

## How Does the New Medicare Prescription Drug Benefit Affect Me if I Have a Medicare HMO?

Starting January 1, 2006, Medicare will offer drug coverage to everyone on Medicare. This drug coverage will be offered to consumers through private plans that have been approved by Medicare. The approved plans will either be stand-alone prescription drug plans (for people in Original Medicare) or Medicare HMOs that provide prescription drug coverage as part of their benefit package. The Medicare HMOs that will offer this coverage in 2006 will be called MA-PDs.



This prescription drug coverage is voluntary. You can decide whether you want to sign up for the benefit or not. If you have other prescription drug coverage that is as good or better than Medicare's coverage, you may not need to sign up now. Otherwise, you need to sign up for the benefit before May 15, 2006 to avoid paying more for this coverage when you do join.

If you decide to join the Medicare Prescription Drug Benefit, you may have to pay an additional monthly premium and may have to meet annual deductibles and pay significant co-pays for this coverage. The amount you have to pay for this coverage depends on which Plan you join and whether or not you qualify for any subsidy to help with the costs of the new benefit.

### What are my Choices for Prescription Drug Coverage Under the Medicare Prescription Drug Benefit?

If you are in a Medicare HMO and you do want to join the Medicare drug benefit, your choices will be different from those in Original Medicare. In 2006, your Medicare HMO will either become an MA-PD that includes the new prescription drug coverage or it will be an MA-only Plan that does not include any prescription drug coverage. Your insurance company will send you a notice by October 31, 2005 to let you know what type of Plan your HMO will be in 2006 and what your options will be for getting prescription drug coverage under the new benefit.

In general, these are your options:

If you are in a Medicare HMO that will offer the new prescription drug coverage:

- you will automatically remain in your HMO unless you choose to join a different HMO or go back to Original Medicare;
- you can only get drug coverage through your HMO (if you decide to stay in that HMO);
- you will need to choose a different HMO if you do not want to join the Medicare Prescription Drug Benefit at this time (for example, if you have other prescription coverage that is as good or better than the Medicare benefit).



If you are in a Medicare HMO that will not offer the new prescription drug coverage:

- you may be put into a different HMO that does offer the new prescription drug coverage
- the notice that you get from your insurance company will tell you whether you will stay in your HMO without drug coverage or whether you will be put in a different HMO with drug coverage. This notice will also explain your options for changing Plans.

### **What if I Am In a Medicare HMO and I Currently Get My Drugs Through Medical Assistance?**

In your case, you will be put into a different HMO that includes prescription coverage if your Medicare HMO does not offer drug coverage under the new benefit. You will get a notice from your insurance company that will tell you about this new HMO. The notice will also explain that you can stay with this new Plan, pick a different Medicare HMO, or go back to Original Medicare.



As a dual eligible, you can change Plans at any time. **Please note that Medical Assistance will no longer cover your prescriptions as of January 1, 2006.** This means that by December 31, 2005, you will need to be enrolled in either an HMO that does offer prescription drug coverage or go back to Original Medicare and join a stand-alone Prescription Drug Plan. If you decide to enroll on your own into a Medicare HMO that does not cover prescriptions, you will not have drug coverage on January 1, 2006.



**If you have questions about the notices you receive from your Medicare HMO or if you would like more information about the Medicare Prescription Drug Benefit, you can call:**

- The Pennsylvania Health Law Project Helpline at
  - 1-800-274-3258; 1-866-236-6310 (TTY) *or*
- The APPRISE Hotline at 1-800-783-7067