



*The Commonwealth of Massachusetts*  
*Executive Office of Elder Affairs*  
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## **Massachusetts Bulletin for People with Medicare**

### **Health Insurance Options for People with Medicare**

- Original Medicare(Part A and Part B)
- Medicare Supplement Insurance (Medigap)
- Medicare Advantage Plans (Medicare Part C)
- Medicare Prescription Drug Coverage (Medicare Part D)
- Employer, Union, Retiree, other group health insurance coverage
- COBRA
- Veterans Health Benefits
- Military Benefits(TRICARE)
- Indian Health Services

### **Programs for People with Limited Income and Resources**

- Extra Help Paying for Medicare Prescription Drug Coverage (Part D)
- Medicare Savings Programs (help with Medicare costs)
- Prescription Advantage (prescription drug insurance assistance program for Massachusetts residents)
- MassHealth (Medicaid)

This Bulletin provides basic health insurance information for people eligible for Medicare. Contact your plan benefits administrator for information about employer, union, retiree, or other group health coverage. Contact your local Veterans Service Officer for Veterans and TRICARE health insurance information. Contact the Indian Health Services for health information for American Indians and Alaska Natives.

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LOCAL HELP FOR PEOPLE WITH MEDICARE



## Medicare

**Medicare** is a Federal Government health insurance program administered by the Centers for Medicare and Medicaid Services (CMS) for people:

- age 65 or older
- under age 65 with certain disabilities

Medicare has **four** parts:

- **Part A (Medicare Hospital Insurance)**  
Helps pay for inpatient care in hospitals, skilled nursing facilities, hospice, home health care and other services.
- **Part B (Medicare Medical Insurance)**  
Helps pay for outpatient medical services including doctor visits, medical equipment, home health care, outpatient care, and some preventive services.
- **Part C (Medicare Advantage Plan)**  
Medicare Advantage Plans include Medicare Part A (Hospital Insurance) and Part B (Medical Insurance).  
Some Medicare Advantage Plans may offer Medicare Part D, prescription drug coverage at additional charge and other services not covered by Medicare. Medicare Advantage Plans (like HMOs, PPOs) are sold by private health insurance companies approved by Medicare.
- **Part D (Medicare Prescription Drug Coverage)**  
Helps pay for outpatient prescription drugs. Medicare prescription drug plans are sold by private insurance companies approved by Medicare.

**There are (2) ways to get Medicare coverage:**

- (1) Original Medicare** is fee-for-service coverage administered directly by Medicare. Original Medicare covers Medicare **Part A (Hospital)** and **Part B (Medical)** services.

Under Original Medicare, you have the choice of doctors, hospitals and other providers that accept Medicare.

You may purchase optional **Medicare Supplement (Medigap)** insurance from a private company or have employer or other health insurance to help pay for deductibles and coinsurance in Original Medicare.

You may decide to purchase a **Medicare Prescription Drug plan (Part D)**

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to help pay for outpatient prescription drugs.

**(2) Medicare Advantage Plan** (like an HMO or PPO)

Medicare Advantage Plan/s (MAP) cover Medicare **Part A and Part B** Services. MAPs are sold by private companies approved by Medicare and usually charge a monthly premium.

Some plans offer additional benefits not covered by Medicare.

Most plans require use of network doctors, hospitals and other providers.

Some MAPs offer Medicare prescription drug coverage (Part D) at additional cost.

You must be enrolled in Medicare A and B, pay plan premiums, deductibles, copays and coinsurance.

(Medicare Supplement Insurance cannot be sold to MAP enrollees)

**Medicare Advantage Plans sold in Massachusetts**

- **Health Maintenance Organizations (HMO)**  
Must be a resident of the plan's service area and use provider network
- **Preferred Provider Organization (PPO)**  
Must be a resident of the plan's service area  
May use out-of-network Medicare providers at higher premium
- **Point-of Service (HMO/POS)**  
Must be a resident of the plan's service area.  
May use of out-of-network Medicare providers at higher premium
- **Private Fee-for-Service (PFFS)**  
May use any Medicare provider that agrees to treat patient.  
The Plan determines provider and patient payment for the services.
- **Special Needs Plan (SNP)**  
For people with Medicare and Medicaid or special conditions

**Medicare Prescription Drug Coverage (Part D)**

Medicare prescription drug coverage (Part D) helps pay for prescription drugs. Medicare prescription drug plans are sold by private companies approved by Medicare. Each plan can vary in cost and specific drugs covered.

**Medicare Prescription Drug Plans (PDPs)** are stand-alone plans for enrollees in **Original Medicare**.

Most **Medicare Advantage Plans** offer optional Medicare prescription drug coverage.

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## Medicare Supplement Insurance (Medigap)

Medicare Supplement Insurance (also called Medigap Insurance) is sold by private insurance companies to help pay health care costs that Original Medicare does not cover such as deductibles and coinsurance.

Some Medigap insurers may include coverage for services that are not covered by Original Medicare.

Two standard Medigap policies are offered to Massachusetts residents:  
**Medicare Supplement Core** and **Medicare Supplement 1**

Medicare Supplement Insurance (Medigap) for Massachusetts residents is regulated by federal and state laws including the following:

- Medigap policies must be clearly identified as **“Medicare Supplement Insurance”**
- Policies and text are standard for all insurers, Basic benefits are the same, some may offer additional benefits
- Medigap insurance is guaranteed renewable and cannot be cancelled unless the beneficiary stops paying the premium or provides false information on the application.
- 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 insurers must offer the same premium to all policyholder and cannot charge a different premium based on age or health.

