

## Getting Prescriptions Filled for Medicare Part D Enrollees

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We have received numerous reports of Medicare beneficiaries who are also enrolled in MassHealth or Prescription Advantage having difficulty in getting prescription drugs under the new Part D plans. Following is a series of steps you can take to address such problems when they occur at your local pharmacy.

- Find out in what plan the individual is enrolled  
Many beneficiaries who are also eligible for MassHealth or Prescription Advantage have been automatically enrolled in a Part D plan. The individual may or may not have received a plan card for the new Part D plan. Ask if they have such a card. If not, each such “dual eligible” should have received a letter telling them what plan they are enrolled in and an acknowledgement letter from the plan. Ask to see the enrollment letter or acknowledgement letter if the individual has one. If the individual has none of these documents ask for their MassHealth and/or Medicare card. Give the documentation to the pharmacist. Ask the pharmacist to send an “E1 query” to the CMS computer system or call the CMS dedicated pharmacy eligibility line (1-800-835-7595) to determine plan enrollment. If the individual is MassHealth and Medicare eligible but has not been autoenrolled in a plan, ask the pharmacist to fill the prescription and bill the Point of Sale contractor.
- Find out if the individual’s prescriptions are covered under the plan  
Once you know the individual’s plan coverage you can go online to determine if his or her drugs are covered under the plan. The Medicare website ([www.medicare.gov](http://www.medicare.gov)) lists plans and contact phone numbers. In addition it has a Formulary Finder which allows you to identify which plans cover what drugs and what limits are placed on their utilization. If the drug is covered by the plan print out the information and show it to the pharmacist. Special coverage provisions are available for benzodiazepines, barbiturates and over-the counter drugs - these drugs are not covered by Part D plans but are covered by MassHealth for MassHealth recipients. In addition, Prescription Advantage will provide coverage for benzodiazepines.
- If the individual’s drugs are not covered by the plan or the drug use is restricted  
If the individual’s drugs are not covered by the formulary or if they require prior approval or have other limits on utilization, the drugs should still be covered by a plan’s transition requirements. Plans are required to have one-time transitional drug coverage of at least 15 days and in most cases 30 days to allow time for individuals to sort out problems with coverage. Call the plan if the pharmacist does not have information about transitional coverage.

- If the one-time transition benefit has been exhausted  
 If the transition benefit is exhausted dually eligible individuals are entitled to an additional one-time 30 day supply of the drug paid for by MassHealth or Prescription Advantage. After the additional one-time 30 day supply is used up dual eligibles are entitled to an additional 72 hour emergency supply when the plan does not provide coverage. Special coverage provisions are available for benzodiazepines, barbiturates and over-the-counter drugs.
- If the individual is being charged a large copayment or pays out-of-pocket for the drug  
 Dually eligible individuals should not pay more in out-of-pocket costs than they paid under MassHealth or Prescription Advantage. They are “held harmless” by these programs for any additional costs. If a dually eligible individual has paid higher copayments contact the pharmacist and follow the procedures above for identifying them as dual eligibles. Ask the pharmacist to bill these programs for the additional copayment cost. If the individual has purchased the drug at full price ask him or her to save the receipt. If the individual is identified as enrolled in a Part D plan ask the pharmacist to bill the plan for reimbursement subject to the appropriate copayment.
- Who to contact if the individual still can't get needed medication  
 Call the following numbers if you are still not successful in getting the individual his or her needed medication:  
 1-800-Medicare (general CMS number for dealing with questions and problems in the Part D Program)  
 1-800-AGE-INFO (SHINE Program of assistance to individuals with health insurance problems)  
 1-800-AGE-INFO (Prescription Advantage Program for individuals enrolled in Prescription Advantage)  
 1-800-841-2900 (MassHealth Customer Service Line)  
 1-800-323-3205 (Medicare Advocacy Project)
- Where to report problems and issues in the Part D Program  
 The Medicare Advocacy Project will serve as a clearinghouse for stories about implementation problems in the Part D Program. Call them at the above phone number or email Diane Paulson at [dpaulson@gbls.org](mailto:dpaulson@gbls.org). You can also contact Roxanne Reddington-Wilde at [redwilde@bostonabcd.org](mailto:redwilde@bostonabcd.org). ABCD is serving as a local contact for communicating problems to CMS.