

Medicare Prescription Drug Coverage

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Part D & Mental Health

- Focus on transitioning the duals
 - Many of your concerns are addressed through transition strategy, for example:
 - Formularies
 - Autoenrollment
 - Outreach & education

Dual Eligibles: Transition to Medicare Prescription Drug Coverage

Reaching Beneficiaries

Protecting Special Populations

Establishing Appropriate Safeguards

Working with States

Ensuring Continuity of Coverage

Providing Extra Help

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Ensuring Continuity of Coverage: Auto-Enrollment

- Medicaid prescription drug coverage for full-benefit dual eligibles ends 12/31/005
- Full-benefit dual eligibles will be automatically enrolled in a prescription drug plan effective January 1, 2006 if they do not select a plan
- Notices will be sent informing duals of plan they will be autoenrolled in mid-October
- Full-benefit dual eligibles have a SEP so that they change plans any time

Providing Extra Help: Low-Income Subsidy

- Notices sent in May/June to individuals who are automatically eligible for the extra help.
- Reminder: Full benefit dual eligible beneficiaries will only be responsible for \$0 to \$5 copayments per prescription
 - Above 100% FPL – up to \$2 or 5\$ copay
 - At or below 100% FPL – up to \$1 or \$3 copay
 - institutionalized – \$0 copay

Auto-enrollment – Timing of Events

Early October

- CMS one-time notification to PDPs
- CMS one-time notification to State Medicaid Agencies of those auto-enrolled into PDPs

Mid-Late October

- CMS mails notices to beneficiaries auto-enrolled into PDPs
- Start monthly auto-enrollments

November – December

- State Medicaid Agencies send Notice of Action to full duals (that Medicaid coverage is ending for prescription drugs)

December 31

- Last chance to change before auto-enrollment takes effect

Establishing Appropriate Safeguards

- Formulary Review
- Transition Process
- Appeals and Exceptions

Six Categories/Classes of Drugs

- Using the responsibility to make sure beneficiaries receive clinically appropriate medications and formularies are not discriminatory, CMS issued additional formulary guidance to plans
- CMS now requires “all or substantially all” of the drugs in the following categories:
 - Antidepressant
 - Antipsychotic
 - Anticonvulsant
 - Anticancer
 - Immunosuppressant
 - HIV/AIDS

Drug Plans Qualifications

■ Qualifications

- Access
- Choice
- Brand Name and Generic
- Pharmacies
- Affordable cost



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Protecting Special Populations

CMS's Long Term Care Guidance addresses:

- LTC Pharmacy Performance and Service Criteria
 - Performance and Service Criteria for Network LTC pharmacies
- Convenient Access
- Formulary
- Exceptions and Appeals

Reaching Beneficiaries: Key Outreach Messages for Dual Eligibles

- **You will start getting comprehensive drug coverage from Medicare (not Medicaid) beginning Jan 1, 2006**
 - No premiums, deductibles, or coverage gaps, and only small co-pays
- **You will receive specific information this Fall about your new, comprehensive coverage**
- **If you don't choose on your own by January, you will be assigned to a prescription drug plan, and you can switch to a different plan at any time**
- **Your plan must cover all medically necessary treatments must work with you and your doctors to make sure you keep getting all the drugs that you need**

“Medicare Covers America” Campaign Strategy

■ Multi-level approach

- National
- Regional
- State/local
- SPAPs

Multi-channel approach

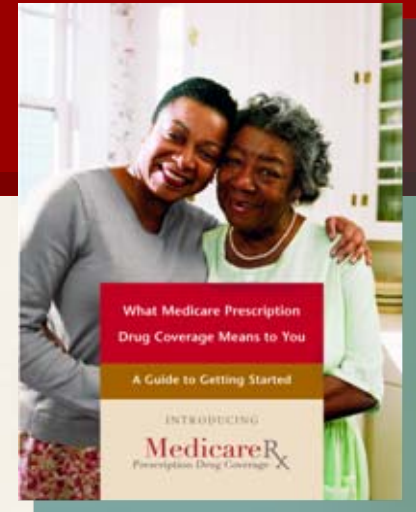
- Media
- Direct mail
- Grassroots outreach
- ***Partnerships***



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Resources



- Medicare Rx trifold brochure
- Medicare Rx informational flyer
- Getting Started brochure
- Parade Magazine's insert – Sunday, September 25
- Medicare & You Handbook
 - Mailed in early October
- Web tools

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Preparing States Outreach and Education

- Workgroups
 - State Issues Workgroup
 - State Pharmacy Assistance Program (SPAP) Workgroup
- Bi-Monthly All-state calls
- Special all-state calls
 - Like the state mental health facility call on 9/16
- MMA_States listserve
- Meetings and workshops
 - Regional
 - National Conference April 2005

Important Dates

- **May – June, 2005**
 - CMS mailed notice to Deemed Eligibles
- **May – August, 2005**
 - SSA mailed application to Potential Eligibles
- **Late September 2005**
 - Plans announced
- **October 1, 2005**
 - People with Medicare will get specific information about coverage
- **November 15, 2005**
 - Beneficiaries choose Part D plan



Important Dates

■ December 31, 2005

- Last chance to change before auto-enrollment takes effect
- Medicaid drug coverage ends for full duals

■ January 1, 2006

- Effective date of auto-enrollment of full-benefit dual eligible individuals

■ June 2006

- Effective date of facilitated enrollment of full-benefit dual eligible individuals



Questions?



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