



Member Handbook

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Civil Rights Protections

Several state and federal laws require all SeniorCare benefits to be provided on a non-discriminatory basis. All seniors applying for SeniorCare are protected against discrimination based on race, color, national origin, sex, religion, age, disability or association with a person with a disability. Any of the following actions may be considered discriminatory treatment, if taken on the basis of any of the above reasons:

- Denial of SeniorCare benefits.
- Segregation or separate treatment.
- Restriction in any way of any advantage or privilege received by others.
- Treatment which is different from that given to others in the determination of enrollment.

Discrimination Complaints

If you believe you have been discriminated against in any way that relates to applying for SeniorCare, contact:

**Wisconsin Department of Health Services
Affirmative Action and Civil Rights
Compliance Office
PO Box 7850
Madison WI 53707-7850
1-608-266-9372 (voice) or
1-608-266-2555 (TTY)**

You may also register complaints at the federal level with the:

**U.S. Dept. of Health and Human Services
Office of Civil Rights
16th Floor
105 W Adams St
Chicago IL 60603
1-312-886-2359 (voice)**

Wisconsin SeniorCare

Wisconsin SeniorCare is a state/federal funded program that helps Wisconsin residents who are 65 years of age or older and who meet the SeniorCare enrollment rules with prescription drug costs. SeniorCare is administered by the Department of Health Services.

How to Apply

You may apply for SeniorCare by completing a SeniorCare application. To get an application contact:

- Your local Office on Aging, Senior Center or Aging Resource Center,
- SeniorCare Customer Service at 1-800-657-2038 (TTY and translation services are available), or
- Applications may also be printed from the Department of Health Services web site at dhs.wi.gov/seniorcare.

Once you have completed an application, mail it and your enrollment fee to:

SeniorCare
PO Box 6710
Madison WI 53716-0710

Please Note: Your application will not be accepted if you apply earlier than the calendar month before your 65th birthday.

Enrollment Rules

Qualifying for SeniorCare

Those who meet all of the following rules may be able to enroll in SeniorCare:

- Must be a Wisconsin resident
- Must be a U.S. citizen or a qualifying immigrant
- Must be 65 years of age or older
- Must provide a Social Security Number or apply for one

- Must pay an enrollment fee of \$30 per person
- Must not be enrolled in a full-benefit Medicaid plan.

Social Security Number

Sections 49.688 and 49.82(2) of the Wisconsin Statutes require that Social Security Numbers and other personally identifiable information must be provided to enroll in SeniorCare. Failure to provide this information may result in denial of your application for benefits. This information will be used only for the direct administration of the SeniorCare Program.

Income

Annual gross income is used to determine your level of benefits and what expenses you will have to pay out-of-pocket.

To make sure that SeniorCare applicants and members report their income correctly, staff from SeniorCare Customer Service may contact you and ask you to provide proof of the answers you provided on your application or SeniorCare annual renewal. If you do not provide any requested proof, your benefits may end or be denied.

If it is discovered that you intentionally provided an inaccurate estimate of your annual income, the Department of Health Services may recover the costs of your benefits from you. (See Fraud; page 14 for more details.)

Assets

There is no asset limit for SeniorCare. Items such as bank accounts (checking and/or savings), insurance policies and home property are not counted in determining SeniorCare enrollment. However, interest earned on your checking and/ or savings account will be counted.

Out-of-Pocket Expenses

SeniorCare members are required to pay certain annual out-of-pocket costs. The amount you are required to pay will depend on the SeniorCare program income rules, which are based on the Federal Poverty Level (FPL) guidelines. These amounts change each year. You can get the current FPL guidelines for SeniorCare online at: dhs.wi.gov/em/customerhelp or by contacting SeniorCare Customer Services at 1-800-657-2038.

Copayments/Deductibles/Spenddown

Everyone enrolled in SeniorCare will have to pay a copayment. Copayments for SeniorCare covered prescription drugs are \$5 for each generic drug and \$15 for each brand name drug filled.

Depending on your income, you may be required to pay a deductible and a spenddown. You will get a Letter of Enrollment notifying you if you will have a deductible and spenddown and the amount. More information about deductible and spenddown can be found in “Enrollment Levels”.