### Medicare Select Plan

- Medicare Select Plans are Medicare supplement plans that require the use of a provider network

The Massachusetts Division of Insurance monitors insurance companies authorized to sell insurance in Massachusetts, For information contact,

**Massachusetts Division of Insurance**  
**617-521-7794 (Boston)      [www.state.ma.us/doi](http://www.state.ma.us/doi)**

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## **Programs for People with Limited Income and Resources**

### **Extra Help (LIS) for Medicare Prescription Drug Coverage (Part D)**

also known as the Limited Income Subsidy (LIS) is a federal program that helps Medicare beneficiaries with limited income and assets pay some of the costs for Medicare prescription drug coverage (Part D). For more information or to enroll in Extra Help, contact **Social Security** at 1-800-772-1213 or visit [www.socialsecurity.gov](http://www.socialsecurity.gov)

**Medicare Savings Program (MassHealth Buy-In)** are federal programs that help pay Medicare premiums and Part A and Part B deductibles and coinsurance for Massachusetts residents with limited income and assets and not receiving other MassHealth benefits.

For more information about Medicare Savings Programs contact

**MassHealth Customer Service**

**1-800-841-2900**

**(TTY: 1-800-497-4648 for people with partial or total hearing loss)**

### **Prescription Advantage/State Pharmacy Assistance Program (SPAP)**

Is a state program that help people with limited income and/or medical condition and age pay for prescription drugs.

Prescription Advantage is funded by state legislation and is administered by the Massachusetts Executive Office of Elder Affairs.

For information about eligibility and enrollment contact

**Prescription Advantage Customer Service**

**1-800-AGE-INFO (1-800-243-4636) press 2**

**(TTY: 1-800-610-0241 for people with partial or total hearing loss)**

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## MassHealth

MassHealth provides a wide range of medical services and other benefits. These programs are authorized by state and federal laws and help pay medical costs for people with **limited income and resources** and meet other eligibility requirements

- **MassHealth Standard** provides a full range of health care benefits
- **MassHealth CommonHealth** for people with disabilities with whose income is too high to be eligible for MassHealth Standard
- **MassHealth Frail Elder Waiver Program** provides coordinated community based services to frail elders living in the community
- **MassHealth Personal Care Attendant Services(PCA)** helps people with long-term disabilities live independently at home
- **Program for All-inclusive Care for the Elderly (PACE)**  
PACE providers deliver needed medical and support services to people living in the community
- **MassHealth Plans for Dual Eligible (MassHealth and Medicare)**

**Senior Care Options (SCO)** is a coordinated health plan that combines Medicare and Medicaid health care with long term care supports for consumers 65 and older

**One Care (Integrated Care Organization or ICO)** is a coordinated care demonstration project in MA. that combines Medicare and Medicaid services with long term care supports for consumers 21-64 years old with disabilities. Enroll through MassHealth

- **MassHealth Long-Term Care(LTC)** covers LTC costs for individuals living in LTC facilities

For information or questions about eligibility and enrollment

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**MassHealth Customer Service 1-800-841-2900**  
**TTY: 1-800-497-4648** (for people with partial or total hearing loss)  
or visit **[www.mass.gov/masshealth](http://www.mass.gov/masshealth)**

## **Helpful Numbers**

### **Massachusetts Executive Office of Elder Affairs**

To directly connect with elder services in your area call press or say:  
**1-800-AGE-INFO (1-800-243-4636)**

- to connect to your local elder service agency or caregiver program 1
- to connect to Prescription Advantage-state prescription drug program 2
- to connect to your regional SHINE Program 3
- to report elder abuse, neglect or financial exploitation 4
- all other matters 5

### **MassHealth**

**1-800-841-2900**

**[www.mass.gov/masshealth](http://www.mass.gov/masshealth)**

**TTY: 800-497-4648**

MassHealth provides a wide range of health care services that pay for all or part of the health care cost for people with limited income and resources. Call MassHealth for One Care enrollment

### **MassHealth Senior Care Options (SCO)**

**1-888-885-0484**

**[www.mass.gov/masshealth](http://www.mass.gov/masshealth)**

**TTY: 1-888-821-5225**

A health plan that combines Medicare and Medicaid services with home services

### **Massachusetts Division of Insurance**

**Boston 617-521-7794**

**[www.state.ma.us/doi](http://www.state.ma.us/doi)**

Regulates insurance companies authorized to sell insurance in Massachusetts

### **Elder Protective Services**

**Elder Abuse Hotline (24 hour/7 days)**

**1-800-922-2275**

A statewide program is administered by the Executive Office of Elder Affairs. Protective Service Agencies investigate reports of elder abuse and provide protective services to abused elders.

### **Attorney General of Massachusetts**

**Elder Hotline 1-888-243-5337**

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[www.ago.state.ma.us](http://www.ago.state.ma.us)

The Attorney General of Massachusetts is the state's chief law enforcement officer  
The Hotline provides information about elder-related issues and programs.

