

Interpreter Bulletin: CMS "Mystery Shoppers!"

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Overview

The Centers for Medicare & Medicaid Services (CMS) and our clients place a great emphasis on quality assurance.

Many of our clients are private health insurance companies that are contracted by CMS to manage beneficiaries' Medicare and Medicaid coverage.

Most frequently, the private health insurance companies manage the following plans:

- Medicare Supplement
- Medicare Advantage (also called "Part C")
- Medicare Part D

CMS needs to verify that these companies are providing the correct information and excellent customer service to beneficiaries. In order to do so, CMS hires "mystery shoppers" to call the insurance companies and pretend to be LEPPs.

What is a "mystery shopper"?

A "mystery shopper" is a person whose job is to visit or call businesses and pretend to be a customer. The "mystery shopper" then completes a report regarding the customer experience, including the overall quality of the service.

The CMS mystery shoppers pretend to be LEPPs, so they actually test both the insurance company agent and the interpretation we provide.

It is important that we provide quality services to all our clients. Knowing our clients may be "mystery shopping" us reinforces that importance.

Important Note

Please remember to approach every call as if it is being monitored!

CMS “Mystery Shoppers”: What kind of questions will they ask?

Calls will vary in length and content. Below is a list of questions “secret shoppers” may ask.

CMS Questions & Answers	Translation
CMS Part C Questions	
<p>Q: Can you answer Part C questions?</p> <p>A: <i>Yes, I will be glad to answer your Part C questions.</i></p>	<p>Q: 您能回答有关 Part C 的问题吗?</p> <p>A: <i>是的, 我很乐意回答有关 Part C 的问题。</i></p>
<p>Q: Can my mom get her monthly premiums deducted from her Social Security check?</p> <p>A: <i>Yes, she can. There are three options to pay the premiums. She may:</i></p> <ol style="list-style-type: none"> 1) <i>Request to have it deducted from her social security payment.</i> 2) <i>Have an electronic funds transfer from her bank account on a monthly basis.</i> 3) <i>Pay monthly through direct billing.</i> 	<p>Q: 我母亲每月的医保费能从她的社安金支票中扣除吗?</p> <p>A: <i>是的, 可以的。有三种支付医保费的方式。她可以选择:</i></p> <ol style="list-style-type: none"> 1) <i>从她的社安金中扣除。</i> 2) <i>每月从她的银行账户电子转账。</i> 3) <i>每月通过直接支付结算。</i>
<p>Q: If my father has to pay a premium with your plan and he wants it withheld from his Social Security check, how long does he have to wait after he elects to have premiums withheld before calling back to determine if there is a problem with withholding?</p> <p>A: <i>The approximate processing time for SSA withdrawals is 3 months. We will send you notification that we are ready to receive deductions from Social Security. However, this does not start the process. SSA will also send you a confirmation notice once the withdrawals are set up.</i></p>	<p>Q: 如果我父亲必须为医保计划支付保费, 但他希望从他的社安金支票中扣除, 那么在他选择了扣缴医保费之后, 需要等待多久可以再打电话过来, 确定医保费扣缴是否有问题?</p> <p>A: <i>社安局(SSA) 处理提款大约需要 3 个月。我们到时会通知您, 我们可以从社安金中扣除医保费了。但是, 这份通知并不就此启动提款流程。一旦提款设置完毕, 社安局还会向您发送确认通知的。</i></p>
<p>Q: Does my mom need to get a referral for outpatient diagnostic lab services in <Plan Name>?</p> <p>A: <i>Answer will depend on plan.</i></p>	<p>Q: 如果需要<Plan Name>的门诊诊断化验服务, 我母亲是否需要转介?</p> <p>A: <i>这取决于相应的计划。</i></p>
<p>Q: What is the in network maximum out of pocket cost for the <Plan Name>?</p> <p>A: <i>Answer will depend on plan.</i></p>	<p>Q: 对于<Plan Name>, 医保网络内的最高自付费用是多少?</p> <p>A: <i>这取决于相应的计划。</i></p>

