigap policies also cover benefits that the Original Medicare Plan does not cover, like emergency health care while traveling outside the United States. The front of the Medigap policy must clearly define it as "Medicare Supplement Insurance." Individual Medigap insurance coverage and text is standard for all insurers.

The three standard Medigap policies sold in Massachusetts are listed below. See attached Medicare Supplement charts for details.

1. Medicare Supplement Core
2. Medicare Supplement 1 (no outpatient prescription drug coverage)
3. Medicare Supplement 2 (unlimited outpatient prescription drug coverage). If you disenroll from Supplement 2, you cannot re-enroll in Supplement 2 in the future.

In compliance with Federal regulations, Medicare Supplement 2 policies covering prescription drugs cannot be sold after December 31, 2005. However existing members may remain enrolled. By remaining enrolled, existing members will continue to have prescription drug coverage.

Medigap policies are regulated by federal and state laws:

- Medigap policies are guaranteed renewable and cannot be cancelled unless the beneficiary stops paying the premium or provides false information on the application when they buy the policy.
- Medigap insurers cannot refuse to sell a policy, exclude or limit coverage, or require a waiting period before coverage starts due to existing health problems.
- Medigap plans must offer the same premium (a "community rate") to all policyholders and cannot charge a different premium based on age or health problems.
- Under the Massachusetts "Ban on Balance Billing" law licensed physicians cannot collect more than the Medicare approved charge for any Medicare service provided to a Medicare beneficiary.

Who Can Buy a Medigap Policy?

Any Massachusetts resident enrolled in Medicare Part A and Part B may buy Medigap insurance in Massachusetts except for individuals under age 65 who are eligible for Medicare solely due to End-Stage Renal Disease

You do not need to buy a Medigap policy if you are enrolled in a Medicare Advantage plan.

When Can You Buy Medigap Insurance?

You can purchase Medigap insurance during one of the following Medigap enrollment periods:

a. The **annual open enrollment period** starts February 1st and ends March 31st. Benefits for people who enroll during the annual open enrollment period begin June 1st.

b. **Special enrollment periods** may be scheduled by Medigap insurers if approved by the Massachusetts Division of Insurance.

c. A **six month open enrollment period** begins from the date a person becomes **"initially eligible"** for coverage in Massachusetts. A person becomes initially eligible on the date when they:
   - first enroll in Medicare Part B; or
   - lose employer sponsored health coverage for active employees due to:
     - termination of employment; or
     - employer bankruptcy; or
     - discontinuation of employer sponsored health coverage offered to similarly situated employees; or
   - covered by an HMO but then moved out of the HMO service area; or
   - became a resident of Massachusetts

d. A **63 day enrollment period** begins when a person:
   - has employer health insurance coverage that pays second to Medicare but the coverage was stopped or is about to be stopped, or
   - loses retiree health insurance coverage, or
   - has a Medigap policy end due to an involuntary termination, or
   - is insured by a Medigap policy or Medicare HMO and the company or its agent misrepresents the policy's terms and conditions during marketing or substantially violates a provision of its policy or contract; or
   - is enrolled in their first Medicare HMO plan and decides to disenroll (for any reason) from the plan within the first 12 months of enrollment.
   - if a person cancels a Medigap policy to join the HMO, the person cannot get a Supplement 2 policy back, but could choose a Core policy or Supplement 1 policy instead.
   - if a person selects a Medicare HMO as their first choice, that person may select any Medigap policy offered for sale in the state. To avoid a break in coverage, that person can apply for Medigap insurance up to 60 days before the actual HMO disenrollment date.

e. A **five-month open enrollment period** occurs if a person is enrolled in a Medicare HMO or Elder Service Plan that announces it will stop doing business in the

person's area as of December 31st. If this happens, the Medigap open enrollment period would begin upon the receipt of an October 2nd notification letter from the plan and end March 4 of the following year.

Help for People with Limited Income and Resources

MassHealth (Medicaid)
www.state.ma.us/masshealth

Customer Service Center 1-800-841-2900
(TTY: 1-800-497-4648)

MassHealth provides a wide range of health care services that pay for all or part of health care costs for elders with limited income and resources and adults with disabilities through its Office of Long Term Care. MassHealth is administered by the Office of Medicaid in the Executive Office of Health and Human Services. MassHealth manages insurance programs for elders, children, low-income parents, disabled adults and pregnant women.

