

IMPORTANT FACTS FOR HEALTHCARE PROFESSIONALS

Important Dates

Audience: Office staff and patients

Action: Provide photocopies in waiting room, post behind the desk and post in exam rooms.

A Call to Action from Mark McClellan, MD, Ph.D.

Audience: Health professionals

Action: Post flyer in lunch area and front desk work space; copy and distribute to all physicians and nurses.

Reproducible Artwork

Audience: Patients

Action: Cut out and use to make copies; consider printing and localizing with your contact information; give to a printer to reproduce copies with your practice name and logo. Use with patients with Medicare who are interested in the coverage.

Quick Facts

Audience: Spanish and English speaking patients

Action: Reproduce freely and distribute in your waiting room. Post in your exam rooms.

Medicare Prescription Drug Coverage Choices

Audience: Office staff, social workers and financial counselors

Action: Reproduce and share with your colleagues regarding the mechanics of the drug coverage.

A Brochure

Audience: Patients

Action: A supply of these patient brochures will be provided at a later date. If you would like, reproduce this and fold.

An Article

Audience: Other clinicians, social workers, financial counselors and volunteer organizations

Action: Consider placing this in your society or association newsletter.

Resources

Audience: Office staff, clinicians, social workers, discharge planners and partner organizations

Action: Places to go to get tools you can use to promote awareness and education for clinicians as well as patients.

**For More Information Visit: www.cms.hhs.gov/medlearn/drugcoverage.asp
or Call 1-800-MEDICARE (TTY-1-877-486-2048)**



MAY 2005		JUNE 2005		JULY 2005		AUGUST 2005	
- Social Security Administration (SSA) begins mailing out and accepting applications for those who need extra help (low income subsidy) and begins holding local events in communities across the country. - Medicare will mail letters to people who are automatically eligible for extra help with drug plan costs.		Local community events continue through December.		Applications will be available online at www.socialsecurity.gov		SSA sends letters informing those who applied for extra help whether they qualify.	
SEPTEMBER 2005		OCTOBER 2005		NOVEMBER 2005		DECEMBER 2005	
- Medigap (supplemental) insurance companies send notices to policyholders with drug coverage informing them of their options. - Employers/unions who provide prescription drug coverage to their retirees will directly notify them about their new prescription drug coverage choices. <i>"Your Guide to Medicare Prescription Drug Plans"</i> is available by calling 1-800-MEDICARE or by visiting www.medicare.gov.		- Comparative information about Medicare prescription drug plans will be available at www.medicare.gov, 1-800-MEDICARE, or through State Health Insurance Assistance Programs and other local organizations. <i>Medicare & You 2006 Handbook</i> containing all the necessary information is mailed to all Medicare households. - Medicare Advantage plans notify plan enrollees about enhanced drug plan coverage options via "Notification of Change." - People with Medicare and Medicaid will get information about how they will be automatically enrolled in a plan if they do not choose one on their own. - Medicare plans that offer drug coverage begin marketing.		Enrollment for Medicare prescription drug plans begin November 15. People must call the company offering the plan to enroll or enroll through 1-800-MEDICARE.		People should enroll in a Medicare prescription drug plan now to pay lower premiums and to receive prescription drug coverage when it begins January 1, 2006.	
Enrollment Begins November 15, 2005							
JANUARY 2006		FEBRUARY 2006		MARCH 2006		APRIL–MAY 2006	
- Medicare prescription drug coverage begins January 1 for those who enrolled in a plan by December 31, 2005. - Medicare begins to provide prescription drug coverage for those who have Medicare and full Medicaid coverage.		Enrollment continues. <i>Medicare prescription drug coverage begins in the following month.</i>				- Medicare will send a reminder to those who have not enrolled in a Medicare prescription drug plan. - May 15 is the last day to enroll in a Medicare prescription drug plan and pay lower premiums. - Facilitated enrollment of those who qualify for extra help and have not yet chosen a plan; coverage effective June 1.	

*Online qualifier tools available at www.medicare.gov and www.socialsecurity.gov allow people to determine whether they may be eligible to receive extra help before they apply. Online applications for extra help is available July 1 on the Social Security Web site. * People can call 1-800-Medicare (1-800-633-4227) to find out about local State Health Insurance Assistance Programs



Medicare^{Rx}

Prescription Drug Coverage

A Call to Action from CMS Administrator Mark B. McClellan, MD, Ph.D

MEDICARE PRESCRIPTION DRUG COVERAGE

Dear Health Professional:

People with Medicare will need to make a decision soon about Medicare's new, voluntary prescription drug coverage that will be available beginning in January 2006. As a fellow health professional, I know you appreciate the importance of prescription drugs for your patients with Medicare, as well as how vital insurance is for financial protection in the event that they need up-to-date drug treatments. That's why we want to make sure you know the basics about Medicare coverage, so you can help your patients prepare for this important decision. We also know how busy you are, so we want to provide you with some simple ways to get information to your Medicare patients, as well as where to refer them for personalized information so they can make a decision. These resources for help will be available by phone, on line and face-to-face in your area.

