

medicare changes that could affect you



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how changes in medicare could affect you

The Medicare Prescription Drug,
Improvement and Modernization Act
of 2003, which was signed into law in
December 2003, makes major
changes to Medicare, the nation's
health insurance program for people
age 65 and over and some persons
with disabilities. These changes
include a new voluntary prescription
drug benefit, changes to the program
that deal with private health plans in

Medicare (known as Medicare+Choice), new coverage, and changes in costs. Many people have questions about how these changes will affect them, how and when they will occur, and what steps people must take to get these new benefits. This booklet outlines the highlights of the Medicare law, and what these changes could mean to you.



Starting in June 2004, discount cards with a Medicare-approved seal will save you about 10 to 15% on your total prescription drug costs.

prescription drug assistance

The most important part of the law is a new benefit to help people in Medicare with their prescription drug costs. This assistance will go into effect in two stages. The first stage begins in May 2004 when people in Medicare can sign up for a discount card to help them with some drug costs. This is a temporary program that phases out when the second stage of assistance, a Medicare drug benefit, goes into effect on January 1, 2006. After December 2005, the discount cards will no longer be used.

Discount Drug Card

Starting in June 2004, discount cards with a Medicare-approved seal will save you about 10 to 15% on your total prescription drug costs. Medicare will contract with private companies to offer these cards. The cost for a card will be no more than \$30.

This card is optional. If you decide to get a Medicareapproved discount card from a private company, you may pay less for your prescription drugs than you do now. Discounts will vary by card, and each plan will be slightly different. For example, some cards can only be used at certain pharmacies. You need to decide if a Medicareapproved discount card will help you. Shop around to see if there is a card that can help meet your needs. Important facts for you to consider:

- You can only get one Medicare discount drug card at a time.
- If you already have a different discount card, you can keep that card. You can also get a Medicare discount card. Use whichever one gives you the best deal.
- If you are in a Medicare+Choice plan, your plan may decide to offer a Medicare discount drug card. If it does, you can **only** choose that card. If your Medicare+Choice plan does not offer a discount drug card, you can choose any available Medicare discount drug card.
- If you are in a state Medicaid program with drug coverage, you will not be able to get the discount card.
- If you have drug coverage through an employer or former employer, you may not need the discount card.
- If you have a Medigap plan with drug coverage, you may get lower prices using the card. The card should not affect your drug coverage.
- If you have a low income, you can get additional help. See "Low Income" section, page 10.

Medicare Prescription Drug Benefit

You may see this benefit called Medicare Part D. In January 2006, Medicare's new drug benefit will go into effect. People with Medicare will be able to join a drug plan. All the plans will be run by private companies. The first enrollment period is from November 15, 2005 to May 15, 2006. The drug benefit is voluntary. You do not have to sign up. There may be a penalty if you sign up at a later time.

How It Works

Here is how the standard drug benefit will work in 2006 for each person. After 2006, these amounts will go up each year.

- You will have to pay a premium each month. The premium will likely be about \$35 a month. Some plans will charge more, others will charge less.
- The plans will vary. Some plans may offer coverage that looks like the standard benefit. Others may look different, but are worth the same. Still others will include additional drug coverage. Premiums will vary based on what each plan offers and where it is offered.
- You will have a \$250 deductible each year.

CHANGES IN MEDICARE

LIFE ANSWERS FROM AARP



Catastrophic Benefit for 2006 starts when your out-of-pocket drug costs (not including premiums) equal \$3,600.

- After the deductible, Medicare will cover 75% of drug costs, up to \$2,250.
- You will pay 25% of drug costs up to \$2,250.
- After total drug costs reach \$2,250, you will pay an additional \$2,850 in out-of-pocket drug costs before Medicare will continue coverage. This is called the coverage gap, also known as the doughnut hole.
- Once your out-of-pocket drug costs, not including premiums, reach \$3,600 (\$250 deductible + \$500 co-insurance + \$2,850 coverage gap) Medicare will start paying again.
 - Now, Medicare will cover up to 95% of drug costs (also called catastrophic benefit).
 - Now, you will pay either \$2
 for generic drugs and \$5 for
 brand-name drugs or 5% of
 the prescription drug cost,
 whichever is greater.

