Q1. What toll-free numbers can I call for assistance?

   TTY: 1-800-425-5707

   TTY: 1-800-425-5705
To call about Mail Order prescriptions: 1-888-565-8361
To find a local pharmacy: 1-866-755-2776
Specialty Drugs: 1-800-870-6419

General Questions:

Q1. Why is the University System changing the retiree health plan?

A1. Change in the University of Maine System’s health plans is nothing new. Over the years, the University System has changed various aspects of the program, including: health plan carriers, plan provisions, deductibles, copays, etc. The introduction of the SmartValue program is simply another change that will allow the University System to continue to provide meaningful retiree health coverage.

Q2. I don’t want to change to the SmartValue Plan, can I stay with the coverage I have currently?

A2. No, effective 1/1/08, the University System is changing the health plan offered to its Medicare-eligible retirees to the SmartValue plan. If you wish to continue the health coverage offered by the University of Maine System, you will be transferred to the SmartValue plan. As always, participating in the retiree health plan is completely optional. If you decide you do not want to continue in the University System’s health plan in 2008, please send a letter to EBPA stating that fact. Please note, however, that if you cancel your University retiree medical and/or dental coverage, it may never be reinstated in the future.

Q3. If I currently have my monthly premium withheld (ACH) from my personal checking or savings account, do I need to do anything?

A3. No, EBPA will continue to withhold your premium from the personal checking or savings account based upon the most recent information that they have on file. The only individuals that need to make an active election to implement an automatic deduction are those retirees that pay the full premium for the health coverage AND have a dependent covered on the plan. Since the SmartValue plan requires that all individuals be covered under their own individual subscriber number, EBPA needs to split the billing records as well. Under this situation, EBPA will need an ACH form filled out for both the retiree and the dependent (you can use the same checking or savings account but EBPA needs two (2) separate forms).

Q4. How does this plan change affect former employees on Long Term Disability?

A4. Since the University System treats former employees receiving Long Term Disability benefits just like retirees (regardless of age or service), this plan change is exactly the same for LTD recipients. All former employees on LTD that are eligible for Medicare will be enrolled in the SmartValue plan effective 1/1/08 (or whenever Medicare becomes effective). PLEASE NOTE: The University System REQUIRES any Retiree, Spouse, Widow, Widower, Former Employee receiving Disability Benefits, or dependent to enroll in BOTH Medicare Part A and Part B when eligible in order to continue the health coverage (this is not a change to policy).
Q5. Should I be concerned about articles like the one I read in AARP’s magazine that are generally negative towards Medicare Advantage plans?

A5. The University System strongly recommends that you educate yourself about health plans by reading articles published in newspapers, magazines and AARP’s newsletter. By educating yourself, you will be better prepared to make informed decisions relative to your health insurance. Please remember that any articles written are general in nature and designed to advise its members of the various products in the marketplace. The AARP article is focused on individual – not group – Private Fee For Service plans. The SmartValue plan that the University System purchased from Anthem is a group program -- customized for our retiree population and is generally richer than standard individual products available in the marketplace.

Q6. Is the University System playing an active role to make sure Anthem follows through with what they say?

A6. Careful consideration and planning has taken place between the two organizations to ensure that communications and commitments are upheld. The University System and Anthem will continue to work very closely together to ensure that the SmartValue plan provides the high level of service currently provided through the CompCare plan.

Q7. What happens to my spouse who is under 65 and not on Medicare?

A7. Your spouse will remain on the Comp Care plan. Once they turn 65, they will be transferred to the SmartValue plan. In these instances, the over-65 Medicare-retiree will participate in the SmartValue plan, and any under-65 individuals will stay on the current plan under a new individual ID number.

Q8. What happens to my dependents (other than my spouse)?

A8. Your non-Medicare eligible dependents will remain on the Comp Care plan. In these instances, the over-65 Medicare-retiree will participate in the SmartValue plan, and any under-65 individuals will stay on the current plan under a new individual ID number.

Q9. Am I eligible for the SmartValue Plan if I live outside of the United States?