MassHealth Standard (Medicaid) is the most complete coverage offered by MassHealth. It pays for a wide range of health-care benefits and is the only coverage that pays for long-term care services. You may enroll in Standard MassHealth if you are:

- single and your income is not greater than 100%* of the Federal Poverty Level (FPL) and your assets do not exceed $2,000.
- married and your combined marital income is not greater than 100%* of the FPL and your combined assets do not exceed $3,000.

MassHealth Standard for people aged 65 or older who need personal care attendant (PCA) services

You may enroll into Standard MassHealth if you are 65 or older and need PCA services if you are:

- single and your income is not greater than 133%* of the FPL and your assets do not exceed $2,000*.
- married and your combined marital income is not greater than 133%* of the FPL and your combined assets do not exceed $3,000.*

Medicare Savings Programs are federal programs that help pay for Medicare premiums and other medical costs such as deductibles and copayments for qualified residents of Massachusetts with limited income and resources. Medicare Savings programs in Massachusetts are administered by MassHealth and include the following:

- **MassHealth Senior Buy-In (Qualified Medicare Beneficiary Program - QMB)**

MassHealth Senior Buy-In pays Medicare Part A and Part B premiums, and Medicare deductibles and copayments. You may be eligible if you are:

- **single** and your income does not exceed **100%** FPL* and your assets do not exceed **$4,000.**
- **married** and your combined income does not exceed **100%** FPL* and your combined assets do not exceed **$6,000.**

- **MassHealth Buy-In (Specified Low-Income Medicare Beneficiary Program (SLMB) & Qualifying Individual (QI) Programs)**
  Both SLMB and QI programs pay the monthly Medicare Part B premium.
  You may be eligible for SLMB if you are:
  - **single** and your income is less than **120%** FPL* and your assets do not exceed **$ 4,000.**
  - **married** and your combined income is less than **120%** FPL* and your combined assets do not exceed **$6,000.**

You may be eligible for QI if your countable income including your spouse's income with whom you live is

- less than **135%** FPL* and your assets do not exceed **$4,000** if single or combined assets of **$6,000** if married.

Federal Poverty Level (FPL) guidelines are calculated each year. Contact MassHealth for details.

Call the MassHealth Customer Service Center **1-800-841-2900 (TTY: 1-800-497-4686)** or visit www.state.ma.us/masshealth for more information about MassHealth programs.

SCO (Senior Care Options) **1-888-885-0484**
www.state.ma.us/masshealth **TTY: 888-821-5225**

MassHealth Senior Care Options (SCO) is a coordinated health plan that combines Medicare and Medicaid health care services with social support services to help elders maintain their health and live in the community as long as possible. SCO is also available to most elders residing in long-term care facilities.
SCO covers all of the services covered by MassHealth. If the person also has Medicare, all Medicare services are also covered.
To be eligible for enrollment in SCO, the person must meet the following requirements:

- be aged 65 or older
- be eligible for MassHealth Standard
- live in the service area of a senior care organization
- not be diagnosed as having end-stage renal disease
- if enrolled in Medicare, must have Parts A&B

- not be subject to a six-month deductible period ("spend-down")
- not be a resident or inpatient in a chronic hospital or intermediate care facility

For more information call MassHealth Senior Care Options (SCO) at **1-888-885-0884** **(TTY: 1-888-821-5225** for people with partial or total hearing loss) or visit www.state.ma.us/masshealth

PACE (Program for All-Inclusive Care for the Elderly) **1-800-408-1253**
(also called Elder Service Plan) **TTY: 1-800-231-5698**
www.state.ma.us/masshealth

PACE helps certain frail people maintain their health and independence and live in the community while getting the health care and other services they need. PACE combines medical care, social services, and long-term care services for frail people. Services are provided by PACE-authorized health centers.

To be eligible, an individual must meet the following criteria:

- be age 55 or older,
- live in the service area of the PACE (Elder Service Plan) program
- be certified as eligible for nursing home care by MassHealth
- be able to live safely in the community

Enrollment in PACE is voluntary and a member may disenroll at any time. Persons may have to pay a monthly premium depending on MassHealth or Medicare eligibility. The PACE program model is a health-care program sponsored by the Centers for Medicare and Medicaid Services and the Commonwealth of Massachusetts Division of Medical Assistance.

