

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
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## **CENTER FOR BENEFICIARY CHOICES**

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**To:** All Medicare Advantage Organizations, Prescription Drug Plans, Cost Plans, PACE Organizations and Demonstrations

**From:** Gary Bailey, Deputy Director  
Center for Beneficiary Choices

**Subject:** **REVISED --** Additional opportunities for individuals affected by Hurricane Katrina to join and switch Medicare Plans, including Medicare prescription drug plans in 2006

**Date:** June 8, 2006

This letter clarifies the special enrollment period (SEP) CMS is providing to individuals affected by hurricane Katrina, giving them more time to enroll in or change their Medicare prescription drug plans in 2006. Individuals will be considered eligible for this SEP if, at the time of the hurricane (August 2005), they resided in any of the parishes or counties declared as meeting the level of "individual assistance" by the Federal Emergency Management Agency (FEMA).

For purposes of identifying these areas, CMS defers solely to the official information provided by FEMA, which identifies all parishes/counties declared eligible for "individual assistance" as a result of Hurricane Katrina. This information is available on the FEMA website at: <http://www.fema.gov/news/disasters.fema?year=2005>.

This special enrollment period means that individuals described above will be able to join and switch plans, including Medicare prescription drug plans, at any time through December 31, 2006. They remain eligible for this SEP regardless of any subsequent change in residence, such as if they have temporarily relocated or permanently moved to another location.

To determine if an individual is eligible for this SEP, Medicare plans must first attempt to obtain proof that in August 2005 the individual resided in an area that FEMA has declared eligible for individual assistance. If the individual is unable to provide such proof (e.g., a driver's license, utility bills, etc.), the plan must accept the beneficiary's attestation that he or she resided in an affected area.