Medicare's prescription drug coverage will offer help for everyone on Medicare, no matter how they get their Medicare coverage today. This is real help: On average, it will provide about \$1300 in financial support. For a typical senior, that means Medicare will pay for about half of their drug costs. All seniors will also get comprehensive protection against very high drug costs.

There is also extra help for those that need it most—your patients with limited income and resources. For most people with limited means, the extra help means no premiums, no deductibles, no gap in coverage and co-pays of only a few dollars for all prescriptions. On average, Medicare will cover about 95% of the prescription drug costs for those who qualify for the extra help. And this isn't just coverage for a few—about one third of all people with Medicare are eligible. The Social Security Administration has sent out a four page application for this extra help. If they didn't get one in the mail, your patients should know that they can get an application for extra help from Social Security.

To make things easy for you and your patients, you can encourage them to learn more about their options by calling 1-800-MEDICARE or by going to www.medicare.gov for a list of local organizations that are prepared to help them examine their options about this valuable coverage.

Besides these resources for more patient information, this kit also includes a list of 800 numbers for the State Health Insurance Assistance Program offices. They understand the details of the coverage and are prepared to help your patients find help filling out applications for extra financial help should they need it, as well as provide assistance selecting a plan starting in November based on the patient's particular needs and concerns.

We have developed some easy-to-use tools that will help make referral to the right resources easy for you and your staff. Please feel free to share with your colleagues, or use with your logo or copy freely if you wish. We have also included a reference guide that gives you immediate access to more tool kits, power point slides and people who can provide more answers to your questions.

The new drug coverage is the most important new benefit in Medicare in 40 years, because prescription drugs are so important for keeping your patients healthy. Thank you in advance for your help alerting all your patients, many of whom have aging parents or disabled children, about the availability of this new coverage and where they can go for more information.

Mark B. McClellan, MD, Ph.D
CMS Administrator



Coverage Good for You, Your Patients and America.

As a health professional, you and your office staff are often in a position to be asked questions about Medicare. When asked complex Medicare questions, all you need to say is “Call 1-800-MEDICARE for the answer to your questions.” For your information, the only things you need to know are:

- The Medicare prescription drug benefit is for ALL people with Medicare.
- It covers brand name as well as generic prescriptions.
- People with Medicare will have a choice of plans to provide this coverage.
- There is additional help for those with limited income and resources.
- If a patient receives a letter and four page application from Social Security, they should fill it out and mail it back. The folks at 1-800-MEDICARE, Social Security office (1-800-SSA-1213), State Health Insurance Program Assistance offices or a USDA extension office near you can give them more help.

You can always refer your patients to www.medicare.gov to get the most up-to-date information. We encourage your staff to have your patients call 1-800-MEDICARE to find the local resources where people with Medicare can get help with their applications and making a choice that works for them.

Limited Income Assistance

Some of your patients will be receiving a letter and application from the Social Security Administration telling them that they may be eligible to get extra help paying for their prescription drugs. You may get questions and we thought you'd like to have some answers.

Medicare and the Social Security Administration are working together to insure that all those people who have incomes under \$14,355 (individual) and \$19,245 (couple) apply for the extra help they need. There are now local resources available to help people with Medicare apply for extra help and, later in November, help them apply for a health plan that meets their needs.

We understand the pressure on your clinical time with your patients, which is why we would just ask that you inform your patients who have Medicare that the new prescription drug coverage could be valuable to them and worth exploring. All they have to do is call 1-800-MEDICARE or go to the web site www.medicare.gov where, starting in October, you or your office staff will be able to find a program that allows you to list your patient's drugs and identify possible plans that work for them.

Social Security Administration Important Information



Our records show you may be eligible to get extra help paying for your prescription drugs.

Soon, a new Medicare Prescription Drug program will take effect. The new program will give you a choice of prescription plans that offer various types of coverage.

You may be able to get extra help to pay for the annual deductible, premiums and co-payments related to the new Medicare Prescription Drug program—an average of \$2,100 in extra help.

But before we can help you, you must fill out the application, put it in the enclosed envelope, and mail it today. Or you may complete an online application at www.socialsecurity.gov beginning July 1, 2005. We will review your application and send you a letter to let you know if you qualify for extra help. We also will send you information about the Medicare Prescription Drug program and tell you what you should do next.

If you need help completing the application, call Social Security at 1-800-772-1213 (TTY 1-800-325-0778). You can find more information at www.socialsecurity.gov.

