

**2015 Annual Notice of Changes Fidelis Dual Advantage Flex (HMO SNP)**



# Fidelis Dual Advantage Flex (HMO-SNP) offered by Fidelis Care

## Annual Notice of Changes for 2015

You are currently enrolled as a member of Fidelis Dual Advantage Flex. Next year, there will be some changes to the plan's costs and benefits. *This booklet tells about the changes.*

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### Additional Resources

- This information is available for free in other languages. Please contact our Member Services number at 1-800-247-1447 for additional information. (TTY users should call 1-800-695-8544). Hours are 8:00 a.m. to 8:00 p.m. seven days a week from October 1st through February 14th and Monday through Friday, 8:00 a.m. to 8:00 p.m. from February 15th through September 30th. Member Services has free language interpreter services available for non-English speakers.
- Esta información está disponible de forma gratuita en otros idiomas. Por favor comuníquese con nuestro número de Servicios al Socio al 1-800-247-1447 para obtener información adicional. Los usuarios con deficiencia auditiva (TTY) deberán llamar al 1-800-695-8544. El horario de atención es de 8:00 a.m. a 8:00 p.m. los siete días de la semana desde el 1 de octubre hasta el 14 de febrero, y de lunes a viernes, de 8:00 a.m. hasta las 8:00 p.m. desde el 15 de febrero hasta el 30 de septiembre. Servicios al Socio también tiene servicios gratuitos de intérprete disponibles para personas que no hablan inglés
- 這些資訊可以其他語言提供。其他資訊請聯絡我們會員服務部電話：1-800-247-1447（TTY 使用者應打 1-800-695-8544）。10 月 1 日到 2 月 14 日期間，我們的辦公時間是週一至週五每天上午 8:00 至晚上 8:00，2 月 15 日到 9 月 30 日期間，我們的辦公時間是週一至週五每天上午 8:00 至晚上 8:00。會員服務部為非英語的人提供免費的翻譯服務。
- Данная информация доступна бесплатно на других языках. Свяжитесь с отделом обслуживания клиентов по номеру 1-800-247-1447 (Пользователям телетайпа нужно звонить 1-800-695-8544). С 8:00 до 20:00 без выходных с 1 октября по 14 февраля, и с 8:00 до 20:00, с понедельника по пятницу с 15 февраля до 30 сентября. В отделе обслуживания клиентов лица, не говорящие по-английски, могут получить бесплатную помощь переводчиков.
- This document is available in large print and audio tapes.

### **About *Fidelis Dual Advantage Flex***

- Fidelis Care is a Coordinated Care plan with a Medicare contract and a contract with the New York State Department of Health Medicaid program. Enrollment in Fidelis Care depends on contract renewal.
- When this booklet says “we,” “us,” or “our,” it means *Fidelis Care*. When it says “plan” or “our plan,” it means *Fidelis Dual Advantage Flex*.

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## Think about Your Medicare Coverage for Next Year

Medicare allows you to change your Medicare health and drug coverage. It's important to review your coverage each fall to make sure it will meet your needs next year.

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### Important things to do:

- Check the changes to our benefits and costs to see if they affect you.** Do the changes affect the services you use? It is important to review benefit and cost changes to make sure they will work for you next year. Look in Sections 1.5 and 1.6 for information about benefit and cost changes for our plan.
  - Check the changes to our prescription drug coverage to see if they affect you.** Will your drugs be covered? Are they in a different tier? Can you continue to use the same pharmacies? It is important to review the changes to make sure our drug coverage will work for you next year. Look in Section 1.5 for information about changes to our drug coverage.
  - Check to see if your doctors and other providers will be in our network next year.** Are your doctors in our network? What about the hospitals or other providers you use? Look in Section 1.6 for information about our Provider Directory.
  - Think about your overall health care costs.** How much will you spend out-of-pocket for the services and prescription drugs you use regularly? How much will you spend on your premium? How do the total costs compare to other Medicare coverage options?
  - Think about whether you are happy with our plan.**
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### If you decide to stay with Fidelis Dual Advantage Flex:

If you want to stay with us next year, it's easy - you don't need to do anything. If you don't make a change, you will automatically stay enrolled in our plan.

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### If you decide to change plans:

If you decide other coverage will better meet your needs, you can switch at any time. If you enroll in a new plan, your new coverage will begin on the first day of the month after you request the change. Look in Section 4.2 to learn more about your choices.

