

(845) 808-1700

Get Help With Prescription Drug Costs

People with limited resources can qualify for even more savings on Medicare drug costs!

Get help paying premiums, deductibles, coinsurance, and other costs.



Some people qualify for Extra Help automatically, and other people have to apply.

You can apply for Extra Help and Medicare Savings Programs (MSPs) at the same time. These state programs provide help with other Medicare costs.

***NEW* 2025 Special Enrollment Period**

People with Extra Help, MSP (Medicare Savings Program) or Medicaid can no longer switch from a Medicare Advantage Plan to another Medicare Advantage Plan unless it's a D-SNP.

***Starting January 1, 2025 once per month, people with Extra Help, MSP or Medicaid can enroll into a stand-alone Prescription Drug Plan or integrated Dual-eligible Special Needs Plan (D-SNP)**

Reminder

January 1—March 31 is the Medicare Advantage Open Enrollment Period.

During the Medicare Advantage Open Enrollment Period, Medicare Advantage enrollees can switch to Original Medicare or to a different Medicare Advantage Plan from the one they are currently enrolled in. You can make one change with new coverage effective first of next month.



Making New York a better place to age



ARE YOU CONCERNED ABOUT AN ERROR OR POTENTIAL FRAUD?

CALL 1-877-678-4697

Save The Date:

MEDICARE “OPEN ENROLLMENT” PERIOD October 15th through December 7, 2024

This is the time of year all people with Medicare can make changes to their health and prescription drug plans, with new coverage to begin January 2025

“MEDICARE ADVANTAGE OPEN ENROLLMENT” PERIOD January 1, 2025 - March 31, 2025

If you're in a Medicare Advantage plan you can change to a different Medicare Advantage plan once or to Original Medicare with or without a Medicare Part D plan.

EPIC ANNUAL “SPECIAL ENROLLMENT PERIOD”

EPIC allows all their members to change their Medicare Part D plan one time a year.

“SPECIAL ENROLLMENT PERIODS”

You can make changes to your Medicare Advantage and Medicare prescription drug coverage when certain events happen in your life. These changes are called; *Special Enrollment Periods (SEP's)*

MEDICARE COUNSELING IS AVAILABLE

- Visit www.medicare.gov where you can get personalized comparison of costs and coverage
- Call 1-800-MEDICARE (1-800-633-4227)
TTY users should call 1-877-486-2048
- Call the Medicare Rights Center:
1-800-333-4114
- Call Lynn Hill, HIICAP Coordinator, Putnam County Office for Senior Resources
(845) 808-1700 ext. 47115

For current information on Medicare, Medicare Prescription Drug Coverage, Medicare Advantage or to get publications call

**1-800-MEDICARE
(1-800-633-4227)**

DISCLAIMER

HIICAP

Health Insurance Information Counseling & Assistance Program

The information provided by the Health Insurance, Information, Counseling and Assistance Program is intended for the sole purpose of educating consumers in regard to the choices available for their health insurance needs. Particular emphasis is placed on understanding original Medicare.

Nothing herein is intended nor should it be construed as an endorsement by the State of New York of any specific insurance product or insurer.

***New York State does not endorse nor recommend any specific insurance product or insurer; this program is solely intended to educate consumers about their choices.**

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**Health Insurance
Information, Counseling
and Assistance Program**

Social Security (*Extra Help*) With Medicare Prescription Drug Costs

Anyone with Medicare can get Medicare Prescription Drug coverage, (Medicare Part “D”).

“**Extra Help**” is available for some people with limited income and resources. It will pay for all or most of the monthly premiums, annual deductibles and prescription co-payments related to a Medicare prescription drug plan. To find out if your eligible Social Security will need to know your income, the value of your savings, investments and real estate (other than your home). If you are married and living with your spouse, SSA will need this information for the both of you.

To Qualify for “Extra Help”

- **Annual income** must be limited to **\$22,836** for an individual or **\$30,900** for a married couple living together. Even if your annual income is higher, you still may be able to get help.

- **Resources** are limited to **\$17,220** for an individual or **\$34,360** for a married couple living together. Resources include bank accounts, stocks and bonds.

Social Security does not count your house, car, and any life insurance policy as resources.



After you apply, Social Security will review your application and send you a letter to let you know if you qualify for “Extra Help”. Once you qualify, you can choose a Medicare prescription drug plan. If you do not select a plan, the Centers for Medicare & Medicaid Services (CMS) will do it for you.

To apply online visit:
www.socialsecurity.gov/extrahelp
or call SSA @ **1-800-772-1213**
(TTY **1-800-325-0778**)

Medicare Savings Programs (MSP)

Are you an individual with a monthly income of less than **\$2,355** or a couple with a monthly income of less than **\$3,189**?

If approved for this benefit, the Medicare Savings Program will pay your Medicare Part B premium, which means that you will have extra money added to your Social Security check each month. You will receive extra help from Medicare which will reduce your co-pays to as low as **\$4.50** for generic and **\$11.20** for brand drugs that are covered by your Medicare Part D plan. In addition you will not be subject to a Medicare Part D plan deductible or the “Gap / Donut Hole”.