<p>Q: My <family member> turns 65 on June 10, 2015. What is the first day that he can have coverage in a MA plan?</p> <p>A: Your <family member> would be eligible to be covered by a Medicare Advantage plan when he has both Part A and Part B as long as he lives in the service area and does not have ESRD.</p> <p>If their Medicare effective dates are June 1, 2015, he could enroll in a Medicare Advantage plan between March 1 and September 30 (with the earliest effective date possible being June 1st). If he wants the coverage to start June 1, he would need to enroll on or before May 31. If he enrolls on June 1 or later, the coverage would be effective the first day of the month after he enrolls.</p> <p>(Keep in mind that specific dates may change based on when the beneficiary turns 65.)</p>	<p>Q: 我的<family member>到 2015 年 6 月 10 日将满 65 岁。他从哪一天开始可以享受 MA 计划的保险?</p> <p>A: 只要您的<family member>居住在计划服务区内, 没有末期肾病 (ESRD), 并且同时有 Part A 和 Part B 保险, 那他有资格享受 Medicare Advantage 计划。</p> <p>如果他们的 Medicare 生效日期为 2015 年 6 月 1 日, 可在 3 月 1 日到 9 月 30 日之间申请加入 Medicare Advantage 计划 (最早的生效日期可能是 6 月 1 日)。如果他希望医保从 6 月 1 日开始, 则需要 在 5 月 31 日或更早进行注册。如果在 6 月 1 日或更晚注册的话, 投保的生效日期将是他注册之后下个月的第一天。</p> <p>(请记住: 具体日期会根据受益人满 65 岁的日期而改变。)</p>
<p>Q: In 2015, is <County> in <State> covered by <Plan Name>?</p> <p>A: Answer will depend on plan.</p>	<p>Q: 2015 年的<Plan Name>涵盖<State>的<County>吗?</p> <p>A: 这取决于相应的计划。</p>
<p>Q: If my father has had mental illness in the past, can he enroll in a MA plan?</p> <p>A: Yes. As long as he meets the qualifications for the plan (lives in the service area, has Medicare Parts A&B, no ESRD, and has a valid enrollment period) he can join the plan, regardless of pre-existing conditions.</p>	<p>Q: 如果我父亲曾有精神病, 他能否注册加入 MA 计划?</p> <p>A: 可以的。不管此前有什么病, 只要他满足参加计划的条件 (居住在计划的服务区内, 参加了 Medicare Part A 和 Part B 的保险, 没有末期肾病 (ESRD), 而且在有效的注册期内), 就可以参加计划。</p>
<p>Q: Can you answer questions about <Plan Name>?</p> <p>A: Yes, I would be happy to answer your questions about our plan.</p>	<p>Q: 您能回答有关<Plan Name>的问题吗?</p> <p>A: 是的, 我很乐意回答有关我们计划的问题。</p>
<p>Q: What is the monthly premium for <Plan Name>?</p> <p>A: Answer will depend on plan.</p>	<p>Q: <Plan Name>每月的保费是多少?</p> <p>A: 这取决于相应的计划。</p>

<p>Q: Does <Plan Name> include Part D prescription drug coverage?</p> <p>A: Answer will depend on plan.</p>	<p>Q: <Plan Name>包括 Part D 处方药保险吗?</p> <p>A: 这取决于相应的计划。</p>
<p>Q: Does <Plan Name> cover seasonal flu shots?</p> <p>A: Yes. Seasonal Flu shots are covered as this is a benefit you would have under Original Medicare.</p>	<p>Q: <Plan Name>包括注射季节性流感疫苗吗?</p> <p>A: 是的。注射流感疫苗在医保范围之内, 因为这是 Original Medicare 为您提供的福利。</p>
<p>Q: Can I get information on plan exceptions and the appeals process on your plan's website?</p> <p>A: Yes, you can. You can visit www.<brand>-website and click the "Grievances and Appeals" link about halfway down the page. Also, there is a "Share your thoughts with us" section on the bottom right portion of the page with the same links.</p>	<p>Q: 我能在医保计划的网站上得到有关计划例外情况和申述程序的信息吗?</p> <p>A: 是的。您可以访问 www.<brand>-网站, 向下滚动到大约页面中部, 点击“不满和申诉”(Grievances and Appeals) 链接。另外, 您也可以在页面右下侧的“与我们分享您的想法”部分(即“Share your thoughts with us”), 找到该链接。</p>
<p>Q: Does the <MA Plan Name> offer basic or enhanced part D benefits?</p> <p>A: Answer will depend on plan.</p>	<p>Q: <MA Plan Name>提供的是基础型还是增强型 Part D 福利?</p> <p>A: 这取决于相应的计划。</p>
<p>Q: Does my father have to join part B to be eligible for part C?</p> <p>A: Yes. You must have Part A AND Part B or become eligible for Part A and Part B in the next three months to enroll in a Medicare Advantage Plan (Part C).</p>	<p>Q: 我父亲必须参加 Part B 保险才能有资格参加 Part C 吗?</p> <p>A: 是的。必须同时参加 Part A 和 Part B 的保险, 或者在未来的三个月中有资格参加 Part A 和 Part B, 才可以注册 Medicare Advantage 计划 (Part C)。</p>
<p>Q: Under this plan if I want to see my Primary Care Physician, what will my co-pay be?</p> <p>A: Answer will depend on plan.</p>	<p>Q: 根据该计划, 如果我想去我的初级护理医师那里就诊, 那我的共付额是多少?</p> <p>A: 这取决于相应的计划。</p>
<p>Q: Does <Plan Name> cover routine eye exams as either a standard or optional supplemental benefit?</p> <p>A: Answer will depend on plan.</p>	<p>Q: <Plan Name>是否包括常规眼科检查, 作为标准的或可选的补充福利? </p> <p>A: 这取决于相应的计划。</p>