A9. No, one of the requirements of the SmartValue plan is that you must be a resident of the United States. If you reside outside the United States, you will remain in the Comp Care plan. Please note that you must maintain your enrollment in Medicare A and B in order to retain the University’s retiree group health coverage, and you will be expected to transfer to the SmartValue plan if you ever decide to permanently reside in the United States in the future.

Q10. What happens to my Medicare if the University System decides to later on drop the SmartValue Plan?

A10. Please note that you continue to have your Medicare A & B coverage under the SmartValue plan. In the event that circumstances regarding continuation of the SmartValue plan change, your Medicare A & B coverage would once again become the primary payer and the University System’s health plan adopted at that time would once again become the secondary payer. That is another reason why it is important that you store your Medicare ID card in a safe place.
Q11. If I turn 65 during 2008 or anytime thereafter, will I automatically receive the form to enroll in the SmartValue plan?

A11. Yes, every month EBPA checks the retiree database to see if any retirees or their spouses turn 65 during the month. If so, EBPA sends the retiree (or spouse) a letter requesting a copy of your Medicare card and the application for the SmartValue plan. By simply filling out the enrollment form and returning it to EBPA, you will be enrolled in the SmartValue plan when your Medicare goes into effect.

Q12. Will my Social Security number be on my SmartValue ID card?

A12. No, your Social Security number will not appear on your SmartValue ID card.

Questions about my Doctor / Hospital / Provider

Q1. How are the doctors reacting to this plan in other states besides Maine?

A1. Most doctors currently accepting Medicare are willing to accept this Medicare Advantage Private Fee For Service (PFFS) plan. Anthem has a national Provider Education and Communication team and will continue to reach out to providers. We encourage you to call Customer Service so they can reach out to a particular provider. In addition, providers are encouraged to call Anthem SmartValue’s Call Center Team with questions and for assistance. The dedicated Provider Services team is available at: 1-866-364-2374, Monday through Friday, 6 AM to 7 PM (EST). In addition, providers can access the automated phone service 24-hours a day, 7-days a week to verify your eligibility and benefit information, and confirm the claims submission address.

Q2. What happens when I get into a situation where the doctor says he/she will not accept SmartValue or is unsure? What is the process for the member? Does SmartValue contact my provider and get back to me?

A2. The doctor must accept the SmartValue plan to see you as a patient. If he/she does not accept the terms and conditions, and you still see the doctor, you will be responsible for the cost of any services provided on that date. SmartValue will reach out to educate your provider but this must be done prior to any visit. The dedicated Provider Services team is available at: 1-866-364-2374, Monday through Friday, 6 AM to 7 PM (EST). In addition, providers can access the automated phone service 24-hours a day, 7-days a week to verify your eligibility and benefit information, and confirm the claims submission address.

Q3. What if my doctor accepts Medicare but not the Anthem BCBS SmartValue plan, can I submit the bill to the SmartValue plan myself?

A3. No. In order to receive the SmartValue benefits, your doctor must accept Medicare and the terms and conditions of the SmartValue Plan and bill SmartValue directly. If you receive services from a provider that does not accept the SmartValue plan, there will be no coverage for services provided.

Questions about the SmartValue plan

Q1. How do I learn about my SmartValue benefits?

A1. Similar to the Anthem CompCare plan, your Customer Service Representatives are eager to assist you with your individual questions. You’ll find it most helpful if you become familiar with the Benefits Summary provided to you before calling Customer Service. The Benefits Summary was provided in
the green booklet mailed to you, introducing you to the SmartValue plan. A Welcome Kit, including a Certificate of Coverage will also be sent to you soon after your effective date of coverage.

Q2. Do I need to pre-notify before getting services?
A2. The plan is designed to encourage you to pre-notify for select services. If you do not pre-notify, there is a $500 copayment that will be your responsibility. If you do pre-notify for these services, the $500 copayment is waived. These services include: inpatient hospital care, inpatient mental health care, skilled nursing facility care, and durable medical equipment. SmartValue also encourages pre-notification because it often enables Anthem care managers and nurses to become aware of situations that afford them the opportunity to offer assistance to you, before and/or after you receive services.