- *Drug Choice*. Drug plans may have lists of drugs they cover. These lists are called formularies or preferred drug lists. The drugs will be in groups. The groups are called therapeutic classes. There will be at least one drug for each therapeutic class. There will also be an appeals process to get a drug not in the formulary.
- Late Enrollment Penalty. As with Medicare Part B enrollment, there will be a penalty for not enrolling in the Medicare drug benefit in the first six months that you are eligible. The penalty will be about 1% of the premium for each month you delay. This penalty does not apply if you lose drug coverage that you had from another source, which was at least as good as the Medicare drug benefit.

Coverage Gap/Doughnut Hole

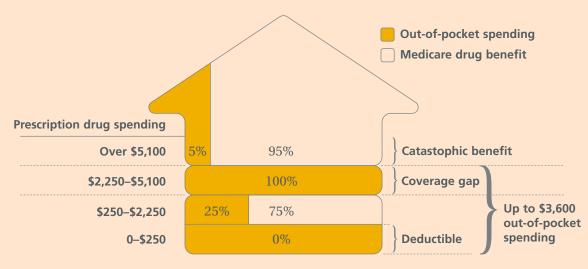
In 2006, you pay all drug costs above \$2,250 until your out-of-pocket drug costs (not including the premium) equal \$3,600. If you do not have any other drug coverage, then \$3,600 in out-of-pocket costs is the same as \$5,100 in total drug costs.

(\$3,600 you pay + \$1,500 Medicare pays + \$0 other drug coverage = \$5,100 total drug costs) (\$2,250 first spending level + \$2,850 coverage gap = \$5,100 total drug costs)

Medicare Drug Benefit 2006 At-a-Glance

Prescription Drug Spending (no drug coverage other than Medicare)	Medicare Pays	Person Pays (no drug coverage other than Medicare)
0–\$250	0	Up to \$250 Deductible
\$250-\$2,250	Up to \$1,500 (75% of drug costs)	Up to \$500 (25% of drug costs)
\$2,250–\$5,100 Coverage Gap/Hole	0 (0% of drug costs)	Up to \$2,850 (100% of drug costs)
Subtotal:	Up to \$1,500+	Up to \$3,600 out-of-pocket = \$5,100 total
Over \$5,100 (Catastrophic Benefit)	95%	5% or \$2 copay/generic \$5 copay/brand name

Note: Your premium (about \$35 per month/\$420 per year in 2006) is not included.



Note: Premiums not included.

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case study

Marie and Evan are a middle income married couple. Evan has heart disease and Marie takes medicine for arthritis. Their drugs cost \$6,810 a year—\$1,960 for her, \$4,850 for him. In 2006, under the Medicare drug benefit, Marie would save 44%, but Evan, with higher costs, would save only 22%. That's because he'd fall partly into the coverage gap. Remember, the coverage gap is all drug costs above \$2,250 until your out-of-pocket drug costs equal \$3,600. Together, the couple would pay \$4,868 out-of-pocket and save \$1,942.

Marie	\$ / Year in 2006
Total Drug Costs:	\$1,960.00
Total out-of-pocket spending: (with premium, which does not count toward \$3,600 out-of-pocket	\$1,097.50
Savings:	\$862.50
Out-of-Pocket Spending Counted Toward Medicare Drug Benefit:	
Annual premium (estimated \$35/m	no) \$420.00
Annual deductible	\$250.00
25% copay on next \$2,000 in total drug spending after \$250 deductibl	\$427.50 e
Full cost of drugs above \$2,250 in total drug spending and below \$3,6 in out-of-pocket drug spending (coverage gap)	\$0.00 600
5% copay above \$3,600 in out-of-pedrug spending	ocket \$0.00



