Roadmap for Medicare
Navigating Medicare Part D
A guide for seniors and caregivers
Roadmap for Medicare: Getting Oriented
This Guide offers information and advice for choosing a Medicare Part D prescription drug plan (PDP) that’s right for you. It will also provide tips and guidance on how to plan for your future healthcare needs.

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NEED HELP NOW?

Call an Express Scripts Medicare Advisor at 1.866.544.3794, 24 hours a day, 7 days a week, except Thanksgiving and Christmas.
TTY users, call 1.800.716.3231.

Find Medicare information online at:
Express-ScriptsMedicare.com/info
RoadmapforMedicare.com
Medicare.gov
Planning Your Route

Medicare eligibility begins at age 65. So if you’re nearing or at that age, now is the time to consider what your future healthcare needs will be. Medicare Parts A, B, C and various Medicare supplemental plans will help you cover your medical costs, but, in most cases, they do not cover prescription medication. For that, you will need a Medicare Part D prescription drug plan (PDP).

Even if you don’t take any medications now, that may change in the future. When you use prescription medications, you use your prescription drug benefit more often than any other health benefit. With the cost of some prescription medications, it does not take much for your pharmacy bill to grow significantly with just one prescription. You can protect yourself from the start by joining a Medicare Part D plan when you become eligible for Medicare.
Planning Your Route

Research shows that most seniors don’t switch plans after enrolling in a prescription drug plan for the first time. When their health situation changes, the coverage they thought was good when they joined may not be good enough. Explore your options and choose a plan that will give you the coverage you need now, while considering how your health may change in the years ahead. Unless your employer is continuing to provide prescription drug coverage, you should consider enrolling in a Part D plan when you reach age 65.

DID YOU KNOW?

92% of seniors between ages 75 and 84 will have at least one chronic illness

50% of seniors between ages 75 and 84 will have 5 or more conditions to manage

This guide provides tips on choosing a plan that is right for you and will help you project your future healthcare and pharmacy costs.
Mapping Your Healthcare Journey

Considering your future health

Enjoying good health today doesn’t guarantee good health tomorrow. In fact, 92% of baby boomers between ages 75 and 84 will have at least one chronic illness, and 50% will have 5 or more conditions to manage as they age. Aside from lifestyle modification, prescription medications are usually the first-line of treatment for a chronic illness so even if your prescription drug costs are not worrisome now, you’ll want to consider what they could be down the road.

Some costs to consider for common conditions associated with aging:

- The average adult with diabetes will spend $13,700 on healthcare costs each year; about $2,466 of that will be on prescription medications.

- The average adult with high blood pressure will spend $733 on healthcare costs each year; about $368 of that will be in prescription medications.

- The average monthly cost for cancer drug treatments is $10,000.

Even if your prescription drug costs are not worrisome now, you’ll want to consider what they could be down the road.
Mapping Your Healthcare Journey

Considering your future health

Here are a few points that can help you map out your future health needs:

- **Do you have, or are there signs that you’ll develop, a chronic condition?**
  Do you control high blood pressure or high cholesterol through diet? At some point in the future, you may require medication. Is your blood sugar level higher than normal? If so, you may be facing type 2 diabetes in the coming years.

- **Does anyone in your family have a chronic condition?**
  Family history is a known risk factor for many common, chronic conditions, such as hypertension, stroke and diabetes — all of which will likely require prescription drug treatment. The conditions that afflicted your grandparents, parents and siblings as they aged can provide signs for your future health.

- **Are you active? Do you take care of yourself?**
  If you are not eating a healthy diet or not getting enough exercise, you are at higher risk for a chronic medical condition that could require medication.

These checklists can help you create an inventory of your current health and prescription status, and assess future needs based on your family history and lifestyle. Just click an icon to jump to the list you want to use or go directly to the Appendix.
Mapping Your Healthcare Journey

Choosing a Medicare Part D plan

When you’re looking at your retirement and considering Medicare Part D, you may think that you’re getting the best deal from a plan with a low monthly premium. Sometimes a low premium means your drugs may not be covered or that you’ll be paying a higher copayment or coinsurance that can quickly add to your expenses. On the flip side, plans that have a higher monthly premium may offer other benefits over the long term.

Once you have a better idea of your current and future health costs, you can seek out a plan that matches your needs. Here are a few things to look for:

Home delivery pharmacy
If you are taking a medication on a long-term basis, check to see if you can receive your medications in the mail. You can save time and money traveling to a pharmacy and can usually receive a longer-term supply for a lower copayment.

