WHO WILL REIMBURSE MEDICARE’S BENEFICIARIES?

“We applaud the states that stepped up to address the national public health crisis created by Part D, and the Centers for Medicare & Medicaid Services for recognizing the need to reimburse them,” said Judith Stein, Executive Director of the Center for Medicare Advocacy, Inc. “But CMS still has not addressed who will reimburse low-income beneficiaries and their families who had to make payments they didn’t owe in order to get their necessary medications.”

CMS announced on January 24 yet another effort to fix the failing Part D drug program; this time, they will begin a new demonstration plan to reimburse states that have been providing prescription drug coverage for the hundreds of thousands of Medicare beneficiaries who lost their Medicaid drug coverage on December 31, 2005. But CMS has failed to develop any plan to reimburse the tens of thousands, if not hundreds of thousands, of beneficiaries and their families, who paid for drugs that should have been covered by the new private Part D plans. The burden should not be on beneficiaries to get receipts for their prescriptions from their pharmacists and to submit them to plans. CMS must require plans to send automatic reimbursement to beneficiaries.

Ms. Stein continued, “The Medicare agency’s daily efforts to fix Part D demonstrate that Part D doesn’t work and can’t work. It is time to repeal the program, and begin again. This time, Congress must create a prescription drug benefit in the Medicare program that is aimed first and foremost at helping people and that is universal, simple, and comprehensive.”