<p>Q: My relative thinks she may qualify for extra help. Where can she find out more information?</p> <p>A: She may:</p> <ol style="list-style-type: none"> 1) Contact the local Medicaid office 2) Go to the Social Security office 3) Call Social Security (7 a.m. to 7 p.m. Monday-Friday) at 1-800-772-1213, TDD/TDY users should call 1-800-328-0778, or visit www.ssa.gov/prescriptionhelp 4) Visit www.socialsecurity.gov to apply online 5) Visit the State Medical Assistance (Medicaid) office. Call 1-800-MEDICARE (1-800-633-4227), and say "Medicaid" to get the telephone number, or visit www.medicare.gov. TTY users should call 1-877-486-2048. 	<p>Q: 我的亲戚认为，她可能有资格获得额外补助。她可以去哪里获取更多信息？</p> <p>A: 她可从以下途径获取信息：</p> <ol style="list-style-type: none"> 1) 联系当地的 Medicaid 办事处 2) 前往社安局 (Social Security) 办公室咨询 3) 拨打社安局的电话 1-800-772-1213 (周一到周五，早 7 点到晚 7 点)，TDD/TDY 用户可拨打 1-800-328-0778，或访问网站 www.ssa.gov/prescriptionhelp 4) 访问网站 www.socialsecurity.gov 以便在线申请 5) 前往州医疗辅助 (Medicaid) 办公室。拨打电话 1-800-MEDICARE (1-800-633-4227)，并说出 "Medicaid" 以便获取电话号码，或访问网站 www.medicare.gov。TTY 用户请拨打 1-877-486-2048。
<p>Q: Will my Medigap Policy pay my premiums or co-pays for my Medicare Advantage Plan?</p> <p>A: No. Medigap coverage will not pay anything if you are enrolled in a Medicare Advantage Plan. It is illegal for someone to sell you Medigap coverage if you are already enrolled in a Medicare Advantage plan. However, it is important to note that if you have a Medigap policy and drop it, or if you never had a Medigap policy, you may not be able to buy the policy of your choice after you have had a Medicare Advantage plan for 12 months or more, especially if you have a health problem.</p>	<p>Q: 我的 Medigap 保单是否会为我的 Medicare Advantage 计划支付保费或共付额？</p> <p>A: 不会的。如果您已注册参加 Medicare Advantage 计划，Medigap 保险不会支付任何费用。如果您已经注册加入了 Medicare Advantage 计划，那么其他任何人向您销售 Medigap 保险都是非法的。但必须注意的是，如果您有 Medigap 保单，然后退掉了，或者如果您从未有过 Medigap 保单，那么在您参加了 Medicare Advantage 计划 12 个月或更长时间后，尤其是您有健康问题的时候，可能无法根据您的选择购买保单。</p>
<p>Q: Would a copy of my aunt's Medicaid card, which includes her name and eligibility date, be acceptable as Best Available Evidence for LIS (Low Income Subsidy)?</p> <p>A: Yes, as long as the Medicaid card includes the beneficiary's name and an eligibility date during a month after June of the previous calendar year. For example: If a card issued 7/1/2014 ends 6/30/2015, then a new card is needed.</p>	<p>Q: 我伯母的 Medicaid 卡上有她的姓名和合格日期，这张 Medicaid 卡的复印件是否可作为 LIS (低收入补助) 的最佳可用证据？</p> <p>A: 是的，前提是 Medicaid 卡上包含受益人的姓名，而且合格日期是在上一日历年度的六月之后的某个月内。比方说：如果发卡日期是 2014 年 7 月 1 日，截止日期为 2015 年 6 月 30 日，那就需要一张新卡。</p>
<p>Q: Does <Plan Name> cover the dental plan either as a standard or optional supplemental benefit?</p>	<p>Q: <Plan Name>是否包括牙科计划，作为标准的或可选的补充福利？</p> <p>A: 这取决于相应的计划。</p>

<p><i>A: Answer will depend on plan.</i></p>	
<p>Q: If my dad has an emergency and goes to the nearest emergency room for treatment, will he have coverage?</p> <p><i>A: Yes, a Medicare Advantage plan will cover emergency and urgently needed care even if he is out of the service area, or if the nearest appropriate facility is not in the plan's network.</i></p>	<p>Q: 如果我父亲发生紧急情况，被送往最近的急诊室治疗， he 可以获得保险吗？</p> <p><i>A: 可以的，即使他不在计划服务区内，或者距离最近的合适的医疗机构不在计划的网络范围内，Medicare Advantage 计划也会承保急诊和急需的医疗护理。</i></p>
<p>Q: Under the <Plan Name> what is the maximum copayment or coinsurance for an ambulance?</p> <p><i>A: Answer will depend on plan.</i></p>	<p>Q: 根据<Plan Name>，救护车的最高共付额或共同保险费是多少？</p> <p><i>A: 这取决于相应的计划。</i></p>
<p>Q: If my <family member> is moving out of the area which is covered, could he switch to a different plan?</p> <p><i>A: Yes, if he moves out of the service area of his plan, he will be given a Special Enrollment Period to change plans.</i></p>	<p>Q: 如果我的<family member>搬离了医保计划的承保地区，他能转到另一个计划吗？</p> <p><i>A: 可以的，如果他搬离了计划承保服务区，他将得到一个特殊注册期来更换计划。</i></p>
<p>Q: Does a Medicare Advantage plan cover some hospital expenses or just Doctors' office visits?</p> <p><i>A: A Medicare Advantage plan must cover all services that you would receive under Medicare Part A and Part B, with the exception of hospice care. (Hospice is covered by Part A, even if you are in a Medicare Advantage plan.)</i></p>	<p>Q: Medicare Advantage 计划是否包括某些住院费用，或者仅仅诊所就诊费用？</p> <p><i>A: Medicare Advantage 计划必须包括 Medicare Part A 和 Part B 的所有服务，但临终关怀服务除外。（即使您加入了 Medicare Advantage 计划，临终关怀服务也包括在 Part A 之内。）</i></p>
<p>Q: My father currently has Part A. Does my father need to have both Part A and Part B to enroll in your plan?</p> <p><i>A: Your father will be eligible for an Advantage plan only once he has both Part A and Part B as long as he lives in the service area and does not have ESRD.</i></p>	<p>Q: 我父亲目前有 Part A 保险。他是否需要同时有 Part A 和 Part B 才可以注册加入你们的计划？</p> <p><i>A: 您的父亲必须同时有 Part A 和 Part B，居住在计划服务区内，并且没有末期肾病 (ESRD)，才可以有资格申请 Advantage 计划。</i></p>

