

Dear Senior Judges:

At the Senior Judges gathering at this year's Judicial Conference, Senior Judge John Fader (a registered pharmacist in an earlier life) offered to assist us in navigating our new world of Medicare Part D prescription coverage effective on January 1, 2019. The problem is making what Plan D is about understandable.

Judge Fader has enlisted several of our colleagues in different jurisdictions to contact a representative of Medicare at 1-800-Medicare and report their experiences to him. From the information that he received, some suggestions can be distilled, subject to an important caveat: everyone's coverage choices and needs will vary depending on cost, location (by zip code), and medications, and the particular Plan D coverage you choose.

So here goes:

- For the most part, the people spoken to at Medicare were knowledgeable and helpful. Conversations ran between 15 and 45 minutes.
- Expect to wait somewhat when you call. For that reason, call as soon as you can to avoid long hold times near the end of the year.
- When making the call to **1-800-MEDICARE (1-800-633-4227)**:
 1. Identify yourself as a Maryland retiree (or soon to be) having to enroll in Part D. Tell them up front that you realize they cannot yet tell you the rates for 2019.
 2. Be prepared to provide (a) the names of your medications and whether they are generic or brand name only, and (b) whether you are interested in a higher premium or a higher co-pay. One of the calls made for a person on Medicare showed the responder taking a social security number and then going into the system to see what drugs the caller was taking.
 3. Remember your spouse's medications are probably going to be different from yours and therefore his/her coverage needs may be different. The same provider may not best serve both parties.
 4. Remember that the numbers that we are receiving are 2018 prices and may change in 2019.
- You may not want to switch to Part D until after the open enrollment period begins in October 2018. Your current coverage does not end until December 31, 2018. It is a good idea to fill or refill as much as you can before the end of the year so you can have the benefit of the present plan offered by the State.
- After you make your plan selection, and before you enroll, check with your pharmacist for further comment, and to ease the change, see if any of your prescriptions can as filled near the end of the year under your current plan.

- You are going to hear about **Drug Tiers** and this is what that means:

Tier 1 Preferred generics / generally prescribed.

Tier 2 Generic drugs which cost more than drugs in Tier 1.

Tier 3. Preferred brand / no generic equivalent / lowest cost brand drugs.

Tier 4 Nonpreferred brand and generic drugs not listed in a preferred Tier.

Tier 5 Specialty / most expensive drugs to treat complex conditions like cancer and multiple sclerosis (may be either generic or brand name)

- To give you an example, Judge Fader states that if he and his wife would choose the SilverScript Plus plan for 2019:
 - The premium for each of them individually will be \$77.60 monthly (2018 rates) (as opposed to the payment for both of them in 2018 of \$73.75.)
 - They would have to make co-payments or a percentage payment (which percentage payment Part D refers to as coinsurance) for a 90 day supply from a preferred pharmacy (both CVS and Walgreens are preferred pharmacies in our 21030 zip code) as stated below for the different Tiers. Check with the Plan you choose whether the pharmacy with which you deal is a preferred, standard or mail order pharmacy until they reach what is called the donut hole of \$3,750 (calculated by combining the amount of the co-pay and the amount SilverScript Plus pays for the drugs).

Tier 1. \$1.00

Tier 2. \$12.50

Tier 3. \$87.50

Tier 4. 40% of the cost of the drug

Tier 5. 33% of the cost of the drug for a 30 day supply – no 90 day supply is available

Each plan is going to have a formulary of drugs covered by the Plan.

- From \$3,750 toward \$5,000 (if this would someday apply) for a 90 day supply

Tier 1. \$2.50

Tier 2. \$12.50

Tiers 3-5. 44% of generic drug cost and 35% of branded drug cost.

- Over \$5,000 (if this would someday apply):
 - Generic drugs – the greater of 5% of the drug cost as coinsurance or \$3.35 copay.
 - Branded drugs – the greater of 5% of the drug cost as coinsurance or \$8.35 copay.

- A question that has arisen is what plan might most closely approximate the Silver Script plan that we now have, Judge Fader was referred to the Silver Script Direct Plan and spoke to a representative at 1-866-362-6212. He was advised that of the two available Silver Script plans, the plan similar (but not exactly the same) as the current plan we are in was the Silver Script Plus plan. The monthly cost was for 2018 is \$77.60 per person. There is also a Silver Script Choice plan that might benefit a person taking only generic medicines. That monthly cost is approximately \$30 per person. The problem inherent for all of us is that we only know the medicines that we are taking now. That may change at any time in the future if and when we are prescribed an expensive medication that is not generically available. That may then cause you to make a change in Plans for the next enrollment period.
- In the “wait and see” category, a July 16, 2018 Baltimore Sun Article reported a legislative fix for 2019 as a carry over year whereby the State will reimburse retirees, based on the retiree’s income, for out of pocket expenses over \$1,500 for the coming year.

Some of you have asked if the Committee could arrange an informative session for the Senior Judges. So far, we have not been able to do that. However, the Employment Benefits Division of the Department of Budget and Management has suggested that Senior Judges could attend upcoming informational sessions beginning in late August or September 2018. These sessions will be hosted by the Department of Aging, but as of now, they have not been scheduled.

In closing, we owe a debt of gratitude to Judge Fader and his wife, Kathy, who is also a registered pharmacist. They have pulled the laboring oar for us. As we receive more information, we will provide it to you. In the meantime, do not hesitate to provide us with information that you have gleaned in your travels through the Medicare Part D wilderness.

Otherwise, enjoy the summer,

Jim

James A. Kenney, III
Chair, Senior Judges Committee