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## Summary of Important Costs for 2015

The table below compares the 2014 costs and 2015 costs for *Fidelis Dual Advantage Flex* in several important areas. **Please note this is only a summary of changes. It is important to read the rest of this *Annual Notice of Changes* and review the enclosed *Evidence of Coverage* to see if other benefit or cost changes affect you.**

Cost	2014 (this year)	2015 (next year)
<b>Monthly plan premium*</b> * Your premium may be higher or lower than this amount. See Section 2.1 for details.	\$0	\$0
<b>Yearly deductible</b>	\$0 or \$147 for Medicare Part B services	\$0 or \$147* for Medicare Part B services  *This is the 2014 amount and is subject to change in 2015.
<b>Doctor office visits</b>	Primary care visits: 0% or 20% per visit  Specialist visits: 0% or 20% per visit	Primary care visits: 0% or 20% per visit  Specialist visits: 0% or 20% per visit
<b>Inpatient hospital stays</b> Includes inpatient acute, inpatient rehabilitation, and other types of inpatient hospital services. Inpatient hospital care starts the day you are formally admitted to the hospital with a doctor's order. The day before you are discharged is your last inpatient day.	\$0 copay per stay OR  Days 1-60: \$1,216 for each benefit period  Days 61-90: \$304 coinsurance per day of each benefit period  Days 91 and beyond: \$608 coinsurance per each "lifetime reserve day" after day 90 for each benefit period (up to 60 days over your lifetime)	\$0 copay per stay OR  Days 1-60: \$1,216 for each benefit period  Days 61-90: \$304 coinsurance per day of each benefit period  Days 91 and beyond: \$608 coinsurance per each "lifetime reserve day" after day 90 for each benefit period (up to 60 days over your lifetime)

Cost	2014 (this year)	2015 (next year)
		*This is the 2014 amount and is subject to change in 2015
<b>Part D prescription drug coverage</b> (See Section 2.6 for details.)	Deductible: \$310 Tiers 2-5 Copays during the Initial Coverage Stage: <ul style="list-style-type: none"> <li>• Drug Tier 1: \$0</li> <li>• Drug Tier 2: \$0-\$2.55</li> <li>• Drug Tier 3: \$0-\$6.35</li> <li>• Drug Tier 4: \$0-\$6.35</li> <li>• Drug Tier 5: \$0-\$6.35</li> </ul>	Deductible: \$320 Tiers 2-5 Copays during the Initial Coverage Stage: <ul style="list-style-type: none"> <li>• Drug Tier 1: \$0</li> <li>• Drug Tier 2: \$0-\$2.65</li> <li>• Drug Tier 3: \$0-\$6.60</li> <li>• Drug Tier 4: \$0-\$6.60</li> <li>• Drug Tier 5: \$0-\$6.60</li> </ul>
<b>Maximum out-of-pocket amount</b> This is the <u>most</u> you will pay out-of-pocket for your covered Part A and Part B services. (See Section 2.2 for details.)	\$6,700	\$6,700  Once you have paid \$6700 out-of-pocket for covered Part A and Part B services, you will pay nothing for your covered Part A and Part B services for the rest of the calendar year.

***Annual Notice of Changes for 2015***  
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## SECTION 1 Changes to Benefits and Costs for Next Year

### Section 1.1 – Changes to the Monthly Premium

Cost	2014 (this year)	2015 (next year)
<b>Monthly premium</b> (You must also continue to pay your Medicare Part B premium unless it is paid for you by Medicaid.)	\$0	\$0

- Your monthly plan premium will be *more* if you are required to pay a late enrollment penalty.
- If you ever lose your low income subsidy ("Extra Help"), you must maintain your Part D coverage or you could be subject to a late enrollment penalty if you ever chose to enroll in Part D in the future. If you have a higher income as reported on your last tax return you may have to pay an additional amount each month directly to the government for your Medicare prescription drug coverage.

### Section 1.2 – Changes to Your Maximum Out-of-Pocket Amount

To protect you, Medicare requires all health plans to limit how much you pay “out-of-pocket” during the year. This limit is called the “maximum out-of-pocket.” Once you reach the maximum out-of-pocket amount, you generally pay nothing for covered Part A and Part B services for the rest of the year.

Cost	2014 (this year)	2015 (next year)
<p><b>Maximum out-of-pocket amount</b></p> <p>Because our members also get assistance from Medicaid, very few members ever reach this out-of-pocket maximum.</p> <p>Your costs for covered medical services (such as copays and deductibles) count toward your maximum out-of-pocket amount.</p> <p>Your plan premium and your costs for prescription drugs do not count toward your maximum out-of-pocket amount.</p>	<p>\$6,700</p>	<p style="text-align: center;">\$6,700</p> <p>Once you have paid \$6,700 out-of-pocket for covered Part A and Part B services, you will pay nothing for your covered Part A and Part B services for the rest of the calendar year.</p>

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### Section 1.3 – Changes to the Provider Network

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There are changes to our network of doctors and other providers for next year.