<p>Q: What is the additional cost for my mother for a wheelchair?</p> <p>A: <i>Answer will depend on plan.</i></p>	<p>Q: 如果我的母亲使用轮椅，额外费用是多少？</p> <p>A: 这取决于相应的计划。</p>
CMS Part D Questions	
<p>Q: My mother wants a preventative tetanus shot. Is that covered by Part D plans?</p> <p>A: <i>Yes. Preventive tetanus shots are covered as a Part D benefit. If the tetanus shot is needed as a therapeutic service, for example, if you step on a rusty nail, this would usually be a medical benefit under Part B.</i></p>	<p>Q: 我母亲想要注射预防性破伤风疫苗。 Part D 计划包括这一项吗？</p> <p>A: 是的。预防性破伤风疫苗是 Part D 的一项承保福利。如果是出于治疗目的而注射破伤风疫苗，比方说，踩到了生锈的钉子，那么这通常属于 Part B 的医疗福利。</p>
<p>Q: Can my mother find pharmacy network information on your website?</p> <p>A: <i>Yes, you may visit <brand>website and click on "pharmacy locator" near the bottom right side of the page to locate a pharmacy in your area. I can also look up pharmacies in our network for you over the phone.</i></p>	<p>Q: 我母亲能在你们的网站上找到关于药房网络的信息吗？</p> <p>A: 可以的，请访问<brand>网站，然后点击页面右下侧的“药房定位器” (pharmacy locator)，就可以找到您所在地区的药房。我也可以在电话上帮您在我们的网络中查找药房的地点。</p>
<p>Q: What is the drug deductible for <Plan Name>? My Mom doesn't get extra help and is not on Medicaid.</p> <p>A: <i>We offer more than one Part D prescription drug plan in 2015. The <brand> plan has a <\$xxx> deductible and the <brand> plan has a <\$xxx> deductible. I will be happy to provide you a quote.</i></p>	<p>Q: <Plan Name>的药物自付额是多少？ 我的母亲没有额外补助，并且没有加入 Medicaid。</p> <p>A: 2015 年，我们提供不止一种 Part D 处方药计划。<brand> 计划有 <\$xxx> 的自付额，<brand> 计划有 <\$xxx> 的自付额。我很乐意为您提供报价。</p>
<p>Q: Does <Plan Name> use network pharmacies?</p> <p>A: <i><Brand> plans use a nationwide network of pharmacies. We have over 60,000 network pharmacies nationwide including most retail chains.</i></p>	<p>Q: <Plan Name>使用网络药房吗？</p> <p>A: <Brand> 计划使用全国范围的药房网络。我们在全国有超过 60,000 家网络药房，包括大多数的零售连锁店。</p>

<p>Q: Will my relative receive a refund in the coverage gap?</p> <p><i>A: In 2010, members not receiving extra help were given a \$250 refund from the government when they reached the coverage gap. In 2011 and beyond, there is no refund; however, there may be discounts to help beneficiaries get through the coverage gap.</i></p>	<p>Q: 我的亲戚是否会收到保险缺口的退款?</p> <p><i>A: 2010 年, 没有得到额外补助的成员, 在出现保险缺口后, 得到政府提供的 250 美元退款。2011 年及其以后, 则没有退款; 但是可能有折扣, 以便帮助受益人解决保险缺口的问题。</i></p>
<p>Q: When my relative goes to Mexico will she have prescription drug coverage?</p> <p><i>A: No - We cannot pay for any prescriptions that are filled by pharmacies outside of the United States or outside of U.S. territories that offer Medicare benefits.</i></p>	<p>Q: 如果我的亲戚去了墨西哥, 她能获得处方药保险吗?</p> <p><i>A: 不能 - 如果处方药是在美国境外药房或是提供 Medicare 福利的美国领土之外的药房配药, 我们不能为其支付费用。</i></p>
<p>Q: Can you answer Part D questions?</p> <p><i>A: Yes, I would be happy to answer your Part D questions.</i></p>	<p>Q: 您能回答关于 Part D 的问题吗?</p> <p><i>A: 是的, 我很乐意回答关于 Part D 的问题。</i></p>
<p>Q: Will your company send my mother updates on how much she is spending on her prescription drug plans?</p> <p><i>A: Yes – an Explanation of Benefits will be mailed monthly showing the total amount she has spent on prescription drugs and the total amount we have paid for each of her prescription drugs during the month.</i></p>	<p>Q: 你们公司会向我母亲发送有关她的处方药计划费用的更新信息吗?</p> <p><i>A: 是的 - 我们每个月都会邮寄一份《福利说明》(Explanation of Benefits), 告知这个月内她的处方药费用总额, 以及我们为她的每种处方药支付的总额。</i></p>
<p>Q: Is epifoam on your formulary?</p> <p><i>A: Answer will depend on plan.</i></p>	<p>Q: Epifoam 是否在你们的处方集中?</p> <p><i>A: 这取决于相应的计划。</i></p>
<p>Q: Can you answer questions about <Plan Name>?</p> <p><i>A: Yes, I would be happy to answer your questions about our plan.</i></p>	<p>Q: 您能回答有关<Plan Name>的问题吗?</p> <p><i>A: 是的, 我很乐意回答有关我们计划的问题。</i></p>

