



Part D for Safety Net Providers



MEDICARE PART D Patient Assistance Guide

1. Which Medicare Part D Plan is patient currently enrolled in?

Check if the patient has a Part D Plan card with an I.D. #. If that plan is accepted at the pharmacy, the enrollment process was completed. If it is not, verify which plan the patient is in by taking one of the following steps:

- a. Go to www.medicare.gov, select "compare Medicare prescription drug plans" then select "find a Medicare prescription drug plan" then select "personalized search" and enter patient's information.
**Before facilitating any online enrollment in plans, complete an Disclaimer Form.*
- b. Call Medicare's 800 number 1-800-MEDICARE (have Patient's Medicare number, effective date for Medicare A or B, birth date, zip code)
- c. If patient is Dual Eligible, go to www.medi-cal.ca.gov and look up the patient's eligibility status (requires use of access codes). Dual eligibles should have a Part D Plan name listed at the bottom of the record after the designation "Carrier" – the auto-enroll plan is listed first, any subsequent plan that the patient is enrolled in is listed next and is the most current plan that Medi-Cal has on record.

2. If patient doesn't have the card or ID number for his/her current Part D Plan.

If the pharmacist is contracted with that Part D Plan: The pharmacist can check enrollment status by sending an E1 query or calling Medicare's dedicated pharmacy eligibility line at 1-866-835-7595.

If the pharmacist is not contracted with that Part D Plan: Patient will not be able to get prescriptions filled at this pharmacy. Refer patient to nearest pharmacy that honor's patient's current Part D Plan.

To verify enrollment and request an ID number or card: Contact the current Part D Plan, or have the patient contact the plan (plans may release information only to plan members).

If you are able to confirm which plan the patient is in, but the pharmacy cannot verify enrollment (and therefore will not fill prescriptions) there is a glitch in the system. To address this call the Regional CMS office at 1-415-744-3602 and explain the problem. Often the Part D Plan has not yet received confirmation of enrollment status from CMS, and staff at the regional office can often fix this in 24 hours.

Temporary Emergency Medi-Cal Claim Through January 27, 2006: a Dual Eligible patient may qualify for temporary emergency prescription drug coverage if they are not able to obtain coverage due to transition problems. The claim must be submitted by the pharmacy under specific circumstances using a specific procedure and codes (see "MMA Emergency Drug Supply Bulletin".)

3. Is the drug(s) that the patient needs covered by his/her current Part D Plan?

a. Go to www.epocrates.com to review the formulary of a Part D plan:

Under “Epocrates ONLINE *free*” click on [Learn More](#)

Under “Access Epocrates Online FREE” click on [Enter Now](#)

Sign on as a new user (make a note of your ID and password) and select the Part D formularies and drugs you choose to review.

Or

b. Go to the current Part D Plan’s web site, download the formulary and check it for patient's drug (be sure to zero in on the Plan that the patient has... some Plans have several versions).

Note that some drugs will be on a Plan formulary, but require prior authorization, step therapy or other limitations that may require initiating a coverage determination request.

c. Temporary Emergency Medi-Cal Claim Through January 27, 2006: a Dual Eligible patient may qualify for temporary emergency prescription drug coverage if they are not able to obtain coverage due to transition problems. The claim must be submitted by the pharmacy under specific circumstances using a specific procedure and codes (see “MMA Emergency Drug Supply Bulletin”).

4. If drug(s) is not on the formulary of patient's current Part D Plan.

a. Refer patient to the clinic staff person who has been trained to assist patients with **Plan Finder** to identify Plans that will cover the patient's drugs and help patient enroll. **NEW PLAN WILL BE IN EFFECT IN THE BEGINNING OF THE NEXT MONTH.**

(go to www.medicare.gov, select "compare Medicare prescription drug plans" then select " find a Medicare prescription drug plan" then select "general search" and enter the patient's drug information and pharmacy choice. Review plan options with patient.)

and...

b. If patient needs the medication before the patient’s new PDP will take effect, check the CMS “PDP Transition Policy Summary (First Fill) 12/28/05” list for number of days the patient’s current Plan will provide a transition assistance “**first fill.**”

- If the first fill **will** get the patient through the end of the month, tell the patient about it and be ready to inform the patient’s pharmacy about the first fill obligation (you may need to fax the “PDP Transition Policy Summary 12/28/05” to the pharmacy - CMS requires all Part D plans to provide transition assistance for new enrollees with a first fill of any drug not on the Plan formulary).
- If the first fill **will not** get the patient through the end of the month, initiate a coverage determination/exception process by contacting the current Plan.

c. Temporary Emergency Medi-Cal Claim Through January 27, 2006: a Dual Eligible patient may qualify for temporary emergency prescription drug coverage if they are not able to obtain coverage due to transition problems. The claim must be submitted by the pharmacy under specific circumstances using a specific procedure and codes (see MMA Emergency Drug Supply Bulletin.)