An updated *Provider and Pharmacy Directory* is located on our website at [www.fideliscare.org](http://www.fideliscare.org). You may also call Member Services for updated provider information or to ask us to mail you a Provider and Pharmacy Directory. **Please review the 2015 *Provider and Pharmacy Directory* to see if your providers are in our network.**

It is important that you know that we may make changes to the hospitals, doctors and specialist (providers) that are part of your plan during the year. There are a number of reasons why your provider might leave your plan but if your doctor or specialist does leave your plan you have certain rights and protections summarized below:

- Even though our network of providers may change during the year, Medicare requires that we furnish you with uninterrupted access to qualified doctors and specialists.
- When possible we will provide you with at least 30 days' notice that your provider is leaving our plan so that you have time to select a new provider.
- We will assist you in selecting a new qualified provider to continue managing your health care needs.
- If you are undergoing medical treatment you have the right to request, and we will work with you to ensure, that the medically necessary treatment you are receiving is not interrupted.

- If you believe we have not furnished you with a qualified provider to replace your previous provider or that your care is not being appropriately managed you have the right to file an appeal of our decision.
- If you find out your doctor or specialist is leaving your plan please contact us so we can assist you in finding a new provider and managing your care.

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## Section 1.4 – Changes to the Pharmacy Network

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Amounts you pay for your prescription drugs may depend on which pharmacy you use. Medicare drug plans have a network of pharmacies. In most cases, your prescriptions are covered *only* if they are filled at one of our network pharmacies.

There are changes to our network of pharmacies for next year.

An updated *Provider and Pharmacy Directory* is located on our website at [www.fideliscare.org](http://www.fideliscare.org). You may also call Member Services for updated provider information or to ask us to mail you a *Provider and Pharmacy Directory*. **Please review the 2015 *Provider and Pharmacy Directory* to see which pharmacies are in our network.**

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## Section 1.5 – Changes to Benefits and Costs for Medical Services

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Please note that the *Annual Notice of Changes* only tells you about changes to your **Medicare** benefits and costs.

**There are no changes to your benefits or amounts you pay for medical services.** Our benefits and what you pay for these covered medical services will be exactly the same in 2015 as they are in 2014.

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## Section 1.6 – Changes to Part D Prescription Drug Coverage

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<b>Changes to Our Drug List</b>
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Our list of covered drugs is called a Formulary or “Drug List.” A copy of our Drug List is in this envelope.

We made changes to our Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs. **Review the Drug List to make sure your drugs will be covered next year and to see if there will be any restrictions.**

If you are affected by a change in drug coverage you can:

- **Work with your doctor (or other prescriber) and ask the plan to make an exception** to cover the drug. **Current members** can ask for an exception before next year and we will give you an answer within 72 hours after we receive your request (or your

prescriber's supporting statement). If we approve your request, you'll be able to get your drug at the start of the new plan year.

- To learn what you must do to ask for an exception, see Chapter 9 of your *Evidence of Coverage (What to do if you have a problem or complaint (coverage decisions, appeals, complaints))* or call Member Services.
- **Find a different drug** that we cover. You can call Member Services to ask for a list of covered drugs that treat the same medical condition.

In some situations, we will cover a **one-time**, temporary supply. (To learn more about when you can get a temporary supply and how to ask for one, see Chapter 5, Section 5.2 of the *Evidence of Coverage*.) During the time when you are getting a temporary supply of a drug, you should talk with your doctor to decide what to do when your temporary supply runs out. You can either switch to a different drug covered by the plan or ask the plan to make an exception for you and cover your current drug.

You will not have to request another formulary exception for exceptions that are approved in 2014 and have an expiration period that continues into 2015.

### Changes to Prescription Drug Costs

*Note:* If you are in a program that helps pay for your drugs ("Extra Help"), **the information about costs for Part D prescription drugs does not apply to you.** We have included a separate insert, called the "Evidence of Coverage Rider for People Who Get Extra Help Paying for Prescription Drugs" (also called the "Low Income Subsidy Rider" or the "LIS Rider"), which tells you about your drug coverage. If you get "Extra Help" and didn't receive this insert with this packet please call Member Services and ask for the "LIS Rider." Phone numbers for Member Services are in 7.1 of this booklet.

There are four "drug payment stages." How much you pay for a Part D drug depends on which drug payment stage you are in. (You can look in Chapter 6, Section 2 of your *Evidence of Coverage* for more information about the stages.)

The information below shows the changes for next year to the first two stages – the Yearly Deductible Stage and the Initial Coverage Stage. (Most members do not reach the other two stages – the Coverage Gap Stage or the Catastrophic Coverage Stage. To get information about your costs in these stages, look in your *Summary of Benefits* or at Chapter 6, Sections 6 and 7, in the *Evidence of Coverage*.)

**Changes to the Deductible Stage**

<b>Cost</b>	<b>2014 (this year)</b>	<b>2015 (next year)</b>
<b>Stage 1: Yearly Deductible Stage</b>	Because we have no deductible, this payment stage does not apply to you.	Because we have no deductible, this payment stage does not apply to you.

