

UNDERSTANDING MEDICARE

What To Consider When Choosing A Part D Drug Plan

(NAPSA)—In 2007, nearly 24 million Medicare beneficiaries were enrolled in a prescription drug plan under the Medicare Part D program. Medicare beneficiaries have the opportunity to consider Part D options for 2008 during the annual election period.

There are two different kinds of Part D coverage. One kind is a “prescription drug plan” that provides coverage for prescription medications only and may be added to an existing private health-coverage-only plan or as part of original Medicare coverage. The other is through a “Medicare Advantage” plan that combines prescription drug coverage with a comprehensive health plan covering doctor and hospital bills. Private health insurers provide both options.

Important Dates

Medicare Advantage plan members enrolled in either of the above options can modify their Part D drug plan elections once per year, during the Annual Election Period (AEP). Throughout this time, enrolled members can add or drop Part D prescription coverage or change plans. The AEP runs November 15 through December 31, 2008.

If you have not made a decision by December 31, you still have some time. The dates from January 1 to March 31 are called the Open Enrollment Period. While in the Open Enrollment Period, you can make one “lateral move” to a different plan of the same type. For example, if you have a plan with drug coverage, you can



When selecting a Medicare Part D plan, be sure to choose the plan that fits your needs.

switch to a different plan that also has drug coverage.

What to Look For

“Medicare prescription drug plans offer a variety of benefit and premium options,” said Mark El-Tawil, chief Medicare officer of Health Net. “What’s most important is to select the plan that fits your needs.”

But what plan is right for you? Here are the quick questions you should be asking:

- **Cost.** It is important to think of any out-of-pocket costs you may have. What will your monthly premiums be? You can select from plans with a range of convenient monthly plan premiums. Will you have a deductible or co-payments? If you’re shopping for price and looking at the comprehensive plans—medical plans combined with Part D prescription drug plan—don’t forget to look at the co-payments and deductibles for doctor and hospital costs.

- **Coverage.** Will you have access to a wide range of prescrip-

tion drugs? You can get drug plans that cover 95 or more of the top 100 drugs. If there are prescription drugs you currently take or expect to take, make sure they are covered. Otherwise, you could be enrolled in a plan that does not pay for the medications you need. Keeping a detailed prescription log will help you to determine your basic needs.

- **Convenience.** Does the plan have an agreement with your favorite pharmacy? If not, you will be spending time traveling to different drugstores.

- **Simplicity.** Part D can be complicated. Who needs that? Some plans give you the right coverage—and they are easy to understand and easy to use. It’s a matter of shopping.

- **Customer Service.** The people you speak with at the health plan should take the time to explain everything clearly. See if you get a good feeling about these people. Are they helpful? Do they seem to understand your personal needs?

“It pays to contact the health plan directly. They can show you the right mix of benefits and expenses and allow you to ‘test-drive’ their customer service,” said El-Tawil. “After all, once you choose a plan, you are going to be dealing with it for quite a while.”

If you want to change your plan, start thinking about it now. Consider your choices and get help if you need it from friends, family or senior and community centers. Also, you can go to www.medicare.gov.