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STATE AND CONSUMERS AFFAIRS AGENCY DEPARTMENT OF CONSUMER AFFAIRS ARNOLD SCHWARZENEGGER, GOVERNOR

Meeting Summary

Subcommittee on Medicare Drug Benefit Plans October 14, 2005 1-3:30 p.m.

> Board of Pharmacy 400 R Street, Suite 4080 Sacramento, California

Present: Stanley Goldenberg, Board President Bill Powers, Board Vice President Andrea Zinder, Board Member John Jones, Board Member

> Patricia Harris, Executive Officer Virginia Herold, Assistant Executive Officer Jan Perez, Legislative Coordinator Judi Nurse, Supervising Inspector Robert Ratcliff, Supervising Inspector

President Goldenberg called the meeting to order at 1:05 p.m.

He explained that the purpose of the meeting is to discuss the implementation of the Medication Prescription Drug Act, and specifically the Part D Benefit. These changes, which will begin January 1, 2006, represent an enormous change in the Medicare benefit program. These changes will affect Medicare beneficiaries, their families and caregivers as well as pharmacists, physicians, nurses and patient advocates. Additional changes will affect Medicaid patients and their caregivers. Because of the complexity of the new law, significant learning will need to take place so that beneficiaries and providers understand how to use the new benefits.

President Goldenberg stated that his hopes are that the regulatory agencies will take a strong lead in educating their licensees about the new provisions. Patients and their families will seek information from their health care providers, and lack of knowledge by the health care providers will place additional strains on patients and health care advocates to obtain and provide this information. He added that patients in skilled

nursing homes have special needs and expressed concern that this group is adequately cared for in roll-out provisions.

Lucy Saldana, PharmD, Centers for Medicare and Medicaid Services provided a PowerPoint Presentation on the federal Medicare Prescription Drug Act. Dr. Saldana's PowerPoint presentation is added as an attachment to this meeting summary (Attachment 1).

Information was mailed to beneficiaries in October about selecting a plan. Several corrections have been made to this material, and the corrected version of the manual is available from the CMS Web site (www.cms.gov).

In California, there are 160 plans available. On October 17, consumers will be able to identify the specific medications that will be offered by each plan. Dr. Saldana stated that there is a calculator available online that will help individuals identify the best plan for them based on the medication they take.

Teri Miller, PharmD, Senior Pharmaceutical Consultant, MediCal Policy Division of the California Department of Health Services, next provided an overview of the where the state is with respect to those 1 million individuals who are duly eligible for Medicaid and Medicare programs. Dr. Miller's presentation focused on the plan's major provisions and implementation challenges for California.

Dr. Miller and Dr. Saldana answered a number of questions from those in the audience.

Betty Thurman, representing HICAP and John Gallapaga asked questions regarding specific coverage of the new plan. HICAP is doing significant public outreach and assistance to educate individuals about the new plans.

Kim FitzGerald, Public Affairs Specialist, Social Security Administration, stated that her agency continues also to do beneficiary outreach and education for the Medicare Prescription Drug Plan. There is one outreach coordinator in each Social Security Office.

Ms. FitzGerald stated that Medicare beneficiaries whose income and assets may qualify them the enhanced coverage for low-income individuals should be directed to <u>www.socialsecurity.gov</u> or to call 1-800-772-1213 or 1-800-MEDICARE.

Many questions centered on issues from patients' perspectives revolving around how to select the best plan for any individual patient.

Scams have appeared to "help" individuals learn about the new benefits that could result in identity theft or just outright theft.

This is a new process, and pharmacists and physicians will need to become knowledgeable about the plans to become successful in securing an appeal of a denied

drug. However, this information is not yet available. Dr. Miller stated that backup contingencies are being developed that will help direct providers with questions to useful sources after the January 1 implementation.

President Goldenberg thanked the presenters and advocated for future meetings where California's health care provider regulatory boards would be active participants. He also again emphasized that patients need access to clear and accurate information about selecting a plan. Many participants in this meeting are developing or working on this component.

President Goldenberg thanked those present for their participation and adjourned the meeting at 3:15 p.m.

Attachment 1

Modernizing Medicare: Prescription Drug Benefit – Part D An Update

A PowerPoint Presentation Prepared by Lucy Saldana, Pharm.D., Centers for Medicare and Medicaid Services

October 14, 2005