## Changes to Your Copayments in the Initial Coverage Stage

Cost	2014 (this year)	2015 (next year)
<p><b>Stage 2: Initial Coverage Stage</b>  <b>During this stage, the plan pays its share of the cost of your drugs and you pay your share of the cost.</b></p> <p>The costs in this row are for a one-month (30-day) supply when you fill your prescription at a network pharmacy. For information about the costs for a long-term supply or for mail-order prescriptions], look in Chapter 6, Section 5 of your <i>Evidence of Coverage</i>.</p> <p>We changed the tier for some of the drugs on our Drug List. To see if your drugs will be in a different tier, look them up on the Drug List.</p>	<p>Your cost for a one-month supply filled at a network pharmacy:</p> <p>Your cost for a one-month supply filled at a network pharmacy:</p> <p><b>(Preferred generic drugs):</b></p> <p>You pay: \$0 - \$2.55 per prescription.</p> <p><b>(Non-preferred generic drugs)</b></p> <p>You pay: \$0 - \$2.55 per prescription.</p> <p><b>(Preferred brand name drugs)</b></p> <p>You pay: \$0 - \$6.35 per prescription.</p> <p><b>(Non-preferred brand name drugs)</b></p> <p>You pay: \$0 - \$6.35 per prescription.</p> <p><b>(Specialty drugs)</b></p> <p><b>You pay:</b> \$0 - \$6.35 per prescription.</p> <hr/> <p>Once you have paid \$4,550 out-of-pocket for Part D drugs, you will move to the next stage (the Catastrophic Coverage Stage).</p>	<p>Your cost for a one-month supply filled at a network pharmacy:</p> <p>Your cost for a one-month supply filled at a network pharmacy:</p> <p><b>(Preferred generic drugs):</b></p> <p>You pay: \$0 - \$2.65 per prescription.</p> <p><b>(Non-preferred generic drugs)</b></p> <p>You pay: \$0 - \$2.65 per prescription.</p> <p><b>(Preferred brand name drugs)</b></p> <p>You pay: \$0 - \$6.60 per prescription.</p> <p><b>(Non-preferred brand name drugs)</b></p> <p>You pay: \$0 - \$6.60 per prescription.</p> <p><b>(Specialty drugs)</b></p> <p><b>You pay:</b> \$0 - \$6.60 per prescription.</p> <hr/> <p>Once you have paid \$4,700 out-of-pocket for Part D drugs, you will move to the next stage (the Catastrophic Coverage Stage).</p>

## Changes to the Coverage Gap and Catastrophic Coverage Stages

The other two drug coverage stages – the Coverage Gap Stage and the Catastrophic Coverage Stage – are for people with high drug costs. **Most members do not reach the Coverage Gap Stage or the Catastrophic Coverage Stage.** For information about your costs in these stages, look at your *Summary of Benefits* or at Chapter 6, Sections 6 and 7, in your *Evidence of Coverage*.

## SECTION 2 Deciding Which Plan to Choose

### Section 2.1 – If you want to stay in Fidelis Dual Advantage Flex

**To stay in our plan you don't need to do anything.** If you do not sign up for a different plan or change to Original Medicare, you will automatically stay enrolled as a member of our plan for 2015.

### Section 2.2 – If you want to change plans

We hope to keep you as a member next year but if you want to change for 2015 follow these steps:

#### Step 1: Learn about and compare your choices

- You can join a different Medicare health plan,
- -- OR-- You can change to Original Medicare. If you change to Original Medicare, you will need to decide whether to join a Medicare drug plan and whether to buy a Medicare supplement (Medigap) policy.

To learn more about Original Medicare and the different types of Medicare plans, read *Medicare & You 2015*, call your State Health Insurance Assistance Program (see Section 6), or call Medicare (see Section 8.2).

You can also find information about plans in your area by using the Medicare Plan Finder on the Medicare website. Go to <http://www.medicare.gov> and click “Find health & drug plans.” **Here, you can find information about costs, coverage, and quality ratings for Medicare plans.**

As a reminder, Fidelis Care offers other Medicare health plans. These other plans may differ in coverage, monthly premiums, and cost-sharing amounts.

#### Step 2: Change your coverage

- To change **to a different Medicare health plan**, enroll in the new plan. You will automatically be disenrolled from Fidelis Dual Advantage Flex.

- To **change to Original Medicare with a prescription drug plan**, enroll in the new drug plan. You will automatically be disenrolled from Fidelis Dual Advantage Flex.
- To **change to Original Medicare without a prescription drug plan**, you must either:
  - Send us a written request to disenroll. Contact Member Services if you need more information on how to do this (phone numbers are in Section 8.1 of this booklet).
  - – *or* – Contact **Medicare**, at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week, and ask to be disenrolled. TTY users should call 1-877-486-2048.

### SECTION 3 Deadline for Changing Plans

Because you are eligible for both Medicare and Medicaid, you can change your Medicare coverage **at any time**. You can change to any other Medicare health plan (either with or without Medicare prescription drug coverage) or switch to Original Medicare (either with or without a separate Medicare prescription drug plan) at any time.