<p>Q: If my mom joins your plan in 2015, if she takes medications and gets in the donut hole, I know she will have to pay out of pocket. During the donut hole, will she get a discount and when?</p> <p>A: Answer depends on plan, but a possible answer may be the following:</p> <p>The discount is applied at the point of sale. Covered brand medications in 2015 will receive a 50% manufacturer's discount from our negotiated rate, and a 5% plan discount (for a total 55% discount)</p> <p>Plus, members would also pay the dispensing fee; and, there is a 35% generic benefit (some may consider it a discount) on covered generic medications under the <brand> Part D Plan.</p> <p>The same applies to the <brand> Part D Plan except for covered Preferred Generic and some Brand medications. Since this plan contains supplemental coverage for Preferred Generic and some Brand medications, members receive the lesser of the copay or coinsurance amount or the negotiated rate.</p> <p>I would be happy to provide you with an estimated quote. I would just need either your state or zip code and the names, dosage, and frequency/quantity of the medication used.</p>	<p>Q: 如果我母亲于 2015 年参保你们的计划, 如果她服用药物并遇到保险缺口, 我知道她就不得不自己来支付费用。 在发生保险缺口期间, 能否给她打折, 何时打折?</p> <p>A: 这取决于相应的计划, 但可能有以下情况:</p> <p>在销售点直接打折。 2015 年, 承保的品牌药物会从我们的协议价格中获得 50% 的厂家折扣, 另加 5% 的计划折扣 (总计折扣 55%)。</p> <p>另外, 会员还要支付配药服务费; 根据<brand> Part D 计划, 承保的非专利药有 35% 的一般福利 (有些人可能认为这是一种折扣)。</p> <p>这同样适用于<brand> Part D 计划, 除了承保的首选非专利药和某些品牌药之外。 因为这一计划包括了首选非专利药和某些品牌药的补充保险, 会员只需要支付共付额、共同保险额或协议价中的较低费用。</p> <p>我很乐意为您提供预估报价。 我需要您提供所在州的州名或邮编, 以及所服用药物的药名、剂量、频率和数量。</p>
<p>Q: If a medication is named "limited quantity," can you explain to me what this means?</p> <p>A: Yes - Quantity Limit (QL) – A management tool that is designed to limit the use of selected drugs for quality, safety, or utilization reasons. Limits may be on the amount of the drug that we cover per prescription or for a defined period of time.</p>	<p>Q: 如果规定某种药物“限量”, 您能解释它的含义吗?</p> <p>A: 可以的 - 数量限制 (QL) - 是一项管理工具, 出于质量、安全或使用的考虑, 旨在限制所选药物的使用。 限制可能是针对我们承保的每种处方药的药量, 也可能是限定时间期限。</p>
<p>Q: Does the <PDP Plan Name> plan cover Lanoxin?</p> <p>A: Answer will depend on plan.</p>	<p>Q: <PDP Plan Name>计划是否包括 Lanoxin?</p> <p>A: 这取决于相应的计划。</p>

<p>Q: Is Abilify on the formulary for <Plan Name>?</p> <p>A: Answer will depend on plan.</p>	<p>Q: Abilify 是否在<Plan Name>的处方集中?</p> <p>A: 这取决于相应的计划。</p>
<p>Q: Do people in <Plan Name> plan need prior authorization to get Trizivir?</p> <p>A: Answer will depend on plan.</p>	<p>Q: <Plan Name>计划参保者是否需要预先核准才可以获得 Trizivir?</p> <p>A: 这取决于相应的计划。</p>
<p>Q: Is <Plan Name> a basic plan or enhanced plan?</p> <p>A: The <brand> (Standard or Value) Part D plan is a basic alternative prescription drug plan. It does not provide additional coverage such as further reductions of cost-shares through the coverage gap phase of the benefit, or any coverage for supplemental drugs.</p> <p><brand> (Plus or Premier, Gold) Part D is an enhanced alternative prescription drug plan. It provides additional coverage such as reduction of the Medicare Part D deductible, further reduction of cost-shares through the coverage gap, and provides coverage for supplemental drugs.</p>	<p>Q: <Plan Name>是基础型计划还是增强型计划?</p> <p>A: <brand>的 (Standard 或 Value) Part D 是基础型备选处方药计划, 不提供额外保险, 比如在福利的保险缺口期间进一步降低成本分担等, 或者任何辅助药物保险。</p> <p><brand>的 (Plus 或 Premier, Gold) Part D 是增强型备选处方药计划, 提供额外保险, 比如减少 Medicare Part D 自付额, 在福利的保险缺口期间进一步降低成本负担等, 并提供辅助药物保险。</p>
<p>Q: My mom has glaucoma and takes Timolol. She is very jittery and is wondering if she runs out early, can she get her prescription refilled?</p> <p>A: Yes. Early refills are available for some prescriptions that are not easily controlled, or could be easy to spill. If her eye drops are easily spilled, her prescription will usually allow for an early refill as long as the prescription is current.</p>	<p>Q: 我母亲有青光眼, 使用 Timolol. 她非常紧张不安, 想知道如果她的药早早就用完了, 是否可以继续按处方拿药?</p> <p>A: 可以的。提前续配处方药适用于不容易控制用量或者容易倒出的药物。如果她的眼药水容易倒出来, 只要处方有效, 通常就可以为她提前续药。</p>
<p>Q: Can my <Family Member> continue to purchase prescriptions on his/her own (she prefers to go to Target/Wal-Mart and get \$4 prescriptions) if she takes this plan <Plan Name>?</p> <p>A: Yes. However, to count toward her drug spending, she would need to show her <Plan Name> ID card. As a member of <Plan Name> if the retail cost of a medication is less</p>	<p>Q: 如果我的<Family Member>加入了<Plan Name>, 她能否继续自主购买处方药 (她更希望去 Target 或 Wal-Mart, 以 \$4 的价格购买处方药)?</p> <p>A: 可以的。但在结算药物开支时, 她需要出示<Plan Name> ID 卡。作为<Plan Name>的会员, 如果药物的零售价格低于计划规定的共付额, 那就只需要支付这两者中的较低价。</p>

