



2005 National *Medicare & You* Training Program

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PharmPAC
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Important Information

For All People With Medicare

- Medicare prescription drug coverage is available to all people with Medicare
- There is additional help for those who need it most
- Medicare prescription drug coverage pays for brand-name as well as generic drugs
- Look for a Medicare prescription drug plan that meets your needs
- Medicare prescription drug coverage helps you pay for the prescriptions you need

Medicare Prescription Drug Coverage

- Begins January 1, 2006
- Available for all people with Medicare
 - Part A, Part B, or both
- For minimum standard coverage in 2006, enrollees would pay
 - Monthly premium of about \$37
 - First \$250 per year for prescriptions (“deductible”)
 - 25% of yearly drug costs from \$250 to \$2,250
 - 100% of next \$2,850 in yearly drug costs
 - Up to \$3,600 out of pocket
 - 5% of drug costs (or small copayment) for rest of the year

Extra Help With Drug Costs

- Available for many people with limited income and resources
- Those below Federal poverty level save over 95% on average
- People with lowest income and resources
 - Pay no premiums or deductibles
 - Have small or no copayments
- Those with slightly higher income and resources
 - Have a reduced deductible
 - Pay a little more out of pocket
- Where to sign up for the “Extra Help”?
 - www.socialsecurity.gov or go to local SSA Office

Which Drugs Are Covered?

- Medicare-covered drugs
 - Drugs available only by prescription
 - Drugs, biologicals, insulin
 - Medical supplies associated with injection of insulin
 - Brand-name **and** generic drugs
- Drugs **not** covered
 - Drugs excluded by law
 - Non-prescription drugs
 - Drugs that are covered for a person under Medicare Part A or Part B

Coverage Varies by Plan

- Plan may not cover all drugs
 - Formularies must include more than one drug in each classification
- Centers for Medicare & Medicaid Services (CMS) will review formularies
- Plan must give 60-day notice of some changes
- Plan must have exception process
 - Gives enrollees access to medically necessary drugs
 - Decision can be appealed

Ways to Get Coverage

- Medicare prescription drug coverage is provided through
 - Medicare Prescription Drug Plans
 - Medicare Advantage and other health plans
 - Some employers and unions to retirees
- Coverage is NOT automatic
- People need to understand their options

Joining a Plan

- Enroll directly with the plan sponsor
- Can get help in enrolling
 - Legal representative
 - Spouse, other relative, friend, or advocate
- Initial Enrollment Period

For people entitled to Medicare before February 2006	November 15, 2005 through May 15, 2006
For people entitled to Medicare on February 1, 2006, or later	7-month period

Late Enrollment

- Most people will have to pay a penalty if they wait to enroll
 - Additional 1% of base premium for every month the person was eligible but not enrolled
 - For as long as the person is enrolled in a Medicare prescription drug plan
- Unless they have other coverage that, on average, is at least as good as Medicare prescription drug coverage

Choosing a Plan

- See *Medicare & You 2006* handbook
 - Mailed October 2005
 - Read about prescription drug plans in the area
- For help in choosing a plan
 - Visit www.medicare.gov “Compare plans” link
 - To get personalized information
 - Call 1-800-MEDICARE (1-800-633-4227)
 - TTY users call 1-877-486-2048
 - Call the local State Health Insurance Assistance Program
 - www.shiptalk.org for local or state office

Important Dates

- January 1, 2006
 - Medicare prescription drug plan coverage begins for those enrolled
- May 15, 2006
 - Last day of Initial Enrollment Period
- May 1, 2006
 - Facilitated enrollment of people entitled to extra help who did not enroll by April 1st.

Where Pharmacists can go for assistance

- **Pharmacy Technical Support Contacts**
www.cms.hhs.gov/PrescriptionDrugCovGenIn/04_Formulary.asp#TopOfPage
- Region I, Boston (CT, ME, MA, NH, RI, VT)
 - Adele.Pietrantonio@cms.hhs.gov
- Region II, New York (NJ, NY, US Virgin Islands, Puerto Rico)
 - John.Cocchiara@cms.hhs.gov
- Region III, Philadelphia (DE, D.C., MD, PA, VA, WV)
 - Marcia.Dashevsky@cms.hhs.gov (hiring pharmacist now)
- Region IV, Atlanta (AL, FL, GA, KY, MS, NC, SC, TN)
 - Denise.Stanley@cms.hhs.gov
- Region V, Chicago (IL, IN, MI, MN, OH, WI)
 - Gregory.Dill@cms.hhs.gov

Where Pharmacists can go for assistance

- Region VI, Dallas (AR, LA, NM, OK, TX)
 - Gary.Blair@cms.hhs.gov
- Region VII, Kansas City (IA, KS, MI, NE)
 - Tammy.Twait@cms.hhs.gov
- Region VIII, Denver (CO, MT, ND, SD, UT, WY)
 - Gary.Pulvermacher@cms.hhs.gov
- Region IX, San Francisco (AZ, CA, HI, NV, Territories of American Samoa, Guam, Commonwealth of the Northern Mariana Islands)
 - Lucy.Saldana@cms.hhs.gov
- Region X, Seattle (AK, ID, OR, WA)
 - Jan.Johannessen@cms.hhs.gov