Health Insurance Coverage

If you have prescription drug coverage under other health insurance plans, including Medicare Parts A, B or D, you may enroll in SeniorCare. SeniorCare will coordinate benefit coverage with all other health insurance coverage including Medicare covered drugs when submitted by your pharmacy as a prescription drug claim.

If you have questions about your individual health insurance coverage, contact your health insurance company directly. For questions about your insurance carrier contact:

State of Wisconsin
Office of Commissioner of Insurance
Bureau of Market Regulation
PO Box 7873
Madison WI 53707-7873
1-800-236-8517

Participating Pharmacies

Please Note: SeniorCare will not cover services billed by pharmacies who do not take part in SeniorCare. If you have a deductible and/or a spenddown, only prescriptions filled by a SeniorCare pharmacy will be applied toward your deductible and/or spenddown.

SeniorCare will keep track of all covered drug costs submitted by participating pharmacies. If the prescription is covered by other health insurance, only the portion you pay is applied toward your spenddown or deductible. When out-of-pocket expense requirements are met for your spenddown or deductible, your pharmacy will be notified upon the next claim submission.

All pharmacies certified to serve Wisconsin Medicaid members are also certified to serve SeniorCare members. Over 95% of all Wisconsin pharmacies take part in Wisconsin Medicaid. If you need help finding a participating pharmacy, contact SeniorCare Customer Services.

Pharmacies are responsible for submitting claims to the SeniorCare Program. SeniorCare will not reimburse members directly for covered services. Members should not submit bills or receipts for prescriptions to the SeniorCare Program.

Enrollment Levels

Most members enrolled in SeniorCare will get a 12-month benefit period.

There are four enrollment levels. Wisconsin law has set income rules for each level based on a percentage of the Federal Poverty Level (FPL). See page 7 for these amounts. Your enrollment level depends on your gross annual income. The enrollment levels are:

Level 1

If your gross annual income is at or below 160% of the current FPL:

- You will be required to pay a copayment for each SeniorCare covered drug filled (see Copayments, page 3).

Level 2a

If your gross annual income is greater than 160% of the current FPL and less than or equal to 200% of the current FPL:

- You will have an annual deductible of \$500. This means that each enrollment year, you must pay for the first \$500 of your SeniorCare covered prescription drug costs.
- You will receive SeniorCare covered prescription drugs during the deductible period at the SeniorCare rate.
- You and/or your spouse (if married and both are enrolled) will each have your own \$500 deductible. If your spouse enrolls at a different time during the 12-month period, the deductible amount for the spouse who enrolled at a later time will be prorated.
- Once you have met your deductible (\$500), for the rest of the enrollment year, you will have a copayment for each SeniorCare covered drug filled (see Copayments, page 3).

Level 2b

If your gross annual income is greater than 200% of the current FPL and less than or equal to 240% of the current FPL:

- You will have an annual deductible of \$850. This means that each enrollment year, you must pay for the first \$850 of your covered prescription drug costs. You will get the SeniorCare rate on most covered drugs during the deductible period.
- You and your spouse (if married and both are enrolled) will each have an \$850 deductible. If you and your spouse are enrolled at different times during the 12-month period, the deductible amount for the spouse who enrolled at a later time will be prorated.
- Once you have met your deductible (\$850), for the rest of the enrollment year, you will have a copayment for each SeniorCare covered prescription drug filled (see Copayments, page 3).

Level 3

if your gross annual income is above 240% of the current FPL:

- You will have an annual spenddown requirement. The amount of the spenddown is equal to the difference between your gross annual income and 240% of the current FPL. When a married couple with a combined annual income greater than 240% of the FPL are both enrolled in SeniorCare, they will have a joint spenddown requirement. During the spenddown period you will pay the retail rate for SeniorCare covered prescription drugs.
- Once you have met the spenddown, for the rest of your enrollment year, each enrolled member will have an \$850 deductible. During your deductible period, you will receive a discount off the retail price of most SeniorCare covered prescription drugs at the SeniorCare rate .
- You and your spouse (if married and both are enrolled) will each have an \$850 deductible. If you and your spouse are enrolled at different times during the 12-month period, the deductible amount for the spouse who enrolled at a later time will be prorated.

