AUGUST 2007

RxCONNECTOR

A publication of the North Dakota Insurance Department

ND ESTABLISHES DRUG REPOSITORY

Governor John Hoeven has authorized the redistribution of unused prescription drugs through a program to assist low-income people who lack prescription drug coverage.

North Dakota will create a Prescription Drug Repository to collect and distribute unused medications so that pharmacies and physicians can distribute them to those who cannot afford them. Patients and practitioners will be able to access information on the availability of drugs, medical devices and supplies online.

At present a website is being designed so that pharmacies that chose to become a repository can connect with donors and participants.

A drug donated, prescribed, or dispensed under the program must be in the original, unopened, sealed, and tamper-evident unit dose packaging, except a drug packaged in single-unit doses may be accepted and dispensed if the outside packaging has been opened and the single-unit-dose package is unopened.

A participant may charge an individual a handling fee that does not exceed two hundred fifty percent of the Medicaid prescription dispensing fee for dispensing donated legend drugs, devices, or supplies under the program.

Governor Hoeven also signed legislation directing the State's Department of Human

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Welcome to the RxConnector newsletter!

Jim Poolman
Insurance Commissioner

Dear Friends,

This newsletter is designed to keep you up to date about the Prescription Connection for ND program and to keep you in the know about the various prescription assistance programs that are available. In addition, from time to time, we may also include other items of interest related to Medicare and the Senior Health Insurance Counseling (SHIC) program.

As always, thank you so much for all that you do for the Prescription Connection program! Without your help, our work would be that much harder. Your efforts are valued and appreciated!

If you have items of interest that you think should be included in this newsletter, we would love to hear about them! Please contact Sharon St. Aubin by email at sstaubin@nd.gov or call her toll free at 888.575.6611.

Jim Poolman
Insurance Commissioner

Contact the Department:

1.888.575.6611
insurance@nd.gov
www.nd.gov/ndins

NORTH DAKOTA
a program of the North Dakota Insurance Department

Prescription Connection for North Dakota

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Services to establish a Medicaid buy-in program to provide medical assistance and health coverage options to families of children with disabilities.

Authorized by the U.S. Family Opportunity Act of 2005, the bill will enable the agency to implement a waiver to provide in-home services to children with extraordinary medical needs who would otherwise require hospitalization or nursing home care.

To be eligible, a child must be determined to have a disability under the Social Security Act and live in a family whose net income is below 200 percent of the federal poverty level. The North Dakota Legislature has authorized $2.7 million to implement the measure.

Source: National Governors Association

NEW PROGRAMS ON RxASSIST

~ Abbott ~

Diabetes Patient Assistance Program

- Program details and contact information added, as well as available monitoring systems.

Application available online:
Abbott Diabetes

~ Stiefel Laboratories ~

Stiefel Laboratories Patient Assistance Program

- Added program details and contact information, as well as Brevoxyl Gel, Brevoxyl Acne Wash Kit, Brevoxyl Creamy Wash, Claripel cream, Clobevate gel, Duac gel, Evoclin foam, Mimyx cream, Rosac cream, Rosac wash, Sulfoxyl lotion, Verdeso foam

Application available online:
Stiefel Application

~ Wyeth ~

Wyeth Hemophilia Patient Assistance Program

Program details and contact information added, as well as Benefix and Refacto.

Application available online:
Wyeth Application

ND OFFERS PRACTICAL TIPS ON HEALTH CARE PROXY

Lynne Jacobson, Legal Services developer for North Dakota, took the lead in providing a handbook for people in North Dakota who need to make medical decisions for others.

Topics discussed in this handbook include:

- Who is the handbook for;
- What is it like to be a Health Care Decision Making Agent;
- What should you do while there is still time;
- Steps to follow in making medical decisions;
- Working within the health care system;
- Resolving disputes and getting help;
- Situations often faced by agents.

Download the handbook

MEDICINES MADE EASY

AARP has an informative, easy to read booklet, “Medicines Made Easy”. The booklet covers the areas of preparing for the doctor’s visit, questions about medications, knowing what your pharmacist can offer, a personal medication record, and managing medications.

This booklet would be an excellent resource at a local health fair, clinic office, medical workshop, etc.

To order copies visit www.aarp.org/health or write to AARP, 601 E Street, NW, Washington, DC 20049 or call 1-888-687-2277. The stock number is D18366.

