

## Issues to Consider in Choosing the Right Medicare Drug Plan

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As of January 1, 2006, the Medicare program will provide prescription drug coverage. All Medicare beneficiaries will have the opportunity to enroll in a prescription drug plan and to choose among many available plans. For most people, enrollment is not mandatory, but it will be the best or only way to get access to life-saving prescription drugs. If you are on Medicare but also rely on Medicaid or an AIDS Drug Assistance Program (ADAP), enrollment in the right plan will help to ensure that you can continue to get the prescription drugs you need. For everyone on Medicare, the Medicare drug plan choices available to you will vary based upon where you live. Understanding why you should enroll in a Medicare drug plan, the issues to consider in selecting a plan, and how to learn more about your drug plan options, are all necessary steps to ensure you select the right plan for you.

### WHY YOU SHOULD ENROLL IN A MEDICARE DRUG PLAN

- **If you have both Medicare and Medicaid**, your Medicaid drug benefit will end on December 31, 2005, and you will be automatically enrolled in a Medicare drug plan. However, the plan to which you are assigned may not be the best plan for you. You have the right to switch to a different drug plan that better meets your needs. So, it is very important to review the plans available in your area to determine which is right for you and provides the best access to the drugs you need.
- **If you use an AIDS Drug Assistance Program (ADAP)** to get your prescription drugs and you are eligible for the Medicare drug benefit, you may lose your ADAP coverage if you do not enroll in a Medicare drug plan. So, if you rely on ADAP, be sure to apply for Medicare coverage. If it is determined that you are not eligible for Medicare, your ADAP coverage will remain unchanged.
- **If you only have Medicare** and do not enroll in the Medicare drug plan by May 15, 2006, you may have to pay a penalty if you decide to enroll later. So, it is important not to delay if you will need Medicare to help you get your prescription drugs. If you have coverage from another source, you should receive a letter shortly from your current health plan telling you if your present coverage is sufficient to avoid paying a penalty if you switch to a Medicare drug plan after the May 15th deadline. If you don't get this letter soon, you should contact your plan.

### CHOOSING THE BEST PLAN

Under the Medicare prescription drug program, there is no single prescription drug plan. Instead, depending on where you live, you may have more than twenty plans to choose from. You will have to decide which plan best meets your needs. The plans offered in your area may be very different in terms of cost and whether they pay for the drugs you need. While all of the plans will cover all antiretrovirals, some may not pay for the other drugs you need. Important issues to consider when choosing a drug plan include:

- **Access:** When comparing your options, look at the list of drugs the plan will pay for or cover (the formulary). It is also important to compare which local pharmacies are working with each drug plan, to make sure you can use a pharmacy that is convenient for you.
  - ▶ **Covered Drugs:** Within certain limits, each Medicare prescription drug plan gets to decide which drugs it will include or cover. We know that all plans are required to cover all antiretroviral drugs. They also will be required to cover all anti-depressant and anti-psychotic medications, although if you are not currently taking these medications your plan can require you to try other drugs before you can get a specific drug. We also know that each plan will be required to cover at least two drugs in each therapeutic class, e.g., two cholesterol drugs. But since every plan will be different, you should select one that covers the drugs you currently use or think you may need in the future. Additionally, you should ask if there are special rules for getting the drugs you currently take (sometimes called prior authorization).
  - ▶ **Participating Pharmacies:** Each plan will require you to use certain pharmacies to fill your prescriptions. Check to make sure the plan will allow you to use a convenient pharmacy.
- **Affordability:** Compare the costs of the plans offered in your area. The different plans will probably have different premiums, co-payments, and deductibles. How much they will cost can vary greatly.
  - ▶ If you have both Medicaid and Medicare, you will not have to pay a premium or a deductible under most plans, and your drug co-pays will be \$1 to \$2 for preferred and \$3 to \$5 for non-preferred drugs.
  - ▶ If you are only on Medicare, you may be eligible for a low-income subsidy that provides "extra help" to make the drug plan more affordable. Depending on your income and assets this can greatly reduce your drug plan costs, so be sure to apply for extra help by contacting your local Medicaid office or the Social Security Administration at 1-800-772-1213.

## NEXT STEPS & HOW TO LEARN MORE ABOUT YOUR DRUG PLAN CHOICES

There are a few other important things to remember to make the transition to the new drug plan as easy as possible. Be sure to read carefully and save any paperwork you receive from the Social Security Administration, Medicaid, Medicare, and your state or local health service agencies. The materials you receive may include important information on changes to your prescription drug coverage, applications for the low-income extra help subsidy, or information on drug plans in your area.

Utilize other options available for learning more about the drug plans available in your area:

**Check Your Mail:** The Centers for Medicare and Medicaid Services (CMS) will mail all Medicare beneficiaries a "Medicare and You" booklet that will provide plan choices and benefit information.

**Call Medicare:** Personalized information will be available by calling 1-800-Medicare.

**Use the Internet:** Check the Center for Medicare Advocacy website ([www.medicareadvocacy.org](http://www.medicareadvocacy.org)), the Centers for Medicare and Medicaid Services (CMS) website ([www.cms.hhs.gov](http://www.cms.hhs.gov)), and the Treatment Access Expansion Project (TAEP) website ([www.taepusa.org](http://www.taepusa.org)), for updated information.

**Beginning October 13<sup>th</sup>, plan information will be available online through the Medicare Prescription Drug Plan Finder at [www.medicare.gov](http://www.medicare.gov).**