

## General Questions about Medicare

### 1. What does “dual eligible” mean?

“Dually eligible” or “dual eligible enrollees” generally refers to anyone that is eligible for both Medicare and Medicaid. They are “dually eligible” for both health care programs.

Some dual eligible enrollees are eligible for all Medicare and Medicaid benefits and services. These enrollees are sometimes referred to as “full-benefit dual eligibles.” Others may be eligible for all Medicare benefits but only receive assistance from the state for payment of their Medicare premium, copays and deductibles. They are sometimes referred to as “partial-benefit dual eligible.” Partial dual eligible individuals do not receive full Medicaid benefits.

### 2. How do I know if I am dually eligible?

As long as you meet the federal qualifications for Medicare eligibility and the state-specific qualifications for Medicaid eligibility, you will qualify as a [dual eligible](#).

To qualify for Medicare, individuals generally need to be 65 or older, blind, or have a qualifying disability and be a U.S. citizen or a legal resident who has lived in the U.S. for at least 5 years in a row. If you are unsure if you qualify for Medicare, you can call Medicare at **1-800-Medicare (1-800-633-4227)**.

To qualify for Virginia Medicaid you must be a resident of the state of Virginia whose financial situation would generally be characterized as low income or very low income, and you must also be a U.S. citizen or a legal resident who has lived in the U.S. for at least 5 years in a row. To qualify for Virginia Medicaid, you must meet at least one of the following criteria:

- Children under age 19
- Pregnant women
- Working adults ages 19-64 [with income up to 138% of the Federal Poverty Level](#)
- Supplemental Security Income (SSI) recipients
- Adults aged 65 or older, blind or disabled (not receiving SSI)
- Children or adults who need long-term care in a facility, or who are receiving Home & Community-based Care (Waiver) Services
- Low-income Medicare Beneficiaries
- Eligible for Plan First Family Planning Services
- Eligible for Breast & Cervical Cancer Early Detection Program

If you are unsure if you qualify for Virginia Medicaid, you can call Cover Virginia at **1-855-242-8282** or visit us at <https://coverva.org/eligibility/>.

### 3. *What does Medicare cover vs. Medicaid?*

Medicare is the primary payer for dual eligible enrollees. Medicare services can be grouped into the following categories:

- **Part A – Hospital Insurance** (inpatient hospital care, inpatient care in a Skilled Nursing Facility, hospice care, and some home health services)
- **Part B – Medical Insurance** (physician services, outpatient care, durable medical equipment, home health services, and many preventive services), and
- **Part D – Prescription Drug Benefit** (Medicare-approved private companies cover outpatient prescription drug coverage)

For full benefit dual eligible enrollees, Medicaid will cover many services that Medicare does not cover or only partially covers. Such services include, but are not limited to, the following:

- Long-term institutional care, such as nursing facility or long-stay hospital,
- Long-term home health and personal care services,
- Other home and community-based services, such as adult-day, community mental health and substance use disorder services,
- Non-emergency transportation services,
- Medicare premiums, copays and deductibles, and
- Dental and Vision (limited).

All full benefit dual eligible enrollees in Virginia are required to enroll with a Managed Care Organization (MCO) (a private health insurance plan) for their Medicaid coverage. MCOs offer additional benefits such as:

- Vision,
- Hearing,
- Cell phone,
- Gym membership, and more.

Medicaid will cover most Medicare premiums, coinsurance and co-pays for both full and partial benefit duals.

### 4. *What are my Medicare and Medicaid enrollment options in Virginia?*

#### **Medicare**

When you first enroll in Medicare and during certain times of the year, you can choose how you get your Medicare coverage. There are two main ways to get your Medicare coverage—Original Medicare (Part A and Part B) or a Medicare Advantage Plan (Part C). Some people choose to get additional coverage, like Medicare prescription drug coverage or Medicare Supplement Insurance (Medigap).