2012 SeniorCare Enrollment Levels*

Group Size	Level 1 Income at or below 160% FPL	Level 2a Income between 160% - 200% FPL	Level 2b Income between 200% - 240% FPL	Level 3 Income more than 240% FPL
1	\$17,872	\$17,873 — \$22,340	\$22,341 — \$26,808	\$26,809 or greater
2	\$24,208	\$24,209 — \$30,260	\$30,261 — \$36,312	\$36,313 or greater

*These levels are based on the 2012 Federal Poverty Level (FPL) income guidelines, which change each year. You can get the current guidelines for SeniorCare online at: dhs.wi.gov/em/customerhelp or by contacting SeniorCare Customer Services at 1-800-657-2038.

- Once you have met your deductible (\$850), for the rest of the enrollment year, you will have a copayment for each SeniorCare covered drug filled (see Copayments, page 3).

When Coverage Begins

Your SeniorCare enrollment begins on the first day of the month following the date SeniorCare receives your completed application and you have met all enrollment rules, including payment of the \$30 enrollment fee.

You will receive a Letter of Enrollment that will have the begin and end date of enrollment, as well as your enrollment level. It is very important for you to read and keep all mail you get about your SeniorCare enrollment.

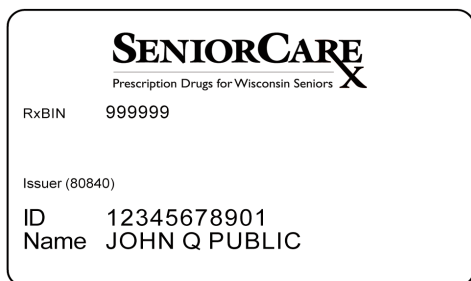
Refund of Enrollment Fee

A refund of your \$30 enrollment fee will be made if:

- You are unable to enroll in SeniorCare, or
- You request to withdraw an application before receiving a Letter of Enrollment, or
- You received a Letter of Enrollment, but have not received any SeniorCare prescription drug benefits. In this case, the request for a refund must be made within 30 days of your application date or within 10 days from the date the notice is mailed, whichever is later.

SeniorCare ID Card

Everyone who is enrolled in SeniorCare will receive a SeniorCare card.



It is important to safeguard your SeniorCare card, because it is intended to be a permanent card and is the way to show your pharmacy provider that you are covered by SeniorCare.

After receiving your card, contact SeniorCare Customer Services at 1-800-657-2038 if:

- The name on your card is wrong.
- Your SeniorCare card is lost or damaged (a new card will be issued immediately).
- You have questions about the use of the card.

When going to a SeniorCare pharmacy provider, be sure to take your card with you. Your card will be used to verify your enrollment at each visit.

You will not get a new card each year. If you receive a letter saying you are no longer enrolled in SeniorCare, you should keep your SeniorCare card. If you enroll in SeniorCare at a later date, you will use the same card.

The SeniorCare card does not show your enrollment dates. You will get a Letter of Enrollment that has your enrollment dates.

Enrollment Updates and Renewals Reporting Changes

You need to report certain changes. The following changes need to be reported within 10 days of the change:

- A new address
- A change in state residency
- Death of a member
- Marriage/separation/divorce

Changes can be reported by calling SeniorCare Customer Services at 1-800-657-2038.

You do not need to report changes in income, unless you believe your financial circumstance has changed to the extent that it would be beneficial for you to reapply (see Reapplying below).

All other income changes will be updated when you complete your annual renewal.

Reapplying

During your 12-month benefit period, if you have a significant decrease in income or a change that results from a marriage, divorce, spouse moving out of your home (for example, to a nursing home) or returning to it, or death of a spouse, you may request to establish a new 12-month enrollment benefit period by reapplying for SeniorCare.

To reapply, you must submit a new application and another \$30 enrollment fee per applicant.

Enrollment will be redetermined for a new 12-month enrollment year (within 30 days) after a complete application is received.

Annual Renewal

Most SeniorCare benefits are approved for a 12-month period and are renewable annually. If you wish to apply to have your SeniorCare enrollment renewed for an additional 12-month benefit period, you must complete and return your SeniorCare Renewal Application. If you do not complete and return your Renewal Application, your SeniorCare benefit period will end on the last day of the 12th month of your current enrollment.

Annual Renewal Application

You will receive a Renewal Application and instructions about six weeks prior to the end of your current benefit period.