Formulary
Choosing a plan with a well-built formulary can save you time and money, offering greater coverage for your medication needs today and down the road.

Pharmacy networks with lower-cost options
Some plans offer lower copayments when you fill a prescription at certain select pharmacies, known as preferred pharmacies. These pharmacies are part of a plan’s larger network of pharmacies. Each pharmacy network is different, depending on the plan you choose.

Pharmacist support
Pharmacists are a great resource for helping you find cost-effective alternatives for your prescription medication needs, and can help you overcome any barriers to not taking your medications as prescribed. Taking your medications the right way can keep you healthy and help prevent additional healthcare costs, such as hospital or emergency room (ER) visits. Express Scripts offers specialist pharmacists who have expertise on medications used to treat common conditions, such as diabetes.
Changing Lanes: Transitioning to Medicare

If you are 65, retired (or retiring) and your employer is no longer providing retiree health and prescription drug benefits for you because you are Medicare-eligible – don’t panic! Here’s what you can do:

**Read up on plans**
Familiarize yourself with your Medicare options. Medicare Part A covers hospitalization and Part B provides coverage for medical needs, such as medically necessary doctor visits; Part D covers prescription drugs, or you can use a Medicare Advantage Plan offered through a private company that combines Parts A and B and sometimes Part D into one plan for greater convenience.

**Make a list**
Write down all of the health expenses you have had in the past 2 years. Include your prescription medication costs, doctor and medical specialist visits, hospital and emergency room visits, lab work and other medical supply costs. This can help you determine how much coverage you need. Use the [Medicare checklists](#) included in this guide for help.

**Talk with an agent or broker**
Talking with a licensed broker or agent can often help you understand your choices and aid in your decision-making process. Many employers will offer brokers and counselors who can help you pick coverage that best suits your needs. Also, calling individual plans to ask questions can help you understand that plan better, and can give you a peek at the kind of service the plan will provide you as a customer.

**Know your dates**
The Annual Enrollment Period for Medicare Part D takes place from October 15 through December 7. You must enroll during this time to have coverage for the following year. Typically, you can’t switch your plan outside the Annual Enrollment Period unless you meet certain special exceptions, such as if you move out of a plan’s service area, lose coverage, or if your plan no longer offers Part D coverage.

Read this helpful article for more information about transitioning to Medicare from previous employer coverage.
Avoiding Road Bumps
Getting ready for Medicare Part D enrollment

Preparing well in advance can help make your journey easier. Here’s what you need to know about enrollment to ensure a smooth ride.

Assess your needs and do your research
Before you enroll, review your current prescription drug needs and consider your future health and what it might cost. Call plans to get answers to any questions you may have. Use the Medicare checklists included in this guide for help.

Avoid late enrollment
Avoid long hold times on the phone by signing up for a plan early. Also, enrolling late — past the December 7 deadline — will cost you! The late enrollment penalty is 1% of the national average premium for every month you were without creditable coverage* following your initial enrollment period, or if you had a break in creditable coverage of at least 63 consecutive days. You will have to pay this late-enrollment penalty for as long as you have Part D coverage.

Healthcare reform doesn’t impact eligibility or enrollment
• The Medicare eligibility age has NOT changed. Seniors still become eligible for Medicare at age 65.
• Public Health Insurance Exchanges do NOT replace Medicare.
• The enrollment process for Medicare health and pharmacy benefits (Parts A, B and D) has not changed.

*Creditable prescription drug coverage is coverage that meets Medicare’s minimum standards, since it is expected to pay at least as much as Medicare’s standard prescription coverage.

Key dates for Medicare Part D annual enrollment period

Plan information available: October 1
Enrollment begins October 15
Enrollment ends December 7

84% of seniors wait until the final 2 weeks to sign up for Part D.

You don’t have to be one of them!
Avoiding Road Bumps

Watching out for fraud and protecting your privacy

Recognizing fraud and protecting your privacy are important as you map your route to Medicare. Here are some ways to protect yourself.

Be wary of sales calls
Medicare prohibits door-to-door sales for Part D plans. If someone comes to your home to sell a Part D plan without an appointment, turn him or her away and report the incident to the Centers for Medicare & Medicaid Services (CMS).

Keep your personal information safe
Never give out your social security number, banking or credit card numbers to anyone you do not know. This includes your medical identification card, which should be kept in a secure location.

Find an approved Medicare plan
Be aware of phony Part D plans. Only plans listed on Medicare.gov are approved by CMS.

