

Steps to Take for Affordable Drugs

Many Medicare beneficiaries may find themselves at the pharmacy counter with a prescription their Medicare Part D insurer will suddenly not cover. If this happens to you, here are some steps you can take to try to make your drugs affordable.

Consult Your Pharmacy

- **Make sure the pharmacy has your up-to-date insurance information:**
 - Sometimes claims are denied simply because the pharmacy computer system has old insurance information for you.
 - Make sure if you utilize more than one pharmacy that there is not a duplicate prescription already in the system, as this can happen when you're transferring prescriptions from one pharmacy to another, which can lead to a claim denial.
 - That any drug discount coupons that you may have utilized in the past are deleted in their system, which can also lead to a claim denial. It is strongly recommended that you utilize drug discount coupons, such as Good RX, at a different pharmacy rather than your preferred pharmacy used for your Medicare Part D plan in order to prevent these claim denials.
- **Confirm the pharmacy is in your Medicare Part D Plan's or Advantage Plan's Network:**
 - Most Medicare Part D and Advantage Plans encourage you to utilize a specific network of pharmacies to fill your prescription. If you go outside that network your plan's list may require you to pay more. *Note that an insurer's list of in-network pharmacies can change at the beginning of each year, so check when you renew your plan each year.
- **See whether you must use mail order:**
 - According to the Pharmacy Benefit Management Institute, about a quarter of plans require you to fill certain prescriptions through mail-order pharmacies. So, if your prescription suddenly went up in price, or stopped being covered, check to see whether coverage would be better through mail order.
- **Look into whether you can get your preferred drug at a better price without your insurance:**
 - Websites such as Blink Health, GoodRX, and RxSaver are good resources for discount coupons.

- If you can't find a coupon, ask the pharmacist what the lowest cash price they can offer is. Independent pharmacies have more leeway than bigger chains to negotiate prices.

What if Your Plan Won't Cover a Drug?

If your network pharmacy can't fill a prescription, the pharmacist will show you a notice that explains how to contact your Medicare drug plan so you can make your request. If the pharmacist doesn't show you this notice, ask to see it.

- **You have the right to do all of these (even before you buy a certain drug):**
 - Talk to your doctor about the following:
 - Whether the plan has special coverage rules
 - Whether there are generic, over the counter, or less expensive brand-name drugs that could work as well as the ones you're taking now.
- **Get a written explanation (called a coverage determination) from your Medicare drug plan. A coverage determination is the first decision made by your Medicare drug plan (not the pharmacy) about your benefits , including these:**
 - Whether a certain drug is covered
 - Whether you have met the requirements to get a requested drug
 - How much you pay for a drug
 - Whether to make an exception to a plan rule when you request it
- **Ask for an exception if:**
 - You or your prescriber believes you need a drug that isn't on your plan's formulary .
 - You or your prescriber believes that a coverage rule (like prior authorization) should be waived.
 - You think you should pay less for a higher tier (more expensive) drug because you or your prescriber believes you can't take any of the lower tier (less expensive) drugs for the same condition.
 - You disagree with your plan's "at-risk determination" under a drug management program that limits your access to coverage for frequently abused drugs.

- **Appeal Process:**

- Have your doctor make a request to help cover a drug that is not on your plan's formulary. Your doctor can establish the medical need and ensure that key health information, such as your diagnosis, other treatment tried, and why it was stopped, etc.
- Have your doctor request an expedited review if you need an answer within 72 hours.
- Your Medicare drug plan will send you a written decision. If you disagree with this decision, you have the right to appeal. The appeals process has 5 levels. If you disagree with the decision made at any level of the process, you can generally go to the next level. At each level, you'll get instructions in the decision letter on how to move to the next level of appeal.

Need Further Assistance to ensure you are in the best Medicare Part D Plan?

- Contact the Rhode Island State Health Insurance Assistance Programs (SHIP) which provides local, in-depth, and objective insurance counseling and assistance to Medicare-eligible individuals, their families, and caregivers.

- **RI SHIP Locations:**

- **Providence:** dial 2-1-1 or 462-4444 (POINT)
- **Northern RI:** (401) 349-5760 x2635
- **West Bay:** (401) 921-5118
- **South County:** (401) 789-3016 x2379
- **East Bay:** (401) 435-7876
- **Newport County:** (401) 848-4185
- **RI SHIP Main Line:** 1-800-884-8721

Sources:

<https://www.medicare.gov/medicare-prescription-drug-coverage-appeals>

Gill, Lisa. "When Your Insurer Drops Your Drugs." Consumer Reports. August 2020.