

FREQUENTLY ASKED QUESTIONS (FAQ)



TEXAS MEDICARE-MEDICAID PLAN - PROVIDER

1. What is the Texas Dual Eligibles Integrated Care Demonstration Project?

The Texas Dual Eligibles Integrated Care Demonstration Project is a demonstration program jointly run by Texas and the federal Centers for Medicare & Medicaid Services (CMS) to provide better health care for people who have both Medicare and Medicaid. Under this demonstration, the state and federal government want to test new ways to improve how dual beneficiaries receive Medicare and Medicaid health care services. Cigna-HealthSpring brings over 10 years of experience working with the dual eligible population, a proven track record of quality care, improved results and enhanced customer experience. Plans available through this demonstration are called Medicare-Medicaid Plans (MMPs).

2. Who is eligible to enroll in a Medicare-Medicaid Plan?

In general, individuals who meet all of the following criteria will be eligible to enroll in a MMP:

- Reside in one of six counties: Bexar, Dallas, El Paso, Harris, Hidalgo, or Tarrant (Cigna-HealthSpring service areas include Hidalgo and Tarrant* counties only)
- Age 21 or older;
- Have both Medicare and Texas Medicaid; and
- Do not have third party insurance (other than Medicare and Medicaid).

3. What is the name of our Medicare-Medicaid plan?

Cigna-HealthSpring CarePlan (Medicare-Medicaid Plan)

4. How will members benefit from Cigna-HealthSpring CarePlan?

Cigna-HealthSpring CarePlan makes it easier for people who receive both Medicare and Texas Medicaid to receive medical and community-based services through one health plan. This plan will make it easier to manage one's own health care needs through better service coordination. Under Cigna-HealthSpring CarePlan, members will not lose any of their current Medicare or Texas Medicaid benefits, but will receive additional benefits, including: a 24-hour nurse advice line, a gym membership, and an over-the-counter monthly allowance.

5. Who are the selected health plans?

The selected health plans for Hidalgo county include: Cigna-HealthSpring, Molina, and Superior. The selected health plans for Tarrant* county include: Amerigroup, Cigna-HealthSpring.

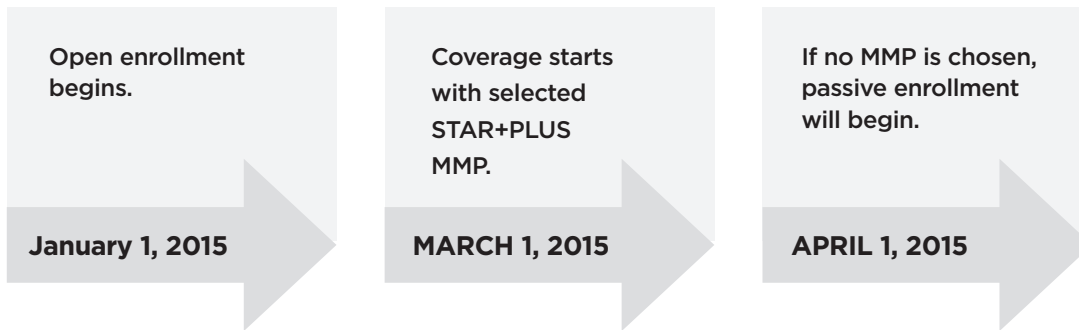
6. When can beneficiaries enroll in Medicare-Medicaid Plans?

Eligible individuals in the selected service areas received a letter from the State of Texas notifying them of their chance to select a Medicare-Medicaid Plan (MMP) in January. Eligible individuals who sign up for a MMP can be covered by the MMP as early as March 1, 2015.

Those who are enrolled in Original Medicare (who qualify for a MMP) who do not make an affirmative choice to choose a MMP or opt-out may be auto-assigned to a MMP starting as soon as April 1, 2015 – a process called “passive enrollment.” Enrollees will receive information on the passive enrollment process no fewer than 60 days prior to the effective date of enrollment into the assigned MMP. During this time, they will have the opportunity to switch to a different MMP or opt out of the demonstration.

Important dates to remember:

- › January 1, 2015 – Open enrollment began—beneficiaries can sign up for a MMP.
- › March 1, 2015 – Coverage begins with selected MMP.
- › April 1, 2015 – If no MMP is chosen, passive enrollment may begin with those who qualify.



7. Is the demonstration mandatory for dually eligible beneficiaries in Texas?

Individuals can opt-out of the demonstration at any time, before or after passive enrollment, to keep their Medicare and Medicaid the same as it is today. Eligible beneficiaries who opt-out or disenroll from the demonstration will continue to receive Medicaid services through the STAR+PLUS program, and they will continue to have a choice of Original Medicare or Medicare Advantage and a prescription drug plan.

8. How does this affect current Cigna-HealthSpring TotalCare members?

TotalCare (HMO-SNP) is a Cigna-HealthSpring plan that currently serves the dual-eligible population. Beginning January 1, 2015, Cigna-HealthSpring TotalCare members who are eligible to enroll in a MMP may be passively enrolled into Cigna-HealthSpring CarePlan or another participating MMP. Enrollment is dependent on the STAR+PLUS plan in which they are currently enrolled and if they are on any HCBS waivers.

9. How does this affect current STAR+PLUS members who receive Medicare?

Beginning January 1, 2015, Cigna-HealthSpring STAR+PLUS members who receive Original Medicare who are eligible to enroll in a MMP can choose to voluntarily enroll in Cigna-HealthSpring CarePlan. This plan will have many enhanced benefits that are not offered in a stand-alone STAR+PLUS plan.

Questions? Please call the Provider Services line at 1-877-653-0331.



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