

Introduction to the Facilitated Enrollment Notice for Victims of Hurricane Katrina

What Is the Purpose of This Notice, and Who Will Get It?

The purpose of this notice is to inform people with Medicare who were identified as living in Louisiana at the time of Hurricane Katrina and have either Supplemental Security Income (SSI) benefits or help from their state paying their Medicare premiums (belong to a Medicaid Savings Program) that they will be enrolled in a Medicare Prescription Drug Plan if they don't join a plan by December 31, 2005, for coverage effective January 1, 2006.

When Will People Get This Notice?

The notices will be mailed by December 22, 2005.

What Should People Do Next?

If they have enrolled in a Medicare drug plan by December 31, they will stay in that plan. They won't need to do anything. They won't be enrolled by Medicare.

If they haven't enrolled by December 31 and want to keep the plan Medicare assigns them, they don't have to do anything. Starting on January 1, 2006, they will have Medicare prescription drug coverage to help them save money now and protect their future prescription drug needs. They can call the plan to get information about their new drug coverage, and read the materials the plan sends them in the mail.

If the person with Medicare has moved recently, or if someone is getting this letter because he or she is a representative payee for a person with Medicare, they should call the plan to be sure it serves the area the person with Medicare currently lives in. If it doesn't, they should call 1-800-MEDICARE to choose and join a plan that serves that state.

If they want information about the other Medicare drug plans available in their area, they can do the following:

- Visit www.medicare.gov on the web and get personalized drug plan information.
- Call 1-800-MEDICARE (1-800-633-4227) for a list of the specific plans. TTY users should call 1-877-486-2048.
- Call their State Health Insurance Assistance Program (SHIP) for free personalized health insurance counseling. See the "Medicare & You" handbook or call 1-800-MEDICARE for their telephone number.

7500 Security Boulevard
Baltimore, MD 21244-1850<BENEFICIARY FULL NAME>
<ADDRESS>
<CITY, STATE ZIP>HICN <1234>
<file creation date>

Dear <Beneficiary Full Name>,

All people with Medicare can join a Medicare drug plan and get coverage for prescription drugs. Because you were identified as living in Louisiana at the time of Hurricane Katrina, Medicare is going to make sure you'll be covered. Medicare will enroll you in a drug plan if you don't enroll on your own by December 31, 2005.

If you enroll in a Medicare drug plan by December 31, you will stay in that plan. You don't need to do anything. You don't need to read the rest of this letter.

If you currently have other drug coverage from a former or current employer or union, you should contact that plan to talk about this letter. You may need to refuse this enrollment from Medicare to keep your current coverage.

If you haven't joined a Medicare drug plan by December 31, Medicare will enroll you in <Organization name>'s <Name of plan> and your coverage will begin January 1, 2006. With this Medicare-approved drug plan, you will pay

- \$0 for your monthly prescription drug plan premium,
- \$0 for your yearly prescription drug plan deductible, and
- up to \$2 for a generic drug and up to \$5 for a brand-name drug when you fill a prescription covered by the plan.

Please read the attached questions and answers for more information about your new prescription drug coverage and what to do now. Please call <Name of plan> at <Plan phone> for more information about your new Medicare prescription drug coverage. When you call the plan, they may ask for your address. You may also visit <Plan website> on the web for more information.

If you don't want Medicare drug coverage, and you don't want Medicare to enroll you in a drug plan, call 1-800-MEDICARE and tell them you don't want to join.

If you need help understanding this letter or the questions and answers attached, please show it to a family member, friend, case manager, or someone you trust. You can also call your State Health Insurance Assistance Program or 1-800-MEDICARE (1-800-633-4227) for help. TTY users should call 1-877-486-2048.

Sincerely,

Mark McClellan, M.D., Ph.D.

Administrator

Centers for Medicare & Medicaid Services

Para obtener una copia de este aviso en español, llame GRATIS al 1-800-MEDICARE (1-800-633-4227). Los usuarios de TTY deben llamar al 1-877-486-2048.

Important Questions and Answers about Your New Drug Coverage

What should I do now?

If you want to keep the plan Medicare assigns you, you don't have to do anything. Starting on January 1, 2006, you will have Medicare prescription drug coverage to help you save money now and protect your future prescription drug needs. Call your plan to get information about your new drug coverage, and read the materials your plan sends you in the mail.

What should I do if I have moved to a new state?

If you have moved recently, or if you are getting this letter because you are a representative payee for someone with Medicare, please call the plan to be sure it serves the area you or the person with Medicare currently live in. If it doesn't, please call 1-800-MEDICARE to choose and join a plan that serves that state.

If you want information about the other Medicare drug plans available in your area, you can do the following:

- Visit www.medicare.gov on the web and get personalized drug plan information. If you don't have a computer, your local library or senior center may be able to help you look at this information.
- Call 1-800-MEDICARE (1-800-633-4227) for a list of the specific plans. TTY users should call 1-877-486-2048.
- Call your State Health Insurance Assistance Program (SHIP) for free personalized health insurance counseling. See your copy of the "Medicare & You" handbook or call 1-800-MEDICARE for their telephone number

Compare the plans and join a Medicare drug plan that works for you. You should find out which plans cover the prescriptions you take and what pharmacies you can use to fill prescriptions. If you join a different plan, you may have to pay a small monthly premium instead of \$0. **Be sure to ask about the premium when you are comparing plans.**

What if I have other prescription drug coverage?

If you have, or are eligible for other types of prescription coverage, read all the materials you get from your insurer or plan provider. Examples of other types of prescription drug coverage include coverage from an employer or union, TRICARE, the Department of Veteran's Affairs, or a Medigap policy. Talk to your benefits administrator, insurer, or plan provider. Joining a Medicare drug plan may affect the coverage you have from one of these other sources, as well as coverage your spouse or other dependents may be getting if they are covered through your plan. You may not need to join a Medicare drug plan.

Note: Other prescription drug coverage does NOT include doctor samples, discount cards, Medicare-approved drug discount cards with or without the \$600 credit, free clinics, or drug discount websites.

Can I join a different Medicare drug plan?

Yes. Even if you don't join a Medicare drug plan on your own, and Medicare enrolls you in a drug plan, you can switch plans. If you decide to switch to a different Medicare drug plan, you can do so at the following times:

- You can switch plans at least once before December 31, 2006, if you get Supplemental Security Income (SSI) benefits, or applied and qualify for extra help through the Social Security Administration or your State Medical Assistance office.
- You can switch plans anytime if you get help from Medicaid paying your Medicare premiums (belong to a Medicare Savings Program).

To join a different Medicare drug plan, call the new plan to find out how to join. Joining a different plan will disenroll you from your current plan.

Note: In special circumstances, Medicare may give you other opportunities to switch to another Medicare drug plan. For example, if you permanently move out of your drug plan's service area; if the plan stops offering prescription drug coverage; or if you enter, live in, or leave a nursing home.

What if I don't want Medicare prescription drug coverage?

If you don't want to join, and you don't want Medicare to enroll you in a Medicare drug plan, call 1-800-MEDICARE and tell them you don't want to join. But, keep in mind that if you drop this coverage and need prescription drugs, Medicare won't pay until you join a plan. If you keep this plan or join another, you have peace of mind knowing the coverage is there if you need it. However, if you tell Medicare you don't want to join a Medicare drug plan, you may have to pay a penalty if you decide to join later.