

C.A.R.E.S. Pharmacy Network Newsletter

Issue 24
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Please visit the C.A.R.E.S.
Pharmacy Network webpage
at: <https://alpharmacycares.org/>

Editor: Oluchukwu Ezeala, PhD Student

link: <https://aub.ethosce.com/>. The College has added a new course on Medicare advantage. While this new addition is not part of the C.A.R.E.S. program, I believe you may find it informative and helpful in navigating the landscape of today's Medicare Advantage Plans. The title of the course is "Navigating Medicare Advantage Plans: Maximizing Plan Utilization for Better Health Outcomes".

Have a good read!

Salisa Westrick, PhD
Sterling Professor
Health Outcomes Research and Policy



Welcome, C.A.R.E.S. Pharmacy Network members!

We hope you had a great summer and are ready to continue the great work you have been doing for your patients. Your dedication and commitment to patient care never go unnoticed, and we are excited to share some insights and updates to support you in your ongoing efforts.

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In this issue, we provide valuable information on Medicare Part C, including what it covers, the different types of plans, beneficiary cost-sharing, current market landscape and the Open and Annual Enrollment Periods. Additionally, we highlight the role of the Senior Medicare Patrol (SMP) in preventing Medicare fraud, and how you can help by informing patients about the program and encouraging them to report suspected fraud.

We also bring you several important updates on our blog, including the upcoming Medicare Drug Price Negotiation Program set for 2026, the availability of free COVID-19 tests for U.S. households, and the ACIP's recent change to the shared clinical decision-making recommendation for RSV vaccination in adults 60 and older. You can read more about these updates at [Blog | alpharmacycares.org](https://alpharmacycares.org/blog).

Lastly, don't forget about our continuing education programs for pharmacists and technicians, which can be accessed via the

Medicare Advantage: What You Need to Know

Salisa Westrick, PhD

Medicare Advantage Plan

Medicare is one of the largest health insurance programs in the United States, with over 66 million Americans enrolled as of 2023.¹ Given an increase in popularity in Medicare Advantage (MA) plans, pharmacists and technicians may receive questions about MA plans. As such, we would like to provide an overview of MA plans in terms of their coverage, cost-sharing, plan types, market penetration, and enrollment periods.

Coverage, Cost-Sharing and Plan Types

Medicare Advantage (MA), also referred to as Medicare Part C, is an alternative health plan that must be approved by Medicare and is offered by private insurance companies.² Because it is an alternative health plan, MA plans must provide all Part A and B covered benefits and may provide additional benefits such as hearing, vision, OTC medications, dental care, and prescription drug costs (Part D).² MA plan enrollees must still pay their Part B premium to stay enrolled in their MA plan.³ As for cost sharing, MA plans do not follow the same structure as the Original Medicare Plan (Part A and Part B) and can vary from one plan to the other. Typically, there are costs to beneficiaries such as deductibles, copayments, and coinsurance, which vary depending on the services beneficiaries are receiving.³ For example, in 2024, health deductibles in Lee County, Alabama, range from \$0 to \$500.⁴ Once beneficiaries reach the out-of-pocket limit, which also differs by plan, the Medicare Advantage plan providers pay all of the costs for covered health benefits for the remainder of the year.³

There are various types of MA plans currently available such as Health Maintenance Organizations (HMOs), Preferred Provider Organizations (PPOs), and Special Needs Plans (SNPs).⁵ In addition to differences in premiums and coverage, these plans vary in specialist referral requirements, provider selection flexibility, and a requirement to choose a primary care provider.⁵ As such, enrollees must be aware of the policies in order to optimize their

Plan. Enrollees can choose either Medicare Advantage plan without prescription drug benefits (MA-only) plans or Medicare Advantage with Prescription Drug benefits (MA-PD) plan. In addition to the Part A and B covered benefits, MA-PD plans also provide prescription drugs (Part D) coverage. As such, opting for an MA-PD plan means beneficiaries have a comprehensive plan that covers hospital, medical, and prescription drug benefits. Because MA-PD plans also provide prescription drug coverage, MA-PD may have higher premiums compared to MA-only plans.⁴

Market penetration

Regarding market penetration of MA plans, beneficiary enrollment in MA plans has increased over the last ten years. In 2010, approximately 25% (11 million) of Medicare beneficiaries had MA plans.⁶ Since then, the trend has been upward, with 2023 marking a milestone as more than half of all eligible Medicare beneficiaries (51% or 30.8 million) are now enrolled in MA plans.⁶ Between 2022 and 2023, total MA enrollment grew by about 2.3 million beneficiaries (or 8%) which is a similar growth rate between 2021 and 2022.⁶ Projections indicate this upward trajectory will persist, reaching a 60% market share (42 million) by 2030,⁷ and 62% by 2033.⁶

Enrollment Periods

We would like to discuss two enrollment periods, concerning Medicare Advantage Plans.