**Massachusetts Medicare Advocacy Project (MAP)**

**1-800-323-3205**

Provides Medicare beneficiaries free legal advice and  
legal representation for appealing medical decisions

**Massachusetts College of Pharmacy and Health Services  
Pharmacy Outreach Program**

**1-866-633-1617**

[www.massmedline.com](http://www.massmedline.com)

Provides free prescription drug information and referrals. The Pharmacy Outreach  
Program is a public service of the MCPHS and EOEA

**Social Security Administration**

**1-800-772-1213**

[www.ssa.gov](http://www.ssa.gov)

Contact SSA to enroll in Medicare and for information and issues about  
Social Security and other related programs

**Massachusetts Health Connector**

**1-877-623-6765**

[www.MAhealthconnector.org](http://www.MAhealthconnector.org)

Health insurance, assistance and on-line application for people without insurance  
or small businesses; dental plan list for anyone

**SHINE (Serving Health Insurance Needs of Everyone)**

**1-800-243-4636**

[www.800ageinfo.com](http://www.800ageinfo.com)

**SHINE**, a State Health Insurance Assistance Program (SHIP), provides  
information, counseling and assistance to **Medicare beneficiaries** and their families  
regarding Medicare and other health insurance issues

SHINE Health Insurance Counselors are trained and certified by the Massachusetts  
Massachusetts Executive Office of Elder Affairs( EOEA). SHINE is administered by  
EOEA in partnership with elder service agencies, councils on aging, independent  
living centers and community based programs.

SHINE is partially funded by the Administration on Community Living.

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**Standard Medigap Plans  
Available in Massachusetts  
in 2015**

| Comparison of Plans                                                                                                                                                          | Core                      | Supplement 1                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-----------------------------|
| <b>Basic Benefits Included In All Plans:</b>                                                                                                                                 |                           |                             |
| <b>Hospitalization Part A Co-payments</b>                                                                                                                                    |                           |                             |
| Days 61 - 90: \$315 per day                                                                                                                                                  | X                         | X                           |
| Days 91-150: \$630 per day                                                                                                                                                   | X                         | X                           |
| 365 Additional Lifetime Hospital days - Paid in full                                                                                                                         | X                         | X                           |
| <b>Part B Coinsurance -</b>                                                                                                                                                  |                           |                             |
| Coverage of coinsurance, in most cases, 20% of approved amount                                                                                                               | X                         | X                           |
| <b>Parts A and B Blood</b> First 3 pints                                                                                                                                     | X                         | X                           |
| <b>Additional Benefits</b>                                                                                                                                                   | <b>Core</b>               | <b>Supplement 1</b>         |
| <b>Part A Deductible for Hospital Days 1 - 60</b>                                                                                                                            |                           | X                           |
| \$1260 per benefit period                                                                                                                                                    |                           |                             |
| <b>Skilled Nursing Facility Coinsurance</b>                                                                                                                                  |                           | X                           |
| Days 21-100 - \$157.50 per day                                                                                                                                               |                           |                             |
| <b>Part B Annual Deductible - \$147</b>                                                                                                                                      |                           | X                           |
| <b>Foreign Travel</b> - For Medicare-covered services needed while traveling abroad.                                                                                         |                           | X                           |
| <b>Inpatient Days in Mental Health Hospitals</b> 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  
in 2015**

| <b>Medigap Carriers</b><br>Please note that rates may change<br>in 2015                                                                                                                                                                                          | <b>Medicare<br/>Supplement Core</b> | <b>Medicare<br/>Supplement 1</b> |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|----------------------------------|
| <b>Blue Cross &amp; Blue Shield of MA<br/>(Medex™)</b><br>1-800-678-2265 sales/apps<br>1-800-258-2226 member services<br>1-800-522-1254 (TDD)<br><a href="http://www.bluecrossma.com">www.bluecrossma.com</a><br>(continuous open enrollment)                    | <b>\$95.02</b>                      | <b>\$176.63</b>                  |
| Optional Preventive Care Benefits<br>Rider                                                                                                                                                                                                                       | <b>\$7.67</b>                       | <b>\$7.67</b>                    |
| <b>Fallon Health &amp; Life Assurance<br/>Company</b><br>1-866-330-6380 sales/apps<br>1-800-868-5200 member services<br>1-877-608-7677 (TDD)<br><a href="http://www.fchp.org/medicare-choices">www.fchp.org/medicare-choices</a><br>(continuous open enrollment) | <b>\$108.50</b>                     | <b>\$197.00</b>                  |
| <b>HNE Insurance Company</b><br>1-877-443-3314<br>1-800-439-2370 (TDD/TTY)<br><a href="http://www.hne.com">www.hne.com</a><br>(continuous open enrollment)                                                                                                       | <b>\$97.00</b>                      | <b>\$189.00</b>                  |
| <b>HPHC Insurance Company, Inc.</b><br>1-800-782-0334 sales/apps<br>1-877-907-4742 member services<br>1-888-259-8276 (TDD)<br><a href="http://www.harvardpilgrim.org">www.harvardpilgrim.org</a><br>(continuous open enrollment)                                 | <b>\$105.00</b>                     | <b>\$199.00</b>                  |

