Medicare’s new prescription drug insurance—called Medicare Part D—began January 1, 2006. To get this insurance, most people will have to sign up for one of the Part D Plans Medicare has approved. And the new Part D offers “Extra Help” to people with limited incomes. Medicare’s Extra Help can reduce what you have to pay for prescriptions.

Mississippi already runs two programs that help people with limited incomes pay for drugs and a third program that helps pay for other Medicare-related costs like premiums. These programs are: Medicaid, Mississippi AIDS Drug Assistance Program (ADAP), and Medicare Savings Programs. But these programs are changing because of Medicare Part D. If you are now in one of these state programs, this fact sheet explains how they will work with the new prescription drug plans. Find your program below to see what effect the new plan will have, what choices you need to make, and how you can get more information.

Since changes are still being made in Mississippi’s programs, it is always best to check with your program directly for the most current information and advice. You may also want to check with your program to see if you may be able to get more benefits. Contact information for each of the programs is included below.

For people on Medicare who are also covered by Medicaid

Will I have to sign up for a new prescription drug plan? And what about Extra Help? Yes. Medicare automatically signed you up with a plan in October, but you can change to a different plan anytime. You are automatically eligible for Extra Help.

How will I know what my plan is? In October, Medicare should have sent you a letter telling you which plan you are signed up with and how to change plans if you want to. This plan went into effect on January 1, 2006.

Does it matter which plan I am signed up with? Probably. Each plan only pays for certain drugs. If your assigned plan does not pay for all the drugs you are taking now, you can switch to another. You can ask the
Mississippi Insurance Counseling and Assistance Program (MICAP) to help you decide if you should switch plans.

What will I need to know to pick the best plan for me? Start by making a list of all the medicines you take. Then check the different plans to see if your drugs are on their list. You can ask MICAP to help you decide which plan is best for you and how to change plans.

How much will I have to pay for drugs? It depends. You won't have to pay any premiums or a deductible. If you live in a nursing home, there will be no costs. For others in Medicaid, the co-pay for each prescription will be $1 or $2 for generic drugs and $3 or $5 for brand names (depending on your income), which may be more than what you pay right now depending on what drugs you take. You will not be limited however to five prescriptions or be limited to generic drugs, depending on the rules of the plan you sign up with.

Can I still fill my prescription if I can’t afford the co-pay? Unlike Medicaid, your pharmacist cannot fill your prescription unless you have the co-pay.

Will my plan pay for all my drugs? Maybe, but there are two different issues.

No plan is allowed to pay for some types of medications, including barbiturates, some anxiety drugs, and drugs to help you gain or lose weight. Medicaid will still pay for these types of drugs that are now covered by Medicaid.

Each plan has its own list of drugs it pays for. But if your doctor says that you need a drug that isn't on the list, you may be able to get an “exception” from your plan to pay for the drug your doctor prescribed. If your plan won't give you an exception, you will have to pay for it yourself or switch to a different drug that is on your plan's list.

Medicaid hasn't decided if it will help pay for these extra costs. Call the program for new information.

Will I have to pay for drugs my doctor says I need but that aren’t on my plan’s drug list? Maybe. Your doctor can ask the plan to give you an “exception” to pay for your drug. If your plan won’t give you an exception, you will have to pay for it yourself or switch to a different drug that is on your plan's list.
Where can I get more information?

Mississippi Insurance Counseling and Assistance Program (MICAP)
1-800-948-3090 (Toll free)

Mississippi Medicaid Office
1-800-421-2408 (Toll free)
601-359-6050 (Local)

Mississippi AIDS Drug Assistance Program (ADAP) pays for some drugs used to treat HIV/AIDS and related conditions.

Will I have to sign up for a prescription plan? Yes. If you are now on Medicare, you should have signed up for one of the new plans between November 15 and December 31, 2005 to get help paying for your drugs in 2006. ADAP hasn’t decided if it will require you to sign up to continue getting help from ADAP. Call the program for new information.

Will I have to apply for Extra Help? Yes. You can apply at any local Social Security office, local Medicaid office, or the Mississippi Insurance Counseling and Assistance Program (MICAP).

What will I need to know to pick the best plan for me? Each plan only pays for certain drugs. Start by making a list of all the medicines you take. Then check the different plans to see if your drugs are on their list. You can ask MICAP for free personal help to decide which plan works best with ADAP for you and how to change plans if you need to.

