## PACE PROVIDER BULLETIN

January 5, 2024

## Medicare Part D Partner Plans 2024

Approximately 92.2% of PACE/PACENET cardholders are enrolled in a Part D plan. It is important that **all** prescription cards be reviewed to ensure that the correct cardholder ID, BIN, and PCN is submitted to the primary plan.

As you update your cardholder's profile, be sure to also update the Other Payer ID (the BIN) in the Coordination of Benefits (COB) segment, Field 340-7C. Claims not submitted to the primary payer on file or submitted with a different BIN than contained on file will deny with NCPDP Error 41 "Submit Bill to Primary Payer."

As in previous years, lists of cardholders using your pharmacy and their partner plan are available upon request and will be sent by secure e-mail.

PLAN NAME	RxBIN RxPCN		RxGRP							
SilverScript Choice	004336	MEDDADV	RXCVSD							
WellCare Classic	610014	MEDDPRIME	2FGA							

## **2024 Partner Plans**

Provider Name	Plan Name	Premium	Deductible		Preferred Generic <b>Tier 1</b>	Non- Preferred Generic <b>Tier 2</b>	Preferred Brand <b>Tier 3</b>	Non Preferred Brand <b>Tier 4</b>	Specialty <b>Tier 5</b>	Mail Order Avail?
SilverScript	Choice Plan	\$40.16	\$545.00 All Tiers	Preferred Pharmacy	\$2.00	\$7.00	16%	35%	25%	CVS Caremark
				Standard Pharmacy	\$8.00	\$15.00	16%	35%	25%	CVS Caremark
WellCare	Classic Plan	\$40.16	\$545.00 All Tiers	Preferred Pharmacy	\$0	\$5.00	22%	41%	25%	Express Scripts
				Standard Pharmacy	\$3.00	\$9.00	22%	41%	25%	Express Scripts



Effective January 1, 2024, the monthly PACENET premium for cardholders <u>**not**</u> enrolled in a Part D Plan is \$40.16. Premium is collected only in the months when the cardholder uses the benefit.

Pharmacies may direct questions to Provider Services at 1-800-835-4080.