# Frequently Asked Questions about Medicare and Dual Eligible Special Needs Plans for Dual Eligible Members

## Original Medicare

Original Medicare, also known as “traditional Medicare” or “Medicare Fee-For-Service”, includes Medicare Part A (Hospital Insurance) and Part B (Medical Insurance). If you want drug coverage, you can join a separate Medicare drug plan (Part D). Signing up for Part D coverage is voluntary but you must sign up for Part D coverage to avoid penalties. You can also add supplemental coverage, like insurance from a former employer or Medicare Supplement Insurance (Medigap), to help pay your out-of-pocket costs (like your 20% coinsurance).

With Original Medicare, you can use any doctor or hospital that takes Medicare, anywhere in the U.S.

## Medicare Advantage

Medicare Advantage, also known as Part C, is an “all in one” alternative to Original Medicare. These “bundled” plans include Part A, Part B, and usually Part D. Medicare Advantage plans are provided by private health insurance plans called Managed Care Organizations (MCO).

Medicare Advantage plans may have lower out-of-pocket costs than Original Medicare. Most offer extra benefits that Original Medicare doesn’t cover—like vision, hearing, dental, and more.

In many cases, you’ll need to use doctors who are in the plan’s network.

## Special Needs Plans

Some enrollees may be eligible for a specialized type of Medicare Advantage plan called a Special Needs Plan (SNP). SNPs are specifically designed to meet the special needs of the individuals they enroll. SNPs must cover all of your Medicare Part A, B, and Part D benefits, and all SNPs are required to offer extra benefits that Original Medicare doesn’t cover—like vision, hearing, dental, and more. SNPs also offer care coordination to assist you in coordinating and accessing your health benefits. There are three types of SNPs:

- Institutional SNP (I-SNP) which is designed to meet the needs of individuals who meet institutional level of care, such as those residing in a nursing facility.
- Chronic Conditions SNP (C-SNP) which is designed to meet the needs of individuals with severe or disabling chronic conditions, such as those with HIV/AIDS or chronic lung disorders
- Dual Eligible SNP (D-SNP) which is designed to meet the needs of [dual eligible enrollees](#), by integrating the Medicare and Medicaid services and benefits. **Click [here](#) to learn more about DSNP’s.**

To learn more about your Medicare enrollment options you can contact Virginia Insurance Counseling and Assistance Program (VICAP) at **1-800-552-3402 V/TTY** or visit their website [at this link](#). VICAP is part of a national network of programs that offers FREE, unbiased, confidential counseling and assistance for people with Medicare.

# Frequently Asked Questions about Medicare and Dual Eligible Special Needs Plans for Dual Eligible Members

## Medicaid

Most Medicaid enrollees must enroll with one of the Commonwealth's six Medicaid Managed Care plans, often referred to as Managed Care Organizations (MCO). These plans will cover all of your medical, behavioral, and long-term care health benefits as well as your prescription drugs.

- Most Medicaid enrollees will have \$0 co-pay.
- You will need to use doctors who are in the plan's network.
- Plans offer extra benefits that traditional Medicaid, sometimes called Medicaid Fee-For-Service, doesn't cover—like vision, hearing, and more.

## 5. How do I enroll?

### Medicare

#### Original Medicare

To qualify for Medicare, individuals generally need to be 65 or older, or blind, or have a qualifying disability and be a U.S. citizen or a legal resident who has lived in the U.S. for at least 5 years in a row.

Most people determined to be eligible for Medicare are automatically enrolled in Original Medicare when they first enroll in Medicare. You change how you get your Medicare coverage when you first enroll in Medicare and during certain times of the year.

If you are enrolled in Original Medicare you may wish to choose a Part D (prescription drug) plan. Medicare prescription drug coverage is an optional benefit offered to everyone who has Medicare.

If you decide not to get Medicare drug coverage when you're first eligible, you may pay a late enrollment penalty if you join later. Before picking a Part D plan you should consider your specific priorities, including but not limited to:

- Do you take a specific drug?
- Do you want extra protection from high prescription costs?
- Do you take a lot of generic prescriptions?

Once you choose a Part D drug plan that works for you, you can enroll with them using the options below:

- Enroll on the [Medicare Plan Finder](#) or on the plan's website.
- Call the plan.
- Fill out a paper enrollment form. Contact the plan to get an enrollment form, fill it out, and return it to the plan.
- Call 1-800-MEDICARE (1-800-633-4227).