### SECTION 4 Programs That Offer Free Counseling About Medicare

The State Health Insurance Assistance Program (SHIP) is a government program with trained counselors in every state. In New York State, the SHIP is called Health Insurance Information Counseling and Assistance Program (HIICAP).

Health Insurance Information Counseling and Assistance Program (HIICAP), is independent (not connected with any insurance company or health plan). It is a state program that gets money from the Federal government to give **free** local health insurance counseling to people with Medicare. Health Insurance Information Counseling and Assistance Program (HIICAP) counselors can help you with your Medicare questions or problems. They can help you understand your Medicare plan choices and answer questions about switching plans. You can call Health Insurance Information Counseling and Assistance Program (HIICAP) at:

#### New York State Health Insurance Information, Counseling and Assistance Program (HIICAP)

COUNTY	CALL	WRITE
Bronx, Kings, Manhattan, Queens, Richmond	212-602-4180	New York City Department for the Aging 2 Lafayette Street, 7th Floor New York, NY 10007-1392
Albany	518-447-7177	Albany County Department for the Aging 162 Washington Ave Albany, NY 12210



<b>Allegany</b>	<b>866-268-9390</b>	<b>Allegany County Office for the Aging 6085 State Route 19N Belmont, NY 14813</b>
<b>Broome</b>	<b>607-722-1251</b>	<b>Action for Older Persons Inc. 32 West State Street Binghamton, NY 13901</b>
<b>Cattaraugus</b>	<b>716-373-8032</b>	<b>Cattaraugus County Dept of Aging 1 Leo Moss Drive, Suite 7610 Olean, NY 14760</b>
<b>Chenango</b>	<b>607-337-1770</b>	<b>Chenango County Area Agency on Aging County Office Bldg., 5 Court Street Norwich, NY 13815</b>
<b>Columbia</b>	<b>518-828-4258</b>	<b>Columbia County Office for the Aging 325 Columbia Street Hudson, NY 12534</b>
<b>Cortland</b>	<b>607-753-5060</b>	<b>Cortland County Area Agency on Aging County Office Bldg 60 Central Avenue Cortland, NY 13045</b>
<b>Delaware</b>	<b>607-746-6333</b>	<b>Delaware County Office for the Aging 6 Court Street Delhi, NY 13753</b>
<b>Dutchess</b>	<b>845-486-2555</b>	<b>Dutchess County Office for the Aging 27 High Street Poughkeepsie, NY 12601</b>
<b>Erie</b>	<b>716-858-8526</b>	<b>Erie County Dept. of Senior Services 95 Franklin Street, Room 1329 Buffalo, NY 14202</b>
<b>Greene</b>	<b>518-719-3555</b>	<b>Greene County Department for the Aging Greene County Office Building 411 Main Street Catskill, NY 12414</b>
<b>Hamilton</b>	<b>518-761-6347</b>	<b>Warren/Hamilton Counties Offices for the Aging 1340 State Route 9 Lake George, NY 12845</b>
<b>Herkimer</b>	<b>315-894-9917 Ext. 236</b>	<b>Catholic Charities of Herkimer County 61 West Street Ilion, NY 13357</b>
<b>Montgomery</b>	<b>518-843-2300</b>	<b>Office for the Aging 135 Guy Park Ave Amsterdam, NY 12010</b>
<b>Nassau</b>	<b>516-485-3754</b>	<b>Office of Children and Family Services 400 Oak Street Garden City, NY 11530</b>

<b>Niagara</b>	<b>716-438-4020</b>	<b>Niagara County Office for the Aging 111 Main Street, Suite 101 Lockport, NY 14094</b>
<b>Oneida</b>	<b>315-798-3658</b>	<b>Oneida County Office for Aging 120 Airline Street, Suite 201 Oriskany, NY 13424</b>
<b>Onondaga</b>	<b>315-435-2362</b>	<b>Onondaga County Department of Aging and Youth Civic Center-13th Floor 421 Montgomery Street Syracuse, NY 13202-2911</b>
<b>Orange</b>	<b>845-615-3700</b>	<b>Orange County Office for the Aging 18 Seward Avenue Middletown, NY 10940</b>
<b>Oswego</b>	<b>315-349-3484</b>	<b>Oswego County Office for the Aging County Office Complex 70 Bunner Street P.O.Box3080 Oswego, NY 13126-3080</b>
<b>Putnam</b>	<b>845-808-1700</b>	<b>Office For Senior Resources 110 Old Route 6, Building #1 Carmel, NY 10512-2196</b>
<b>Rensselaer</b>	<b>518-270-2730</b>	<b>Unified Family Services Department for the Aging 1600 Seventh Avenue Troy, NY 12180</b>
<b>Rockland</b>	<b>845-364-2110</b>	<b>Rockland County Office for the Aging 50 Sanatorium Road Building B Pomona, NY 10970-0350</b>
<b>Schenectady</b>	<b>518-346-3497 Ext.102</b>	<b>Catholic Charities 1473 Erie Blvd Schenectady, NY 12305</b>
<b>Suffolk</b>	<b>631-853-6651</b>	<b>Office for the Aging P.O. Box 6100 - H. Lee Dennison Building 3rd Floor 100 Veterans Memorial Highway Hauppauge, NY 11788-0099</b>
<b>Sullivan</b>	<b>845-794-3000 Ext. 5000</b>	<b>Sullivan County Office for the Aging 100 North Street, P.O. Box 5012 Sullivan County Government Center Monticello, NY 12701</b>
<b>Ulster</b>	<b>845-340-3456</b>	<b>Ulster County Office for the Aging 1003 Development Court Kingston, NY 12401</b>