**Medicare Supplement Plans  
Offered in Massachusetts  
in 2015**

| <b>Medigap Carriers</b><br>Please note that rates may change<br>in 2015                                                                                                                                                                                                                                         | <b>Medicare<br/>Supplement Core</b>                                                    | <b>Medicare<br/>Supplement 1</b>                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| <b>Humana Insurance Company</b><br>1-800-872-7294 sales/apps<br>1-800-866-0581 member services<br>1-800-833-3301 (TDD)<br><a href="http://www.humana-medicare.com">www.humana-medicare.com</a><br>(continuous open enrollment)                                                                                  | <b>\$157.24</b><br>(Rate last changed June 1,<br>2014 and may change in<br>the future) | <b>\$243.60</b><br>(Rate last changed June 1,<br>2014 and may change in the<br>future) |
| <b>Humana Insurance Company</b><br>HEALTHY LIVING (including dental<br>and vision benefits)<br>1-800-872-7294 sales/applications<br>1-800-866-0581 member services<br>1-800-833-3301 (TDD)<br><a href="http://www.humana-medicare.com">www.humana-medicare.com</a><br>(continuous open enrollment)              | <b>\$155.97</b><br>(\$170.59 as of April 1)                                            | <b>\$234.55</b><br>(\$256.95 as of April 1)                                            |
| <b>Transamerica Life Insurance<br/>Company</b><br>For eligibility & plan information:<br>1-800-247-1771<br>(Group Medicare Supplement Insurance<br>sponsored for members of various participating<br>industry, trade, professional and other special<br>interest associations.)<br>(continuous open enrollment) | <b>\$111.16</b>                                                                        | <b>\$192.28</b>                                                                        |
| <b>Transamerica Premier Life<br/>Insurance Company*</b><br>1-800-458-5736<br>(Group Medicare Supplement insurance<br>sponsored exclusively for eligible members of<br>the American Medical Association.)<br><a href="http://www.amainsure.com">www.amainsure.com</a><br>(continuous open enrollment)            | <b>\$97.46</b>                                                                         | <b>\$168.58</b>                                                                        |

\* Monumental Life Insurance Company changed its name to Transamerica Premier Life Insurance Company effective July 31, 2014.

**Medicare Supplement Plans  
Offered in Massachusetts  
in 2015**

| <b>Medigap Carriers</b><br>Please note that rates may change in 2015                                                                                                                                                                                                                          | <b>Medicare Supplement Core</b> | <b>Medicare Supplement 1</b> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|------------------------------|
| <b>Tufts Insurance Company</b><br>1-800-714-3000 sales/apps<br>1-800-701-9000 member services<br>TDD<br>1-800-208-9562 (member services)<br>1-888-899-8977 (sales/apps)<br><a href="http://www.tuftsmedicarepreferred.org">www.tuftsmedicarepreferred.org</a><br>(continuous open enrollment) | <b>\$104.76</b>                 | <b>\$194.00</b>              |
| <b>United Healthcare Insurance Company</b><br><u>Only for members of AARP</u><br><u>(American Association of Retired Persons)</u><br>1-800-523-5800<br>(continuous open enrollment)                                                                                                           | <b>\$122.75</b>                 | <b>\$218.00</b>              |

| <b>Medigap Carriers</b><br>Please note that rates may change in 2015                                                                                                                                                          | <b>Medicare Select**</b> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| <b>Blue Cross &amp; Blue Shield of Massachusetts HMO Blue, Inc.</b><br>1-800-258-2226 member services<br>1-800-522-1254 (TDD)<br><a href="http://www.bluecrossma.com">www.bluecrossma.com</a><br>(continuous open enrollment) | <b>\$136.42</b>          |

\*\* Medicare Select Plans are Medicare Supplement Insurance Plans that require the use of a provider network. Medicare Select In-network benefits will be the same as the Medicare Supplement Core benefits or Medicare Supplement 1 benefits, based on the member's choice of PCP.

In addition to the above-noted Medicare Supplemental plans, Massachusetts residents may enroll in Medicare Advantage Plans as well as Part D Prescription Drug Plans with the Centers for Medicare and Medicaid Services ("CMS"). For further information regarding these plans please visit the following website: <https://www.medicare.gov/find-a-plan/questions/home.aspx>

## Medicare Advantage Plans Offered in Massachusetts in 2015

|                                                                                                          | Plan Name                | Plan Type | Monthly Premium | Drugs | Doctor Choice                       | Counties                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------|--------------------------|-----------|-----------------|-------|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>AARP Medicare Complete Provided by Secure Horizons</b><br><br>Phone:<br>1-800-547-5514                | Medicare Complete        | HMO       | \$0.00          | Yes   | Plan Doctors Only (some exceptions) | Bristol<br>Hampden                                                                                                                                                |
|                                                                                                          | Medicare Complete Plan 1 | HMO       | \$0.00          | Yes   | Plan Doctors Only (some exceptions) | Middlesex<br>Suffolk                                                                                                                                              |
|                                                                                                          | Medicare Complete Plan 2 | HMO       | \$45.00         | Yes   | Plan Doctors Only (some exceptions) | Middlesex<br>Suffolk                                                                                                                                              |
|                                                                                                          | Medicare Complete Choice | PPO       | \$40.00         | Yes   | Any Doctor                          | Barnstable<br>Berkshire<br>Bristol<br>Dukes<br>Essex<br>Franklin<br>Hampden<br>Hampshire<br>Middlesex<br>Nantucket<br>Norfolk<br>Plymouth<br>Suffolk<br>Worcester |
| <b>Blue Cross Blue Shield of Massachusetts</b><br><br>Phone:<br>1-800-678-2265<br>TTY:<br>1-800-522-1254 | Medicare HMO Blue PlusRx | HMO       | \$193.00        | Yes   | Plan Doctors Only                   | Barnstable<br>Bristol<br>Essex<br>Franklin<br>Hampden<br>Hampshire<br>Middlesex<br>Norfolk<br>Plymouth<br>Suffolk<br>Worcester                                    |