If you need information about the new Medicare Prescription Drug program, call 1-800-MEDICARE (TTY 1-877-486-2048) or visit www.medicare.gov.

Mailing your application today will allow us to give you a quicker decision about whether you qualify for the extra help.

Jo Anne B. Barnhart
Jo Anne B. Barnhart
Commissioner

Reproducible Artwork

For information contact www.medicare.gov or call 1-800-MEDICARE.

MedicareRx
Prescription Drug Coverage

Medicines I take	What this is for	Dosage	When I take it

MEMO PAD



Medicare covers many services to help you stay healthy, including

- Diabetes services and supplies
- Glaucoma tests
- Screening for certain cancers
- Flu and pneumonia shots
- Bone Mass Measurements

Starting January 1, 2006, Medicare will be offering insurance coverage for prescription drugs through Medicare prescription drug plans.

For more information, visit www.medicare.gov

OR

call 1-800-MEDICARE (1-800-633-4227).
TTY users should call 1-877-486-2048.



Important Dates

SUMMER 2005

People with Medicare can apply for extra help through the Social Security Administration

OCTOBER 2005

Watch your mail for the *Medicare & You* handbook to compare plans available in your area.

NOVEMBER 15, 2005

First day you can join a Prescription Medicare Coverage Plan.

JANUARY 1, 2006

Medicare prescription drug coverage begins.

BOOKMARKS

Easy to reproduce reminders for your patients.

Reproducible Artwork

Give these numbers to your office staff in case they get questions about where to go for more help with Medicare prescription drug coverage information.



1-800-MEDICARE or State Health Insurance Assistance Programs

Alabama	(800)	243-5463	Idaho	(800)	247-4422
Alaska	(800)	478-6065	Iowa	(800)	351-4664
Arkansas	(800)	224-6330	Kansas	(800)	860-5260
Arizona	(800)	432-4040	Kentucky	(877)	293-7447
California	(800)	434-0222		TTY	(888) 642-1137
Colorado	(888)	696-7213 or	Louisiana	(800)	259-5301
	(800)	544-9181	Maine	(877)	353-3771
Connecticut	(800)	994-9422	Maryland	(800)	243-3425
District of Columbia	(202)	739-0668	Massachusetts	(800)	243-4636
Delaware	(800)	336-9500	Michigan	(800)	803-7174
Florida	(800)	963-5337	Minnesota	(800)	333-2433
Georgia	(800)	669-8387	Mississippi	(800)	948-3090
Hawaii	(888)	875-9229	Missouri	(800)	390-3330
Illinois	(800)	548-9034	Montana	(800)	332-2272 or
Indiana	(800)	452-4800		(800)	551-3191



1-800-MEDICARE or State Health Insurance Assistance Programs

Nebraska	(800)	234-7119	South Carolina	(800)	868-9095
Nevada	(800)	307-4444	South Dakota	(800)	536-8197
New Hampshire	(800)	852-3388	Tennessee	(877)	801-0044
New Jersey	(800)	792-8820	Texas	(800)	252-9240
New Mexico	(800)	432-2080	Utah	(800)	541-7735
New York	(800)	333-4114	Vermont	(800)	642-5119
North Carolina	(800)	443-9354	Virginia	(800)	552-3402
North Dakota	(888)	575-6611	Virgin Islands	(340)	772-7368
Ohio	(800)	686-1578	Washington	(800)	562-6900
Oklahoma	(800)	763-2828	West Virginia	(877)	987-4463
Oregon	(800)	722-4134	Wisconsin	(800)	242-1060
Pennsylvania	(800)	783-7067	Wyoming	(800)	856-4398
Puerto Rico	(877)	725-4300			
Rhode Island	(401)	462-3000			

Elder Helpline (800) 677-1116

Handy list of State Health Insurance Assistance Program offices that can give your patient expert advice on their Medicare drug coverage.

Medicare Prescription Drug Coverage Basics

What are Medicare prescription drug plans?

Beginning January 1, 2006, prescription drug coverage will be available to all Americans with Medicare. Every person with Medicare, no matter how they get their health care today or whether they have existing drug coverage, will be eligible for drug coverage under a Medicare prescription drug plan. Insurance companies and other private companies will work with Medicare to offer these drug plans. Medicare prescription drug plans will be available throughout the country, and all plans will cover both brand name and generic drugs.

Medicare prescription drug plans provide insurance coverage for prescription drugs. Like other insurance, if people with Medicare join they will pay a monthly premium (generally around \$32 in 2006) and pay a share of the cost of their prescriptions. Costs will vary depending on the drug plan that is chosen.

Drug plans may vary in what prescription drugs are covered, how much someone has to pay and which pharmacies can be used. All drug plans will have to provide at least a standard level of coverage, which Medicare will set. However, some plans might offer more coverage and additional drugs for a higher monthly premium. When a person with Medicare joins a drug plan, it is important for them to choose one that meets their prescription drug needs.

