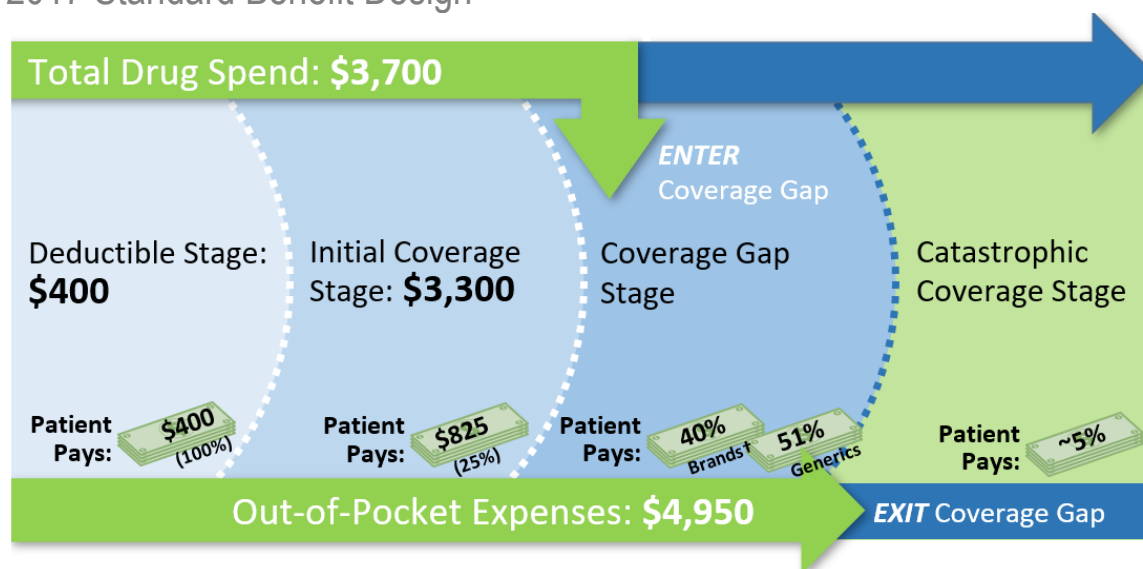


2017 Medicare Part D

Pharmacist Quick Reference Guide

Medicare's Annual Enrollment Period (AEP) for the 2017 plan year takes place October 15-December 7, 2016. During this time, your Medicare-eligible patients may choose to join or switch Medicare Part D plans. The information below can help you educate your patients about changes to the Medicare Part D program for 2017.

2017 Standard Benefit Design



2017 Low-Income Subsidy (LIS) Cost-Sharing Levels

Full Benefit Dual Eligible	Deductible	Copayments
Up to or at 100% Federal Poverty Level (FPL)	\$0	\$1.20 Generic/Preferred Multi-Source Drug \$3.70 Other
Over 100% FPL	\$0	\$3.30 Generic/Preferred Multi-Source Drug \$8.25 Other
Institutionalized Beneficiary	\$0	\$0
LIS Recipient (Full Subsidy)	Deductible	Copayments
Income at or below 135% FPL and limited resources [‡]	\$0	\$3.30 Generic/Preferred Multi-Source Drug \$8.25 Other
LIS Recipient (Partial Subsidy)	Deductible	Copayments
Income below 150% FPL and limited resources [‡]	\$82.00	Prior to Catastrophic Coverage Stage: <ul style="list-style-type: none"> • 15% Coinsurance During Catastrophic Coverage Stage: <ul style="list-style-type: none"> • \$3.30 Generic/Preferred Multi-Source Drug • \$8.25 Other

[‡] The 50% discount paid by brand-name drug manufacturers during the Coverage Gap Stage will count toward the patient's Out of Pocket Expenses (pushing them through the Coverage Gap); however, the additional 10% paid by the Medicare Part D plan will not.

