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APRIL FOOLS DAY FOR MEDICARE BENEFICIARIES?

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Starting on April 1st, Medicare Part D prescription drug plans will no longer pay for prescribed medicines that are not on the plan's formulary or that require prior plan approval. This is because the "transition" period during which plans were told to cover these drugs ends on March 31, 2006.

"This is a cruel April Fools for Medicare beneficiaries," explains Judith Stein, Executive Director of the Center for Medicare Advocacy. "Many people who seek refills of their medications on or after April 1 will be turned away. Many beneficiaries do not understand, nor were they told by their plans, that they were getting these drugs on a temporary basis. They did not know that they should speak to their doctors about changing to a drug on their plan's formulary or about asking for a formulary Exception."

The Medicare agency, Centers for Medicare & Medicaid Services, advised drug plans in mid-March to notify enrollees about the steps needed to obtain necessary medicines. "Unfortunately, plans were not *required* to mail these notices to all their enrollees and many people with Medicare have not been properly informed" Ms. Stein said.

"We are concerned that, once again, people who have been stabilized on medically appropriate drugs will be denied those drugs by Medicare Part D. Based on recent experience, we question whether Part D plans will have the capacity to handle inquiries from beneficiaries who can no longer get their prescribed drugs," Ms. Stein added. "Once again people will face the loss of necessary medications. This is no joke."