<p><i>than the copay amount set by the plan, you will pay the lesser of the two costs.</i></p>	
<p>Q: What is the maximum co-pay or co-insurance for a 1 month supply for preferred generics (tier 1) under <Plan Name>?</p> <p>A: <i>Answer will depend on plan.</i></p>	<p>Q: 根据<Plan Name>, 首选非专利 (1 级) 药 1 个月药量的最高共付额或共同保险是多少?</p> <p>A: <i>这取决于相应的计划。</i></p>
<p>Q: If one of my <family member's> medications is not covered under the formulary, can she buy the prescription under the plan within 90 days of the enrollment date?</p> <p>A: <i>Yes, our plans must allow up to a 30 day transition fill, for New or Current Qualifying Members in a plan, within the first 90 days of enrollment. During this time, a request for an exception can be made by calling or faxing the request to the pharmacy department.</i></p>	<p>Q: 如果我的<family member>的某一种药物不在处方集内, 她能否在注册日期后 90 天内根据保险计划购买这一处方药?</p> <p>A: <i>可以的, 我们的计划必须允许多达 30 天的过渡配药, 对于计划的新会员或当前有资格的会员, 过渡期为注册后的前 90 天。在此期间, 可通过电话或传真向药物部门提出例外申请。</i></p>
<p>Q: Is this <brand>? Is this the same number? I'm calling on behalf of the US Department of Health and Human Services and I was calling to send over an authorization form for the release of a patient profile. Could you assist me with that?</p> <p>A: <i>You have reached <brand>. Since you are calling about records for a member, I will need to connect you with Customer Service for that information.</i></p>	<p>Q: 这是<brand>吗? 是这个同样的号码吗? 我是在代表美国卫生和公众服务部打电话, 想要发送一份针对患者档案披露事宜的授权书。 您能协助我吗?</p> <p>A: <i>您已经拨通了<brand>的电话。 因为您要了解会员的记录, 我需要为您转接客户服务部, 让他们提供相关信息。</i></p>
<p>Q: I'm calling on behalf of the US Dept of Health and Human Services. I have just spoken to someone in your enrollment department. I was just needing to get your time zone and your state. What state are you located in?</p> <p>A: <i>To confirm, are you trying to reach the pre-enrollment department for plan information or you recently submitted an enrollment application? If "Yes"... We are located in <State>, we are in the <Time zone>. If "No"...We have multiple locations to support our members with the main location in <State> which is in the <Time Zone>.</i></p>	<p>Q: 我是在代表美国卫生和公众服务部打电话。 我刚刚与你们注册部的员工通过话。 我只需要知道你们所在的州和所在时区。 您住在哪个州?</p> <p>A: <i>我要确认一下, 您是想要联系预注册部门, 了解关于计划的信息, 还是您最近提交了注册申请? 如果“是”... 我们位于<State>, 我们所在时区是<Time zone>。 如果“不是”... 我们有多多个办事处为会员提供服务, 其中主要地点在<State>, 时区是<Time Zone>。</i></p>