HELPFUL TIPS WHEN APPLYING FOR SOCIAL SECURITY DISABILITY BENEFITS

Keep a very detailed pain/symptom journal.
Document all symptoms (whether related to the disability or not); rate the severity, the dates and times of occurrences, what brought on the symptoms, what if anything alleviated the symptoms. Document very clearly how the symptoms affected the patient's ability to do daily activities. Include photos if the disability is visible. The patient should take this pain journal to the physician and ask the physician to document these things in the medical record.

Keep a spreadsheet with all appointments and detailed contact info for all medical providers.
The decision on the claim will be based on the supporting medical evidence of the patient's condition meeting the Social Security requirements for disability.

Keep in touch with the Social Security Administration.
Notify the Social Security Administration (SSA) if there are any changes or additional health concerns that come up after the patient makes application but the determination hasn't been made yet, and have new records released to SSA.

Make sure that all parts of the application are filled out.
Address how symptoms meet the SSA definition of disability. Once the application is sent to Disability Determination Services (DDS), they will try to make a decision within 90 days and will use only the information turned in to them. Therefore, it is the client's responsibility to call DDS and ask about the application and if certain reports by doctors were delivered. If the client is not satisfied with the information DDS is using to make a decision, the client has the right to ask DDS to delay a decision. At that point the client or social worker can follow up with doctors or agencies that have not delivered info to DDS.

Multi-system diagnosis information is important.
Some Social Security agents look upon cancer as an illness, not a disability. Along with this diagnosis, list the physical impairments: i.e., persistent nausea, diarrhea, abdominal pain, radiation or surgical intervention etc. that exemplify the disability of the disease. Also mention other system problems and enumerate each one: diabetes, continuous clinical depression along with treatment, heart problems, obesity, fractures with chronic arthritis, osteoporosis.

Make and keep copies of all available records.
Make sure to have copies of all records including x-ray reports, lab reports, CT & MRI readings and physician statements. Then have the client or caretaker take copies to the case worker.

Consider having the client appoint a representative for their claim.
This allows the advocate to check on the progress of DDS, whether all forms have been turned in and if all records have been received. The client signs "acceptance of appointment" and the advocate sends it in. This works best if done with the initial application, but can be done any time during the disability determination process. Without this form, DDS and SSA will not talk to the advocate about the application. With it in place, they send the representative copies of everything they send the applicant.

The form needed is SSA 1696-U4 (www.ssa.gov/online/ssa-1696.pdf).

For training resources regarding disability benefits try:

- Local Social Security Offices, which have representatives who will teach a 2-4 hour class;
- World Institute on Disability at www.wid.org/training;
- "How to get SSI and Social Security Disability" by Mike Davis, available at bookstores;
- "Stepping Stones To Recovery" at www.prainc.com/SOAR/tools/default.asp;

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- The federal site, www.disabiltyinfo.gov;
- For benefits information see www.disabilityinfo.gov/digov- public/public/DisplayPage.do? parentFolderId=164
- The SSA website at: www.ssa.gov/

SEE THE LIGHT—PROTECT YOUR EYES THIS SUMMER

The American Academy of Ophthalmology (AAO) reminds Americans of the importance of protecting their eyes from the sun's harmful rays by wearing sunglasses and wide-brimmed hats.

One of the greatest threats to our eyes is invisible. The scientific evidence is piling up: long-term exposure to invisible ultraviolet radiation can damage our eyes and lead to vision loss. Everyone is at risk, even children.

Take these steps to protect your eyes from the sun:

- Select sunglasses that block ultraviolet rays. Don't be deceived by color or cost. The ability to block UV light is not dependent on the darkness of the lens or the price tag.
- Make sure your sunglasses block 99 percent or 100 percent of UV rays and UV-B rays.
- Ideally, your sunglasses should wrap all the way around to your temples, so the sun's rays can't enter from the side.
- In addition to your sunglasses, wear a broad-rimmed hat to protect your eyes.
- Even if you wear contacts with UV protection, remember your sunglasses.
- Sunglasses should be worn whenever outside, and it's especially important to wear sunglasses in the early afternoon and in higher altitudes, where UV light is more intense.
- Don't be fooled by a cloudy day. The sun's rays can pass through the haze and thin clouds

To learn more visit:

- American Academy of Ophthalmology
- All About Vision
- The UV Learning Center
- WebMD
- Aging Eye

MINIMUM WAGE CHANGED JULY 24TH

The Workforce Watch, a newsletter published by Job Service North Dakota, has announced that North Dakota employers will be required to raise their minimum wages to $5.85 per hour, effective Tuesday, July 24, 2007. The increase is in accordance with state and federal laws passed earlier this year to increase the minimum wage gradually to $7.25 per hour in 2009.

