



Comparing Medicare Prescription Drug Coverage

Beginning January 1, 2006, Medicare prescription drug coverage is available to all people with Medicare. Medicare will offer insurance coverage for prescription drugs through Medicare drug plans. Insurance companies and other private companies approved by Medicare will provide these plans. You can join one of these Medicare drug plans beginning November 15, 2005.

When you decide you want Medicare prescription drug coverage, you will need to choose a particular Medicare drug plan. There may be many drug plans available in your area to choose from.

Medicare drug plans will have different costs and cover different drugs. This tip sheet will help you compare the information for each Medicare drug plan that you want to learn more about.

What Medicare drug plans are available?

Because people with Medicare get their care in different ways, you have choices about your Medicare drug coverage. You need to know that there are two types of Medicare drug plans that provide prescription drug coverage.

- There will be Medicare Prescription Drug Plans that only provide prescription drug coverage. These plans add drug coverage to the Original Medicare Plan (Part A and/or Part B), Medicare Private Fee-for-Service Plans that don't offer prescription drug coverage, and Medicare Cost Plans.
- There will also be prescription drug coverage that is part of Medicare Advantage Plans (like a Medicare HMO, PPO, or Private Fee-for-Service Plan) and other Medicare Health Plans. You would get your Medicare health care and prescription coverage through these plans.

Detailed information about the specific drug plans in your area will be available in October 2005. You can get a list of the drug plans, their costs, their contact information, and more by

- reading the "Medicare & You 2006" handbook that will be mailed to you. Section 13 lists the specific plans in your area.
- visiting www.medicare.gov on the web. Select "Search Tools" at the top of the page.
- calling 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. When you call, have your Medicare card, a list of the drugs you use, and the name of the pharmacy you use ready.



How do I compare Medicare drug plans?

When you find some drug plans you are interested in, call the companies that offer the plans and use the chart on the next page to compare information about these plans. The steps below will help you complete the chart. The chart isn't part of the enrollment process, just a tool to help you organize the information.

Step 1: Find out which plans cover your drugs.

- Drug plans will cover different generic and brand-name drugs in different drug categories on their drug lists.
- The drug list (formulary) may not include your specific drug. However, in most cases, a similar drug that is safe and effective should be available.

Step 2: Find out the costs of each plan.

Medicare drug plans can vary on how much they charge and how much they cover. Choose the Medicare drug plans you want to know more about and compare the following for each plan:

- **Premium.** This is the monthly payment you make to get coverage.
- **Deductible.** This is the yearly amount you pay before your Medicare drug plan begins to pay.
- **Coinsurance or Copayments.** This is your share of your prescription drug costs. Medicare and your drug plan also pay a share of the costs.
- **Coverage limits.** Some plans may have you pay all drug costs beyond a certain limit.

If you have limited income and resources, you may qualify for extra help paying for Medicare prescription drug coverage that can lower or even eliminate these costs. Medicare mailed letters to people who automatically qualify for extra help in May and June. If you didn't automatically qualify, the Social Security Administration (SSA) sent people with certain incomes an application for this extra help. If you didn't get an application but think you may qualify, call 1-800-772-1213. TTY users should call 1-800-325-0778. You can also visit www.socialsecurity.gov on the web, or apply at your State Medical Assistance office.

Step 3: Find out each plan's pharmacy and mail order options.

- Medicare will require plans to have convenient pharmacies for you to choose from. If it's important to you to stay with your current pharmacy, find out if you can use your pharmacy with the drug plan.
- Some drug plans also allow you to get your prescriptions through the mail.



Where can I get help?

If you need help comparing Medicare prescription drug coverage, you can

- read your “Medicare & You 2006” handbook, visit www.medicare.gov on the web, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
- call your State Health Insurance Assistance Program (check the back cover of your “Medicare & You 2006” handbook for the telephone number in your state).
- attend Medicare-related events in your community. Look for information about these events in your local newspaper or listen for information on the radio.

What should I do next?

Once you choose a Medicare drug plan, you will need to join. For information on how to join, read the tip sheet “Medicare Prescription Drug Coverage: How to Join” (CMS Pub No. 11111). For a copy of this tip sheet, visit www.medicare.gov on the web, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.