Date:_____



Dear Helpline Caller:

Thank you for calling the Medicare Rights Center. We are a national, nonprofit consumer service organization that works to ensure access to affordable health care for older adults and people with disabilities through counseling and advocacy, educational programs, and public policy initiatives.

During a recent phone conversation, one of our counselors assisted you with a prescription drug plan search using Medicare's Plan Finder tool. Attached, you will find information about the Part D prescription drug plans that seem to work best for you. We made this decision by considering:

- Your current list of prescription drugs
- Estimated drug costs
- Coverage of either all or most of your drugs in the least restrictive way

When you are ready to enroll in a prescription drug plan, make two phone calls:

- 1. Call the plan directly to confirm the accuracy information from Medicare's Plan Finder
- 2. Call 1-800-MEDICARE (1-800-633-4227) to enroll in the plan

Write down the first and last name of the person you speak to, the date and time of the call, and the reference number of the call, if applicable.

When you enroll in a new plan, you will automatically be disenrolled from your old plan, but we do encourage you to follow-up with your old plan to confirm.

After you enroll, your new plan coverage will become effective January 1, 2025.

If you do not receive your ID card before your coverage begins, call your new plan and ask for the following numbers which you can use to get your medications at the pharmacy as soon as your coverage starts:

- Rx Bin number
- Rx PCN number
- Rx Group number and ID number

If you have additional questions or concerns, please feel free to call us again at 800-333-4114.

Sincerely,

Medicare Rights Center Helpline Counselor



What to consider when comparing prescription drug plans

As you review your Medicare Plan Finder information, you may also wish to consider:

Cost of each plan

Drug costs are an estimate. Only the monthly premium and annual deductible are fixed. What you pay for prescriptions may change during the year. If a drug you take has a very high copay or coinsurance, you may wish to ask your doctor if there is a drug you can take that will cost you less, such as a generic. If you have Extra Help, your drug costs will be lower.

Covered drugs

Review the new plan's formulary to ensure coverage of your current medications. Does the plan require that you get special permission before it will cover a medication you need? Pay attention the following coverage restrictions:

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

If the plan says that your drug coverage has been denied because of one of these reasons listed above, you or your doctor can submit a formal, written request to the plan asking it to pay for the drug you need. This formal request is called an **exception request** because you're asking the plan to make an exception to its coverage rules. For more information about how to request an exception or appeal for coverage, call our helpline at 800-333-4114 or visit www.medicareinteractive.org.

Pharmacy network

- Can I use the pharmacy that I usually go to?
- Can I fill my prescriptions when I travel?
- What happens if I go to pharmacies that are not in the network?
- Can I get my prescriptions by mail order?

Coordinating with your other benefits

- How will my new Part D prescription drug plan work with any other drug coverage I receive?
- Could I lose my retiree or employer health coverage if I join a Medicare drug plan?