|                                                                        | Plan Name                  | Plan Type | Monthly Premium | Drugs | Doctor Choice     | Counties                                                                                                                       |
|------------------------------------------------------------------------|----------------------------|-----------|-----------------|-------|-------------------|--------------------------------------------------------------------------------------------------------------------------------|
| <b>Blue Cross<br/>Blue Shield of<br/>Massachusetts<br/>(continued)</b> | Medicare HMO Blue Value Rx | HMO       | \$27.00         | Yes   | Plan Doctors Only | Barnstable<br>Bristol<br>Essex<br>Franklin<br>Hampden<br>Hampshire<br>Middlesex<br>Norfolk<br>Plymouth<br>Suffolk<br>Worcester |
|                                                                        | Medicare PPO Blue PlusRx   | PPO       | \$153.00        | Yes   | Any Doctor        | Barnstable<br>Bristol<br>Essex<br>Franklin<br>Hampden<br>Hampshire<br>Middlesex<br>Norfolk<br>Plymouth<br>Suffolk<br>Worcester |
|                                                                        | Medicare PPO Blue ValueRx  | PPO       | \$49.00         | Yes   | Any Doctor        | Barnstable<br>Bristol<br>Essex<br>Franklin<br>Hampden<br>Hampshire<br>Middlesex<br>Norfolk<br>Plymouth<br>Suffolk<br>Worcester |
|                                                                        | Medicare PPO Blue SaverRx  | PPO       | \$0.00          | Yes   | Any Doctor        | Barnstable<br>Bristol<br>Essex<br>Franklin<br>Hampden<br>Hampshire<br>Middlesex<br>Norfolk<br>Plymouth<br>Suffolk<br>Worcester |

|                                                                                                   | Plan Name                                  | Plan Type | Monthly Premium | Drugs | Doctor Choice     | Counties                                                |
|---------------------------------------------------------------------------------------------------|--------------------------------------------|-----------|-----------------|-------|-------------------|---------------------------------------------------------|
| <b>Erickson Advantage</b><br><br>Phone:<br>1-800-989-1389                                         | Erickson Advantage Signature with Drugs    | HMO POS   | \$189.00        | Yes   | Plan Doctors Only | Essex<br>Plymouth                                       |
|                                                                                                   | Erickson Advantage Signature without Drugs | HMO-POS   | \$149.00        | No    | Plan Doctors Only | Essex<br>Plymouth                                       |
|                                                                                                   | Erickson Advantage Freedom                 | HMO-POS   | \$48.00         | Yes   | Plan Doctors Only | Essex<br>Plymouth                                       |
| <b>Fallon Community Health Plan</b><br><br>Phone:<br>1-888-377-1980<br><br>TTY:<br>1-877-608-7677 | Fallon Senior Plan Plus Enhanced Rx        | HMO       | \$152.00        | Yes   | Plan Doctors Only | Bristol<br>Middlesex<br>Norfolk<br>Plymouth             |
|                                                                                                   | Fallon Senior Plan Plus Enhanced Rx        | HMO-POS   | \$106.00        | Yes   | Plan Doctors Only | Hampden<br>Hampshire                                    |
|                                                                                                   | Fallon Senior Plan Plus Enhanced Rx        | HMO       | \$236.00        | Yes   | Plan Doctors Only | Franklin<br>Worcester                                   |
|                                                                                                   | Fallon Senior Plan Plus Enhanced Rx        | HMO       | \$166.00        | Yes   | Plan Doctors Only | Essex<br>Suffolk                                        |
|                                                                                                   | Fallon Senior Plan Plus Enhanced Rx        | HMO       | \$201.00        | Yes   | Plan Doctors Only | Barnstable                                              |
|                                                                                                   | Fallon Senior Plan Saver                   | HMO       | \$27.00         | No    | Plan Doctors Only | Bristol<br>Franklin<br>Middlesex<br>Norfolk<br>Plymouth |
|                                                                                                   | Fallon Senior Plan Saver                   | HMO       | \$19.00         | No    | Plan Doctors Only | Essex<br>Suffolk                                        |
|                                                                                                   | Fallon Senior Plan Saver                   | HMO       | \$59.00         | No    | Plan Doctors Only | Franklin<br>Worcester                                   |
|                                                                                                   | Fallon Senior Plan Saver                   | HMO       | \$0.00          | No    | Plan Doctors Only | Hampden<br>Hampshire                                    |
|                                                                                                   | Fallon Senior Plan Saver                   | HMO       | \$65.00         | No    | Plan Doctors Only | Barnstable                                              |



