

The implementation of the Medicare Part D program began January 1, 2006. Implementation of the program has been met with a variety of challenges faced by many of the RW Part B-eligible clients in our area. To assist persons affected by the program implementation problems, the following scenarios and solutions have been put into place:

- (1) For persons who have enrolled in Medicare Part D on time, but who have not received a letter or cards: HPC RW Part B will pay for HPC formulary medications for one month. During that time, the case manager and the client will obtain the proper documentation to verify enrollment to the pharmacy.
- (2) For person who have enrolled in Medicare Part D and who have received a letter stating they are enrolled (with the plan ID #), but who have not received their cards: if their pharmacy will not honor the letter without the cards, the client will be directed to use the Sarasota County or Collier County pharmacy if they are enrolled in one of the plans the CHD pharmacy is signed up with. HPC RW Part B will pay for overnight shipment of the medications for clients outside the county filling the prescription. The SCHD, LCHD and CoCHD pharmacies have indicated they will bill Medicare with this documentation.
- (3) For persons who waited until after the deadline to enroll: HPC RW Part B will pay for a portion of one month of HPC formulary medications while the case manager and the client enroll the client in Medicare Part D. A sliding scale will be applied to account for the client's portion which must be paid at the time the prescription is filled. For persons <150% FPL, the client will be required to pay 5% of the total cost HPC is paying. For persons 150-300% of FPL, the client will be required to pay 10% of the total cost HPC is paying.
- (4) For persons who knew they were eligible and have not enrolled in Medicare Part D: Same as above and the case manager and client will enroll immediately in Medicare Part D.
- (5) For persons who have enrolled, received cards, and get their scripts filled but are told their HIV drugs are not on formulary resulting in >\$40 cost per drug out-of-pocket cost to the client: RW Part B will pay for the co-payment (HPC formulary drugs only). Client must contact plan and CMS immediately to inform the agency of the situation (ALL HIV drugs are required to be on the formulary). Documentation of client contact with CMS (date, time, contact person and brief description of call) must be provided to the case manager by the client within 15 days of his/her being apprised of the co-payment situation.
- (6) For ADAP clients who are eligible for the standard benefit (income >150% FPL), ADAP is to provide the medications (1/3/06 Memo from Dr. Sorensen).
- (7) In all cases where RW Part B/HPC makes payment on Medicare Part D eligible costs (meaning the client was enrolled at the time of service): the pharmacy or client MUST seek reimbursement and forward entire amount to HPC. Services and/or authorizations will be halted in 60 days if this does not occur. Clients will be held responsible for seeking Medicare reimbursement to HPC.

All the above assistance criteria are also subject to the availability of funds and client eligibility and compliance.