1. Medicare Annual Enrollment Period (AEP): begins on October 15 and concludes on December 7.⁸ During the AEP, Medicare beneficiaries can compare plans and enroll in Medicare Advantage plans or stand-alone prescription drug plans, with new coverage starting on January 1 of the following year.
2. Medicare Advantage Open Enrollment Period (OEP): runs from January 1 to March 31 each year.⁸ OEP allows Medicare Advantage participants to make a one-time change to their plan. Specifically, MA enrollees can switch to a different MA plan, drop MA and return to Original Medicare, and, if they elect to return to Original Medicare, sign up

for a stand-alone Medicare Part D Prescription Drug plan (PDP). It should be noted that during the Medicare Advantage OEP, enrollees with Original Medicare cannot switch to an MA plan or join a PDP or switch from one PDP to another.

Conclusion

MA plans have gained popularity, with over half of Medicare beneficiaries now enrolled in these plans. MA plans come in two types: MA-only plans, which provide hospital and medical benefits without prescription drug coverage, and MA-PD plans, which include hospital, medical, and prescription drug benefits. One reason for the growing popularity of MA plans is the supplemental benefits they offer beyond Parts A and B benefits, such as dental, vision, fitness, meals, and over-the-counter (OTC) items. Pharmacists can assist Medicare Advantage beneficiaries by educating them about selecting the right plan during OEP and AEP to ensure that they select appropriate plans that fit their needs.

References

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Role and Achievements of Senior Medicare Patrols in Combating Medicare Fraud

Oluchukwu Ezeala, PhD Student

You may have heard of Senior Medicare Patrol or SMP but are not sure what this organization is about. SMP is a nationwide federal program, funded by the U.S. Department of Health and Human Services (HHS) through the Administration for Community Living (ACL).¹ Its goal is to enhance the integrity of the Medicare and Medicaid programs and protect beneficiaries' interests by actively preventing healthcare fraud. SMPs work closely with trained professionals and volunteers to educate and counsel Medicare beneficiaries and their families on how to prevent and identify fraud, errors, and abuse.¹

One of the key ways SMPs achieve this goal is by organizing outreach events, where they engage with community members and raise awareness about the different means Medicare fraud can occur.¹ For example, ambulance fraud can occur when Medicare is billed for more miles than were actually traveled during patient transport, or in the case of durable medical equipment scams, suppliers might collect a beneficiary's Medicare number during a sales event or through an unsolicited phone call.²

Beyond raising awareness about fraud identification, SMP staff and volunteers provide detailed guidance on reporting Medicare fraud, errors, and abuse. Beneficiaries can report suspected fraud through the Office of Inspector General (OIG) hotline or by calling 1-800-Medicare.³ They can also report directly to SMPs, who will review the reports to determine if fraud has occurred before forwarding them to the appropriate channels for further action.³

Currently, there are 54 SMP projects—one in each of the 50 states, as well as in the District of Columbia, Guam, Puerto Rico, and the U.S. Virgin Islands.³ Last year, the 54 SMP projects made remarkable advances in their outreach efforts.³ Collectively, in 2023, they organized over 22,000 outreach and educational events and reached more than 1.2 million individuals.³ They also had approximately 270,000 interactions with Medicare beneficiaries

and reported anticipated Medicare recoveries of \$111,277,683. Additionally, they saved beneficiaries around \$45,000 and achieved a cost avoidance of \$34,306.³ These 2023 results show a significant improvement over that of 2022. In particular, the Office of Inspector General reported several increases from 2022 to 2023: beneficiary interactions grew from 246,722 to 270,348, group outreach and educational events rose from 18,274 to 22,356, and the total number of people reached expanded from 1,000,240 to 1,244,697.³ Furthermore, there was a substantial rise in anticipated Medicare recoveries for 2023, totaling \$111,277,683, compared to \$153,812 the previous year, along with an increase in cost avoidance from \$31,122 in 2022 to \$34,306 in 2023.³

The notable progress of SMPs in fighting Medicare fraud highlights their critical role. Pharmacists can support these efforts by guiding beneficiaries to report suspected fraud to the appropriate channels or by referring them to SMPs.