|                                                                                                 | Plan Name                               | Plan Type | Monthly Premium | Drugs | Doctor Choice     | Counties                                                                                                                       |
|-------------------------------------------------------------------------------------------------|-----------------------------------------|-----------|-----------------|-------|-------------------|--------------------------------------------------------------------------------------------------------------------------------|
| <b>Fallon Community Health Plan (continued)</b>                                                 | Fallon Senior Plan Saver Enhanced Rx    | HMO       | \$46.00         | Yes   | Plan Doctors Only | Bristol<br>Middlesex<br>Norfolk<br>Plymouth                                                                                    |
|                                                                                                 | Fallon Senior Plan Saver Enhanced Rx    | HMO       | \$26.00         | Yes   | Plan Doctors Only | Hampden<br>Hampshire                                                                                                           |
|                                                                                                 | Fallon Senior Plan Saver Enhanced RX    | HMO       | \$76.00         | Yes   | Plan Doctors Only | Franklin<br>Worcester                                                                                                          |
|                                                                                                 | Fallon Senior Plan Saver Enhanced Rx    | HMO       | \$86.00         | Yes   | Plan Doctors Only | Barnstable                                                                                                                     |
|                                                                                                 | Fallon Senior Plan Saver Enhanced Rx    | HMO       | \$56.00         | Yes   | Plan Doctors Only | Essex<br>Suffolk                                                                                                               |
|                                                                                                 | Fallon Senior Plan Super Saver Rx       | HMO       | \$0.00          | Yes   | Plan Doctors Only | Barnstable<br>Bristol<br>Essex<br>Franklin<br>Hampden<br>Hampshire<br>Middlesex<br>Norfolk<br>Plymouth<br>Suffolk<br>Worcester |
|                                                                                                 | Fallon Senior Plan Standard             | HMO       | \$129.00        | No    | Plan Doctors Only | Franklin<br>Worcester                                                                                                          |
|                                                                                                 | Fallon Senior Plan Standard Enhanced Rx | HMO       | \$176.00        | Yes   | Plan Doctors Only | Franklin<br>Worcester                                                                                                          |
| <b>Harvard Pilgrim Healthcare</b><br><br>Phone:<br>1-888-609-0692<br><br>TTY:<br>1-800-720-3480 | Stride Value Rx Plus                    | HMO       | \$136.00        | Yes   | Plan Doctors Only | Bristol<br>Norfolk<br>Suffolk<br>Worcester                                                                                     |

|                                                                                         | Plan Name                       | Plan Type | Monthly Premium | Drugs | Doctor Choice     | Counties                                      |
|-----------------------------------------------------------------------------------------|---------------------------------|-----------|-----------------|-------|-------------------|-----------------------------------------------|
| <b>Harvard Pilgrim Healthcare (continued)</b>                                           | Stride Value Rx                 | HMO       | \$46.00         | Yes   | Plan Doctors Only | Bristol<br>Norfolk<br>Suffolk<br>Worcester    |
| <b>Health New England</b><br><br>Phone:<br>1-413-787-0010<br><br>TTY:<br>1-800-439-2370 | HNE Medicare Basic No RX        | HMO       | \$19.00         | No    | Plan Doctors Only | Berkshire<br>Franklin<br>Hampden<br>Hampshire |
|                                                                                         | HNE Medicare Basic RX           | HMO       | \$75.00         | Yes   | Plan Doctors Only | Berkshire<br>Franklin<br>Hampden<br>Hampshire |
|                                                                                         | HNE Medicare Plus RX            | HMO       | \$106.00        | Yes   | Plan Doctors Only | Berkshire<br>Franklin<br>Hampden<br>Hampshire |
|                                                                                         | HNE Medicare Premium No RX      | HMO       | \$89.00         | No    | Plan Doctors Only | Berkshire<br>Franklin<br>Hampden<br>Hampshire |
|                                                                                         | HNE Medicare Premium RX         | HMO       | \$156.00        | Yes   | Plan Doctors Only | Berkshire<br>Franklin<br>Hampden<br>Hampshire |
|                                                                                         | HNE Medicare Value              | HMO       | \$20.00         | Yes   | Plan Doctors Only | Berkshire<br>Franklin<br>Hampden<br>Hampshire |
|                                                                                         | HNE Medicare Freedom (HMO-POS)  | HMO       | \$210.00        | Yes   | Plan Doctors Only | Berkshire<br>Franklin<br>Hampden<br>Hampshire |
| <b>Tufts Health Plan</b><br><br>Phone:<br>1-877-218-4835                                | Medicare Preferred HMO Basic    | HMO       | \$33.00         | No    | Plan Doctors Only | Worcester                                     |
|                                                                                         | Medicare Preferred HMO Basic    | HMO       | \$34.00         | No    | Plan Doctors Only | Essex<br>Suffolk                              |
|                                                                                         | Medicare Preferred HMO Basic Rx | HMO       | \$0.00          | Yes   | Plan Doctors Only | Hampden<br>Hampshire                          |