The following six organizations operate PACE-Elder Service Plans in designated service areas in Massachusetts:

Elder Service Plan of the East Boston
Neighborhood Health Center
10 Grove Street
East Boston, MA 02138
617-568-4602

Harbor Health Services
Elder Service Plan
2216 Dorchester Ave.
Dorchester, MA 02124
617-296-5100

Elder Service Plan of Uphams Corner
1140 Dorchester Avenue
Dorchester, MA 02123
617-288-0970

Elder Service Plan at Fallon
277 East Mountain Street
Worcester, MA 01608
508-856-2026

Cambridge Hospital Elder Service Plan
270 Green Street
Cambridge, MA 02139
617-575-5850

Elder Service Plan of North Shore
20 School Street
Lynn, MA 01901
781-581-7565

For information about eligibility and to find out if you live in a designated service area call the MassHealth Enrollment Center at **800-408-1253 (TTY: 1-800-231-5698** for people with partial or total hearing loss).

Prescription Advantage
P.O. Box 15153
Worcester, MA 01615-0153
www.800ageinfo.com

1-800-AGE-INFO
(1-800-243-4636)
TTY: 877-610-0241

Prescription Advantage is an insurance plan created by the Commonwealth of Massachusetts and is administered by the Massachusetts Executive Office of Elder Affairs for certain Massachusetts residents age 65 and over.

Free Care (Uncompensated Care Pool)

The Uncompensated Care Pool pays hospitals and community health centers for certain services provided to low income patients.

The Massachusetts Division of Health Care Finance and Policy administers the Free Care program. For information contact your hospital or community health center or contact the Division of Health Care Finance and Policy at 1-877-910-2100.

Other Health Care Programs

Veterans' Administration (VA) Health Care System **1-800-827-1000**

The VA Health Care System provides inpatient and outpatient medical service, prescription drugs and medical supplies. Veterans may enroll at any time at any VA medical center or clinic and at any veteran's agent office in Massachusetts. For more information, call the VA Health Benefits Service Center or visit **www.va.gov/health/elig**

COBRA **Employee Benefits Security Administration (EBSA)**
1-866-444-3272

COBRA (The Consolidated Omnibus Budget Reconciliation Act of 1985) is a federal law that gives certain employees and their dependents the right to continue health coverage at group rates when coverage is lost due to specific events. COBRA applies

to employers with 20 or **more employees**. For information about COBRA contact your employee benefit administrator or call EBSA at 1-866-444-3272 or visit **www.dol.gov/ebsa**.

Mini-COBRA **Massachusetts Division of Insurance** **617-521-7777**

Mini-COBRA is a Massachusetts state law that gives certain employees and certain dependents the right to continue health coverage at group rates when coverage is lost due to specific events. **Mini-COBRA applies to Massachusetts employers with 1 to 19 employees**. Coverage and eligibility of Mini-COBRA is similar to COBRA. For detailed information about Mini-COBRA, contact your employee health plan benefit administrator or call the Massachusetts Division of Insurance at **617-521-7777** or visit **www.state.ma.us/doi**

TRICARE for Life (TFL)/Military Retiree Benefits **1-888-363-5433**

TRICARE is a health care program for active duty and retired uniformed services members and their families including National Guard members and reservists, Medicare-eligible uniformed services retirees age 65 or older, and certain family members have access to expanded medical coverage known as TRICARE for Life (TFL). To get TFL benefits you must have Medicare Part A and Part B. For more information on Medicare Prescription Drug Benefit contact Medicare at 1-800-Medicare (1-800-633-4277) or visit **www.medicare.gov**. For general TRICARE questions, call 1-888-DOD-LIFE **(1-888-363-5433)**or visit **www.TRICARE.osd.mil**.

SHINE, State Health Insurance Assistance Program, is a statewide network of volunteers trained and certified by the Massachusetts Executive Office of Elder Affairs in partnership with elder service agencies and Councils on Aging. SHINE provides free health care information, assistance and counseling to Medicare beneficiaries of all ages.

Health Care Directory

SHINE Health Insurance Counseling Program **1-800-AGE-INFO**
www.800ageinfo.com or **(1-800-243-4636)**
www.medicareoutreach.org **TTY: 1-800-872-0166**

The SHINE Program provides free health insurance information, assistance and counseling to Medicare beneficiaries of all ages. SHINE Counselors help beneficiaries compare costs and benefits of various health plans, explain the benefits of Medicare and additional insurance options, including Medigap, HMOs, MassHealth and prescription drug options.

