

Quick Answers to FAQs on Medicare Part D for Dual Eligible Beneficiaries

- **What if a dually eligible beneficiary (Medicare and Medicaid) presents at the pharmacy and does not know what Medicare Part D plan he or she has been enrolled in?**

The pharmacist should submit an E1 query to determine what Part D plan the beneficiary is enrolled in. If the E1 query returns the BIN, PCN, Group and ID (the “4Rx” data), the pharmacist should bill that plan. If the E1 query returns just the telephone number for the plan, then the pharmacist should call the plan to obtain the billing information.

- **What if a dually eligible beneficiary who has been enrolled in a plan presents at a pharmacy with a plan acknowledgement letter indicating that the beneficiary has switched plans?**

If the beneficiary has the plan acknowledgement letter in hand, the pharmacist should bill the plan using the BIN, PCN, Group and ID indicated in the letter.

- **What if a dually eligible beneficiary presents at a pharmacy without the plan acknowledgement letter but indicates that he or she has switched plans?**

The pharmacist may submit an E1 query to obtain plan information or the beneficiary may call 1-800-Medicare (800-633-4227).

- **What if a beneficiary presents at a pharmacy with a Medicaid card and appears to be dually eligible but is not enrolled in a Part D plan?**

The pharmacist should submit an E1 query to determine whether or not the beneficiary is enrolled in a Part D plan. If the dually-eligible beneficiary is not enrolled in a Part D plan, then the pharmacist may use the facilitated enrollment option. This will allow for the prescription to be filled and facilitate enrollment in a Part D plan. If the provider is unable to get paid claims through the facilitated enrollment plan, the beneficiary may contact the SC DHHS Beneficiary Call Center at 800-549-0820 for assistance.

- **What are the copays supposed to be under a dual eligible beneficiary's Part D plan?**

There are various levels of copays for dual eligible beneficiaries. For 2014, the Low Income Subsidy (LIS) copays for duals are listed below:

Level 3 - \$0 for dual eligible beneficiaries residing in a Skilled Nursing Facility (SNF).

Level 2 - \$1.15 (generics) and \$3.50 (brand).

Level 1 - \$2.65 (generics) and \$6.60 (brand)

- **What is the annual deductible for a dual eligible beneficiary under Medicare Part D?**

Dual eligible beneficiaries are not required to pay an annual deductible for their prescriptions under Medicare Part D.

- **Does a dually eligible beneficiary have to pay for their drugs in the donut hole of their Medicare Part D coverage?**

No, dually eligible beneficiaries are not subject to the gap (donut hole) in Medicare Part D coverage.