|                                  | Plan Name                               | Plan Type | Monthly Premium | Drugs | Doctor Choice           | Counties                                                  |
|----------------------------------|-----------------------------------------|-----------|-----------------|-------|-------------------------|-----------------------------------------------------------|
| Tufts Health Plan<br>(continued) | Medicare Preferred<br>HMO Basic Rx      | HMO       | \$35.90         | Yes   | Plan<br>Doctors<br>Only | Barnstable<br>Bristol<br>Middlesex<br>Norfolk<br>Plymouth |
|                                  | Medicare Preferred<br>HMO Basic Rx      | HMO       | \$55.90         | Yes   | Plan<br>Doctors<br>Only | Essex<br>Suffolk                                          |
|                                  | Medicare Preferred<br>HMO Basic Rx      | HMO       | \$65.60         | Yes   | Plan<br>Doctors<br>Only | Worcester                                                 |
|                                  | Medicare Preferred<br>HMO Prime         | HMO       | \$130.00        | No    | Plan<br>Doctors<br>Only | Barnstable<br>Bristol<br>Middlesex<br>Norfolk<br>Plymouth |
|                                  | Medicare Preferred<br>HMO Prime         | HMO       | \$52.00         | No    | Plan<br>Doctors<br>Only | Hampden<br>Hampshire                                      |
|                                  | Medicare Preferred<br>HMO Prime         | HMO       | \$154.00        | No    | Plan<br>Doctors<br>Only | Essex<br>Suffolk                                          |
|                                  | Medicare Preferred<br>HMO Prime         | HMO       | \$148.00        | No    | Plan<br>Doctors<br>Only | Worcester                                                 |
|                                  | Medicare Preferred<br>HMO Prime Rx      | HMO       | \$154.40        | Yes   | Plan<br>Doctors<br>Only | Barnstable<br>Bristol<br>Middlesex<br>Norfolk<br>Plymouth |
|                                  | Medicare Preferred<br>HMO Prime Rx      | HMO       | \$76.40         | Yes   | Plan<br>Doctors<br>Only | Hampden<br>Hampshire                                      |
|                                  | Medicare Preferred<br>HMO Prime Rx      | HMO       | \$178.40        | Yes   | Plan<br>Doctors<br>Only | Essex<br>Suffolk                                          |
|                                  | Medicare Preferred<br>HMO Prime Rx      | HMO       | \$183.50        | Yes   | Plan<br>Doctors<br>Only | Worcester                                                 |
|                                  | Medicare Preferred<br>HMO Prime Rx Plus | HMO       | \$110.20        | Yes   | Plan<br>Doctors<br>Only | Hampden<br>Hampshire                                      |

|                                          | Plan Name                               | Plan Type | Monthly Premium | Drugs | Doctor Choice           | Counties                                                                                   |
|------------------------------------------|-----------------------------------------|-----------|-----------------|-------|-------------------------|--------------------------------------------------------------------------------------------|
| <b>Tufts Health Plan<br/>(continued)</b> | Medicare Preferred<br>HMO Prime Rx Plus | HMO       | \$188.20        | Yes   | Plan<br>Doctors<br>Only | Barnstable<br>Bristol<br>Middlesex<br>Norfolk<br>Plymouth                                  |
|                                          | Medicare Preferred<br>HMO Prime Rx Plus | HMO       | \$212.20        | Yes   | Plan<br>Doctors<br>Only | Essex<br>Suffolk                                                                           |
|                                          | Medicare Preferred<br>HMO Value no Rx   | HMO       | \$96.00         | No    | Plan<br>Doctors<br>Only | Barnstable<br>Bristol<br>Middlesex<br>Norfolk<br>Plymouth                                  |
|                                          | Medicare Preferred<br>HMO Value         | HMO       | \$22.00         | No    | Plan<br>Doctors<br>Only | Hampden<br>Hampshire                                                                       |
|                                          | Medicare Preferred<br>HMO Value         | HMO       | \$117.00        | No    | Plan<br>Doctors<br>Only | Essex<br>Suffolk                                                                           |
|                                          | Medicare Preferred<br>HMO Value         | HMO       | \$109.00        | No    | Plan<br>Doctors<br>Only | Worcester                                                                                  |
|                                          | Medicare Preferred<br>HMO Value Rx      | HMO       | \$120.30        | Yes   | Plan<br>Doctors<br>Only | Barnstable<br>Bristol<br>Middlesex<br>Norfolk<br>Plymouth                                  |
|                                          | Medicare Preferred<br>HMO Value Rx      | HMO       | \$46.30         | Yes   | Plan<br>Doctors<br>Only | Hampden<br>Hampshire                                                                       |
|                                          | Medicare Preferred<br>HMO Value Rx      | HMO       | \$141.30        | Yes   | Plan<br>Doctors<br>Only | Essex<br>Suffolk                                                                           |
|                                          | Medicare Preferred<br>HMO Value Rx      | HMO       | \$144.60        | Yes   | Plan<br>Doctors<br>Only | Worcester                                                                                  |
|                                          | Medicare Preferred<br>HMO Saver Rx      | HMO       | \$0.00          | Yes   | Plan<br>Doctors<br>Only | Barnstable<br>Bristol<br>Essex<br>Middlesex<br>Norfolk<br>Plymouth<br>Suffolk<br>Worcester |

**HMO = Health Maintenance Organization** A type of plan in which you can only go to doctors, hospitals and other providers that belong to the plan network, except in an emergency.

**MSA = Medical Savings Account** A plan that has two parts. The first part is a high-deductible Medicare Advantage MSA Health Plan. This health plan won't begin to pay covered costs until you have met the annual deductible, which varies by plan. The second part is a Medical Savings Account into which Medicare deposits money that you may use to pay health care costs.

**PPO = Preferred Provider Organization** A type of plan in which you pay less if you use doctors, hospitals, and other providers that belong to the plan network. You can use doctors, hospitals, and other providers outside of the network for an additional cost.

**PFES = Private Fee for Service** A type of Medicare Health Plan in which you may go to any Medicare-approved doctor or hospital that accepts the plan's payment. The insurance plan, rather than the Medicare Program, decides how much it will pay and how much you will pay for the services you have. Under this type of plan you may pay more or less for Medicare-covered benefits and you may have extra benefits that Original Medicare Plan doesn't cover.