<b>Westchester</b>	<b>914-813-6100</b>	<b>Department of Senior Programs &amp; Services 9 South First Avenue, 10th Floor Mt. Vernon, NY 10550</b>
<b>Wyoming</b>	<b>585-786-8833</b>	<b>Wyoming County Office for Aging 8 Perry Avenue Warsaw, NY 14569</b>

## SECTION 5 Programs That Help Pay for Prescription Drugs

You may qualify for help paying for prescription drugs. There are two basic kinds of help:

- **“Extra Help” from Medicare.** People with limited incomes may qualify for “Extra Help” to pay for their prescription drug costs. If you qualify, Medicare could pay up to 75% or more of your drug costs including monthly prescription drug premiums, annual deductibles, and coinsurance. Additionally, those who qualify will not have a coverage gap or late enrollment penalty. Many people are eligible and don’t even know it. To see if you qualify, call:
  - 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048, 24 hours a day/7 days a week;
  - The Social Security Office at 1-800-772-1213 between 7 a.m. and 7 p.m., Monday through Friday. TTY users should call, 1-800-325-0778 (applications); or
  - Your State Medicaid Office (applications).
- **Help from your state’s pharmaceutical assistance program.** New York State has a program called Elderly Pharmaceutical Insurance Coverage (EPIC) program that helps people pay for prescription drugs based on their financial need, age, or medical condition. To learn more about the program, check with your State Health Insurance Assistance Program (the name and phone numbers for this organization are in Section 5 of this booklet).

<b>New York State Health Insurance Information, Counseling and Assistance Program (HIICAP)</b>		
<b>COUNTY</b>	<b>CALL</b>	<b>WRITE</b>
<b>Bronx, Kings, Manhattan, Queens, Richmond</b>	<b>212-602-4180</b>	<b>New York City Department for the Aging 2 Lafayette Street, 7th Floor New York, NY 10007-1392</b>
<b>Albany</b>	<b>518-447-7177</b>	<b>Albany County Department for the Aging 162 Washington Ave</b>

		<b>Albany, NY 12210</b>
<b>Allegany</b>	<b>866-268-9390</b>	<b>Allegany County Office for the Aging 6085 State Route 19N Belmont, NY 14813</b>
<b>Broome</b>	<b>607-722-1251</b>	<b>Action for Older Persons Inc. 32 West State Street Binghamton, NY 13901</b>
<b>Cattaraugus</b>	<b>716-373-8032</b>	<b>Cattaraugus County Dept of Aging 1 Leo Moss Drive, Suite 7610 Olean, NY 14760</b>
<b>Chenango</b>	<b>607-337-1770</b>	<b>Chenango County Area Agency on Aging County Office Bldg., 5 Court Street Norwich, NY 13815</b>
<b>Columbia</b>	<b>518-828-4258</b>	<b>Columbia County Office for the Aging 325 Columbia Street Hudson, NY 12534</b>
<b>Cortland</b>	<b>607-753-5060</b>	<b>Cortland County Area Agency on Aging County Office Bldg 60 Central Avenue Cortland, NY 13045</b>
<b>Delaware</b>	<b>607-746-6333</b>	<b>Delaware County Office for the Aging 6 Court Street Delhi, NY 13753</b>
<b>Dutchess</b>	<b>845-486-2555</b>	<b>Dutchess County Office for the Aging 27 High Street Poughkeepsie, NY 12601</b>
<b>Erie</b>	<b>716-858-8526</b>	<b>Erie County Dept. of Senior Services 95 Franklin Street, Room 1329 Buffalo, NY 14202</b>
<b>Greene</b>	<b>518-719-3555</b>	<b>Greene County Department for the Aging Greene County Office Building 411 Main Street Catskill, NY 12414</b>
<b>Hamilton</b>	<b>518-761-6347</b>	<b>Warren/Hamilton Counties Offices for the Aging 1340 State Route 9 Lake George, NY 12845</b>
<b>Herkimer</b>	<b>315-894-9917 Ext. 236</b>	<b>Catholic Charities of Herkimer County 61 West Street Ilion, NY 13357</b>
<b>Montgomery</b>	<b>518-843-2300</b>	<b>Office for the Aging 135 Guy Park Ave Amsterdam, NY 12010</b>
<b>Nassau</b>	<b>516-485-3754</b>	<b>Office of Children and Family Services 400 Oak Street</b>