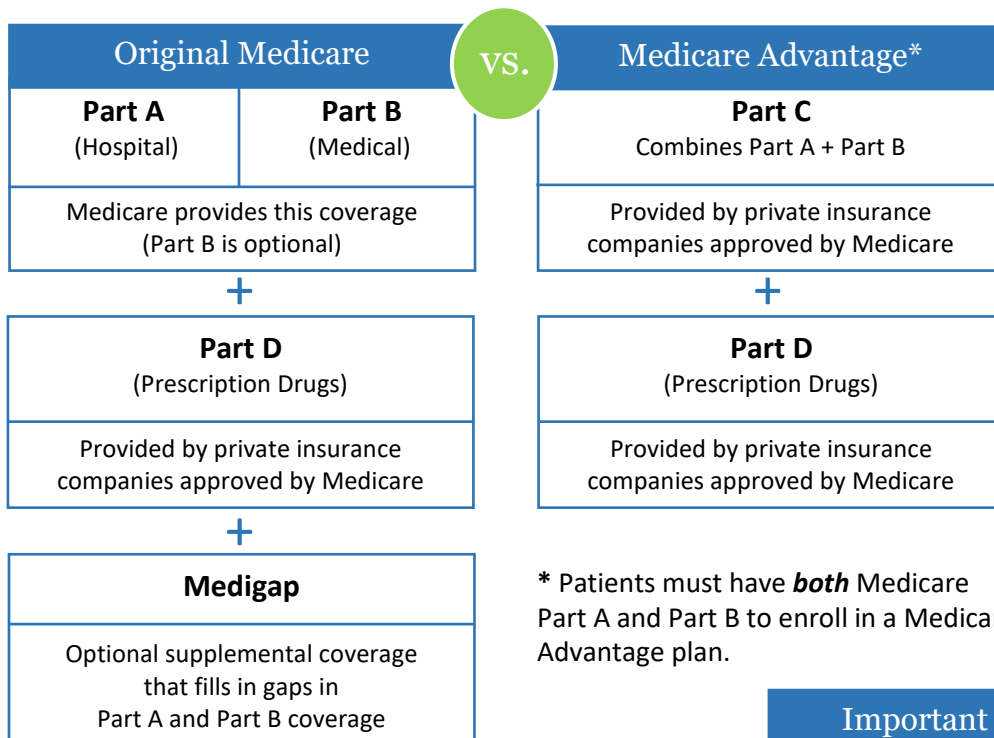
[‡] Resource limits are set annually by the Social Security Administration.

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Medicare Refresher

- **Part A:** **Covers inpatient care**
(e.g. hospital, skilled nursing facility care, home health care, hospice)
- **Part B:** **Covers outpatient care**
(e.g. medical visits, DME, a few prescription drugs)
- **Part C:** **Voluntary medical benefit that combines Part A and Part B**
(patient must continue to pay Part B premiums)
- **Part D:** **Voluntary prescription drug benefit**



\$0 Generic Plans

Some Part D plans offer \$0 co-pays for generic medications beginning on day one of coverage. These plans can help patients by lowering their drug costs and delaying their entrance into the Coverage Gap.

- **Familiarize yourself with the plans in your area that offer \$0 generics.** This information may be obtained using Medicare's Plan Finder tool (www.medicare.gov).
- **Discuss benefits, safety of generics.** Educate your patients that these drugs are approved by the FDA and have the same strength, quality, and performance as brand-name drugs.
- **Look for cost-saving opportunities.** Offer to review a patient's medication profile to see if there are any opportunities to recommend lower-cost generics.

Important Medicare Dates

Oct. 15 – Dec. 7, 2016

During this time, your patients can join or switch Medicare Part D plans.

Jan. 1, 2017

If patients enrolled between October 15 and December 7, 2016, their coverage begins today.

Special Enrollment Period

Patients may switch or join plans only if they qualify for a Special Enrollment Period. Reasons may include moving to a different coverage area or losing creditable coverage. Patients also may elect to enroll in a 5-star Medicare Advantage plan during this time if one is available in their area.

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