

HMSA Akamai Advantage

Frequently Asked Questions from Oahu HMO Participating Providers

What's HMSA Akamai Advantage®?

- HMSA Akamai Advantage is a comprehensive plan that provides Original Medicare benefits, additional benefits and services, and prescription drug coverage. HMSA contracts with the federal government to offer HMSA Akamai Advantage.
- For 2018, HMSA will offer four individual health plans to Oahu residents:
 - Essential Advantage (HMO).
 - Complete (PPO).
 - Complete Plus (PPO).
 - HMSA Akamai Advantage Dual Care (PPO SNP): Available to those eligible for both Medicare and Medicaid.
- Essential Advantage is a new HMO plan for Oahu members. It has the lowest monthly premium of our individual non-DSNP plans while still providing great benefits for doctor visits, hospital stays, preventive care, and more. Members will receive all of their care from Hawai'i Pacific Health, one of Hawaii's largest integrated health care systems.
- Three of these plans (Essential Advantage, Complete, and Complete Plus) offer routine vision and eyewear benefits. Complete Plus also offers tier 1 preferred generic drug coverage in the coverage gap.

When's the annual open enrollment for Medicare beneficiaries?

- October 15 through December 7, 2017. Plans will start January 1, 2018. Current members who want to continue their existing plan don't have to re-enroll.

Who's eligible to enroll in HMSA Akamai Advantage?

- Hawaii residents with Medicare Part A and Part B.
- HMSA Akamai Advantage Dual Care members must be eligible for Medicare Part A and Part B, have a Medicaid plan, and pay their Part B premium if Medicaid or another source doesn't already pay for it.
- Hawaii residents diagnosed with end-stage renal disease, which results in kidney failure, may not be eligible for HMSA Akamai Advantage. However, exceptions may apply. Please call HMSA for more information:
 - Oahu: 948-6235.
 - Neighbor Islands: 1 (800) 693-4672 toll-free.
 - TTY users: 711.

Are all Medicare plans offered in Hawaii the same?

- No. Each plan has different benefits and costs. Please refer to the *2018 HMSA Akamai Advantage Plan Comparison for Providers* brochure for details.

Why should my patient choose an HMSA Akamai Advantage plan?

- HMSA offers members a network of more than 5,000 physicians and pharmacies statewide.
- HMSA Akamai Advantage members can access a large network of Blue Cross and Blue Shield providers in the Blue MA PPO Network when they're traveling on the Mainland. This doesn't apply to HMSA Akamai Advantage Dual Care and Essential Advantage, which don't have visitor and travel benefits.
- Members get worldwide benefits for emergency physician and outpatient services. This doesn't apply to HMSA Akamai Advantage Dual Care and Essential Advantage, which don't have worldwide benefits for emergencies.
- We have more than 75 years of experience serving Hawaii residents and have a trusted reputation with financial resources necessary to protect our members.
- We offer friendly, local customer service and walk-in locations in Hawaii.
- HMSA Akamai Advantage plans include comprehensive medical and drug benefits with many health screenings without a copayment.
- Three of these plans (Essential Advantage, Complete, and Complete Plus) offer a fitness benefit at no additional cost.
- Plans offer financial protection with annual dollar limits on member medical out-of-pocket costs.

Why are premiums and benefits different for Oahu and the Neighbor Islands?

- Generally, the cost of care differs by county, so premiums and benefits need to be adjusted accordingly.

If HMSA members select HMSA Akamai Advantage, do they have to change doctors?

- Probably not. Most HMSA participating providers also participate with HMSA Akamai Advantage. Essential Advantage members will need to choose a provider in the Essential Advantage network.

Why do HMSA Akamai Advantage plans require preauthorization for some services?

- Our preauthorization process helps ensure the safety of our members, promotes appropriate use of services, and keeps health care costs in check.

Does HMSA Akamai Advantage cover routine dental services?

- HMSA Akamai Advantage Dual Care includes routine dental benefits.
- HMSA Akamai Advantage Essential Advantage, Complete, and Complete Plus plans don't include dental care. HMSA offers individual dental plans to its members. If interested, members can visit an HMSA Center or office for more information. Also, members can call 948-6235, option 1, on Oahu or 1 (800) 693-4672 toll-free on the Neighbor Islands. For TTY, call 711.

Does HMSA have dental plan options?

- Yes. You may want to consider our Dental Plus Plan for seniors 65 years and older. If members have questions, they can call 948-5555, option 2, on Oahu or 1 (800) 620-4672 toll-free on the Neighbor Islands.