MSPs

1. Qualifying Individual (QI)

- Pays for your Part B premium
- May receive up to three months retroactive reimbursement for Part B premiums (Note: only for premiums paid up to three months before your MSP effective date, and within the same year of that effective date)
- You cannot have both QI and Medicaid

2. Qualified Medicare Beneficiary (QMB)

- Pays for Medicare premiums
- Providers are prohibited from charging you for Medicare cost-sharing (deductibles, coinsurance, and copayments). This means you should not be billed for any Medicare-covered services you receive from Original Medicare providers or providers in your Medicare Advantage Plan's network
- You can have both QMB and Medicaid

MEDICARE AT A GLANCE:

Medicare Part A

Medicare Part A helps cover inpatient care in hospitals. This includes critical access hospitals and skilled nursing facilities (not custodial or long-term care). It also helps cover hospice care and home health care. You must meet certain conditions to get these benefits.

Most people automatically get Medicare Part A coverage without having to pay a monthly payment, called a premium. This is because they or a spouse paid Medicare taxes while working. If you don't automatically get premium-free Part A, you may be able to buy it.

Medicare Part B

Medicare Part B helps cover medical services like doctors' services, outpatient care, items medically necessary, and preventative services that Part A does not cover. Medicare part B is optional however, if you don't sign up for part B when eligible, you may have to pay a late enrollment penalty, generally for as long as you have Part B.

The standard Medicare Part B premium for 2024 is \$174.70. Some people may pay a higher premium, based on their income. If you must pay higher premiums, SSA will send you a letter with your premium amount(s) and the reason for their determination. If you have both Medicare Part B and a Medicare Part D plan, you'll pay higher premiums for each.

Medicare Prescription Drug Coverage (Part D)

Medicare offers prescription drug coverage to everyone with Medicare. If you decide not to join a Medicare drug plan when you're first eligible, and you don't have other "creditable" prescription drug coverage you'll likely pay a late enrollment penalty, which will be added to your monthly premium generally for as long as you have Medicare prescription drug coverage.



Medicare Advantage Plans (Part C)

Medicare Advantage Plans are health plan options, like HMO's and PPO's, also known as Medicare "Part C" They are approved by Medicare but are run by private companies. They provide all your Part A and Part B coverage and must cover medically-necessary services. They generally offer extra benefits, and many include Part D drug coverage. You may have to see doctors who belong to the plan or go to certain hospitals to get covered services.

Some Medicare Advantage Plans charge a monthly premium in addition to your Part B premium. Costs vary by plan and the services you use.

Medicare Part D & Insulin

Medicare Part D covered insulin copays are capped at \$35 per month with no deductible. You should contact your Part D plan for information about exact costs and coverage rules for insulin.

Vaccines

All Medicare covered vaccines should be free to you. This means you should not owe any cost sharing, such as a copayment, coinsurance, or deductible for your covered vaccines. Medicare Part D plans must include most commercially available vaccines on their formularies, including the vaccine for shingles (herpes zoster). To avoid billing issues, it is usually best to make sure that your health care provider or pharmacy administering the vaccine will bill your Part D plan. When you get a vaccine at your doctor's office, ask the provider to call your Part D plan first to find out if your provider can bill your Part D plan directly. The only exceptions are flu, pneumonia, hepatitis B and COVID-19 vaccinations, which are covered by Part B.



***NEW* What's the Medicare Prescription Payment Plan?**

The Medicare Prescription Payment Plan is a new payment option in the [prescription drug law](#) that works with your current drug coverage to help you manage your out-of-pocket costs for drugs covered by your plan by spreading them across the calendar year (January–December). Starting in 2025, anyone with a Medicare drug plan or Medicare health plan with drug coverage (like a Medicare Advantage Plan with drug coverage) can use this payment option. **All plans offer this payment option, and participation is voluntary.**

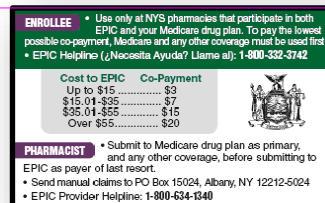
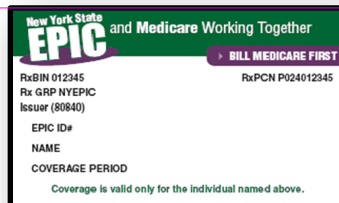
If you select this payment option, each month you'll continue to pay your plan premium (if you have one), and you'll get a bill from your health or drug plan to pay for your prescription drugs (instead of paying the pharmacy). There's no cost to participate in the Medicare Prescription Payment Plan.

This payment option might help you manage your monthly expenses, but it doesn't save you money or lower your drug costs.

How do I sign up?

Visit your health or drug plan's website, or call your plan to start participating in this payment option:

- **In 2024, for 2025:** If you want to participate in the Medicare Prescription Payment Plan for 2025, contact your plan now. Your participation will start January 1, 2025.
- **During 2025:** Starting January 1, 2025, you can contact your plan to start participating in the Medicare Prescription Payment Plan anytime during the calendar year.



If you are a NYS resident, 65 or older with an annual income of less than \$75,000 for single and \$100,000 for married, consider joining EPIC!

EPIC saves you money by supplementing your Medicare Part D plan.

• **Fee Plan** members pay an annual fee to EPIC based on their income. The EPIC co-payments range from \$3-\$20 based on the cost of the drug. Those with Full Extra Help from Medicare have their EPIC fee waived.

• **Deductible Plan** members must meet an annual out-of-pocket deductible based on their income before paying EPIC co-payments for drugs.

EPIC also pays the Medicare Part D plan premiums, up to the amount of a basic plan, for members with annual income below \$23,000 if single or \$29,000 if married. Those with higher incomes must pay their Part D plan premiums however, their EPIC deductible is lowered by the annual cost of a Medicare Part D drug plan.

For more information contact NYS EPIC @ 1-800-332-3742