

Provider Partnership Program (PPP) E-mail Notification Archives

August 6, 2004

Just as a follow-up to my recent e-mail, I wanted to pass along this additional information regarding beneficiary educational materials for the Section 641 Medicare Replacement Drug Demonstration. All of these materials can all be found at <http://www.cms.hhs.gov/researchers/demos/drugcoveredemo.asp>:

For more information about this demonstration, as of July 6, 2004, beneficiaries should call the Medicare contractor that has been designated to coordinate this demonstration, TrailBlazer Health Enterprises. TrailBlazer has established a demonstration call center at 1-866-563-5386 anytime between 8:00 am and 7:30 pm EDT, Monday through Friday. TTY users should call 1-866-5387.

I hope you find this information helpful in reaching out to your Medicare beneficiary population regarding this important demonstration. Thanks again for your help!

I recently sent you a note regarding a Special Edition Medlearn Matters article that explains the Medicare Replacement Drug Demonstration (MRDD) (MMA Section 641) (the article is available at www.cms.hhs.gov/medlearn/matters/mmarticles/2004/SE0443.pdf). This is just a gentle reminder about the MRDD and that there are slots available for patients who meet the requirements for the demo. Because of the interest to get folks signed up as soon as possible, we are asking your assistance in getting the word out to your association members.

In addition, Jody Blatt, who is the Project Officer at CMS for this demonstration, has offered her services for a conference call (or meeting if location permits) to discuss this demonstration in more detail. Either Jody or her colleague, Jim Coan, or the Demonstration Outreach Coordinator at TrailBlazer Health Enterprises, Sharon Cardinale, are available to make presentations on the demonstration, answer questions about the what the demonstration covers and/or application process, etc. Jody can be reached at jblatt@cms.hhs.gov.

Thank you again for your assistance in helping to get the word out about this important demonstration.

Two Other Things

Medicare Minute ~ HHS Proposes New Rules to Deliver Better Benefits and Savings on Drugs for Medicare Beneficiaries and Urges Public Comment

HHS Secretary Tommy G. Thompson announced on Monday, July 26 the proposed regulations to deliver on a new law that provides better benefits including prescription drug savings of more than 50 percent for the average senior without coverage -- and improved access to health care services through Medicare.

The proposed regulations, which are now available for public comment, implement the essence of the Medicare Modernization Act that creates a new voluntary prescription drug benefit under Medicare, as well as new health plan choices, improved health care for rural America and improved preventive care benefits.

The new prescription drug benefit will allow all Medicare beneficiaries to enroll in drug coverage through a prescription drug plan or Medicare health plan with Medicare paying for 75 percent of the premium. Additional benefits for Medicare beneficiaries who have limited means will cover, on average, 95 percent of their drug costs. The new benefits also will provide new protections for retirees who currently receive drug coverage through their employers or unions. All the new Medicare benefits are voluntary as seniors can choose to keep their existing traditional coverage.

"We're delivering on our promise to America's seniors to provide better benefits and real savings on their prescription drugs," Secretary Thompson said. "For the first time, all Medicare beneficiaries will have access to prescription drug coverage. Seniors currently without coverage could see their drug costs cut by more than half, with lower-income seniors getting even greater savings."

The Medicare prescription drug benefit is a key element of the Medicare Modernization Act signed into law on Dec. 8, 2003. The Centers for Medicare & Medicaid Services (CMS) also proposed rules to implement another key element of the law: strengthening and improving the Medicare Advantage program, including making regional preferred provider organizations (PPOs) available to all Medicare beneficiaries. These provisions will give beneficiaries broad and more secure access to coordinated-care health plans that provide additional benefits and significantly lower out-of-pocket costs. Though over 60 million Americans in all 50 states including rural areas get their health insurance coverage through PPOs today, they have generally not been available to Medicare beneficiaries. The proposed rules would also implement new, less costly options for Medigap coverage.

"As we move closer to providing affordable drug coverage, access to popular health plans, and more secure retirement coverage, we need input from the public," said CMS Administrator Mark B. McClellan, M.D., Ph.D. "We are taking special steps to encourage comments and dialogue on these proposed rules, and implement them together, to assure that the key elements of the new law work together to give seniors and people with disabilities the best Medicare possible."

The rule will be published in the Federal Register on Aug. 3, 2004. The comment period on the proposed regulations lasts 60 days, closing on Oct. 4, 2004. Final rules are expected to be issued early in 2005. Enrollment for the new Prescription drug plans will begin in the fall of 2005 for benefits starting in on Jan. 1, 2006.

CMS and many organizations involved in health care and Medicare will be hosting meetings all across the country to gather information and comments until the comment period closes on Oct. 4, 2004. CMS will also host a series of national phone calls for additional comment, input and information. Comments can also be sent electronically to www.cms.hhs.gov/regulations/ecomments.

A fact sheet and other information on this new rule is available at [<www.cms.hhs.gov/medicarerreform>](http://www.cms.hhs.gov/medicarerreform)

Beneficiary-Related Information

Please plan to visit the CMS Publication Mailing List at <http://www.cms.fu.com/maillinglist> to order the following publication/posters that have arrived at the CMS Warehouse:

- 1) Publication Number: 11036 "Enrolling in Medicare" - English (Publication Date: February, 2004);
- 2) Publication Number: 11069 "Medicare-Approved Drug Discount Card Poster" - English (Publication Date: April, 2004);
- 3) Publication Number: 11069-S "Medicare-Approved Drug Discount Card Poster" - Spanish (Publication Date: April, 2004); and
- 4) Publication Number: 11069-N "Medicare-Approved Drug Discount Card Poster" - Native Americans/Alaska Natives (Publication Date: May, 2004).

You may place an order or obtain additional copies of the publication/posters listed above, by using the CMS Warehouse Reorder Form in the CMS Publication Mailing List. When ordering the publication/posters, please remember to:

- . Update contact information and shipping address information on the edit user information screen;
- . Print the verification screen after you order the publications; and
- . Use the "HELP" button at the top or bottom of the screen if you have questions about ordering publications or updating information on the Publication Mailing List.

Thanks again for all of your help ~ Valerie

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August 12, 2004

Increased Payments For Preventive Services And Lower Beneficiary Copayments

Medicare beneficiaries will have greater access to preventive benefits and lower copayments for hospital outpatient services, while hospitals will see a 3.3 percent inflation update in payment rates for outpatient services under a proposed rule announced today by the Centers for Medicare & Medicaid Services.

The proposed payment rate update and other policy changes in the annual Outpatient Prospective Payment System (OPPS) rule will increase projected Medicare payments to hospitals for outpatient services to \$24.2 billion compared to projected payments of \$22.7 billion in 2004 - a 6.6 percent increase in total payments.

Federal Register Display Date: Monday August, 9 at 4:00pm.
Federal Register Publication Date: August 16, 2004 - Part II.
Comment period closes: October 8, 2004

To view the Press Release, go to
<http://www.cms.hhs.gov/media/press/release.asp?Counter=1155>

To view the Proposed Rule (CMS-1427-P), go to
<http://www.cms.hhs.gov/providers/hopps/2005p/1427p.asp>