A person with an average income in a Medicare prescription drug plan would expect to pay a \$250 annual deductible and then 25 percent of their drug costs up to a limit of \$2,250. Medicare's catastrophic drug coverage begins when a patient spends a total of \$3,600 out-of-pocket for covered drugs in a year. After that, they will only need to pay 5 percent of their drug costs. Some plans will offer additional coverage.

What do I tell my patients about the Medicare drug coverage?

Tell them that the new Medicare drug coverage can be a real help to them and your office has an 800 number to the State Health Insurance Assistance Program that can help provide expert advice and counseling to your patients. A copy of those state numbers is on a rolodex card included in this package. Your patients can also call 1-800-MEDICARE to get access to a team of local counselors who can help them with their application for extra help and their selection of a prescription drug plan.

When can people with Medicare join a Medicare prescription drug plans?

Those people who have Medicare Part A (Hospital Insurance) and/or Medicare Part B (Medical Insurance), can join a Medicare prescription drug plan between November 15, 2005 and May 15, 2006. If they join by December 31, 2005, their Medicare prescription drug plan coverage will begin on January 1, 2006. If they join after that, their coverage will become effective the first day of the month after the month they join. For example, if someone joins on April 15th, their coverage will begin May 1. In general, they can join or change plans once each year between November 15 and December 31.

Everyone should consider joining a plan. Even if someone doesn't use a lot of prescription drugs now, they still should think about joining a plan. If they don't join a plan by May 15, 2006, and don't have a drug plan that covers as much or more than a Medicare prescription drug plan, they will have to pay more if they decide to join later.

Is there additional assistance for those who need it?

People who qualify for extra help paying for Medicare prescription drug costs will get continuous coverage with a small out-of-pocket cost. The amount they pay out-of-pocket depends on their income and resources. A beneficiary with limited income and resources who joins a Medicare prescription drug coverage plan and qualifies for the most generous help, will have more than 95 percent of their drug costs covered.

Certain people with limited income and resources will automatically qualify for the extra help and then will join a Medicare prescription drug plan during the regular enrollment period beginning November 15.



Medicare Prescription Drug Coverage Basics

What will the plan's formularies look like and how can I work with them?

- CMS will make sure that all lists of drugs, known as formularies, include a broad range of medically appropriate drugs to treat all diseases and do not substantially discourage enrollment by certain people with Medicare.
- CMS has to approve all changes to formularies. People with Medicare and providers will be notified at least 60 days in advance in the event of deletions or higher cost sharing.
- All plans will have an appeals and exceptions process if a non-formulary drug needs to be provided.
- Formularies must include at least two drugs from each category and class (if two drugs exist). Individual formulary classification structures will be compared to the United States Pharmacopeia (USP) model and other commonly used classification systems to ensure that a formulary includes drugs from a sufficient breadth of categories and classes.
- CMS will review all formularies for inclusion of at least one drug from the USP "Formulary Key Drug Types" and inclusion of drugs identified in widely accepted treatment guidelines.
- Six drug classes of special concern have been specified in which all drugs will be on formulary: anti-neoplastics, anti-HIV/AIDS drugs, immunosuppressants, anti-psychotics, anti-depressants and anti-convulsants.

Do Medicare prescription drug plans work with all types of Medicare Health Plans?

Yes. Medicare prescription drug coverage will be offered by most Medicare Advantage and Medicare health plans, and by stand alone prescription drug plans. People in the original Medicare plan will need to join a Medicare prescription drug plan (P-D-P) to get drug coverage. People in Medicare Advantage plans, currently without drug coverage, can choose to join their plan's Medicare Advantage Prescription Drug Plan in order to receive drug coverage.

What if someone already has prescription drug coverage from a Medigap (Medicare Supplement Insurance) Policy?

Those who have a Medigap policy with drug coverage will get a detailed notice from their insurance company telling them whether or not their prescription drug coverage is, on average, at least as good as standard Medicare prescription drug coverage. If their Medigap coverage is at least as good as Medicare's coverage, and they decide to keep their current drug coverage, they may be able to buy a Medicare prescription drug plan later without having to pay a penalty.

What if someone has prescription drug coverage from an employer or union?

Those who have prescription drug coverage from an employer or union will get a notice from their employer or union that tells them if their coverage is, on average, at least as good as standard Medicare prescription drug coverage.

If the employer or union plan covers as much as or more than a Medicare prescription drug plan the person with Medicare can...

- keep their current drug plan. If they join a Medicare prescription drug plan later their monthly premium won't be higher (no penalty), or
- drop their current drug plan and join a Medicare prescription drug plan, but they may not be able to get their employer or union drug plan back.