MassHealth **Customer Service 1-800-841-2900**
www.mass.gov/masshealth **TTY: 1-800-497-4648**

MassHealth provides a wide range of health care services that pay for all or part of the health care cost for elders with limited income and resources. Contact MassHealth for information about their health care programs including MassHealth Standard and Medicare Savings Programs.

MassHealth Senior Care Options (SCO) **1-888-885-0484**
www.mass.gov/masshealth **TTY: 1-888-821-5225**

A health plan that combines Medicare and Medicaid services with social support services that helps seniors maintain their health and continue to live in their own homes.

Massachusetts Division of Insurance **Boston 617-521-7777**
www.state.ma.us/doi **Springfield 413-785-5526**

The Division of Insurance monitors insurance companies authorized to sell insurance in Massachusetts, reviews insurance contracts, forms and rates to ensure compliance with Massachusetts regulations, and investigates consumer complaints against insurance companies, brokers, agents and other licensees. The Division provides general insurance information, publications and advice on consumer rights and protections.

Protective Services **Elder Abuse Hotline** **1-800-922-2275**
Protective Services provide services to eliminate or alleviate abuse of elders. Community agencies and case workers coordinate and provide a variety of health, mental health, legal and social services. To report elder abuse, call the Elder Abuse Hotline 24-hours a day, 7 days a week.

Office of the Massachusetts Attorney General Hotline **1-888-830-6277**
www.ago.state.ma.us

The Attorney General's Hotline staff answers questions and assists with consumer complaints for all types of insurance. The Attorney General's Office mediates problems and provides educational materials.

MassPRO (Health Quality Improvement Organization) **Helpline 1-800-252-5533**
www.masspro.org

MassPRO contracts with Medicare as a Quality Improvement Organization (QIO) that oversees and improves the care given to Medicare patients. MassPro processes appeals for Medicare patients denied Medicare hospital coverage and reviews Medicare beneficiary medical quality of care complaints.

Massachusetts Medicare Advocacy Project (MAP) **1-800-323-3205**

MAP provides Medicare beneficiaries free legal advice and legal representation for appealing medical decisions made by Medicare providers in both fee-for-service Medicare and Medicare HMOs and for other insurance programs.

Medicare Helpline (24 hours a day, 7 days a week) **1-800-MEDICARE**
www.medicare.gov **(1-800-633-4227)**

MassMedLine **1-866-633-1617**
www.massmedline.com

MassMedLine provides prescription medication information and help to Massachusetts residents applying for prescription drug assistance programs. MassMedLine is staffed by pharmacy professionals who work with patient's doctors to obtain medications at the lowest price. MassMedLine provides information about drug interactions and using medications correctly. MassMedLine is a service of the Massachusetts College of Pharmacy and Sciences and the Massachusetts Executive Office of Elder Affairs.

Social Security Administration **1-800-772-1213**
www.ssa.gov

Contact Social Security to enroll in Social Security, SSI, SSDI and Medicare; or to report a change in address or income, or to replace a lost Medicare card.

2006 Medicare Part A Benefits and Gaps

(Chart outlines gaps in Medicare coverage. Refer to Medicare Handbook for complete list of Medicare benefits.)

Coverage	Beneficiary Pays	Medicare Pays
Medicare Part A		
Inpatient Hospital Care*		
Days 1-60*	$952 deductible	Balance
Days 61-90*	$238 per day	Balance
Days 91-150(*lifetime reserve days*)	$476 per day	Balance
Additional days	All costs	$0
Semi-private room and board, general nursing, and other hospital services and supplies.		
Skilled Nursing Facility Care**		
Days 1-20	$0	All costs
Days 21-100	$119 per day	Balance
Additional days	All costs	Nothing
After three-day inpatient hospital stay & admission to a Medicare approved SNF within 30 days of discharge		
Home Health Care	$0	Up to 35 hours per week
Part-time or intermittent skilled care, home health aide services, and		
Durable Medical Equipment and Supplies	20% of approved amount	80% of approved amount
Hospice Care	Small co-payments for inpatient respite and drugs	Balance
Pain relief, symptom management and support services for the terminally ill.		
Blood	For first 3 pints	All but first 3 pints per calendar year

