## The Medicare drug benefit (Part D)

### What is Part D?
Medicare part D, the prescription drug benefit, is the part of Medicare that covers most outpatient prescription drugs. Part D is offered through private companies either as:

- A stand-alone prescription drug plan (PDP), for those enrolled in Original Medicare
- Or, a set of benefits included with your Medicare Advantage Plan

### Is Part D enrollment required?
Unless you have **creditable drug coverage** (coverage that is, on average, as good as or better than the basic Part D benefit), you should enroll in Part D as soon as you are eligible. If you delay enrollment, you may face gaps in coverage and enrollment penalties.

### What costs are associated with Part D?
Each Part D plan has different costs, including premiums, deductibles, and copayments. Additionally, once your total drug costs reach a certain limit you enter the donut hole (coverage gap). You generally pay more for your drugs during the coverage gap. Part D costs can change every year.

### How does Part D cover my medications?
Each Part D plan has a list of covered drugs, called its formulary. Before you go to the pharmacy, find out if your drug is on your plan’s formulary. If possible, ask your doctor to check that your prescription is covered. Otherwise, call your plan directly or check your plan’s website.

Keep in mind that your plan may place restrictions on coverage, such as:

- **Prior authorization**: you must get prior approval from the plan before it will cover a specific drug
- **Step therapy**: you must try a different or less expensive drug first
- **Quantity limits**: you can only receive coverage for a certain amount of a drug over a certain period of time, such as 30 pills per month

### How will Part D work with my other coverage?
It depends on what type of other coverage you have. Call your insurance company to find out if and how it works with Part D. Some plans do not coordinate with Part D, or may stop providing coverage if you enroll in Part D.
| **When can I switch Part D plans?** | In most cases, you can only make changes to your Medicare Part D coverage during **Fall Open Enrollment** (October 15 through December 7). Your new coverage begins January 1 of the following year. Under certain circumstances, you may be eligible to use a Special Enrollment Period (SEP) to make changes to your Part D coverage. |
| **Is there a way to learn more about available Part D plans in my area, and to get other help with Part D enrollment?** | You can get information from Medicare at [www.medicare.gov](http://www.medicare.gov) or by calling 1-800-MEDICARE (633-4227). Or you can contact your State Health Insurance Assistance Program (SHIP). To find your SHIP’s contact information, visit [www.shiptacenter.org](http://www.shiptacenter.org). |

## Extra Help

Extra Help is a federal program that helps pay for some to most of the out-of-pocket costs of Medicare prescription drug coverage. It is also known as the Part D Low-Income Subsidy (LIS). If your monthly income is up to $1,538 in 2018 ($2,078 for couples) and your assets are below $14,100 ($28,150 for couples), you may be eligible for Extra Help.

## How do I get Extra Help?

If you do not have Medicaid, Supplemental Security Income (SSI), or a Medicare Savings Program (MSP), you can apply for the Extra Help program through the Social Security Administration (SSA) using either the agency’s print or online application. (If you have Medicaid, SSI, or an MSP, you should be automatically enrolled in Extra Help.) To apply online, visit [www.ssa.gov](http://www.ssa.gov).