The minimum wage for tipped employees will increase according to a different schedule. Starting July 24, 2007, the minimum wage for tipped employees is $3.92 per hour. A tipped employee is any service employee who receives more than $30 per month in tips. Employers must maintain written records verifying tipped employees' wages (combined with tips earned) equals at least the full minimum wage ($5.85 per hour by July 24, 2007) for all hours worked each work week.

For more information contact Job Service at 1-701-328-5000 or 1-800-247-0981.

EYECARE AMERICA

Founded in 1985, EyeCare America is a public service program of the Foundation of the American Academy of Ophthalmology. Their mission is to reduce avoidable blindness and severe visual impairment by raising awareness about eye disease and care, providing free eye health educational materials and facilitating access to medical eye care.

EyeCare America offers multiple eye care programs for which individuals may qualify. Callers will be asked a series of questions to determine the program that provides the most appropriate eye care services, so please only call one help line. Information about each help line can be obtained at:
www.eyecareamerica.org/eyecare/care/index.cfm

MEDICARE PART D - 2008

If you want a quick reference guide to the changes in the Standard Part D Benefit for 2008, visit the Medicare Part D website. All information is displayed in a handy, easy to read chart.

PHARMACEUTICAL MANUFACTURERS ENGAGE IN UNFAIR PRICING PRACTICES

U.S. District Judge Patti Saris in Boston on Thursday ruled that AstraZeneca, Schering-Plough, and Bristol-Myers Squibb (BMS) engaged in unfair and deceptive trade practices related to the prices of some their medications, *Dow Jones/ Boston Globe* reports (*Dow Jones/Boston Globe*, 6/22).

Saris dismissed similar allegations against Johnson & Johnson. The decision affects patients who paid for certain medications from December 1997 to 2003 (Dow Jones/ Newark *Star-Ledger*, 6/22).

In the case, the plaintiffs alleged that the companies sold medications to physicians at a large discount from the "average wholesale price," or AWP, and encouraged them to seek full reimbursement for the treatments from health insurers (*Bloomberg/New York Times*, 6/22).

Some health insurers have used AWP to calculate reimbursements for medications, a practice that Medicare ended in 2003 because of allegations that pharmaceutical companies inflated the measure artificially to increase their profits (Won Tesoriero/Korn, *Wall Street Journal*, 6/22). The lawsuit seeks hundreds of millions of dollars in damages (*Bloomberg/ New York Times*, 6/22).

Saris ordered *AstraZeneca* to pay fines of $4.45 million to non-Medicare third-party payers and *BMS* to pay fines of $183,000. In addition, Saris said that she will review additional information from plaintiff attorneys before she decides on additional damages for third-party payers for copayments for some medications (*Wall Street Journal*, 6/22). Plaintiff attorneys have until Aug. 1 to provide their calculations of damages.

Source: Kaiser network.org June 22, 2007

COMMUNITY ACTION ACCEPTING APPLICATIONS

Community Action is currently accepting applications for the Senior Commodities Program. They distribute commodities every two months to eligible households. To qualify you must:

- Be 60 years or older;
- Be income-qualified - Household size: 1=$1,107; 2=$1,484; 3=$1,861; 4=$2,238 (gross income);
- You must provide proof of income, age, and Social Security number;

If any clients are interested they can stop by Community Action and pick up an application or they can contact Karen for an application.

Karen can be reached at 258-2240. The address is 2105 Lee Ave Bismarck.

Karen serves Morton, Burleigh, McLean, Mercer, Sioux, Emmons, Grant, and Oliver counties.

FDA APPROVES FIRST SKIN PATCH TREATMENT FOR ALZHEIMER'S

~ Treatment reduces gastrointestinal side effects of drug ~

WASHINGTON - The first skin patch to treat the dementia that can plague Alzheimer's patients gained federal approval, a drug company said Monday.

The drug in the patch, called Exelon or rivastigmine, is the same as that now available in capsule form but provides a regular and continuous dose throughout the day, according to Novartis Pharmaceuticals Corp. Since the drug enters the bloodstream directly, the patch also eliminates some of the gastrointestinal side effects associated with the drug when swallowed.

The drug is meant to treat the symptoms of mild to moderate dementia in patients with Alzheimer's disease. It also won Food and Drug Administration approval to treat patients with mild to moderate Parkinson's disease dementia, Novartis said.

About 4.5 million Americans have Alzheimer's. As the disease progresses, it robs patients of their memories and changes how they both think and behave. It's ultimately fatal. Rivastigmine isn't a cure. It inhibits the breakdown of a chemical in the brain called acetylcholine, thought important for both learning and memory.