If the employer or union plan covers less than a Medicare prescription drug plan, the person with Medicare can...

- keep their current drug plan and join a Medicare prescription drug plan to give them more complete prescription drug coverage, or
- just keep their current drug plan. But, if they join a Medicare prescription drug plan later, they will have to pay at least 1% more for every month they waited to join after May 15, 2006, or
- drop their current drug plan and join a Medicare prescription drug plan, but they may not be able to get their employer or union drug plan back.

For additional information or additional educational materials, review materials available through <http://www.cms.hhs.gov/medlearn/drugcoverage.asp> on the web.

Quick Facts about Medicare's New Coverage for Prescription Drugs

Starting January 1, 2006, Medicare will offer prescription drug plans to help you pay for the prescriptions you need. If you don't join a Medicare prescription drug plan by May 15, 2006, you will pay a higher premium unless you have drug coverage that, on average, is at least as good as standard Medicare prescription drug coverage (such as from a former employer or union). Your insurer will notify you before fall to let you know if your coverage, on average, is at least as good as standard Medicare prescription drug coverage.

What do I need to know?

- To get Medicare prescription drug coverage, you must choose and enroll in a Medicare prescription drug plan.
- You can first enroll in a Medicare prescription drug plan from November 15, 2005 through May 15, 2006.
- If you join by December 31, 2005, your coverage will begin January 1, 2006.
- If you join, your costs will vary depending on which plan you choose. In general, you pay a monthly premium (generally around \$32 in 2006) and a yearly deductible (up to the first \$250 in 2006). You will also pay a share of your prescription drug costs, and your plan pays a share. Medicare helps pay for drugs up to a limit (\$2,250 in total) and once your total out-of-pocket costs for drugs reach \$3,600, you pay 5% of the costs and Medicare pays 95% of the costs for the rest of the year.
- Many people with limited income and resources will get extra help paying for their prescription drug coverage. People with the lowest incomes and resources will get the most help. If you are in this group, you will get information in the mail this summer from the Social Security Administration (SSA) or from Medicare telling you what to do.



What if I already have prescription drug coverage?

If you already have prescription drug coverage through your Medicare private health plan or other insurance, check with your current plan to see if this coverage is changing.

Unless you have other drug coverage that is, on average, at least as good as standard Medicare prescription drug coverage, it's important for you to join a Medicare prescription drug plan when you are first eligible. For most people, joining when you are first eligible means you will pay a lower monthly premium than if you wait to join until later.

How can I get more information?

Detailed information will be available in **October 2005**. You can look at the "Medicare & You 2006" handbook, visit www.medicare.gov on the web or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. For more information on who can get extra help with prescription drug costs and how to apply, call SSA at 1-800-772-1213 or visit www.socialsecurity.gov on the web.



Resumen Corto sobre la Nueva Cobertura de Medicare para Recetas Médicas

Comenzando el 1 de enero de 2006, Medicare ofrecerá planes para recetas médicas para ayudarle con los costos de medicinas que usted necesita. Si usted no se inscribe en un plan de Medicare para recetas médicas antes del 15 de mayo de 2006, usted pagará una prima más elevada a menos de que, en promedio, usted tenga una cobertura tan buena como la cobertura estándar de Medicare para recetas médicas (como la de su empleador o sindicato). Su asegurador le notificará antes del otoño si su cobertura es por lo menos tan buena como la cobertura estándar de Medicare para recetas médicas.

¿Qué necesito saber?

- Para recibir la cobertura de medicamentos de Medicare, usted debe escoger e inscribirse en un plan de Medicare para recetas médicas.
- Usted puede comenzar a inscribirse en un plan de Medicare para recetas médicas entre el 15 de noviembre de 2005, y el 15 de mayo de 2006.
- Si se inscribe antes del 31 de diciembre de 2005, su cobertura comenzará el 1 de enero de 2006.
- Si se inscribe, sus costos variarán dependiendo del plan que usted escoja. Por lo general, usted tendrá que pagar una prima mensual (alrededor de \$32 en el 2006) y un deducible anual (hasta los primeros \$250 en el 2006). Usted también pagará una parte de los costos de sus medicamentos, y su plan paga una parte. Medicare le ayuda a pagar hasta cierto límite (\$2,250 en total) y una vez los gastos totales de-su-bolsillo para sus medicamentos alcancen \$3,600, usted paga el 5% de los costos y Medicare paga el 95% de los costos por el resto del año.
- Muchas de las personas con ingresos y recursos limitados recibirán ayuda adicional para pagar por su cobertura para medicamentos. Las personas con ingresos y recursos más bajos recibirán la mayoría de la ayuda. Si está en este grupo, usted recibirá información por correo este verano de la Administración del Seguro Social (SSA) o de Medicare indicándole que debe hacer.