<b>Garden City, NY 11530</b>		
<b>Niagara</b>	<b>716-438-4020</b>	<b>Niagara County Office for the Aging 111 Main Street, Suite 101 Lockport, NY 14094</b>
<b>Oneida</b>	<b>315-798-3658</b>	<b>Oneida County Office for Aging 120 Airline Street, Suite 201 Oriskany, NY 13424</b>
<b>Onondaga</b>	<b>315-435-2362</b>	<b>Onondaga County Department of Aging and Youth Civic Center-13th Floor 421 Montgomery Street Syracuse, NY 13202-2911</b>
<b>Orange</b>	<b>845-615-3700</b>	<b>Orange County Office for the Aging 18 Seward Avenue Middletown, NY 10940</b>
<b>Oswego</b>	<b>315-349-3484</b>	<b>Oswego County Office for the Aging County Office Complex 70 Bunner Street P.O.Box3080 Oswego, NY 13126-3080</b>
<b>Putnam</b>	<b>845-808-1700</b>	<b>Office For Senior Resources 110 Old Route 6, Building #1 Carmel, NY 10512-2196</b>
<b>Rensselaer</b>	<b>518-270-2730</b>	<b>Unified Family Services Department for the Aging 1600 Seventh Avenue Troy, NY 12180</b>
<b>Rockland</b>	<b>845-364-2110</b>	<b>Rockland County Office for the Aging 50 Sanatorium Road Building B Pomona, NY 10970-0350</b>
<b>Schenectady</b>	<b>518-346-3497 Ext.102</b>	<b>Catholic Charities 1473 Erie Blvd Schenectady, NY 12305</b>
<b>Suffolk</b>	<b>631-853-6651</b>	<b>Office for the Aging P.O. Box 6100 - H. Lee Dennison Building 3rd Floor 100 Veterans Memorial Highway Hauppauge, NY 11788-0099</b>
<b>Sullivan</b>	<b>845-794-3000 Ext. 5000</b>	<b>Sullivan County Office for the Aging 100 North Street, P.O. Box 5012 Sullivan County Government Center Monticello, NY 12701</b>
<b>Ulster</b>	<b>845-340-3456</b>	<b>Ulster County Office for the Aging 1003 Development Court</b>

<b>Kingston, NY 12401</b>		
<b>Westchester</b>	<b>914-813-6100</b>	<b>Department of Senior Programs &amp; Services 9 South First Avenue, 10th Floor Mt. Vernon, NY 10550</b>
<b>Wyoming</b>	<b>585-786-8833</b>	<b>Wyoming County Office for Aging 8 Perry Avenue Warsaw, NY 14569</b>

## SECTION 6 Questions?

### Section 6.1 – Getting Help from Fidelis Dual Advantage Flex

Questions? We're here to help. Please call Member Services at 1-800-247-1447 (TTY only, call 1-800-695-8544). We are available for phone calls 8:00 a.m. to 8:00 p.m. seven days a week from October 1 to February 14, and Monday through Friday, 8:00 a.m. to 8:00 p.m. from February 15 through September 30. Calls to these numbers are free.

#### **Read your 2015 *Evidence of Coverage* (it has details about next year's benefits and costs)**

This *Annual Notice of Changes* gives you a summary of changes in your benefits and costs for 2015. For details, look in the 2015 *Evidence of Coverage* for Fidelis Dual Advantage Flex. The *Evidence of Coverage* is the legal, detailed description of your plan benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs. A copy of the *Evidence of Coverage* is included in this envelope.

#### **Visit our Website**

You can also visit our website at [www.fideliscare.org](http://www.fideliscare.org). As a reminder, our website has the most up-to-date information about our provider and pharmacy network (Provider and Pharmacy Directory) and our list of covered drugs (Formulary/Drug List).

### Section 7.2 – Getting Help from Medicare

To get information directly from Medicare:

#### **Call 1-800-MEDICARE (1-800-633-4227)**

You can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

## Visit the Medicare Website

You can visit the Medicare website (<http://www.medicare.gov>). It has information about cost, coverage, and quality ratings to help you compare Medicare health plans. You can find information about plans available in your area by using the Medicare Plan Finder on the Medicare website. (To view the information about plans, go to <http://www.medicare.gov> and click on “Find health & drug plans.”)

## Read *Medicare & You 2015*

You can read *Medicare & You 2015* Handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. If you don't have a copy of this booklet, you can get it at the Medicare website (<http://www.medicare.gov>) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

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## Section 7.3 – Getting Help from Medicaid

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To get information from Medicaid, you can contact your local Department of Social Services.