Can HMSA Akamai Advantage members use out-of-network providers?

- Yes, HMSA Akamai Advantage PPO members can, but they may pay more out of pocket to see an out-of-network provider than if they see a participating provider in our network. Essential Advantage members can only use out-of-network providers in an urgent or emergent situation or if a network provider isn't available.

Are HMSA Akamai Advantage members covered while traveling on the Mainland?

- Yes. If members see a provider in the Blue Medicare Advantage PPO network, they'll pay the same as if they were seeing a network provider in Hawaii. They may pay more if they see an out-of-network provider. They won't pay extra if the care is for a medical emergency. This doesn't apply to HMSA Akamai Advantage Dual Care and Essential Advantage, which don't have visitor and travel benefits.
- For more information on benefits while traveling, members can:
 - Call Customer Relations during regular business hours at 948-6235 on Oahu or 1 (800) 693-4672 toll-free on the Neighbor Islands.
 - Call 1 (800) 810-BLUE (2583) to find a Blue Medicare Advantage PPO provider.
 - Visit provider.bcbs.com to find a doctor.

What's a maximum out-of-pocket amount?

- It's the most a member will pay out of pocket during the calendar year for Medicare-covered hospital and medical services. When members receive services, the out of pocket is the amount they pay through either a copayment or coinsurance to the doctor, hospital, or other health care provider.
- A maximum out-of-pocket amount provides financial protection for our members.
- When the annual maximum out-of-pocket amount is reached, HMSA Akamai Advantage will pay 100 percent of Medicare-covered medical and hospital services. See the *2018 Summary of Benefits* for details. The maximum out-of-pocket amount doesn't include prescription drugs or services not covered by Original Medicare.

How do I know if the drugs I prescribe for my patients are covered or if there are any changes?

- You or your patient can do one of the following:
 - Review the new drug formulary you received in your HMSA Akamai Advantage packet.
 - Go to hmsa.com/portal/provider/zav_dr.02.02.htm.
 - Call 948-6000 on Oahu or 1 (800) 660-4672 toll-free on the Neighbor Islands.
- Please refer any other questions about the drug formulary to HMSA's pharmacy benefits manager, CVS Caremark®. CVS Caremark can answer specific questions about the members' drugs and why prices have changed.

Can my patients buy prescription drugs while traveling on the Mainland?

- Yes. HMSA Akamai Advantage has a national pharmacy network that includes CVS Caremark, Target, Walmart, and Sam's Club.
- In an emergency or urgent situation when a network pharmacy isn't available, your patient can go to an out-of-network pharmacy for Medicare-qualified prescriptions. Your patient will pay the pharmacy the entire cost of the drug and submit a claim to HMSA for reimbursement when they return to Hawaii.

Does HMSA offer medical-only plans?

- HMSA Akamai Advantage offers medical-only plans to some employer groups. We don't offer medical-only plans to individuals.

Does HMSA Akamai Advantage offer a stand-alone prescription drug plan?

- No. All HMSA Akamai Advantage plans include medical and prescription drug benefits.

Does HMSA offer Medigap plans?

- Yes. HMSA Senior Connection is a Medicare supplement plan, but it's closed to new members. More information is available at hmsa.com/healthplans/medicare/seniorconnection/default.aspx.

Where can my patients get more information on HMSA Akamai Advantage?

Your patients can:

- Attend a free HMSA Akamai Advantage sales seminar. For information on the seminars, call 948-6402 on Oahu or 1 (800) 252-4137 toll-free on the Neighbor Islands.
- Go to hmsa.com/advantage for more information and a seminar schedule.
- Call HMSA at 948-6235 on Oahu or 1 (800) 693-4672 toll-free on the Neighbor Islands, 8 a.m. to 8 p.m., seven days a week. TTY users, call 711.
- Visit an HMSA Center or office.

Essential Advantage (HMO)

What is Essential Advantage?

- Essential Advantage (HMO) is a HMSA's new Medicare Advantage plan for 2018 in collaboration with Hawai'i Pacific Health (HPH). It has the lowest monthly premium of our plans on Oahu while still providing great benefits for doctor visits, hospital stays, preventive care, and more.
- Members will receive care from HPH, one of Hawaii's largest integrated health care systems, with Hawai'i Health Partners (HHP), its physician network.
- This plan may be right for members who want the convenience of having all of their doctors and other providers at one health center.

Why is HMSA offering another Medicare Advantage plan to members?

- HMSA wants to offer our Medicare members another health plan choice to best fit their health care and budget needs.