How will this change affect what I have to pay? Everyone in ADAP will pay more for the drugs ADAP now pays for. If you qualify for Extra Help, your other medications will be cheaper. If you do not qualify for Extra Help, you will have to pay a premium, a deductible, higher co-pays, and other costs that you don't have to pay in ADAP. ADAP hasn't decided if it will help pay for these extra costs. Call the program for new information.

Will my plan and ADAP pay for all my drugs? Maybe, but there are two different issues.

No plan will be allowed to pay for some types of medications, no matter what plan you are on. These include barbiturates, some anxiety drugs, and drugs to help you gain or lose weight. You will probably have to pay for these drugs yourself.

Each plan has its own list of drugs it pays for. But if your doctor says that you need a drug that isn’t on the list, your doctor may be able to ask your plan to give you an “exception” to pay for the drug prescribed. If
your plan won’t give you an exception, you will have to pay for it yourself or switch to a different drug that is on your plan’s list.

ADAP hasn’t decided if it will help pay for these costs. Call the program for new information.

Will I have to pay for drugs my doctor says I need but that aren’t on my plan’s drug list? Maybe. Your doctor can ask the plan to give you an “exception” to pay for your drug. If your plan won’t give you an exception, you will have to pay for it yourself or switch to a different drug that is on your plan’s list.

Where can I get more information?

Mississippi AIDS Drug Assistance Program (ADAP)
601-960-7723

Mississippi Insurance Counseling and Assistance Program (MICAP)
1-800-948-3090 (Toll free)

Mississippi Medicaid Office
1-800-421-2408 (Toll free)
601-359-6050 (Local)

Social Security
1-800-772-1213 (Toll free)
1-800-325-0778 (Toll-free TTY for people with hearing loss)

Medicare Savings Programs—Qualified Medicare Beneficiary Program (QMB), Specified Low-Income Medicare Beneficiary Program (SLMB), and Qualifying Individual (QI)

Will I have to sign up for a prescription drug plan? No, but it is always a good idea to sign up for a plan, even if you are not taking any prescription drugs now. There are no premiums, and drug costs will be very low. If you don’t sign up with a plan between November 15, 2005 and May 15, 2006, Medicare will select a plan for you and sign you up. Until then, you can decide which plan is best for you. You will be able to choose from several different plans.

Will I have to apply for Extra Help? No. You will automatically get Extra Help so you don’t have to apply. You should receive a letter soon (or you may have already) telling you that you qualify. The application should be made through the State Medicaid Office or the Social Security Administration. The Mississippi Insurance Counseling Assistance Program (MICAP) may also offer additional assistance.
How will I know what my plan is? In May 2006, Medicare will send you a letter (unless you have already enrolled in a plan) telling you which plan you are signed up with and how to change plans if you want to.

Does it matter which plan I am signed up with? Probably. Each plan only pays for certain drugs. If the plan you are assigned to does not pay for all the drugs you are taking now, you can switch to another plan. You can ask MICAP for help in choosing the best plan for you, but you are limited to the plans that work with the Medicare Savings Programs.

What will I need to know to pick the best plan for me? Start by making a list of all the medicines you take. Then check the different plans to see if your drugs are on their list. You can ask MICAP to help you decide which plan is best for you and how to change plans.

How much will I have to pay for my drugs? For drugs on your plan’s approved list, your co-pay for each prescription will be $2 for generic drugs and $5 for brand names.

Will my plan pay for all my drugs? Maybe. But there are two different issues.

No plan is allowed to pay for some types of medications, no matter what plan you are on. These include barbiturates, some anxiety drugs, and drugs to help you gain or lose weight. You will have to pay for these yourself.

And each plan has its own list of drugs it pays for. But if your doctor says that you need a drug that isn’t on the list, you may be able to get an “exception” from your plan to pay for the drug your doctor prescribed. If your plan won’t give you an exception, you will have to pay for it yourself or switch to a different drug that is on your plan’s list.

Will I have to pay for drugs my doctor says I need but that aren’t on my plan’s drug list? Maybe. Your doctor can ask the plan to give you an “exception” to pay for your drug. If your plan won’t give you an exception, you will have to pay for it yourself or switch to a different drug that is on your plan’s list.
Where can I get more information?

Mississippi Insurance Counseling and Assistance Program (MICAP)
1-800-948-3090 (Toll free)

Mississippi Medicaid Office
1-800-421-2408 (Toll free)
1-601-359-6050 (Local)

Medicare Savings Programs
1-800-633-4227

For our FREE educational guide, visit www.aarp.org/medicarerx or call 1-888-OUR-AARP (1-888-687-2277).