

INFORMATION ABOUT MEDICARE OPEN ENROLLMENT



IMPORTANT INFORMATION

ABOUT MEDICARE PART D FOR PEOPLE LIVING WITH PULMONARY ARTERIAL HYPERTENSION (PAH)

If you or your loved one has been prescribed a medication to treat PAH, you may have questions about your Medicare prescription coverage options. **The Medicare Open Enrollment Period is from October 15 through December 7, 2020.** This is your chance to enroll or update your coverage for next year and make certain that your Medicare plan covers your prescription needs. The following information outlines key facts about Medicare Part D to help you better understand your options.



WHAT IS MEDICARE PART D?

Medicare is government-sponsored health insurance coverage for people age 65 and older, certain younger people with disabilities, and people with end-stage renal disease. If you're eligible for Medicare Parts A and B (which cover hospital and other medical expenses, respectively), you're also eligible for Part D, which covers prescription drug costs.

Part D plans:

- Help cover some of the costs of prescription drugs
- Require that you share part of the cost, including a yearly deductible and co-pay or co-insurance for each medication. Patient out-of-pocket costs for prescription drugs can be significant, particularly for specialty products
- Are optional, but if you have Medicare, you must enroll in a Part D plan to get prescription coverage



WHAT SHOULD I CONSIDER WHEN I'M CHOOSING A PLAN?

Choosing a Part D plan can be a daunting task. Having ample coverage may be critical when it comes to a progressive condition like PAH. If you or a loved one takes medication to treat PAH and plans to enroll in a Medicare Part D plan or switch to a new one, consider the following:

- Does your new plan's approved drug list (also called formulary) include all of your medications?
- Are the monthly premiums, deductibles, and your out-of-pocket costs similar to your previous or existing plan?

DEFINITIONS

CO-PAY: The amount you pay as your share of a medical cost, such as for a doctor's visit or a prescription drug. It's usually a set amount. For example, if a prescription drug costs \$50, you may have a co-pay of \$5.

CO-INSURANCE: The amount you are required to pay as your share after you pay your deductible. Co-insurance is usually a percentage (for example, 15%). Patients will have to pay either a co-pay or co-insurance, not both at the same time.

DEDUCTIBLE: The amount you must pay for prescriptions or other healthcare costs before your insurance plan begins to pay.

PREMIUM: The periodic payment you make to your healthcare plan to continue your coverage.

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STEPS TO TAKE AFTER ENROLLING IN MEDICARE PART D

THE MEDICARE OPEN ENROLLMENT PERIOD IS FROM OCTOBER 15 THROUGH DECEMBER 7, 2020.

WHAT ARE SOME THINGS I SHOULD CONSIDER DOING ONCE I ENROLL IN OR CHANGE MY PART D PLAN?

- ✓ Call all healthcare providers involved in treating your PAH (cardiologist, pulmonologist, etc.) to notify them of the change in your insurance and provide any new information
- ✓ Call the specialty pharmacy that delivers your PAH medications to provide your new insurance information
- ✓ Check to see if you need new prior authorizations for your PAH medications to be approved. The need for new prior authorizations may delay the filling of your medications
- ✓ If you're taking Janssen therapies, you can call Janssen CarePath at 866-228-3546, and select option 1 to provide your new insurance information

WHAT IS MEDICARE EXTRA HELP?

Medicare patients can qualify for Extra Help (also called Low-Income Subsidy, or LIS) with their Medicare prescription drug plan costs. To qualify, a person must be enrolled in Medicare Part D and have both limited resources and limited income. You may qualify for Extra Help if you are an individual with an annual income of less than \$19,140, or a married couple living together with an annual income of less than \$25,860.^{1,2*}

You should look into the Extra Help program whenever you update your Medicare Plan, especially if your income has recently changed. There are additional requirements. This is not meant to be an exhaustive list of requirements.

! PROVIDING YOUR NEW INSURANCE INFORMATION TO YOUR HEALTHCARE TEAM AND PHARMACY CAN HELP YOU AVOID A GAP IN YOUR COVERAGE.

WHO SHOULD I CALL IF I HAVE QUESTIONS?

If you're taking a Janssen therapy for PAH, call Janssen CarePath at 866-228-3546, and select option 1. Our Janssen CarePath Care Coordinator can assist you with support and services designed specifically to help people living with PAH.

For additional help with your insurance coverage questions, explore these resources:

Medicare

www.medicare.gov or call 1-800-MEDICARE (1-800-633-4227); TTY users: 1-877-486-2048

Detailed information on selecting a health insurance plan, including live telephone support

State Health Insurance Assistance Programs

www.shiptacenter.org

Free in-depth, one-on-one insurance counseling and assistance for Medicare beneficiaries and their families, friends, and caregivers, available through your home state

*These income limits represent 150% of the 2020 Federal Poverty Level (FPL) for the 48 contiguous States and District of Columbia. Alaska and Hawaii have separate and slightly higher poverty levels.

References:

1. U.S. federal poverty guidelines used to determine financial eligibility for certain federal programs. US Department of Health and Human Services website. <https://aspe.hhs.gov/poverty-guidelines>. Accessed May 19, 2020. 2. Eligibility for extra help (prescription drug low-income subsidy). Social Security Administration website. <https://secure.ssa.gov/poms.nsf/lnx/0603001020>. Revised February 7, 2018. Accessed May 19, 2020.

