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Seniors will see improvement in drug costs in 2011

Federal officials have announced that the monthly premium for standard coverage for Medicare Prescription Drug Plans (known as Part D plans) will increase by an average of \$1 per month in 2011. Be aware that this is a national average for standard coverage; plans vary widely in coverage and cost, so that Medicare beneficiaries should check their particular plan as to cost increases. Nevertheless, seniors with high drug costs can look forward to a noticeable improvement next year.

Medicare had no prescription drug plan prior to 2006. Seniors and disabled Medicare beneficiaries had had, and continue to have many challenges in paying for prescription drugs. Some lucky retirees had prescription drug coverage through former employers, and other low income seniors are able to take advantage of PACE and PACENET, prescription drug assistance in Pennsylvania funded by lottery proceeds. Once the Medicare Prescription Drug Plan, or Medicare Part D, was available, it offered some relief to those on Medicare who were having trouble paying for prescription drugs. Unfortunately, this benefit came with its own set of problems. Medicare Part D is provided by private insurance companies, and there are often many and confusing choices for the consumer. There are many plans, costs for plans, deductibles, and specific formularies to consider when choosing a plan that best suits the individual. The largest issue is the "doughnut hole" where subscribers who have out-of-pocket medication costs of more than \$2,700 then do not receive any assistance with their drug costs until they reach the catastrophic limit of \$4,550. Paying for prescription drugs during this coverage gap is a challenge for many Medicare beneficiaries.

But thanks to the new health care law, the "doughnut hole" will be closing over time. Medicare recipients in the coverage gap will receive a \$250 check this year; next year, those in the gap will get a 50 percent discount on brand name drugs, and a seven percent discount on generic drugs. The gap will gradually become smaller, closing completely in 2020.

Details on Medicare Part D coverage will be available this fall on Medicare's plan finder during the open enrollment period. It is a good idea to compare plans in your area based upon the particular drugs that you are prescribed, as well as plans that meet your specific budget. Some plans have lower deductibles, more attractive co-payments, and some even have some coverage for the "doughnut hole." Do not forget to investigate PACE and PACENET, as well as government subsidies for low income beneficiaries, both for Part D and Part B of Medicare.

For those who still have trouble paying for their prescription drugs as we work our way through the closing of the coverage gap, remember to work with your physician on managing your drug costs. Sometimes a generic drug will work just as well, or another version of the drug that is less expensive will be effective. Most of the major drug companies have Patient Assistance programs to help you with the cost of expensive brand name drugs that they manufacture. Be sure to let your physician know that you are having trouble affording your medications; reducing the dose or not filling prescriptions is an ineffective way to manage your health care or to be part of your healthcare team.