Evan \$	6 / Year in 2006
Total Drug Costs:	\$4,850.00
Total out-of-pocket spending: (with premium, which does not count toward \$3,600 out-of-pocket)	\$3,770.00
Savings:	\$1,080.00
Out-of-Pocket Spending Counted Toward Medicare Drug Benefit:	
Annual premium (estimated \$35/mo) \$420.00
Annual deductible	\$250.00
25% copay on next \$2,000 in total drug spending after \$250 deductible	\$500.00
Full cost of drugs above \$2,250 in total drug spending and below \$3,600 in out-of-pocket drug spending (coverage gap)	\$2,600.00
5% copay above \$3,600 in out-of-poo	ket \$0.00

Note: Total out-of-pocket spending = out-of-pocket spending on drugs + annual premium

CHANGES IN MEDICARE

LIFE ANSWERS FROM AARP



If your income is less than about \$12,000 a year for one person, you may get up to \$600 to help pay for prescription drugs in 2004 and again in 2005.

- The Medicare drug benefit is voluntary. However, if your employer chooses to provide drug benefits that wrap around Medicare's benefit, you would need to be enrolled. Your employer will not be eligible for the federal subsidy.
- If your employer cancels your retiree health benefits after your initial chance to enroll in the Medicare drug benefit, you will be able to enroll later—as long as your employer's plan is at least as good as the Medicare Part D benefit. A late penalty may apply under certain conditions.

Low Income Features

For people with low incomes, Medicare drug assistance has special features.

Discount Card Program

If your income is less than about \$12,000 a year for one person, or \$16,000 for a married couple, you may get up to \$600 to help pay for prescription drugs in 2004 and again in 2005. Also, you will not have to pay a fee for your discount card. While you have money on your card, you will have to pay a low copay (5% to 10%) each time you use it. If you use up the \$600, the card can still be used for discounts.

If your drugs are covered by Medicaid, you cannot get the discount card. If you have drug coverage from an employer or the federal government, you cannot get the special low income features of the discount card.

Medicare Prescription Drug Benefit

Many people with low incomes will get extra help with their Medicare drug benefit. People with the lowest incomes will pay no premiums or deductibles, small or no copays, and will have no coverage gap. Those with

slightly higher incomes will have a reduced deductible and some will have a sliding scale premium and small coinsurance.

This chart shows how people with low incomes will be helped in 2006 when the benefit starts:

Medicare Prescription Drug Benefit

People with Medicare and full Medicaid coverage (Dual Eligible). Income below \$9,630 single/ \$13,000 married couple:

- No premium
- No deductible
- No coverage gap
- \$1 copay for generic
- \$3 copay for brand-name
- No copay if in nursing home
- (\$3,600 out-ofpocket)

- Income below \$13,000 single/ \$17,550 married couple. Assets* below \$6,000 single/\$9,000 married couple:

- generic
- \$5 copay for
- No copay over the catastrophic limit

- Income below single/\$20,000
- No premium
- No deductible
- No coverage gap
- \$2 copay for
- brand-name No copay over the
- catastrophic limit (\$3,600 out-ofpocket)

- \$13,000 single/ \$17,550 married couple. Assets* below \$10,000 married couple:
- No premium
- \$50 deductible
- No coverage gap
- 15% coinsurance
- **\$2** generic or \$5 brand-name copay over the catastrophic limit (\$3,600 out-ofpocket)
- Income between \$13,000-\$14,450 single/\$17,550-\$19,500 married couple. Assets* below \$10,000 single/\$20,000 married couple:
- Sliding-scale premium
- \$50 deductible
- No coverage gap
- 15% coinsurance
- \$2 generic or \$5 brand-name copay over the catastrophic limit (\$3,600 out-ofpocket)
- * Assets that count include savings and investments. Assets that do not count include the home you live in, your car, a burial plot and/or a life insurance policy up to \$1,500 each. You can also keep \$1,500 for burial funds.

Note: The income amounts in this chart are estimates for 2006. Real amounts are not yet set.

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