# Frequently Asked Questions about Medicare and Dual Eligible Special Needs Plans for Dual Eligible Members

## Medicare Advantage

Not all Medicare Advantage Plans work the same way. Before you join, take the time to find and compare Medicare health plans in your area. Once you understand the plan's rules and costs, here's how to join:

- Use [Medicare's Plan Finder](#).
- Visit the plan's website to see if you can join online.
- Fill out a paper enrollment form. Contact the plan to get an enrollment form, fill it out, and return it to the plan.
- Call the plan.
- Call 1-800-MEDICARE (1-800-633-4227).

To learn more about your Medicare enrollment options and get assistance enrolling, you can contact Virginia Insurance Counseling and Assistance Program (VICAP) at **1-800-552-3402 V/TTY**. VICAP is part of a national network of programs that offers FREE, unbiased, confidential counseling and assistance for people with Medicare.

## **Medicaid**

### If You Are Not Enrolled in Medicaid

To qualify for Virginia Medicaid, you must be a resident of the state of Virginia whose financial situation would generally be characterized as low income or very low income, and you must also be a U.S. citizen or a legal resident who has lived in the U.S. for at least 5 years in a row. To qualify for Virginia Medicaid, you must meet at least one of the following criteria:

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# Frequently Asked Questions about Medicare and Dual Eligible Special Needs Plans for Dual Eligible Members



## If You Are Already Enrolled in Medicaid

In Virginia, most Medicaid enrollees must enroll with one of five private health insurance plans called Managed Care Organizations, or MCOs. These plans will cover your medical, behavioral, and long-term care health benefits as well as your prescription drugs.

- Most Medicaid enrollees will have \$0 co-pay.
- You will need to use doctors who are in the plan's network.
- Plans offer extra benefits that traditional Medicaid, sometimes called Medicaid Fee-For-Service, doesn't cover—like vision, hearing, dental, and more.

## Dual Eligible Special Needs Plans

### 1. What does “dual eligible” mean?

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- Children or Adults Who Need Long-term Care in a Facility/Home & Community-based Care (Waiver) Services
- Medicare Beneficiaries
- Plan First - Family Planning Services
- Breast & Cervical Cancer Early Detection Program

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### 3. *What is a Dual Eligible Special Needs Plan (DSNP)?*

Dual eligible enrollees often have complex health care needs. Many dual eligible enrollees have multiple chronic health care conditions (heart disease, diabetes, mental disorders, etc.) and have difficulty with daily activities (mobility, dressing, bathing, etc.). On top of difficult health care needs, dual eligible enrollees have to navigate two health care systems (Medicare and Medicaid) that were not designed to work together. DSNPs are designed to improve the quality of health care for dual eligible enrollees that may need additional assistance by coordinating all of your Medicare and Medicaid benefits.

- DSNPs must cover all of your Medicare Part A, B, and Part D benefits,
- DSNPs are required to offer extra benefits that Original Medicare doesn't cover—like vision, hearing, dental, and more.
- DSNPs will provide care coordination to assist you in coordinating and accessing your Medicare and Medicaid benefits.

Additionally, people that enroll in a DSNP often qualify for zero or low cost sharing (co-pays, premiums, and deductibles).

### 4. *Why should I enroll in a DSNP?*

Navigating Medicare and Medicaid can be confusing and result in unnecessary gaps in your health care. By coordinating Medicare and Medicaid benefits, DSNP's can make it simpler for members to navigate the health care system. This is especially important for individuals with multiple chronic health care conditions. DSNPs are required to cover all of the services you receive through traditional Medicare and other Medicare Advantage plans. DSNPs also provide care coordination to assist members in navigating, coordinating and accessing needed services. Additionally, people that enroll in a DSNP often qualify for zero or low cost sharing (co-pays, premiums, and deductibles).