<p>Q: Does <Part D Plan> plan cover any generic drugs in the coverage gap?</p> <p>A: Answer will depend on plan. Several options are:</p> <ol style="list-style-type: none"> 1) Yes - <Brand> covers many generics (65% - 99% of formulary generic drugs) in the coverage gap.... 2) No - <Brand> does NOT cover generic drugs in the coverage gap. 	<p>Q: <Part D Plan>计划是否包括保险缺口中的所有非专利药物?</p> <p>A: 这取决于相应的计划。有几种情况:</p> <ol style="list-style-type: none"> 1) 是 - <Brand> 包括保险缺口中的许多种非专利药 (处方集非专利药中 65% - 99%) ... 2) 否 - <Brand> 不包括保险缺口中的非专利药。
<p>Q: Do husbands and wives have to sign up for the same Part D plan?</p> <p>A: No, spouses may sign up for different Part D plans.</p>	<p>Q: 夫妻双方需要注册相同的 Part D 计划吗?</p> <p>A: 不, 夫妻可以各自注册不同的 Part D 计划。</p>
<p>Q: Are diabetic testing supplies, like test strips and lancets, covered under the Part D benefit of your plans?</p> <p>A: No, diabetic test strips are a Part B benefit. Test strips, lancets, and needle disposal systems are not considered medical supplies directly associated with the delivery of insulin for purposes of coverage under Part D.</p>	<p>Q: 糖尿病测试用品, 如试纸和针头, 是否包括在你们 Part D 计划的福利范围内?</p> <p>A: 不, 糖尿病试纸属于 Part B 的福利。按照 Part D 的保险范围, 试纸、针头以及针头处理系统不被认为是与注射胰岛素直接相关的医疗器械。</p>
<p>Q: What does "step therapy" mean?</p> <p>A: Step Therapy (ST) – A utilization tool that requires you to first try another drug to treat your medical condition before we will cover the drug your physician may have initially prescribed.</p>	<p>Q: “分步疗法” (step therapy) 是什么?</p> <p>A: 分步疗法 (ST) 是一种实用工具, 要求您首先试用另一种药物来治疗您的病情, 然后我们才承保您的医生最初可能开具的处方药。</p>
<p>Q: My mom takes a drug called Furosemide in 40 mg tablets. For your <Part D Plan> plan, what is the co-pay for a 1 month supply at a retail pharmacy that works with your plan? She will not be eligible for extra help and she is not on Medicaid.</p> <p>A: Answer will depend on plan.</p>	<p>Q: 我母亲服用 Furosemide 40 毫克剂量药片。根据你们的<Part D Plan>计划, 如果在与你们计划合作的零售药房配 1 个月用量的药, 共付额是多少? 她不符合获得额外补助的资格, 也没有加入 Medicaid。</p> <p>A: 这取决于相应的计划。</p>
<p>Q: Will my mom get reimbursed for at least part of the cost of the administration of a Shingles vaccine that she gets at a doctor's office? It is called Zostavax (Zaw-stah-vax),</p>	<p>Q: 我母亲在医生诊所注射带状疱疹疫苗, 对此费用, 她是否可至少报销其中的一部分? 疫苗名称是 Zostavax (Zaw-stah-vax), 医生说她应该注射该疫苗。(我没有账户。)</p>

<p>and her doctor said she should get it. (I don't have an account.)</p> <p><i>A: Yes, if she had to pay the entire cost for both the vaccine medication and for getting the vaccination shot, she can ask us to pay her back for our share of the cost. She will be reimbursed the amount she paid less her normal coinsurance or copayment for the vaccine (including administration) less any difference between the amount the doctor charges and what we normally pay. (If she is on Extra Help, we will reimburse her for this difference.)</i></p>	<p><i>A: 是的，如果她支付了疫苗药品和注射的所有费用，她可以要求我们偿付我们应分担的费用。她可以报销的费用是她支付的费用减去疫苗（包括注射）的正常共同保险额或共付额，再减去医生收费和我们正常支付款额两者中的任何差额。（如果有额外补助 (Extra Help)，我们会报销这部分差额。）</i></p>
<p>Q: Can you tell me what a prior authorization means? I see it abbreviated as "P.A."</p> <p><i>A: Yes, for certain services provided by specialists, your Primary Care Physician will need to get prior approval from us. This is called getting "prior authorization." Covered services that need approval in advance are marked with a note in the Medical Benefits Chart found in the Evidence of Coverage (EOC). Some drugs are covered only if the doctor or other network provider gets "prior authorization" from us. Covered drugs that need prior authorization are marked in the formulary.</i></p>	<p>Q: 您能解释预先核准的含义吗？我看到它的缩写是 "P.A."。</p> <p><i>A: 我可以解释一下：对于由专科医生提供的某些服务，您的初级护理医师 (PCP) 需要预先得到我们批准。这叫做获得“预先核准” (prior authorization)。在承保范围说明书 (EOC) 的医疗福利表中，对需要提前批准的各项承保服务标有说明。某些药物只有当医生或其他网络供应商在得到我们的“预先核准”后才可以获得承保。处方集中标注了需要预先核准的承保药物。</i></p>
<p>Q: My mom lives in Brooklyn, and if she gets flooded again, will she still be able to get her medication immediately?</p> <p><i>A: Yes, if a Presidential major disaster or emergency declaration is issued, or if the Secretary declares a public health emergency, and the underlying circumstances are reasonably expected to result in a disruption in access to covered Part D drugs, we will lift our "refill-too-soon" edits.</i></p>	<p>Q: 我母亲住在 Brooklyn，如果她的居住地再次发生洪灾，她仍然能立即获得所需药物吗？</p> <p><i>A: 是的，如果发布了总统列为重大灾害或紧急情况的公告，或者国务卿宣布为突发公共卫生事件，并且能够合理预期到潜在的情况会导致无法获得 Part D 承保的药物，我们会移除“取药间隔太短”标记。</i></p>