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Recent Blog Highlights

“Preventing Medicare fraud”



<https://www.alpharmacares.org/post/preventing-medicare-fraud>

“Respiratory Syncytial Virus (RSV) Vaccination Update: Shared Clinical Decision-Making
Recommendation Removed for Adults 60+”

<https://www.alpharmacares.org/post/respiratory-syncytial-virus-rsv-vaccination-update-shared-clinical-decision-making-recommendation>

Recent Blog Highlights

“2026 Prescription Savings: Medicare’s Groundbreaking Drug Price Negotiations Deliver Relief”

Drug Name	Participating Drug Company	Commonly Treated Conditions	Agreed to Negotiated Price for 30-day Supply for CY 2026	List Price for 30-day Supply, CY 2023	Discount of Negotiated Price from 2023 List Price	Total Part D Gross Covered Prescription Drug Costs, CY 2023	Number of Medicare Part D Enrollees Who Used the Drug, CY 2023
Januvia	Merck Sharp Dohme	Diabetes	\$113.00	\$527.00	79%	\$4,091,399,000	843,000
Fiasp; Fiasp FlexTouch; Fiasp PenFill; NovoLog; NovoLog FlexPen; NovoLog PenFill	Novo Nordisk Inc	Diabetes	\$119.00	\$495.00	76%	\$2,612,719,000	785,000
Faniga	AstraZeneca AB	Diabetes; Heart failure; Chronic kidney disease	\$178.50	\$556.00	68%	\$4,342,594,000	994,000
Enbrel	Immunex Corporation	Rheumatoid arthritis; Psoriasis; Psoriatic arthritis	\$2,355.00	\$7,106.00	67%	\$2,951,778,000	48,000
Jardiance	Boehringer Ingelheim	Diabetes; Heart failure; Chronic kidney disease	\$197.00	\$573.00	66%	\$8,840,947,000	1,883,000
Stelara	Janssen Biotech, Inc.	Psoriasis; Psoriatic arthritis; Crohn's disease; Ulcerative colitis	\$4,695.00	\$13,836.00	66%	\$2,988,560,000	23,000
Xarelto	Janssen Pharms	Prevention and treatment of blood clots; Reduction of risk for patients with coronary or peripheral artery disease	\$197.00	\$517.00	62%	\$6,309,766,000	1,324,000
Eliquis	Bristol Myers Squibb	Prevention and treatment of blood clots	\$231.00	\$521.00	56%	\$18,275,108,000	3,928,000
Entresto	Novartis Pharms Corp	Heart failure	\$295.00	\$628.00	53%	\$3,430,753,000	664,000
Imbruvica	Pharmacyclics LLC	Blood cancers	\$9,319.00	\$14,934.00	38%	\$2,371,858,000	17,000

Note: Numbers other than prices are rounded to the nearest thousands. List prices are rounded to the nearest dollar and represent the Wholesale Acquisition Costs (WACs) for the selected drugs based on 30-day supply using CY 2022 prescription fills. Drug companies' participation in the Negotiation Program is voluntary; the figures above represent estimates based on continued drug company participation in the Medicare program.

<https://www.alpharmacycares.org/post/2026-prescription-savings-medicare-s-groundbreaking-drug-price-negotiations-deliver-relief>

Recent Blog Highlights

“Coming soon: Free COVID-19 tests (starting at the end of September)”



<https://www.alpharmacycares.org/post/coming-soon-free-covid-19-tests-end-of-september>

Summer Highlights



C.A.R.E.S. at the Alabama Pharmacy Association (APA) 143rd Convention

Did You Know?

Digoxin, a medication used to treat heart failure, is derived from the foxglove plant. Foxglove plant is commonly found in Europe and parts of North America!



Foxglove plant

REMINDER!

In partnership with the Alabama Department of Senior Services (ADSS), the C.A.R.E.S. program is partnering with the Harrison College of Pharmacy to offer an online **ACPE approved** 3-credit hour video-based training and three **ACPE approved** 1-credit hour articles at no cost to you and your pharmacy technician!

1. Online Video Training:

“The Role of Pharmacy Personnel in Assisting Medicare Beneficiaries with Limited Income and Resources”

In summer 2023, we updated the three hours comprehensive CE program to provide an overview of Medicare, government assistance programs, impact of the Inflation Reduction Act and the roles of the Aging and Disability Resource Centers (ADRCs) with the primary goal of helping pharmacists and pharmacy staff effectively and efficiently assist Medicare beneficiaries.

2. Articles:

Three one-hour home-study articles covering the following topics:

- *Basic Introduction of Medicare: What Pharmacy Personnel Need to Know*
- *Government Assistance Programs to Assist Medicare Patients with Limited Income*
- *Assistance Programs Available for Older Adults*

Access the CE programs by visiting: <https://aub.ethosce.com/>

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Feel free to subscribe to receive Medicare Updates by going to: <https://www.alpharmacycares.org/>