You will receive instructions and an income calculation worksheet to assist you in completing the Renewal Application.

SeniorCare Benefits

Covered Prescriptions

SeniorCare covers most prescription drugs and over the counter insulin. Reimbursement for most drugs is limited to a 34-day supply. Some maintenance drugs may be provided in a three-month supply; other maintenance drugs must be provided in a three-month supply.

Prior Authorization

Some prescription drugs require prior approval from the SeniorCare Program before you get them. This is called prior authorization.

Your pharmacist must get prior authorization before some drugs will be covered. SeniorCare prior authorization may be required for some categories of prescription drugs and for drugs that appear to be for cosmetic use only.

If authorization is not approved, SeniorCare will not pay for the drug(s). If you have a spenddown and/or a deductible, these costs will not be applied toward your spenddown or deductible.

Prescriptions Not Covered

SeniorCare will not pay for:

- Drugs administered in a physician's office.
- Drugs that are experimental or have a cosmetic, not a medical, purpose.
- Over-the-counter drugs such as vitamins and aspirin even if prescribed, except for insulin.
- Drugs for which authorization has been denied.
- Drugs from manufacturers who have not signed a rebate agreement with the State.

Participating pharmacies know what limits are placed on prescription drugs by the SeniorCare Program. The pharmacist must tell you if a prescription drug is covered by SeniorCare, before the drug is dispensed. If SeniorCare does not cover a drug, you may still choose to purchase that drug. A pharmacist may charge you for those drug costs if, the pharmacist has informed you that it is not covered and has received your consent prior to the purchase.

The participating pharmacy provider must notify you, before filling your prescription, if a drug is not covered under SeniorCare. If you decide you still want your prescription filled, you will be responsible for the cost and it will not count toward your spenddown or deductible.

Please Note: Immunizations and vaccines (for example: flu shot, pneumonia shot, etc.) are not covered under the SeniorCare Program.

Potential Coverage Limitations for Levels 2b and 3

Coverage of drugs for SeniorCare members in Levels 2b and 3 are limited to drugs from manufacturers that enter into a SeniorCare rebate agreement with the State. By signing a rebate agreement with SeniorCare, drug manufacturers agree to make rebate payments to the State for those prescription drugs which were paid for by SeniorCare. The rebates help fund SeniorCare.

If a drug manufacturer has not signed a Senior-Care rebate agreement, SeniorCare will not cover that drug. There may, however, be an alternative drug available. Your pharmacist may be able to help you find an alternative drug from a manufacturer that has signed an agreement.

Questions to Ask

If your pharmacy tells you that a drug is not covered you should ask:

- Is it “not covered” because this is not a drug covered by SeniorCare?
- Is it “not covered” because the manufacturer did not sign a SeniorCare rebate agreement?
- Is it “not covered” because the pharmacy does not have it available?

Asking these questions will help you decide if you want to request an alternative drug or if SeniorCare will not be able to cover the drug at all.

Out-of-State Prescription Benefits

If you are traveling outside of Wisconsin for an extended period, you will need to make arrangements with your pharmacy in Wisconsin to have prescriptions sent to you. SeniorCare will not pay for prescription filled by out-of-state providers who do not take part in SeniorCare, except under the following circumstances:

- When you are within the United States, Canada or Mexico, and an emergency arises from an accident or illness requiring covered prescription drugs and when the pharmacy completes all the necessary forms. (An out-of-state pharmacy, that is not a certified Wisconsin SeniorCare provider, should contact SeniorCare Provider Services at 1-800-947-9627 to file a claim for payment.)
- When prior authorization has been granted for provision of a non-emergency prescription drug, and you are within the United States, Canada or Mexico.

Withdrawal from Program

You may withdraw from the SeniorCare program at any time. Your request can be made by phone, by calling SeniorCare Customer Services at 1-800-657-2038 or in writing by sending a written request

to: **SeniorCare**
 PO Box 6710
 Madison WI 53716-0710

Enrollment will end on the date that we mail your termination notice.

Termination from Program

SeniorCare enrollment is terminated when you:

- No longer meet the SeniorCare enrollment rules,
- Request to withdraw from the program, or
- Do not complete or fail to submit your annual Renewal Application.