*Each benefit period begins the day you go to the hospital and ends when you haven't received hospital or skilled care in a SNF for 60 days in a row. A new benefit period begins if you go to a hospital or SNF after a benefit period has ended. You must pay the inpatient hospital deductible for each benefit period

Part A Premiums for Voluntary Enrollee (individuals who must purchase Part A):

30-39 work quarters	$216/month in 2006
0-29 work quarters	$393/month in 2006

For more information, visit www.medicare.gov or call 1-800-MEDICARE (1-800-633-4227) TTY users call 1-877-486-2048 or refer to the "Medicare & You" handbook

SHINE Counseling Program of the Executive Office of Elder Affairs
November, 2005

2006 Medicare Part B Benefits and Gaps

(Chart outlines gaps in Medicare coverage. Refer to Medicare & You Handbook for a complete list of Medicare benefits)

Coverage	Beneficiary Pays	Medicare Pays
Medicare Part B		
Medical Expenses • Doctors' services • Inpatient and outpatient medical services and supplies • Physical and speech therapy • Diagnostic tests • Ambulance services Medicare also pays for other medically necessary services, see Medicare Handbook.	$124 deductible* then 20% ** of Medicare's approved amount after the deductible is met Limited charges above the approved amount may apply for some Part B providers.	80% of Medicare's approved amount after $124 deductible is met. Reduced to 50% for most outpatient mental health services.
Clinical Lab Tests Blood tests, urinalysis, and more.	$0 for tests if medically necessary.	Generally 100% of approved amount.
Home Health Care Part-time or intermittent skilled care, home health aide services, and	$0	Up to 35 hours per week
Durable Medical Equipment and Supplies	20% of approved amount	80% of Medicare's approved amount
Outpatient Hospital Treatment	After $124 deductible, you pay a copayment according to the service.	Medicare payment to hospital based fee schedule.
Blood	For first 3 pints, plus 20% of approved amount (after $124 is met)	80% of approved amount (after $124 deductible and starting with the 4th pint).

* Deductible is the amount you must pay before your Medicare plan begins to pay

** Coinsurance is the amount you may be required to pay after you pay any plan deductibles. A 20% coinsurance amount applies to most Part B services. A 50% coinsurance applies to most out-patient mental health services. Monthly Part B Premium is $88.50 per month for 2006.

SHINE Counseling Program of the Executive Office of Elder Affairs
November, 2005

Standard Medigap Plans
Massachusetts 2006

Comparison of Plans	Core	Supplement 1
Basic Benefits Included In All Plans:		
Hospitalization Part A Co-payments		
Days 61 - 90: $238 per day	X	X
Days 91-150: $476 per day	X	X
365 Additional Lifetime Hospital days - Paid in full	X	X
Part B Coinsurance - Coverage of coinsurance, in most cases, 20% of approved amount	X	X
Parts A and B Blood First 3 pints	X	X
Additional Benefits	**Core**	**Supplement 1**
Part A Deductible for Hospital Days 1 - 60 $952 per benefit period		X
Skilled Nursing Facility Coinsurance Days 21-100 - $119 per day		X
Part B Annual Deductible - $124		X
Foreign Travel - For Medicare-covered services needed while traveling abroad.		X
Inpatient Days in Mental Health Hospitals In addition to Medicare's coverage of 190 lifetime days and less any days previously covered by plan in same benefit period	60 days per calendar year	120 days per benefit period

Medicare Supplement Plans
Offered in Massachusetts for Coverage in 2006

Medigap Carriers Please note that rates may change in 2006	Medicare Supplement Core	Medicare Supplement 1
Blue Cross & Blue Shield of MA (Medex™) 1-800-678-2265 sales/apps 1-800-258-2226 member services 1-800-522-1254 (TDD) www.bluecrossma.com **(open enrollment: Feb-Mar; initial eligibility[1]; special open enrollment period: Sept-Dec 31, 2005 for Jan 2006)**	**$77.54** **(Proposed rate of $81.11 to be effective 3/15/06**	**138.41** **(Proposed rate of $149.19 to be effective 3/15/06)**
United HealthCare™ Insurance Company **Only for members of AARP (American Association of Retired Persons)** 1-800-523-5800 **(continuous open enrollment as of January 1, 2006[1])**	**$110.25**	**$150.50**

[1] Plan offers discounted rates to certain members joining when initially eligible.