Why is HMSA offering this plan only on Oahu and not on the Neighbor Islands?

- This is the first time HMSA is offering a Medicare Advantage HMO plan. Since this is a new plan, we want to see how well it fits the needs of our members on Oahu before providing a similar plan on the Neighbor Islands.

If my patients ask me about Essential Advantage, what do I need to know?

- HMSA and HPH have collaborated to create a new Medicare Advantage HMO plan called Essential Advantage.
- Essential Advantage is a low-premium plan option for members on Oahu only.
- Members have a limited provider network to choose from compared to the HMSA Akamai Advantage PPO plans.
- Essential Advantage members must get all their care from providers in HPH's provider network.

Why is Essential Advantage a closed network?

- This helps to keep monthly premiums low for our members while providing a high level of care.

What are the criteria for joining the Essential Advantage provider network?

- If you want to join Essential Advantage network, you must:
 - Have a valid HMSA participating provider agreement for Medicare plans.
 - Participate with HPH or participate to fill a needed specialty for the Essential Advantage network.

I'm a private practice specialist who receives referrals from Hawaii Pacific Health. Am I considered an in-network provider?

- No. You can only be an in-network provider if you're a member of the Essential Advantage network.

How does the referral process work?

- In-network referrals are submitted through EPIC or fax and received at the HHP Managed Care office. Out-of-network referral requests are submitted to the HHP Managed Care office. HHP will send the request to HMSA for review.

I'm a PCP with Health Plan Hawaii. Am I considered "in-network" under Essential Advantage plan?

- Not necessarily. Please contact HHP if you have questions or would like to be in the network.

How does the prior authorization process work?

- The prior authorization guidelines are the same as for the other HMSA Akamai Advantage plans.
- View the guidelines on the HMSA provider portal at https://hmsa.com/portal/provider/zav_pel.aa.AKA.501.htm.

Who do I contact if I have a question about an out-of-network referral that I submitted?

- Call us at 948-6464 on Oahu or 1 (800) 877-5394 toll-free on the Neighbor Islands, Monday through Friday, 8 a.m.–4 p.m.
- Send a fax to 944-5611 on Oahu.
- Write to:
 - HMSA Akamai Advantage
 - Medical Management
 - P.O. Box 2001
 - Honolulu, HI 96808-2001

Will my PCP status be the same if I participate with both HMSA Akamai Advantage and Essential Advantage?

- Yes. Your PCP status would be the same for both HMSA Akamai Advantage and Essential Advantage.

What fee schedule will be used to pay providers?

- Providers will be paid according to the fee schedule in their Medicare contract.

HMSA Akamai Advantage Dual Care

What's HMSA Akamai Advantage Dual Care?

- HMSA Akamai Advantage Dual Care is a plan that serves members who live in Hawaii and are enrolled in both Medicare and QUEST Integration (Medicaid). The plan started January 1, 2016.

Is HMSA Akamai Advantage Dual Care a Medicaid plan?

- No. HMSA Akamai Advantage Dual Care is an HMSA plan with a Medicare contract. The plan helps coordinate Medicare and Medicaid services for members.
- Members may get their Medicaid benefits through HMSA QUEST Integration or another QUEST Integration plan.

How is HMSA Akamai Advantage Dual Care different from other HMSA Akamai Advantage plans?

- These members must have a Medicaid plan.
- As part of their Medicaid benefit, these members pay low- or no-cost sharing for their prescription drugs.
- HMSA Akamai Advantage Dual Care includes routine dental benefits.
- Because members who have both Medicare and Medicaid often have special needs, this plan coordinates their health care with:
 - An individualized health assessment and care plan.
 - An engaging care team of providers and caregivers.
 - Ongoing assessments to ensure that we continue to meet their needs.

Will my patient ever need to pay for services they receive?

- HMSA Akamai Advantage Dual Care members have Medicare and Medicaid QMB status. The QMB program is a state Medicaid benefit that helps low-income Medicare beneficiaries pay for Medicare Part A and Part B premiums with cost sharing such as deductible coinsurance and copayments. Federal law bars Medicare providers and suppliers from billing an individual enrolled in the QMB program for Medicare Part A and Part B cost sharing under any circumstances. See the MLN article at [cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1128.pdf](https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1128.pdf).

How can my patient enroll in the HMSA Akamai Advantage Dual Care plan?

- Call HMSA at 948-6235 on Oahu or 1 (800) 693-4672 toll-free, 8 a.m. to 8 p.m., seven days a week.
- For TTY, call 711.
- Or visit an HMSA Center or office to meet with us.