

If you have Medicare, the new health reform law can help you!

In March 2010, the Patient Protection and Affordable Care Act was signed into law. This health reform law provides several important new benefits for Medicare beneficiaries. Below are three immediate benefits that you can look forward to in the coming months.

The \$250 Doughnut Hole Rebate

People with Medicare Part D who reach the Doughnut Hole coverage gap this year will automatically receive a \$250 rebate check. This one-time payment in 2010 will help three million people to pay for the prescription drugs they need.

What You Need to Know

- You do not need to do anything to receive your check. Medicare tracks when you have reached the coverage gap. The check will come automatically about three months after you reach the Doughnut Hole.
- The first group of rebate checks will be mailed on June 15, 2010, with another group being sent out every six weeks until the end of the year.
- Because these checks are sent automatically, avoid anyone who promises to “help” you get your check or get you your check more quickly if you pay them a fee. Immediately report this scam or any similar fraud to the police or to the Attorney General at 1-800-243-5377.

Closing the Doughnut Hole

Starting in 2011, people with Medicare Part D who reach the Doughnut Hole coverage gap will receive a 50% discount on all brand-name drugs and a 7% discount on generic drugs. These discounts will gradually increase over the next 10 years until the coverage gap is closed in 2020.

What You Need to Know

- Although you will only be paying 50% of your drug costs, the full cost of the drugs will be applied toward getting you through the doughnut hole. This will help you to afford your medications, while also helping you to pay your way out of the coverage gap and into catastrophic coverage where you only pay 5% of your drug costs.
- This discount will continue to get bigger until 2020, when you will pay a consistent copayment or coinsurance of no more than 25% of the drug cost (what you pay during standard coverage now).

Free preventive care

Starting in 2011, Medicare beneficiaries will not have to pay any co-payments for annual check-ups, preventive services and screening—such as mammograms and colonoscopies.

What You Need to Know

- Medicare currently covers a check-up only when you enter into Medicare and every other year thereafter. The health reform law allows all preventive care to be covered regardless of whether you have met your annual Medicare deductible.



Information compiled by Champaign County Health Care Consumers

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