Medicare HMO Plans
Offered in Massachusetts for Coverage in 2006

Medicare HMO Plan	No Drug	Basic Drug*	Enhanced Drug*	Service Area by County
Blue Cross Blue Shield of Massachusetts, HMO Blue 1-800-678-2265 TTY: 1-800-522-1254	Medicare HMO Blue $81	Medicare HMO Blue $108	Medicare HMO Blue $122	Franklin, Hampden, Hampshire
	Medicare HMO Blue $83	Medicare HMO Blue $110	Medicare HMO Blue $125	Barnstable, Bristol, Plymouth
	Medicare HMO Blue $92	Medicare HMO Blue $120	Medicare HMO Blue $134	Essex, Middlesex, Norfolk, Suffolk
	Medicare HMO Blue $98	Medicare HMO Blue $126	Medicare HMO Blue $140	Worcester

*Contact health plan for details on "Basic Drug" and "Enhanced Drug"

Medicare HMO Plan	No Drug	Basic Drug*	Enhanced Drug*	Service Area by County
Fallon Community Health Plan, Inc. **1-800-868-5200** **TTY: 1-877-608-7677**	Fallon Senior Plan Saver $0	Fallon Senior Plan Saver $30	Fallon Senior Plan Saver $47	Worcester, portions of Franklin, Hampden, Hampshire, Middlesex and Norfolk
	Fallon Senior Plan Standard $40	Fallon Senior Plan Standard $71	Fallon Senior Plan Standard $87	Worcester, portions of Franklin, Hampden, Hampshire, Middlesex and Norfolk
	Fallon Senior Plan Plus $70	Fallon Senior Plan Plus $101	Fallon Senior Plan Plus $117	Worcester, portions of Franklin, Hampden, Hampshire, Middlesex and Norfolk
Harvard Pilgrim Health Care, Inc. **1-800-779-7723** **TTY: 1-888-259-8276**	First Seniority $96	First Seniority $121		Essex, Middlesex (except Ashby), Norfolk, Suffolk

*Contact health plan for details on "Basic Drug" and "Enhanced Drug"

Medicare HMO Plan	No Drug	Basic Drug*	Enhanced Drug*	Service Area by County
Tufts Associated Health Maintenance Organization, Inc. 1-800-246-2400 TTY: 1-888-899-8977	Medicare Preferred HMO Value $32	Medicare Preferred HMO Value Rx $52	Medicare Preferred HMO Value Rx Plus $67	Barnstable, Norfolk, Plymouth
	Medicare Preferred HMO Value $58	Medicare Preferred HMO Value Rx $78	Medicare Preferred HMO Value Rx Plus $93	Bristol
	Medicare Preferred HMO Value $78	Medicare Preferred HMO Value Rx $98	Medicare Preferred HMO Value Rx Plus $113	Essex
	Medicare Preferred HMO Value $37	Medicare Preferred HMO Value Rx $57	Medicare Preferred HMO Value Rx Plus $72	Hampden
	Medicare Preferred HMO Value $49	Medicare Preferred HMO Value Rx $69	Medicare Preferred HMO Value Rx Plus $84	Middlesex, Suffolk
	Medicare Preferred HMO Value $47	Medicare Preferred HMO Value Rx $67	Medicare Preferred HMO Value Rx Plus $82	Worcester

*Contact health plan for details on "Basic Drug" and "Enhanced Drug"

Medicare HMO Plan	No Drug	Basic Drug*	Enhanced Drug*	Service Area by County
Tufts Associated Health Maintenance Organization, Inc. 1-800-246-2400 TTY: 1-888-899-8977	Medicare Preferred HMO Prime $50	Medicare Preferred HMO Prime Rx $70	Medicare Preferred HMO Prime Rx Plus $85	Barnstable, Norfolk, Plymouth
	Medicare Preferred HMO Prime $96	Medicare Preferred HMO Prime Rx $116	Medicare Preferred HMO Prime Rx Plus $131	Bristol, Essex
	Medicare Preferred HMO Prime $75	Medicare Preferred HMO Prime Rx $95	Medicare Preferred HMO Prime Rx Plus $110	Hampden
	Medicare Preferred HMO Prime $87	Medicare Preferred HMO Prime Rx $107	Medicare Preferred HMO Prime Rx Plus $122	Middlesex, Suffolk
	Medicare Preferred HMO Prime $85	Medicare Preferred HMO Prime Rx $105	Medicare Preferred HMO Prime Rx Plus $120	Worcester