If you suspect identity theft

If you feel like you gave your personal information to someone you should not have, contact the Federal Trade Commission.

More information is available at www.consumer.ftc.gov
Roadside Assistance: Getting Help on the Way

Along your route, you may find you have specific questions and need expert assistance. There are a few resources you can tap to get the answers you need.

Express Scripts Medicare Advisors can answer general questions about Medicare Part D. Call 1.866.544.3794, 24 hours a day, 7 days a week, except Thanksgiving and Christmas. TTY users, call 1.800.716.3231.

Use the Medicare Advisor checklist to make sure you get answers to all of your questions with one phone call.

You’ll find a lot of Medicare information online — some accurate, some not. Stick to reputable resources and organizations to be sure you’re getting the facts. Some resources are:

- Express-ScriptsMedicare.com/info
- RoadmapforMedicare.com
- Medicare.gov

Before you talk with an Express Scripts Medicare Advisor

- Make a list of the questions you need answered and be sure you get all the information you need before hanging up.
- Call well in advance of the enrollment deadline to avoid long wait times.
- Make a list of all of your medications and other medical expenses.
- Have your red, white and blue Medicare ID card handy. If you are losing employer-provided coverage, have that information ready, too.
Shortcuts to Savings

Selecting the right Medicare Part D plan will save you money. Plus the choices you make once you’ve enrolled in a plan can also lower your costs. Here are some simple shortcuts you can take that will help you save on your pharmacy costs in retirement:

**Generic drugs**
Ask about generic equivalents or generic alternatives that are clinically appropriate for you. A generic equivalent contains the same active ingredients as its brand-name counterpart. A generic alternative does not have the same active ingredients, but may offer the same or a similar benefit as the brand. Both can provide significant cost savings.

**Home delivery pharmacy service**
If you take a medication on a long-term basis, check to see if you can receive your medications in the mail. A home delivery prescription, can often cost less when you fill a 3-month supply. Some plans even offer to ship for free.

**Dose optimization**
Some drugs come in varying strengths, and it’s often possible to get the same results by taking fewer pills at a higher dosage. This practice, known as “dose optimization,” can lower your costs. Fewer pills at a higher strength will cost you less than more pills at a lower dose.

**Adherence**
Medication adherence means taking your medication as prescribed – at the right time, dose and as long as your doctor recommends. Being adherent will not only keep you safe, but can save you money by avoiding unnecessary healthcare costs.
Hitting the Road

This guide should serve as a good start to your healthcare journey as you consider a Medicare Part D plan. If you need more information, our Express Scripts Medicare Advisors are available to help.

DON’T FORGET

Medicare Part D enrollment starts on October 15.
Plan information becomes available on October 1.

AVOID WAITING UNTIL THE LAST MINUTE!

Express Scripts Medicare Advisors can answer general questions about Medicare Part D call 1.866.544.3794, 24 hours a day, 7 days a week, except Thanksgiving and Christmas. TTY users, call 1.800.716.3231.

Visit us online for information about our Medicare Part D plan at Express-ScriptsMedicare.com/info.

For more helpful tips and articles, visit RoadmapforMedicare.com.
Appendix
Medications Checklist
Write down the prescription and non-prescription drugs you are taking (pills, patches, drops, over-the-counter medications, vitamins, supplements) and use them as a reference when speaking with your doctor or pharmacist.

<table>
<thead>
<tr>
<th>PRESCRIPTION/ NON-PRESCRIPTION DRUGS</th>
<th>DOSE (mg)</th>
<th>FREQUENCY (Number of times/day)</th>
<th>DESCRIPTION OF DRUG (blue, round, liquid)</th>
<th>PRESCRIBING DOCTOR</th>
</tr>
</thead>
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</tbody>
</table>

Here are four easy questions to ask your doctor each time he/she prescribes you a new drug:

1. What condition does it treat?
2. Will a particular drug interact harmfully with any of my other medications?
3. Are my doctors aware of all the medications I take, and do I need them all?
4. Is there a generic equivalent or alternative available for my brand drugs?

Express Scripts offers Medicare prescription drug coverage. For more information, call an Express Scripts Medicare Advisor at 1.866.544.3794. TTY users, call 1.800.716.3231. Also, you may visit us online at [Express-ScriptsMedicare.com/info](http://Express-ScriptsMedicare.com/info).
## Family Medical History Checklist

List any chronic conditions or illnesses impacting your family. This will help you consider factors that may affect your future healthcare costs.