COUNTY	CALL	WRITE
<b>Albany</b>	<b>518-447-7492</b>	<b>Albany County DSS 162 Washington Avenue Albany, NY 12210</b>
<b>Allegany</b>	<b>585-268-9622</b>	<b>Allegany County DSS 7 Court Street Belmont, NY 14813</b>
<b>Broome</b>	<b>607-778-8850</b>	<b>Broome County DSS 36-42 Main Street Binghamton, NY 13905</b>
<b>Cattaraugus</b>	<b>716-373-8065</b>	<b>Cattaraugus County DSS 1701 Lincoln Avenue Suite 6010 Olean, NY 14760</b>
<b>Chenango</b>	<b>607-337-1500</b>	<b>Chenango County DSS PO Box 590, Court Street Norwich, NY 13815</b>
<b>Columbia</b>	<b>518-828-9411/12</b>	<b>Columbia County DSS 25 Railroad Avenue PO Box 458 Hudson, NY 12534</b>
<b>Cortland</b>	<b>607-753-5248</b>	<b>Cortland County DSS 60 Central Avenue</b>

<b>Cortland, NY 13045</b>		
<b>Delaware</b>	<b>607-746-2325</b>	<b>Delaware County DSS 111 Main Street Delhi, NY 13753</b>
<b>Dutchess</b>	<b>845-486-3000</b>	<b>Dutchess County DSS 60 Market Street Poughkeepsie, NY 12601-3299</b>
<b>Erie</b>	<b>716-858-8000</b>	<b>Erie County DSS 95 Franklin Street Buffalo, NY 14202</b>
<b>Greene</b>	<b>518-943-3200</b>	<b>Greene County DSS 411 Main Street PO Box 528 Catskill, NY 12414-1716</b>
<b>Hamilton</b>	<b>518-648-6131</b>	<b>Hamilton County DSS PO Box 725, White Birch Lane Indian Lake, NY 12842</b>
<b>Herkimer</b>	<b>315-867-1291</b>	<b>Herkimer County DSS 301 North Washington Street, Suite 2110 Herkimer, NY 13350</b>
<b>Montgomery</b>	<b>518-853-4646</b>	<b>Montgomery County DSS County Office Building PO Box 745 Fonda, NY 12068</b>
<b>NYC</b>	<b>718-557-1399</b>	<b>Human Resources Administration</b>
<b>Bronx, Kings, Manhattan, Queens, Richmond</b>		
<b>Nassau</b>	<b>516-227-7474</b>	<b>Nassau County DSS 60 Charles Lindbergh Blvd. Uniondale, New York 11553-3656</b>
<b>Niagara</b>	<b>716-439-7600</b>	<b>Niagara County DSS 20 East Avenue PO Box 506 Lockport, NY 14095</b>
<b>Oneida</b>	<b>315-798-5632</b>	<b>Oneida County DSS 800 Park Avenue Utica, NY 13501-2981</b>
<b>Onondaga</b>	<b>315-435-2928</b>	<b>Onondaga County DSS Onondaga County Civic Center 421 Montgomery Street</b>



		<b>Syracuse, NY 13202-2923</b>
<b>Orange</b>	<b>845-291-4000</b>	<b>Orange County DSS Box Z , 11 Quarry Road Goshen, New York 10924-0678</b>
<b>Oswego</b>	<b>315-963-5000</b>	<b>Oswego County DSS 100 Spring Street PO Box 1320 Mexico, NY 13114</b>
<b>Putnam</b>	<b>845-225-7040</b>	<b>Putnam County DSS 110 Old Route Six Center Carmel, New York 10512-2110</b>
<b>Rensselaer</b>	<b>518-270-3928</b>	<b>Rensselaer County DSS 1801 6<sup>th</sup> Avenue Troy, NY 12180</b>
<b>Rockland</b>	<b>845-364-3040</b>	<b>Rockland County DSS Building L Sanatorium Road Pomona, New York 10970</b>
<b>Schenectady</b>	<b>518-388-4470</b>	<b>Schenectady County DSS 797 Broadway Schenectady, NY 12305</b>
<b>Suffolk</b>	<b>631-854-9700 Riverhead 631-852-3710 Hauppauge 631-853-8730</b>	<b>Suffolk County DSS 3085 Veterans Memorial Highway Ronkonkoma, New York 11779-8900</b>
<b>Sullivan</b>	<b>845-292-0100</b>	<b>Sullivan County DSS P.O. Box 231 19 Community Lane Liberty, NY 12754</b>
<b>Ulster</b>	<b>845-334-5000</b>	<b>Ulster County DSS 1061 Development Center Kingston, NY 12401-1959</b>
<b>Westchester</b>	<b>914-995-3333</b>	<b>Westchester County DSS White Plains District Office 85 Court Street White Plains, New York 10601-4201</b>
<b>Wyoming</b>	<b>585-786-8900</b>	<b>Wyoming County DSS 466 North Main Street Warsaw, NY 14569</b>

