

NEW LAW PROTECTS THOSE ON CONNPACE AND T-19

The Medicare Prescription Drug, Improvement and Modernization Act provides for comprehensive Medicare coverage of prescription drugs for the first time in the Medicare program's history. However, the federal law provides that, beginning January 1, 2006, individuals who are enrolled in both Medicare and Medicaid, who are known as "dually eligible," will no longer get prescription drug coverage through the Medicaid program. Instead, dually eligible beneficiaries will receive their prescription drug coverage through the new Medicare Part D program. On December 1, 2005, in an effort to provide relief to low income individuals facing increased prescription drug costs, the Governor signed into law new legislation that was unanimously passed by the Connecticut House and the Senate. This new law provides additional coverage of prescription drug costs for ConnPACE recipients and dually eligible individuals over and above what the federal law would have covered.

The new law creates a special fund known as the "Medicare Part D Supplemental Needs Fund." The fund will be used to help dually eligible individuals (individuals with both Medicare and Medicaid) and ConnPACE recipients cover the costs associated with the Part D program. The intention of this new state law is to allow dually eligible individuals and ConnPACE recipients the same access to medication and the same cost-sharing that they have had during 2005.

The new state law provides coverage for non-formulary drugs (drugs not on a Medicare Part D plan's list of covered drugs), prescribed to ConnPACE recipients and dually eligible individuals, provided that the individual and his or her physician participate in the Medicare "exceptions process" for the drugs.

The State will also cover the co-pays for dually eligible individuals and ConnPACE will continue to pay for the actual cost of the prescribed drug above ConnPACE's \$16.25 co-pay. The premium for any Part D plan will also be paid by the State for ConnPACE recipients and dually eligible individuals.

Fortunately, in Connecticut, consumer advocacy groups such as the Center for Medicare Advocacy have worked to help secure these additional State funds to protect Connecticut Medicare beneficiaries from the gaps in prescription drug coverage under Medicaid and ConnPACE that did not previously exist. Without such advocacy, individuals with limited incomes may have found themselves paying more out of pocket than they were before the Medicare Part D program. Individuals who need assistance with choosing a Part D plan are encouraged to contact CHOICES at 1(800)994-9422 or (860)887-3561.

The Center for Medicare Advocacy, Inc. is a national, non-partisan education and advocacy organization that promotes fair access to Medicare and health care. The Center's national office is in Mansfield with offices in Washington DC and throughout the country. For more information contact Attorney Lara Stauning at (860)456-7790 or visit the Center's website: www.medicareadvocacy.org. Se habla espanol.