¿Qué sucede si ya tengo cobertura para medicamentos recetados?

Si usted ya tiene cobertura para medicamentos a través de su plan privado de salud de Medicare o algún otro seguro, verifique con su plan actual para ver como si la cobertura está cambiando.

Es importante que usted se inscriba en un plan tan pronto sea elegible, a menos de que, en promedio, usted tenga cobertura tan buena como la cobertura estándar de Medicare para recetas médicas. Para la mayoría de las personas, inscribirse ahora significa que usted pagará una prima mensual más baja que si espera a inscribirse más adelante.

¿Cómo puede conseguir más información?

Información detallada estará disponible en **octubre del 2005**. Puede leer el manual de “Medicare y Usted 2006”, visitar www.medicare.gov por el Internet o llamar GRATIS al 1-800-MEDICARE (1-800-633-4227). Los usuarios de TTY deben llamar al 1-877-486-2048. Para más información sobre la ayuda adicional con los costos de medicinas y como solicitar la ayuda, llame al SSA al 1-800-772-1213, o visite www.socialsecurity.gov por el Internet.



Quick Facts about Medicare's New Coverage for Prescription Drugs for People with Limited Income and Resources

Starting January 1, 2006, Medicare will offer prescription drug coverage for all people with Medicare. If you have Medicare and have limited income and resources, you may qualify for extra help paying for prescription drugs.

What do I need to know?

- If your annual **income** is below \$14,355 for a single person (or \$19,245 if you are married and living with your spouse), you may qualify for extra help. Slightly higher income levels may apply if you provide support to other family members living with you, or if you work or reside in Alaska and Hawaii.
- And if your **resources** (including your savings and stocks, but not counting your home or car) are under \$11,500 (for a single person) or under \$23,000 (for a married couple) you may qualify for extra help paying for your Medicare prescription drug costs.
- You can apply for this extra help through the Social Security Administration or your State Medical Assistance Office. Social Security is mailing the application for extra help to those who may qualify. If you receive an application, fill it out and return it in the enclosed postage paid envelope.
- The amount of extra help you get depends on your income and resources.
- You still need to join a Medicare prescription drug plan for Medicare to pay for your drug costs.
- You can join a Medicare prescription drug plan from November 15, 2005 through May 15, 2006. If you join by December 31, 2005, your coverage begins January 1, 2006. If you join after January 1, 2006, your coverage starts the first day of the month after the month you join.
- If you qualify for extra help, you will have continuous drug coverage and will pay only a small amount for your prescriptions.





CENTERS FOR MEDICARE & MEDICAID SERVICES

How do I get more information?

For more information on who can get extra help with prescription drug costs and how to apply, call the Social Security Administration at 1-800-772-1213, or visit www.socialsecurity.gov on the web. TTY users should call 1-800-325-0778.

You will receive detailed information from Medicare about your choice of Medicare prescription drug plans in October 2005. You can look at the “Medicare & You 2006” handbook, visit www.medicare.gov on the web or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.



May 2005

The Choices You Have for Medicare Prescription Drug Coverage Depend on What Kind of Health Coverage You Have Now.

People with Medicare Need To Know:

- Everyone with Medicare can get Medicare prescription drug coverage.
- Coverage starts January 1, 2006.
- You must join to get coverage.
- You can join from November 15, 2005–May 15, 2006.
- If you don't join by May 15, 2006, you may have to wait until November 15, 2006, and you may pay a penalty.
- There's extra help for those who need it most.
- Medicare prescription drug coverage covers brand name and generic drugs.
- Compare and join a Medicare prescription drug plan that meets your needs.
- You'll get a list of plans and their costs mailed to you in the *Medicare & You* handbook this October.

People with Employer or Union Drug Coverage Need to Know:

- Medicare is working with employers and unions to help you keep the coverage you have.
- Contact your benefits administrator to decide whether you should keep your current coverage. You may be able to keep your current coverage and not pay a penalty if you join a Medicare prescription drug plan after May 15, 2006.
- If you drop your employer or union coverage, your eligibility for your employer/union plan may be affected. You also may not be able to drop your employer or union drug coverage without also dropping your employer or union health coverage.
- You may qualify for extra help paying for your prescriptions.

People with the Original Medicare Plan and Medigap Need to Know:

- You can't have both Medigap prescription drug coverage and Medicare prescription drug coverage at the same time.
- You will get a detailed notice in the mail from your Medigap insurance company describing your choices for prescription drug coverage in the fall. Read it carefully before making any decisions.
- Most prescription drug coverage offered by Medigap policies, on average, is not as good as standard Medicare prescription drug coverage. This means, in most cases, if you keep your Medigap prescription coverage, and don't join a Medicare prescription drug plan by May 15, 2006, you will have to pay a penalty for joining later.