Q3. Tell me about SmartValue “Explanation of Benefits” (EOBs). Will I receive an EOB if my claim is denied? Will I only receive EOBs from Anthem?
A3. You will receive an Explanation of Benefits (EOB) each time services are provided. This EOB will represent the entire payment made to your provider (for both Medicare and Anthem payments). You will no longer receive separate EOBs from Medicare and Anthem, as the SmartValue plan is responsible for the entire payment to the provider.

Q4. What kinds of immunizations are covered under the SmartValue plan?
A4. The SmartValue plan is designed to encourage you to receive preventive care and immunizations. What is covered will change over time to reflect best medical practices at that time. Currently, services such as the pneumonia vaccine, flu shots and hepatitis B and shingles vaccines are covered. Please call 1-877-326-2201 if you want to confirm coverage for a specific procedure.

Q5. Am I covered by the SmartValue plan when I travel outside of the United States?
A5. Generally, the SmartValue plan is designed to cover services provided within the United States. However, there are limited urgent/emergency benefits in the program. Please refer to the “Foreign Travel Emergency and Urgently Needed Care” section of your Benefits Summary.

Q6. Are there any lifetime limits?
A6. Yes. As with any health plan, certain services are subject to Annual or Lifetime limits. Please refer to your Benefits Summary for specific limitations.

Q7. Will I be notified when my deductible has been met or I reach the out of pocket limit for the year?
A7. You will receive statements (EOBs) from Anthem when there are services provided that require retiree cost-sharing, that include the Medicare as well as Anthem payments. Initially, these statements will not have deductible accumulators, but that feature is being looked at. Please call Customer Service at 1-877-326-2201 for assistance.

Q8. If I don’t turn 65 until April 2008 and I already met the $300 Comp Care deductible, do I have to turn around and meet the SmartValue deductible as well?
A8. Yes.

Q9. If I receive services outside of the United States, do I have to have the bill translated to English?
A9. Yes. It is recommended that the bill be translated to English and converted to US currency.

Q10. How do I take advantage of opportunities provided by “Silver and Fit”? Is the discount in addition to the normal senior citizens discount?

A10. You will receive a Flyer in your Post-Enrollment Welcome Kit outlining enrollment details and website information. In addition, you can always call Customer Service at 1-877-326-2201.

Q11. How does the Anthem “Seniorlink” and “Silver and Fit” programs coordinate with the University Sponsored EAPs?

A11. These programs are not coordinated. The “Seniorlink” and “Silver and Fit” programs are provided by Anthem. The EAP program is a behavioral health program unrelated to these programs offered by your SmartValue plan.

Q12. How do I find out if my locale gym participates with the “Silver and Fit” program?

A12. The “Silver and Fit” Flyer includes a “find a fitness club” web link to view and search for participating facilities in your area. You can also call Customer Service at 1-877-326-2201.

Q13. If I currently see a nurse practitioner, will I still be able to?

A14. Yes, if that individual accepts the SmartValue terms and conditions. Also, that individual must be providing covered services.

Prescription Drug Questions

Q1. Can you review our Retail and Mail Order benefits?

A1. Retail Pharmacies, 30-day supply:
   To find out if a pharmacy near your home is in the network, you can contact the pharmacy and ask if it participates in the Anthem SmartValue plan network. Or, you can visit the Web site at www.bmedicarerx.com or call Customer Service at 1-866-755-2776, from 8 a.m. to 8 p.m., 7 days a week. (TTY/TDD users should call 1-866-798-7026.)

   Retail Pharmacies, up to a 90 day supply (noted with an asterisk):
   A supply of up to 90 days is available at SmartValue Pharmacies listed in your green booklet. These retail chain and independent pharmacies are noted with an asterisk. For example, CVS, Hannaford, Rite Aid, Target, and Shaw’s Osco are all listed. The copay structure is: 1 copay per 30-day supply, 2 copays for a 31 to 60-day supply, and 3 copays for a 61 to 90-day supply. To get current information about network pharmacies in your area, please visit the Web site at www.bmedicarerx.com or call Customer Service at 1-866-755-2776, from 8 a.m. to 8 p.m., 7 days a week. (TTY/TDD users should call 1-866-798-7026.)