*Contact health plan for details on "Basic Drug" and "Enhanced Drug"

Medicare PPO Plans
Offered in Massachusetts for Coverage in 2006

Medicare PPO Plan	No Drug	Basic Drug*	Enhanced Drug*	Service Area by County
Blue Cross Blue Shield of Massachusetts HMO Blue 1-800-678-2265 TTY: 1-800-522-1254	Medicare PPO Blue $96	Medicare PPO Blue $123	Medicare PPO Blue $137	Franklin, Hampden, Hampshire
	Medicare PPO Blue $101	Medicare PPO Blue $128	Medicare PPO Blue $143	Barnstable, Bristol, Plymouth
	Medicare PPO Blue $111	Medicare PPO Blue $138	Medicare PPO Blue $153	Essex, Middlesex, Norfolk, Suffolk
	Medicare PPO Blue $113	Medicare PPO Blue $141	Medicare PPO Blue $155	Worcester
Fallon Community Health Plan, Inc. 1-800-868-5200 TTY: 1-877-608-7677	Fallon Senior Plan Preferred $135	Fallon Senior Plan Preferred $166	Fallon Senior Plan Preferred $182	Worcester, portions of Franklin, Hampden, Hampshire, Middlesex and Norfolk

*Contact health plan for details on "Basic Drug" and "Enhanced Drug"

Medicare PPO Plan	No Drug	Basic Drug*	Enhanced Drug*	Service Area by County
Tufts Associated Health Maintenance Organization, Inc. 1-800-246-2400 TTY: 1-888-899-8977	Medicare Preferred PPO $91	Medicare Preferred PPO Rx $111	Medicare Preferred PPO Rx Plus $126	Barnstable, Bristol, Middlesex, Worcester
	Medicare Preferred PPO $101	Medicare Preferred PPO Rx $121	Medicare Preferred PPO Rx Plus $136	Essex, Norfolk, Plymouth, Suffolk
	Medicare Preferred PPO $81	Medicare Preferred PPO Rx $101	Medicare Preferred PPO Rx Plus $116	Hampden

*Contact health plan for details on "Basic Drug" and "Enhanced Drug"

Medicare Special Needs Plans Offered in Massachusetts for Coverage in 2006

Company	Plans	Customer Service Phone Number	Service Area by County
Senior Whole Health 58 Charles Street, 2nd Floor Cambridge, MA 02141	Senior Whole Health Dual Eligible	1-888-566-3526 TTY: 1-888-749-6455	Bristol, Essex, Middlesex, Norfolk, Suffolk
Commonwealth Care Alliance 30 Winter Street, 7th Floor Boston, MA 02108	Senior Care Options Program Dual Eligible	1-866-610-2273 TTY: 1-866-322-7357	Essex, Hampden, Middlesex, Norfolk, Plymouth, Suffolk
	Commonwealth Care Connection Dual Eligible	1-866-610-2273 TTY: 1-866-322-7357	Essex, Hampden, Middlesex, Norfolk, Plymouth, Suffolk
United Health Group 275 Grove Street, Suite 3-120 Auburndale, MA 02466	Evercare Mass SCO Dual Eligible	1-800-393-0939 TTY: 1-888-685-8480	Bristol, Essex, Hampden, Middlesex, Norfolk, Plymouth, Suffolk, Worcester
	Evercare Plan IP Institutional	1-800-393-0939 TTY: 1-888-685-8480	Bristol, Essex, Hampden, Middlesex, Norfolk, Plymouth, Suffolk, Worcester
	Evercare Plan DP Dual Eligible	1-800-393-0939 TTY: 1-888-685-8480	Essex, Hampden, Middlesex, Norfolk, Plymouth, Suffolk, Worcester
Fallon Community Health Plan One Chestnut Place, 10 Chestnut Street Worcester, MA 01608	Fallon Senior Plan Value Dual Eligible	1-888-846-5997 TTY : 1-877-608-7677	Worcester, portions of Franklin, Hampden, Hampshire, Middlesex and Norfolk

Call MassHealth at 1-888-885-0484 for eligibility and enrollment in these "Special Needs" plans

SHINE Counseling Program of the Executive Office of Elder Affairs
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