People in a Managed Health Plan Need to Know:

- If you currently have drug coverage, you can stay in your plan and have Medicare prescription drug coverage.
- If your plan does not provide drugs, you can choose one with drugs from your current organization.

The Choices You Have for Medicare Prescription Drug Coverage Depend on What Kind of Health Coverage You Have Now.

Those Who Automatically Qualify for Extra Help (People with Both Medicare and Medicaid) Need to Know:

- You automatically qualify for extra help. You don't need to apply.
- If you get your prescription drugs from Medicaid, Medicare will begin paying for your prescription drugs starting January 1, 2006.
- Your coverage will come from a Medicare prescription drug plan starting January 1, 2006.
- If you don't join a plan by December 31, 2005, Medicare will enroll you in a drug plan to make sure your coverage continues.

Those Who Automatically Qualify for Extra Help (People with Both Medicare and who Belong to a Medicare Savings Program or who Receive SSI) Need to Know:

- You automatically qualify for extra help.
- You must join a Medicare prescription drug plan to get coverage.
- If you don't join a plan by May 15, 2006, Medicare will enroll you in a drug plan for coverage effective June 1, 2006, to make sure you get help paying for your prescription drug costs.

Those Who Must Apply for the Extra Help (People with Medicare with Limited Income and Resources) Need to Know:

- You must apply to SSA or your state agency for the extra help paying for the yearly deductible, monthly premium, and coinsurance and/or copayments.
- You must join a Medicare prescription drug plan to get coverage.
- If you qualify for extra help and you don't join a plan by May 15, 2006, Medicare will enroll you in a drug plan so that your coverage is effective June 1, 2006, to make sure you get help paying for your prescription drug costs.

How do I get this Prescription Drug Coverage?

You may sign up for a prescription drug plan starting on November 15, 2005.

If you sign up by December 31, 2005, your coverage will start on January 1, 2006.

Please note: If you sign up after December 31, 2005, your coverage will start the month after you sign up.

Remember you must join a plan if you want to get this coverage.

Joining will help you get the medicines you need now and in the future.



Important Dates for Medicare Prescription Drug Coverage:

October 2005
Medicare & You handbook with more information on how to sign up.

November 15, 2005
Sign up starts.

January 1, 2006
Coverage starts for those who signed up by December 31, 2005.

May 15, 2006
Last day to sign up in 2006. Remember to join by this date or you will have to wait until November 15, 2006 to join and you may pay higher premiums.



Medicare^{Rx}
Prescription Drug Coverage



Partnership for
Clear Health Communication

Medicare^{Rx}
Prescription Drug Coverage

Prescription drug coverage is available for all people in Medicare.

Sign up starts on November 15, 2005

Look inside for answers to these three questions:

- What does the Medicare Prescription Drug Coverage do for me?
 - How do I get this Prescription Drug Coverage?
 - How do I sign up?
-

What does the Medicare Prescription Drug Coverage do for me?

- ✓ It provides you with insurance coverage for prescription drugs.
- ✓ It pays for both brand name and generic drugs.
- ✓ It offers a choice of plans.

As with other types of insurance, your monthly premium and out-of-pocket costs may be different in different plans.

Medicare^{Rx}

Prescription Drug Coverage

How do I sign up?

In October 2005, you will receive more information from plans in your area.

This information will help you:

- Check if your prescription drugs are covered in the new plans.
- Find out which pharmacies the drug plans in your area use to make sure they are convenient.
- Determine if the monthly fees work for you.

All these things are important to help you choose a plan.



Next steps to pick a plan that works for you.

Sign up starts on November 15, 2005.

Sign up by December 31, 2005, to get coverage beginning January 1, 2006.

May 15, 2006 is the last day to sign up for coverage in 2006.

For more information visit www.medicare.gov or call toll free 1-800-MEDICARE. (1-800-633-4227)



New Coverage That is Good for Americans with Medicare

from Mark B. McClellan, MD, Ph.D., Administrator, Centers for Medicare & Medicaid Services

After 40 years of providing dependable coverage for doctor visits, hospital stays and surgery, Medicare will now offer dependable drug coverage that can help people with Medicare stay healthy. In addition, new preventive benefits — a “Welcome to Medicare” physical exam and screenings for diabetes and heart disease — are now available. We know that 49 percent of these people with Medicare will be contacting their health professional to ask what they think about the new benefits. We value your clinical time and hope that you can simply encourage your patients to access 1-800-MEDICARE to get the local expertise to help them fill out their forms for extra help or to help them make their decision in November. If you want to know more, consider consulting www.cms.hhs.gov/medlearn/drugcoverage.asp your ready resource for information about the drug coverage and for information you can use in your practice.

