



U.S. Congresswoman
**CAROLYN CHEEKS
 KILPATRICK**



Medicare's

New Drug Plan



- *Get the Facts*
- *Know Your Options*
- *Be Prepared*

Who Is Eligible?

Anyone on Medicare's Part A or B are eligible for Medicare Part D, the new prescription drug plan. Generally that includes people 65 years old or older, or younger individuals with certain disabilities.

If you have Medicare and Medicaid, you will be enrolled automatically, so there will be no lapse in your prescription drug coverage.

Enrollment

The first enrollment period starts November 15th for coverage beginning January 1st. There will be annual enrollment periods every year after. There is an additional fee for late enrollment, so if you decide to join later than May 15, 2006 your monthly premiums may be higher. The late enrollment fee is approximately 1% of your premium for each month you delay, and you will pay it as long as you stay in a Part D plan.

IMPORTANT DATES

November 15, 2005
 Open enrollment for the Medicare drug plans—both health plans with drug coverage and prescription-only plans.

January 1, 2006
 Medicare drug coverage begins for those enrolled by December 31, 2005.

May 15, 2006
 Last day to enroll to receive any coverage in 2006. Also last day to enroll in the prescription drug plan without incurring a 1% per month premium.

November 15, 2006
 Open enrollment for the prescription drug plan benefit for 2007.

Dear Friend:

Beginning January 1st, Medicare will be offering prescription coverage through new private plans and through Medicare HMOs, known as Medicare Part D.

I opposed the law that created this program because the benefits offered are fewer and more complex than a direct benefit through Medicare.

My concern for you over this new complex system has inspired me to gather these important facts and compile them for your convenience.

I hope you find this information helpful as you face these important choices in the upcoming months.

Carolyn

Do I Have to Sign Up ?

You are not required to sign up for Medicare's drug plan - coverage is **voluntary**. You may already have good drug coverage from elsewhere. If you choose to enroll, it is important that you choose a plan meeting your needs.

What Does Part D Cost?

All of the Part D plans are private insurance plans. Most participants will pay monthly premiums, approximately \$37 a month, or about \$445 annually. For each prescription, you will be required to pay a portion of the costs, and the plan will pay for some of the costs. How much you pay, and how much the plan pays varies on a case by case basis.





How do Medicare Part D Plans Differ from Parts A & B?

Medicare Part D drug coverage is not the same as the temporary Medicare-approved drug discount cards that were available in 2004 through 2005. This new program is permanent and offers insurance protection for drug costs now and in the future.

Review Plans Carefully

No single Medicare drug plan offers the same coverage for everyone. Instead, Medicare has approved a variety of plans by private companies. Plans will differ, including which drugs are covered and what percentage you will have to pay. All plans must meet requirements set by Medicare and will include both generic and brand name drugs. So compare your options carefully and choose the plan that is best for you. You will be able to change plans once a year. To compare plans online visit www.medicare.gov.

What is the Doughnut Hole?

The "doughnut hole" is a break in program coverage that occurs when the beneficiary has reached \$2,251 in drug costs and does not pick up again until the beneficiary reaches \$5,100 in drug costs. During the "doughnut hole" period, the beneficiary pays 100% of their drug costs.

Who Can Help?

Michigan
Medicare/Medicaid
Assistance Program
1-800-803-7174
www.mymmap.org

Social Security
Administration
1-800-772-1213
www.ssa.gov/prescriptionhelp

Medicare Office
1-800-MEDICARE
www.medicare.gov

Center for Medicare &
Medicaid Services
1-877-267-2323
www.cms.hhs.gov/medicarereform

Basic Types of Prescription Drug Plans

Medicare Part D prescription drug plans will come in two basic types. The most simple is a prescription drug plan, or PDP, which covers only drugs and can be used with your traditional Medicare and/or a Medicare supplement plan. The other

Type combines a prescription drug plan with a Medicare Advantage plan that includes medical coverage for doctor visits and hospital expenses; it is called a Medicare Advantage Plus Prescription Drug plan, or MA-PD.

Do You Qualify For Limited Income Assistance?

No one can be denied for health reasons or level of income.

If you qualify, Medicare will pay most of your prescription costs with unlimited coverage throughout the year. Eligibility depends on your income and the value of certain things you own or have saved (known as assets). To see if you qualify, contact the Social Security Administration or your local Medicaid office. If you already have both Medicare and Medicaid, you will likely be eligible for assistance. If you do not qualify for Medicaid, you may still qualify if your 2005 income is below \$14,355 for an individual or \$19,245 for a couple.

Before You Call...

Have your Medicare Identification Number

Make a list of your current prescriptions, the dosage, what they have been costing you.

Know your preferred method of receiving prescriptions, and your refill schedule.

Know your annual income AND have a list of your personal assets in case you qualify for low income assistance.

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Michigan's 13th Congressional District

DETROIT OFFICE

1274 Library St. Suite 1-B
Detroit, MI 48226
(313) 965-9004
Fax (313) 965-9006

WASHINGTON D.C. OFFICE

1610 Longworth HOB
Washington D.C. 20515
(202) 225-2261
Fax (202) 225-5730

DOWN RIVER OFFICE

3005 Biddle Ave., Room A
Wyandotte, MI 48197
(734) 246-0780
FAX (734) 246-1148