Novartis said the prescription patch would be available soon. The patch is made by Germany's LTS Lohmann Therapie-Systeme AG and distributed by Novartis Pharmaceuticals, part of Switzerland's Novartis AG.

EMAIL UPDATE SERVICE AVAILABLE FROM CMS

The Centers for Medicare & Medicaid Services (CMS) will soon offer a new email update service that delivers the latest healthcare information to users' inboxes.

Visitors to the www.cms.hhs.gov and www.medicare.gov websites can sign up to receive updates on Medicare and Medicaid related topics throughout the site including Medicare Coverage Updates, Medicare Guidance to Providers, Press Releases, Prescription Drug Coverage, Nursing Home Quality, Medicare publications, claims forms, and much more.

With a subscription profile, users automatically receive notices when information is updated rather than having to frequently visit the website for changes. This is a free service provided by CMS. Email addresses will only be used to deliver the information users request, or to give access to individual profiles of subscriptions. Profiles can be changed anytime.

In order to ensure subscription emails and announcements are successfully received from www.cms.hhs.gov and www.medicare.gov, cmslists@subscriptions.cms.hhs.gov should be added to the user's contact list, spam settings should be adjusted, or instructions from the email provider should be followed on how to prevent emails from being marked "Spam" or "Junk Mail."

ND KIDS COUNT

ND KIDS COUNT is a national organization and is privately funded by the Annie E. Casey Foundation. Data is collected to provide informed discussion and better policies/decision-making for children and families.

The organization is viewed as a very neutral, reliable source of information. Visit their website (www.ndkidscount.org) to get an idea of the topics covered.

A new online ND Fact Book is published every year plus an Overview. The Overview in 2006 focused on American Indian Children in ND. The Inform Fact Sheet is distributed electronically via a listserv.

ND KIDS COUNT is an excellent resource for those who are writing speeches or making proposals for grants.

DEAR MARCI INFORMATION

"Dear Marci" is an electronic Medicare update. The following information was presented in the July 2, 2007 issue:

Dear Marci,

I live in Pennsylvania, but I am planning on spending the summer with my son and his family in California. I have a couple of chronic conditions, though, and might need to visit a doctor while I'm there. Would Medicare pay for a visit to the doctor out of state?

-Sabina (Hershey, PA)

Dear Sabina,

It depends on how you get your Medicare coverage.

If you have Original Medicare, the traditional fee-for-service coverage administered by the federal government, then you can see any doctor, including specialists, anywhere in the country at any time as long as the doctor or provider accepts Medicare. The vast majority of doctors in the U.S. accept Medicare.

However, if you are enrolled in a Medicare private health plan (also called Medicare Advantage), such as an HMO, PPO or PFFS plan, you will need to check with your plan to see if it offers coverage in California and if the doctors and providers in California will accept your Medicare private health plan.

If you are enrolled in Original Medicare, just bring your Medicare card with you to California in case you need to go to the doctor or hospital. The Original Medicare card is the red, white and blue card you received when you first enrolled in Medicare. It will list your name and the dates that your Original Medicare hospital insurance (Part A) and medical insurance (Part B) began. It will also show your Medicare claim number, which is the same as your Social Security number and identifies you in the Medicare system. The codes after your Social Security number give Medicare other information about your Medicare eligibility.

If you have a Medicare private health plan (HMO, PPO, or PFFS), you should not use the red, white, and blue card when you go to the doctor or hospital. Instead, you have to use the membership card your Medicare plan sent to you to get health services covered. You will also use it at the pharmacy if your health plan has Medicare prescription drug coverage (Part D).

For more "Dear Marci" columns or to submit your own question, visit www.seniorjournal.com/DearMarci.htm.

PRESCRIPTION DISCOUNT CARDS FOR THE UNINSURED

More than 1,000 free Family Wize prescription drug discount cards are available through the Souris Valley United Way. To find out more, visit www.familywize.com or call 701.839.2994.

ND INSURANCE DEPARTMENT WEBSITE - A GREAT SOURCE OF INFORMATION

Don't forget to visit the North Dakota Insurance Department's website for answers to many of your Medicare and long-term care insurance questions. The "Consumer" section has information specific to Medicare, Medicare Part D, Medicare supplement insurance and Medicare advantage plans. Users can even look up premiums in real time for every Medicare supplement policy currently marketed in North Dakota.

Visit the "Consumer" section at www.nd.gov/ndins/consumer/.