



**Maine Department of Health and Human Services  
MaineCare Services  
Pharmacy Unit  
11 State House Station  
Augusta, Maine 04333-0011**

**PAUL R. LEPAGE  
GOVERNOR**

**BETHANY L. HAMM  
ACTING COMMISSIONER**

<b>To:</b>	Pharmacy providers
<b>From:</b>	Jill Kingsbury, Director of Pharmacy Operations
<b>Date:</b>	October 5, 2018
<b>Re:</b>	Maine Part D Co-pay and Plan Changes Effective January 1, 2019

**The new co-pay changes are effective January 1, 2019. Claims with a date of service prior to January 1, 2019 will revert to the 2018 co-pay structure.**

**Nursing Facility Medicaid / Medicare (Dual) members no co-pays similar to previous years.**

**Cost Reimbursement Boarding Home Dual Member Co-pays**

Brand drugs = State pays 100% up to \$8.50 per Rx, allow less.  
Generic drugs = State pays 100% up to \$3.40 per Rx, allow less.

**Medicaid & Part D Dual Member Co-pays**

Brand drugs = State pays 50% up to \$4.25 per Rx, allow less.  
Generic drugs = State pays 100% up to \$3.40 per Rx, allow less.

**DEL/Part D Member Co-pays**

Brand drugs = State pays 50% up to \$10.00 per Rx, allow less, similar to previous years.  
Generic drugs = State pays 100% up to \$3.40 per Rx, allow less.

**Other Changes in Part D for 2019 include the following increases:**

Deductible = \$415 (State pays 50% up to \$208)  
Initial coverage Limit = \$3,820  
Out-of-pocket Threshold = \$5,100  
Gap = State pays 80% and the member pays 20% + \$2.00 co-pay

**The following plans are contracted with the State of Maine for 2019. Please use the information below for processing pharmacy claims, or contact the Pharmacy Helpdesk at 1-888-420-9711.**

PLAN NAME	CONTRACT ID	BENEFIT ID	BIN	PCN	GROUP	PHARMACISTS ONLY
WELLCARE	S4802	075	004336	MEDDADV	788257	1-866-800-6111

**POS Facilitated Enrollment Information**

**Administered through Humana Limited Income Net Program**

BIN = 015599      PCN = 05440000      Phone 1-800-783-1307