People with Medicare will need to make a decision soon about signing up for Medicare’s new prescription drug coverage — and we are launching a nationwide outreach effort to help them make an informed decision. Enrollment begins November 15, 2005. Coverage begins January 1, 2006.

BACKGROUND

Beginning January 1, 2006, prescription drug coverage will be available to all Americans with Medicare. Every person with Medicare — no matter how they get their health care today or whether they have existing drug coverage — will be eligible for drug coverage under a Medicare prescription drug plan. The drug plans will be available in all parts of the country, and they will cover brand name and generic drugs. Prescriptions can be obtained from neighborhood pharmacies and through mail order.

All people with Medicare will have a choice of plans, so they can get the coverage that meets their needs. A typical person who is paying for drugs on his or her own today will receive help worth about \$1,300, because the coverage will pay for part of their prescription drug costs after a deductible. They will also get peace of mind against catastrophic drug costs, because Medicare will pay about 95 percent of the cost of prescriptions after out-of-pocket expenses reach \$3,600 a year. People with Medicare will pay a monthly premium that has been expected to average about \$32 in 2006. Medicare will also help pay for high-quality retiree drug coverage provided by employers and unions. Drug coverage will also be available through Medicare Advantage plans, and other Medicare Health Plans which typically offer extra coverage with lower costs.

People with limited incomes — almost one-third of all people with Medicare — will get extra help. The extra help will pay for about 85 percent or more — in most cases 95 percent or more — of prescription drug costs. More than six million people, who already meet the test for extra help, will be automatically enrolled in a prescription drug plan. Others who may meet that test are being mailed applications, and they can qualify for the extra help by filling it out.

TARGETED OUTREACH EFFORT

Right now, the Medicare outreach effort is focusing on making sure people with Medicare know about the drug coverage options that they will have next year, and on helping people with limited incomes and resources get extra help. In the fall, people with Medicare and their family members and caregivers will get additional information and help so that they can make a confident decision about Medicare prescription drug coverage. This includes information and help that is targeted to each person with Medicare, so that they know about the features of Medicare prescription drug coverage that apply to their own situation:

- **People with Medicare Advantage and other Medicare Health Plans:** You will get more drug coverage through your Medicare Advantage plan, with additional benefits that lower your costs. This fall, you will get more information from your plan about your coverage options.
- **People with Retiree Coverage:** Medicare can help pay for drug coverage from your former employer or union if it meets Medicare’s standards. This fall, your retiree benefit program will let you know what decisions you need to make.
- **People with Medicaid Drug Coverage:** You will automatically get comprehensive drug coverage from Medicare. This fall, you will get help in signing up for a Medicare prescription drug plan. To make sure you don’t miss a day of coverage, Medicare can enroll you in a plan on January 1 if you don’t choose a plan on your own.
- **Other People with Limited Income and Resources:** Sign up as soon as possible for extra help from Medicare that will cover 85 to 100 percent of your drug costs, depending on your income and resources. This fall, you can get help in signing up for a Medicare prescription drug plan. To make sure you get comprehensive coverage, Medicare will enroll you in a plan next year if you don’t choose a plan on your own.
- **Other People with Medicare:** You need to make a decision about Medicare prescription drug coverage to get help with your drug costs and peace of mind from coverage that never runs out. You can save if you sign up on time, by May 15, 2006. This fall, you will get specific information on the drug plans, and help will be available to choose a plan.



Resources

Communication tools for the office or other education efforts:

<http://www.cms.hhs.gov/medlearn/drugcoverage.asp>.

Communication tool kit for partners:

<http://www.cms.hhs.gov/partnerships/tools/materials/medicaretraining/MPDCoutreachkit.asp>.

Easy to use plan locator (starting in October):

<http://www.medicare.gov>

For help with prescription drug costs:

<http://www.socialsecurity.gov/prescriptionhelp> or call 1-800-772-1213 (TTY:1-800-325-0778)

Regional Map and Contact Information



REGIONAL OFFICES

PHONE NUMBERS

	Centers for Medicare & Medicaid Services	Social Security Administration
REGION I – BOSTON	617-565-1188	617-565-2881
REGION II – NEW YORK	212-616-2205	212-264-2500
REGION III – PHILADELPHIA	215-861-4140	215-597-4456
REGION IV – ATLANTA	404-562-7150	404-562-5500
REGION V – CHICAGO	312-886-6432	312-575-4053
REGION VI – DALLAS	214-767-6401	214-767-4207
REGION VII– KANSAS CITY	816-426-5233	816-936-5740
REGION VIII – DENVER	303-844-2111	303-844-0840
REGION IX – SAN FRANCISCO	415-744-3501	510-970-8431
REGION X – SEATTLE	206-615-2306	206-615-2660

**For more information call 1-800-MEDICARE, or visit
www.cms.hhs.gov/medlearn/drugcoverage.asp.**