<table>
<thead>
<tr>
<th>CONDITION</th>
<th>PARENT</th>
<th>SIBLING</th>
<th>OTHER RELATIVE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alzheimer’s</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arthritis</td>
<td></td>
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<td></td>
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<tr>
<td>Arthritis, Rheumatoid</td>
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<tr>
<td>Asthma</td>
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<td></td>
<td></td>
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<tr>
<td>Cancer of __________</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Diabetes type 2</td>
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<td></td>
<td></td>
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<tr>
<td>Heart disease</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stroke</td>
<td></td>
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</tr>
</tbody>
</table>

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**Lifestyle Factors Checklist**

Some habits, like eating a healthy diet, are good for your future health. But other habits, like smoking, are risk factors for chronic conditions and serious illnesses. These answers will help you consider factors that may impact your future healthcare costs.

1. How is your health?

2. Do you see healthcare providers for preventive needs or on a consistent basis?

3. Do you see a healthcare provider for one chronic condition or multiple health issues?

4. Do you smoke?

5. Do you drink frequently? (3 – 4 drinks a day)

6. How often do you exercise?

7. Do you maintain a healthy weight?

8. Do you eat a healthy diet?

9. Do you get enough sleep?
Medicare Advisor Checklist

It’s a good idea to be prepared before getting on the phone with an insurance agent or an Express Scripts Medicare Advisor. Use the checklist below to make sure you cover everything on your call. Use the blank lines to add your own questions to the list, and check off each question as you get the answer you need.

- Are my current drugs on the plan’s formulary?
- Is my pharmacy in the plan’s network?
- Does the plan have pharmacies with preferred or lower pricing in their network? If so, how many pharmacies offer this pricing?
- Does the preferred pharmacy network have a large chain pharmacy or independent pharmacies?
- If I’m traveling in the U.S., will I have access to any pharmacy?
- Is there a deductible?
- How much would my copayments be?
- Does your plan offer home delivery pharmacy service for my medications?
- Does the plan have specialist pharmacists that I can talk to if I have a chronic condition?
- Can I call to speak to a pharmacist at any time of the day or night?

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Centers for Medicare & Medicaid Services (CMS): This is the federal agency that oversees Medicare and Medicaid.

Chronic condition: A chronic condition is a long-term health condition, such as high cholesterol or diabetes, that is generally not curable.

Coinsurance: A coinsurance is the portion of the prescription drug cost that you are responsible for paying after your deductible (if any) is met. Coinsurance is typically a percentage of the cost of a medication.

Copayment: A copayment is the portion of the prescription drug cost that you are responsible for paying after your deductible (if any) is met. In a standard Medicare Part D plan, copayments began in stage 2, the Initial Coverage stage. A copayment is typically a fixed amount you pay for your medication.

Coverage Gap: Also known as the “donut hole,” the Coverage Gap is the third stage of coverage in a standard Medicare Part D plan. In this stage, you are responsible for a higher percentage of your drug costs.

Deductible: The deductible is the first stage of coverage in a standard Medicare Part D plan. A deductible is the amount you will pay out-of-pocket for your prescription medications before your Part D plan begins to pay its share.

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Glossary

**Formulary:** The formulary is a list of prescription medications covered by a Medicare Part D plan.

**Insurance agent/broker:** This is a person licensed by the state and authorized to sell Medicare plans. Medicare prohibits door-to-door sales for Part D plans. If someone comes to your home to sell a Part D plan without an appointment, turn him or her away and report the incident to the Centers for Medicare & Medicaid Services (CMS).

**Medicare Part D:** This is the part of Medicare that provides beneficiaries with access to insurance coverage for prescription medications not covered under Medicare Part B.

**Monthly premium:** This is the monthly fee for your Medicare Part D prescription drug plan coverage.

**Preferred pharmacy network:** This is a group of pharmacies within a plan’s larger network of pharmacies that offers covered prescription drugs to members of a plan at lower cost-sharing levels.

**Star ratings:** The Centers for Medicare & Medicaid Services rate each Medicare Part D plan annually on their performance. A plan’s Star Rating is an indicator of the quality and service beneficiaries will receive. Look for a plan with 3 or more stars.

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Express Scripts has expertise in Medicare Part D prescription drug plans. For more information, call us at 1.866.544.3794, 24 hours a day, 7 days a week, except Thanksgiving and Christmas. TTY users, call 1.800.716.3231.

You can also visit us online at Express-ScriptsMedicare.com/info.

To learn about other Medicare prescription drug plans in your area, go to medicare.gov.

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