**SCO = Senior Care Option** A voluntary program that combines health care services with social support services to help low-income seniors maintain their health and stay in their own homes. With SCO, a team of medical professionals works together to provide you with care that is individually tailored to meet your needs. You must be 65 years of age or older and eligible for MassHealth (Medicaid) to join; you may also have Medicare.

**SNP = Special Needs Plan** A special type of Medicare Advantage Plan that provides all Medicare Part A and Part B health care and services to people who can benefit the most from things like special care for chronic illnesses, care management of multiple diseases, and focused care management. These plans may limit membership to people in certain institutions (like a nursing home), eligible for both Medicare and Medicaid, or with certain chronic or disabling condition.

## Medicare Prescription Drug Plans Offered in Massachusetts in 2015

| Company                                                | Prescription Drug Plan              | Monthly Premium | Annual Deductible | Customer Service Phone Number                   |
|--------------------------------------------------------|-------------------------------------|-----------------|-------------------|-------------------------------------------------|
| <b>Aetna</b>                                           | • Medicare Rx Saver                 | \$22.10         | \$320             | Phone:<br>1-855-338-7030                        |
|                                                        | • Medicare Rx Premier               | \$119.10        | \$0               | TTY/TDD:<br>711                                 |
| <b>Blue Cross<br/>Blue Shield of<br/>Massachusetts</b> | • Blue MedicareRx Value Plus        | \$40.30         | \$320**           | Phone:<br>1-877-479-2227                        |
|                                                        | • Blue MedicareRx Premier           | \$110.20        | \$0               | TTY:<br>1-866-236-1069                          |
| <b>Cigna-HealthSpring<br/>Rx</b>                       | • Cigna-HealthSpring Rx Secure      | \$46.30         | \$320             | Phone:<br>1-800-735-1459<br><br>TTY:<br>711     |
|                                                        | • Cigna-HealthSpring Rx Secure Max  | \$128.30        | \$0               |                                                 |
|                                                        | • Cigna-HealthSpring Rx Secure Xtra | \$35.80         | \$0               |                                                 |
| <b>Envision RxPlus</b>                                 | • Envision Rx Plus Silver           | \$66.30         | \$320             | Phone:<br>1-866-250-2005<br><br>TTY/TDD:<br>711 |
| <b>Express Scripts<br/>Medicare</b>                    | • Express Scripts Medicare Choice   | \$51.00         | \$50**            | Phone:<br>1-866-477-5704                        |
|                                                        | • Express Scripts Medicare Value    | \$47.40         | \$320             | TTY:<br>1-800-716-3231                          |

| Company                                   | Prescription Drug Plan             | Monthly Premium | Annual Deductible | Customer Service Phone Number                   |
|-------------------------------------------|------------------------------------|-----------------|-------------------|-------------------------------------------------|
| <b>First Health Part D</b>                | • First Health Part D Premier Plus | \$97.90         | \$0               | Phone:<br>1-855-389-9688                        |
|                                           | • First Health Part D Value Plus   | \$37.20         | \$250**           | TTY/TDD:<br>711                                 |
| <b>Humana Insurance Company</b>           | • Humana Walmart – RX Plan         | \$15.60         | \$320**           | Phone:<br>1-800-706-0872<br><br>TTY/TDD:<br>711 |
|                                           | • Humana Preferred Rx Plan         | \$26.70         | \$320             |                                                 |
|                                           | • Humana Enhanced                  | \$50.60         | \$0               |                                                 |
| <b>SilverScript</b>                       | • Choice                           | \$23.30         | \$0               | Phone:<br>1-866-552-6106                        |
|                                           | • Plus                             | \$74.30         | \$0               | TTY/TDD:<br>1-866-552-6288                      |
| <b>Stonebridge Life Insurance Company</b> | • Transamerica MedicareRx Choice   | \$41.00         | \$0               | Phone:<br>1-877-527-1958                        |
|                                           | • Transamerica MedicareRx Classic  | \$34.70         | \$320             | TTY/TDD:<br>711                                 |

| Company                                    | Prescription Drug Plan        | Monthly Premium | Annual Deductible | Customer Service Phone Number |
|--------------------------------------------|-------------------------------|-----------------|-------------------|-------------------------------|
| <b>United American Insurance Company</b>   | • Enhanced                    | \$71.30         | \$60**            | Phone:<br>1-877-723-1662      |
|                                            | • Select                      | \$48.50         | \$320             | TTY/TDD:<br>1-866-524-4170    |
|                                            | • Essential                   | \$23.60         | \$230**           |                               |
| <b>United HealthCare Insurance Company</b> | • AARP Medicare Rx Saver Plus | \$27.50         | \$320             | Phone:<br>1-888-867-5564      |
|                                            | • AARP Medicare Rx Preferred  | \$48.20         | \$0               | TTY/TDD:<br>711               |
| <b>WellCare</b>                            | • WellCare Classic            | \$30.70         | \$320*            | Phone:<br>1-888-293-5151      |
|                                            | • WellCare Extra              | \$52.70         | \$0               | TTY:<br>1-888-816-5252        |

\* Tier 1 medications not subject to plan deductible.

\*\* Tier 1 and Tier 2 medications not subject plan deductible.