

MEDICARE & YOU



Understanding The ABCs Of Medicare Part D

(NAPSA)—There has been a lot of talk lately about Medicare Part D, the new prescription drug benefit that begins Jan. 1, 2006. With so much information, it can be overwhelming and difficult for seniors and their families to understand the significance of this new coverage now available to them.

“For the first time, America’s seniors will have access to affordable prescription drug coverage,” said Jackie Kosecoff, Ph.D., executive vice president of PacifiCare’s Prescription Solutions, which is offering three Medicare Part D plans. “There are lots of new choices out there for them to review, and it may seem complicated at first. But knowing a few basic facts can help people understand the benefit more clearly.”

In order to assist seniors in making the right choice for themselves on prescription drug coverage, she offers the following facts and tips on Medicare Part D.

1. All 42 million Medicare beneficiaries are eligible for the new prescription drug coverage, and enrollment in Part D is voluntary.

2. Part D plans are being provided solely through private health care plans. This is different from current medical coverage options, in which seniors can choose between traditional Medicare and private health insurers (HMOs) that offer Medicare Advantage plans.



Seniors have new options for prescription drug coverage.

3. Seniors can sign up for Part D plans as of Nov. 15. The open-enrollment period for the program will last until May 15, 2006, but in order for coverage to start on Jan. 1, 2006, seniors must sign up by Dec. 31.

4. Part D coverage will be offered through two types of plans. A stand-alone Prescription Drug Plan, called a PDP, will offer drug coverage only. Hospital and outpatient costs would be covered by separate plans. An MA-PD plan is a Medicare Advantage Prescription Drug plan that offers medical, hospital and drug coverage.

5. All plans that offer Part D coverage have to meet basic requirements. For example, each plan has to offer at least two

drugs in every drug class except those that are excluded from coverage, such as those used for weight loss, weight gain or cosmetic purposes or those sold over the counter.

6. If you already have prescription drug coverage, it may still be available after this year. Seniors should compare their current plan’s 2006 coverage with the Part D plans that will be available in their area next year.

7. The standard annual deductible will be \$250. Medicare estimates that the average monthly premium will be about \$32.

8. For low-income beneficiaries, premiums and deductibles may be reduced or eliminated. Copays will be as little as \$1 for generic drugs and \$3 for brand-name drugs.

9. In most cases, seniors who join a Medicare Part D plan can change their coverage at the beginning of the following year. There are exceptions for seniors who reside in a nursing facility or are eligible for both Medicare and Medicaid.

10. Further information can be found by calling 1-800-MEDICARE or visiting www.medicare.gov.

“Understanding your drug coverage options is the first step in making the right health care choice,” said Kosecoff. “This is an important time for our nation’s seniors that will pave the way for a healthier and happier future for many.”



Note to Editors: PacifiCare is the nation’s second-largest senior health insurance company with more than 20 years’ experience delivering affordable, quality health care coverage to America’s seniors. Jackie Kosecoff served as professor of medicine and public health at The University of California, Los Angeles, where she still holds a research professorship. She has written articles for the *New England Journal of Medicine*, *The Journal of the American Medical Association* and *Annals of Internal Medicine*.