

To:

All Providers

HMOs and Other
Managed Care
Programs

SeniorCare program begins in September

Coverage of prescription drug costs for eligible participants enrolled in the new SeniorCare program will begin September 1, 2002.

What is SeniorCare?

SeniorCare is a new prescription drug assistance program for Wisconsin residents who are 65 years of age or older who meet the eligibility criteria. The program is designed to help seniors with their prescription drug costs. Coverage under the new program will begin on September 1, 2002.

Eligibility requirements

To be eligible to participate in SeniorCare, an applicant must:

- Be a Wisconsin resident.
- Be 65 years of age or older.
- Pay a \$20 annual enrollment fee per person.

Benefit levels based on income

Program participants are subject to certain annual out-of-pocket expense requirements depending on annual income. The table in Attachment 1 of this *Wisconsin Medicaid and BadgerCare Update* lists these expense requirements. Assets such as checking and savings accounts, insurance policies, home property, etc., are not counted when determining eligibility.

Eligibility for participants with other prescription drug coverage

Individuals with prescription drug coverage under other health plans, except Wisconsin Medicaid, will be eligible to enroll in SeniorCare. Wisconsin Medicaid recipients will not be eligible for SeniorCare. SeniorCare, like Wisconsin Medicaid, will require providers to:

- Be Medicaid certified.
- Bill commercial health insurance before billing SeniorCare.

Covered benefits

SeniorCare will cover legend drugs and insulin where the manufacturer has signed a rebate agreement. Supplies, equipment, and over-the-counter drugs will not be covered.

Additional information

For additional information regarding the SeniorCare program, providers may refer to Provider Services at (800) 947-9627 or (608) 221-9883 and to the Wisconsin SeniorCare Program Web site at the following address: www.dhfs.state.wi.us/seniorcare/index.htm. Providers are encouraged to check the site often for updates and to refer patients to the site for further information. Pharmacy-specific information on SeniorCare will be sent separately.

ATTACHMENT 1

SeniorCare income limits and expense requirements

The table below lists the income limits and annual out-of-pocket expense requirements for SeniorCare program participants. When purchasing drugs, SeniorCare participants must use Wisconsin Medicaid-certified pharmacies. SeniorCare will automatically track drug costs that are applied to the spenddown and deductible through the Wisconsin Medicaid Point-of-Sale (POS) system.

Income limits, based on 2002 Federal Poverty Levels (FPL)*	Annual out-of-pocket expense requirements and benefits*
At or below 160% FPL (\$14,176 per individual and \$19,104 per couple annually).	<ul style="list-style-type: none"> • Pay a \$20 annual enrollment fee per person. • No deductible or spenddown. • Pay a \$15 copay for each brand name drug and a \$5 copay for each generic drug.
Between 160% and 240% of FPL (\$14,177 to \$21,264 per individual and \$19,105 to \$28,656 per couple annually).	<ul style="list-style-type: none"> • Pay a \$20 annual enrollment fee per person. • \$500 deductible per person. • Receive discount off the retail price of most covered prescriptions for drugs until the \$500 deductible is met. • After \$500 deductible is met, pay a \$15 copay for each brand name drug and a \$5 copay for each generic drug.
Above 240% FPL (\$21,265 or higher per individual and \$28,657 or higher per couple annually).	<ul style="list-style-type: none"> • Pay a \$20 annual enrollment fee per person. • Pay retail price for drugs equal to the amount that income exceeds 240% of FPL (also known as spenddown). • Drug costs for spenddown will be tracked automatically by SeniorCare. During the spenddown, there is no discount on drug costs. • After spenddown is met, meet a \$500 deductible. • Receive discount off the retail price of most covered prescriptions for drugs until the \$500 deductible is met. • After the \$500 deductible is met, pay a \$15 copay for each brand name drug and a \$5 copay for each generic drug.

* Annual FPL income levels and out-of-pocket expense requirements are calculated as of May 2002.