As an added bonus DSNPs offer additional benefits, that aren't covered under traditional Medicare, which can include:

- Dental care, such as exams, x-rays, cleanings, fillings, crowns and extractions;
- Hearing exams and access to hearing aids at a reduced cost;
- Annual eye exam and a credit for eyewear; and
- Transportation.

To learn more about your Medicare enrollment options you can contact Virginia Insurance Counseling and Assistance Program (VICAP) at 1-800-552-3402 V/TTY or visit their website [at this link](#). VICAP is part of a national network of programs that offers FREE, unbiased, confidential counseling and assistance for people with Medicare.

# Frequently Asked Questions about Medicare and Dual Eligible Special Needs Plans for Dual Eligible Members

## 5. Should I align my DSNP enrollment with my Medicaid plan?

In most Virginia localities, dual eligible members are able to enroll in the same health plan for Medicare and Medicaid. This is called “aligned enrollment”. Aligned enrollment often provides:

- One plan that coordinates all care.
- Some Integrated member materials.
- A comprehensive provider network.
- Timely coordination of care.
- Reduced confusion for members and providers.
- Easier access to specialists who are contracted with both Medicare and Medicaid.
- Better health outcomes.

Individuals that have aligned their enrollment report greater satisfaction with their health care and improved health outcomes.

If you are interested in aligning your enrollment, you can call your Medicaid plan Member Services telephone number (on the back of your member ID card) and tell them that you wish to enroll in their dual eligible needs plan (D-SNP). Or, you can call your DSNP plan Member Services telephone number (on the back of your ID card), or use the contact information for your DSNP provided [below](#), and ask them about enrolling in their Medicaid plan.

## 6. What are my DSNP enrollment options in Virginia?

Effective January 1, 2024, there are five health plans, or MCOs, that offer DSNPs in Virginia. The health plans, along with their contact information is listed below:

Health Plan Name	Phone Number	Website
Aetna Better Health	1-855-463-0933	<a href="https://www.aetnabetterhealth.com/virginia-hmosnp/">https://www.aetnabetterhealth.com/virginia-hmosnp/</a>
Anthem HealthKeepers	1-855-679-0541	<a href="https://shop.anthem.com/medicare/shop/landing?brand=ABCBS&amp;role=consumer&amp;locale=en_US">https://shop.anthem.com/medicare/shop/landing?brand=ABCBS&amp;role=consumer&amp;locale=en_US</a>
Molina Medicare Complete Care	1-800-424-4495	<a href="https://www.molinahealthcare.com/members/va/en-us/hp/medicare/medicare.aspx">https://www.molinahealthcare.com/members/va/en-us/hp/medicare/medicare.aspx</a>
Sentara Community Complete	1-844-563-4201	<a href="https://www.optimahealth.com/plans/medicare/optima-community-complete-hmo-d-snp">https://www.optimahealth.com/plans/medicare/optima-community-complete-hmo-d-snp</a>
UnitedHealthcare Dual Complete	1-888-638-6613	<a href="https://www.uhccommunityplan.com/virginia">https://www.uhccommunityplan.com/virginia</a>

## 7. How do I enroll in a DSNP?

Before you join, take the time to find and compare Medicare health plans in your area. Once you understand the plan's rules and costs, here's how to join:

- Use [Medicare's Plan Finder](#).
- Met with a local licensed agent
- Visit the plan's website to see if you can join online. ([See above](#))



## Frequently Asked Questions about Medicare and Dual Eligible Special Needs Plans for Dual Eligible Members



- Fill out a paper enrollment form. Contact the plan to get an enrollment form, fill it out, and return it to the plan.
- Call the plan. ([See above](#))
- Call 1-800-MEDICARE (1-800-633-4227) for enrollment assistance.

You will not have to wait for Medicare open enrollment (October through December). Most people can enroll in a DSNP at any time of year.

To learn more about your Medicare enrollment options and get assistance enrolling, you can contact Virginia Insurance Counseling and Assistance Program (VICAP) at **1-800-552-3402 V/TTY** or visit their website [at this link](#). VICAP is part of a national network of programs that offers FREE, unbiased, confidential counseling and assistance for people with Medicare.