<p>Q: My mother just got on Medicaid. Could she pay less for her prescriptions right away if she presents a copy of her Medicaid eligibility letter to the pharmacy?</p> <p>A: Yes. <i>If you believe she has qualified for Extra Help, and she believes that she is paying an incorrect cost-sharing amount when she gets her prescriptions at a pharmacy, our plan has developed a process to allow her to pay the proper co-payment level.</i></p>	<p>Q: 我母亲刚刚参加 Medicaid。如果她向药房出示她的 Medicaid 资格信函复印件, 能否立即减免一部分处方药费?</p> <p>A: 可以的。如果您认为她有资格得到额外补助 (Extra Help), 并且她认为在药房处方药时支付的共付额有错, 我们的计划制定了一个流程, 能帮助她支付正确的共付额。</p>
<p>Q: What is the criteria for enrolling in your MTM Program?</p> <p>A: <i>We have a program called the Medication Therapy Management (MTM) program that can help our members with special situations. Members must have several complex medical conditions or they may need to take many drugs at the same time, or they could have very high drug costs. If we have a program that fits your needs, we will automatically enroll you in the program and send you information.</i></p>	<p>Q: 注册加入 MTM 计划的标准是什么?</p> <p>A: 我们有一个称为“药物治疗管理”(MTM)的计划, 能帮助会员处理特殊情况。会员必须患有几种复杂的病情, 或者他们可能需要同时服用很多种药物, 或者他们的药费非常高。如果我们的计划适合您的需求, 我们会自动将您注册到该计划, 并向您发送信息。</p>
<p>Q: My aunt thinks she might qualify for Extra Help for RX coverage from Social Security administration. How can she get information on getting this help?</p> <p>A: <i>If your aunt thinks she may qualify for Extra Help, she can call Social Security to obtain information or apply for the program at 1-800-772-1213. TDD/TDY users should call 1-800-328-0778, or visit www.ssa.gov/prescriptionhelp; or visit www.socialsecurity.gov to apply online.</i></p> <p><i>She may also be able to obtain information and apply at her State Medical Assistance or Medicaid Office.</i></p> <p><i>Our plan offers services through Social Service Coordinators (SSC) which can provide information and assist with completion and submission of the Extra Help forms. After she applies, she will receive a letter letting her know if she qualifies for Extra Help and what she should do next.</i></p>	<p>Q: 我的伯母认为, 她可能有资格获得社安局 (Social Security administration) 处方药保险额外补助 (Extra Help)。她如何能得到这方面的信息?</p> <p>A: 如果您的伯母认为, 她可能有资格获得额外补助 (Extra Help), 可以拨打电话 1-800-772-1213 联系社安局 (Social Security) 以便获得相关信息, 或者申请加入计划。TDD/TDY 用户应拨打 1-800-328-0778, 或者访问网站 www.ssa.gov/prescriptionhelp; 还可以访问 www.socialsecurity.gov 进行在线申请。</p> <p>她还可以前往所在州的 Medical Assistance 办公室或 Medicaid 办公室, 获得相关信息并办理申请。</p> <p>我们的计划通过社会服务协调员 (SSC) 提供服务, 他们可以提供信息, 并帮助完成和提交额外补助 (Extra Help) 申请表。申请之后, 她会收到信函, 告诉她是否有资格获得额外补助 (Extra Help), 以及下一步应该怎么做。</p>

<p>Q: Can I find quantity limit day supply information for your formulary drugs on your website?</p> <p>A: Yes - Our formulary (Drug List) includes information about the quantity limit (QL) restrictions. To find out if any of the QL restrictions apply to a drug, you may check the comprehensive formulary (drug list) for the QL symbol or online searchable formulary (drug list). The coverage notes section on the online searchable formulary will display quantity limit (QL) day supply information.</p>	<p>Q: 我能在你们的网站上找到有关处方集药物每日数量限制的信息吗?</p> <p>A: 是的。我们的处方集（药物清单）包括了有关数量限制（QL）的信息。如要查明某种药物是否有适用的任何 QL 限制，您可以查看完整的处方集（药物清单），看看是否有 QL 标志，或者查看可在线检索的处方集（药物清单）。可在线检索的处方集保险注释部分会显示每日数量限制（QL）信息。</p>
<p>Q: If a drug is going to be removed from the formulary, how many days in advance will you let me know?</p> <p>A: At least 60 days in advance. If we remove drugs from our formulary, or add prior authorization, quantity limits and/or step therapy restrictions on a drug or if move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 60 days before the change becomes effective, or at the time the member requests a refill of the drug. In that case, the member will receive a 60-day supply of the drug.</p> <p>However, if the Food and Drug Administration (FDA) deems a drug on our formulary to be unsafe or the drug's manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug.</p>	<p>Q: 如果要从处方集中删除某种药物，你们会提前多少天通知我?</p> <p>A: 至少提前 60 天。如果我们从处方集中删除药物，或者对某一药物增加预先核准、数量限制和/或分步疗法限制，或者将某种药物移至更高的共付额等级，我们必须在变更生效之日前至少 60 天通知会受影响的会员，或在会员要求续药时给予通知。在此情况下，会员将收到 60 天用量的药物。</p> <p>但是，如果食品和药物管理局（FDA）认为我们处方集中的某一种药物不安全，或药物的生产厂家从市场撤消这种药物，我们会立即从我们的处方集中删除该药物，并通知服用该药的会员。</p>