



California State Board of Pharmacy

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

Meeting Summary

Subcommittee on Medicare Drug Benefit Plans

July 7, 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
Patricia Harris, Executive Officer
Virginia Herold, Assistant Executive Officer
Jan Perez, Legislative Coordinator

In audience: John Jones, Board Member
Richard Benson, Board Member

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.

President Goldenberg concluded his opening remarks by noting the diversity of attendees in the audience, who included representatives of patient advocate groups, the

Medical Board of California, drug manufacturers, schools of pharmacy, and diverse individuals. He encouraged all to fully participate in the meeting.

Teri Miller, PharmD, Senior Pharmaceutical Consultant, MediCal Policy Division of the California Department of Health Services, provided an overview of the federal Medicare Prescription Drug Act. Dr. Miller's presentation focused on the plan's major provisions and implementation challenges for California; this presentation comprised the bulk of the meeting. Dr. Miller's PowerPoint presentation will be added as an attachment to the meeting summary (Attachment 1).

Kim FitzGerald, Public Affairs Specialist, Social Security Administration, stated that her agency is in charge of beneficiary outreach and education for the Medicare Prescription Drug Plan. There is one outreach coordinator in each Social Security Office. Ms. FitzGerald distributed a list of Medicare Outreach Coordinators for Northern California and three beneficiary-oriented fact sheets.

Ms. FitzGerald also provided copies of the application that was recently mailed to those Medicare beneficiaries whose income and assets may qualify them for the enhanced coverage for low-income individuals. This application is available online at www.socialsecurity.gov or by calling 1-800-772-1213 or 1-800-MEDICARE.

She stated that the phone numbers will be a more useful reference for many because the group of potential beneficiaries is not a group who widely use the Internet. However, there is a great deal of information available online for those who will assist potential beneficiaries, including a qualifier calculator. Another related Web site is www.medicare.gov.

David Lipshultz, Staff Attorney, California Health Advocates, discussed a number of issues from the patient's perspective revolving around how to select the best plan for any individual patient. What will the plan cost? What is the best plan for an individual? What if an individual needs/wants to change plans? Should an individual drop a retirement drug benefit plan? Essentially patients and their advocates need to learn what are the key decision points and decision deadlines.

Mr. Lipshultz discussed a number of other issues that will affect any patient's ability to secure the best plan, or what to do if a patient needs to change plans. For example, what will the appeals process involve? Will there be continuity of care for existing prescribed drugs? If a patient cannot pay the copayment, will pharmacies not dispense the drugs?

He stated that there are already scams appearing to "help" individuals learn about the new benefits.

He encouraged the Board of Pharmacy to become involved by reviewing the formularies once they are released to assure they provide adequate medication coverage. If a plan does not cover a particular drug, the patient will have to work to get it approved through

the appeals process. 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.

Aileen Harper, Executive Director, Center for Health Care Rights, continued to describe many of the implementation and educational issues from the patient's perspective raised by Mr. Lipschultz. She stated that HICAP is involved in many of these issues currently. Patients will need to use either the appeals process or seek waivers to attempt to secure specific drug coverage.

President Goldenberg thanked the presenters and advocated for future meetings where California's health care provider regulatory boards would be active participants. He stated that he would attend the Medical Board's meeting at the end of July to encourage that board's involvement in the educational efforts. Representatives of the Medical Board agreed that this outreach is needed. Educational outreach is also needed to include nurses and others who provide patient care.

He also 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 invited those present to bring their ideas to the next meeting of this subcommittee, which will take place in late September or early October. He added that CMS needs to be part of future meetings, and regretted that CMS was unable to attend this meeting.

President Goldenberg thanked those present for their participation and adjourned the meeting at 3:30 p.m.