Mail Order: 30 to 90 day supplies
Copay savings are available thru Anthem NextRx mail order. The Mail Order benefit is 1 copay for a 30-day supply, and 2 copays for a 31 to 90-days supply. Mail service offers a convenient, affordable way for members to have prescription medications delivered right to their doorstep. To get order forms and information about filling your prescriptions by mail, you can call Customer Service at 1-888-565-8361, Monday — Friday from 7 a.m.to 9 p.m. CST and on Saturday from 8 a.m. to 7 p.m. CST. Our Interactive Voice Response (IVR) is available 24 hours a day, 7 days a week. (TTY/TDD users should call 1-800-905-9821.)
Q2. Do you have a Pharmacy Directory online?
A2. Yes, please go to www.bmedicarerx.com or call Customer Service.

Q3. Are there prior authorizations on some drugs?
A3. Yes, some drugs will require a prior authorization for clinical reasons. These are primarily medications that are specialty injectables and/or immunological agents. If you are taking one of these drugs, Anthem will contact you and your provider regarding the approval process. If you are concerned, please contact Anthem at 1-877-326-2201.

Q4. Are vacation overrides still available?
A4. Yes

Q5. Am I going to have to get all new prescriptions from my doctor in 2008?
A5. No, prescriptions at existing pharmacies will be honored until they expire. However, if you want to use the mail order program for the first time, then YES, you will need new prescriptions to send to Anthem NextRx.

Q6. Is there a Maine mail order match program in the SmartValue Medicare Advantage plan?
A6. No, there is not. Please refer to the prescription drug section of your Benefits Summary that was provided to you in the green booklet, introducing you to the SmartValue plan. There is a select list of pharmacies that can dispense a 90-day supply, but the copay savings is not available.

Q7. If I use the mail order program, will I have to get a new Rx every time I try to refill my prescription?
A7. No, a new Rx is required when the remaining refills have been exhausted or the prescription is more than one year old.

Q8. If I decide to use the mail order program, how will I know what my co-pay is?
A8. Generic drugs have the Tier 1 copay (currently $10). Brand name drugs will either have the Tier 2 or Tier 3 copayment (currently $25 or $40). Note that if you are using a credit card, Anthem NextRx will only charge the amount of the copayments required to fill your prescription at that time. If you want to use a personal check, you can contact the Mail Order program at 1-888-565-8361 to verify the payment amount needed.

Q9. What payment options does a UMS member have with SmartValue mail order?
A9. Mail Order requires payment with any prescription order. Major credit cards are accepted as well as checks. Anthem Mail Order does request that no cash be sent in the mail.
Q10. I am concerned about the quality of medications from unknown pharmacies; how can I be sure the Rx I receive from Anthem’s mail order pharmacy are going to be as good or the same as what I am receiving now?

A10. Differences between prescription drugs dispensed across different pharmacies are not due to the pharmacy. All generic drug standards are controlled by the FDA and must meet standards for approval. Ratings are given to generic drugs that denote they are equivalent to their brand counterparts. Single source branded drugs, Lipitor for example, are only available from the manufacturer that holds the patent. All pharmacies must obtain these single source branded drugs from the patent holder. This is true of Anthem’s mail order program.

Q11. Are the tier levels on the SmartValue Rx program changing? That is, if a prescription that I am currently taking is a tier 2, is it going to remain a tier 2 on the SmartValue plan?

A11. Generally yes. However, formulary changes occur periodically to reflect changes in the medical and pharmacy landscape. For example, the introduction of a new generic may change the relative tiering of other brand medications. Changes will be communicated to members ahead of time so that you can talk to your doctor about these changes and what is best for you.

Q12. Is there a “Donut Hole” in the Rx plan we have with the SmartValue plan?

A12. The UMS prescription drug plan does not have a doughnut hole.

*Please note: this list of Frequently Asked Questions (FAQ) was compiled based on inquiries posed at the Informational Sessions conducted by the University System. This FAQ is provided to you as a general information tool. You are encouraged to become familiar with your plan documents and to call Customer Service for assistance with individual questions. If there are discrepancies between this list and Anthem SmartValue plan documents, the plan documents will govern.