



## Are You Paying the Right Amount for Your Prescriptions?

Getting “extra help” means Medicare will help pay your Medicare drug plan costs, which includes help with paying your monthly premium, deductible, and copayments.

### What should my costs be?

If you qualify for extra help, you should pay no more than \$2.40 for a generic drug (or brand-name drug treated as a generic) and \$6.00 (in 2009) for any other brand-name drug. If you have Medicaid and live in an institution (such as a nursing home), you should pay zero for covered drugs.

Most people who qualify for extra help also pay nothing for their monthly premium or annual deductible. However, some people with higher income may pay a reduced monthly premium.

### What if I think I’m paying the wrong amount?

Call your plan. Your plan may ask you to provide information to help them confirm the level of extra help you should get. Here are some examples of documents you can send your plan to help prove you qualify for extra help:

- A purple letter from Medicare that says you automatically qualify
- A yellow or green automatic enrollment letter from Medicare
- An extra help “Notice of Award” from Social Security
- An orange letter from Medicare that says your copayment amount will change next year
- If you have Supplemental Security Income (SSI), you can use your award letter from Social Security as proof that you have SSI

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You can also give your plan any of the following documents as proof that you qualify for extra help. Each item listed below must show that you were eligible for Medicaid during a month after June of 2008.

<b>Other Proof You Have Medicaid</b>	<b>Proof You Have Medicaid and Live in an Institution</b>
<ul style="list-style-type: none"> <li>• A copy of your Medicaid card</li> <li>• A copy of a state document that shows you have Medicaid</li> <li>• A print-out from a state electronic enrollment file or screen print from your state's Medicaid systems that shows you have Medicaid</li> <li>• Any other document from your state that shows you have Medicaid</li> </ul>	<ul style="list-style-type: none"> <li>• A bill from the institution (like a nursing home) or a copy of a state document showing Medicaid payment to the institution for at least a month</li> <li>• A screen print from your state's Medicaid systems showing that you lived in the institution for at least a month</li> </ul>

Your plan must accept any of these documents as proof that you qualify for extra help. As soon as you have provided any one of these documents, your plan must make sure that you pay no more to fill your prescriptions than the amounts listed on the front of this sheet.

If you qualify for extra help because you have Medicaid, but you don't have or can't find any of these documents, and you ask for help, your plan must also contact Medicare so that Medicare can get proof that you qualify, if it's available. You can expect your request to take anywhere from several days to up to two weeks to process, depending on the circumstances. Be sure to tell your plan how many days of medication you have remaining. Your plan and Medicare will work to process your request before you run out of medication, if possible.

## **Can I get any costs back if I've been paying too much?**

If you have paid for prescriptions since the date you qualified for extra help, you may be able to get back some of these costs. Keep the receipts, and call your plan for more information.

## **Who should I call for help?**

If your plan doesn't correct a problem to help you pay the right amount, doesn't respond to your request for help, or takes longer than expected to get back to you, call 1-800-MEDICARE (1-800-633-4227) to file a complaint. TTY users should call 1-877-486-2048.