Fraud

Member Fraud

Fraud means getting or helping another person get benefits to which you or that person is not entitled. People who commit fraudulent acts are subject to prosecution.

You may be fined up to \$10,000, imprisoned up to one year or both and suspended from the SeniorCare Program if you:

- Lie on the application for SeniorCare (good faith financial estimates will not be penalized as long as there is no intent to provide misleading, fraudulent, omitted or incomplete information).
- Fail to tell us about an event that you know affects initial or continued enrollment for SeniorCare.
- Apply for SeniorCare on behalf of another person and use any part of the benefit for yourself.
- Allow another person to use your SeniorCare card or use someone else's card to get prescription drugs.

Provider Fraud

If you suspect a SeniorCare provider of fraud, waste, or abuse, a complaint can be made by calling SeniorCare Customer Services at 1-800-657-2038 or by writing to:

Examples of provider fraud, waste, and abuse are:

- Billing for prescriptions that were not received.
- Billing for more than was provided.

SeniorCare Member Rights

Wisconsin and U.S. laws guarantee members rights, which include:

- The right to be treated with respect by state employees and their contractors.
- The right to confidentiality of all information. (This does not prohibit the use of such records for program purposes, including auditing or accounting purposes.)
- The right of access to records and files relating to your case, except information obtained under a promise of confidentiality.
- The right to remain enrolled in SeniorCare even if temporarily absent from the state, provided you remain a Wisconsin resident.
- The right to a speedy determination of enrollment status and prior notice of proposed changes in such status.
- The right to request reasonable accommodations to take part in the program for a disability-related reason or the right to request interpreters or translators to take part in the program.

Appeals

You may appeal to the state Division of Hearings and Appeals (DHA), if you believe your:

- Application for SeniorCare was unfairly denied.
- Application was not acted upon promptly.
- Benefits were unfairly suspended, discontinued, ended or reduced.

- Benefits or services you received were not properly determined.
- Initial enrollment date for program benefits was not properly determined.

General program policy decisions that apply to all SeniorCare members cannot be appealed. For example, SeniorCare will not pay for a non-covered drug, even if a health care provider prescribed it to you and you disagree with the rule.

An appeal may result in a fair hearing. If an appeal is filed for discontinuation, ended or suspension, before the date the change was to take effect, coverage will continue pending the hearing decision. The appeal should include important facts of the matter and your Senior-Care ID number.

An appeal must be made no later than 45 days after the date of the action being appealed. To learn more about the appeal process or to file an appeal, contact:

**Department of Administration
Division of Hearings and Appeals
PO Box 7875
Madison WI 53707-7875
1-608-266-3096**

The hearing will be held at a location determined by the Division of Hearings and Appeals. Hearings will be:

- Held at a time reasonably convenient to the petitioner, department, or agency staff and the administrative law judge.
- Reasonably accessible to the petitioner.
- Held at a location subject to the judgement of the administrative law judge.

If you need information about an accommodation for a disability or English translation, please call

1-608-266-3096. This phone number is only for the Administrative Hearing process.

Other Programs

If you are interested in other benefit programs, contact your local agency or visit the State of Wisconsin's internet tool ACCESS at access.wi.gov or call Member Services at 1-800-362-3002.

ACCESS.wi.gov

ACCESS is an online tool that will let you:

- Apply online for FoodShare, BadgerCare Plus, Medicaid and Family Planning Only Services.
- Get up-to-date information about the status of your FoodShare, BadgerCare Plus, Medicaid, SeniorCare or Caretaker Supplement benefits.
- Find out which low or no-cost health, nutrition and other programs you might be able to enroll in.

Visit access.wi.gov today!

Contacts and Other Information

Call SeniorCare Customer Services at 1-800-657-2038, if you have questions about:

- Your enrollment
- Your deductible and/or spenddown
- Covered prescription drugs
- Your Letters of Enrollment

Additional information about Wisconsin Programs can be found online, at:

- dhs.wi.gov/em/customerhelp
- dhs.wi.gov/forwardhealth
- dhs.wi.gov/aging/index.htm



State of Wisconsin
Department of Health Services
Division of Health Care Access and Accountability

The Department of Health Services is an equal opportunity service provider. If you need help to access benefits or material in an alternate format, please contact SeniorCare Customer Services at 1-800-657-2038 (TTY and translation services are available).