

CMS expands health care provider directory, launches first phase of Physician Compare website

More information for consumers including quality of care data

Today, the Centers for Medicare & Medicaid Services (CMS) enhanced the Physician Directory tool at www.medicare.gov with new information about physicians and other health care workers in their communities and the services those professionals provide.

The new feature, called Physician Compare, expands and updates CMS' Health care Provider Directory, which has helped millions of beneficiaries find Medicare-participating doctors online for over a decade. The new tool expands the doctor-specific information into the suite of informational tools for Medicare beneficiaries and other consumers.

"The new Physician Compare tool begins to fill an important gap in our online tools by providing more information about physicians and other health care workers," said Donald Berwick, M.D., CMS administrator. "This helps to pave the way for consumers to have similar information about their physicians as they have for nursing homes, home health agencies and health and drug plans."

The new site, at www.medicare.gov/find-a-doctor, which was required by the Affordable Care Act of 2010, contains information about physicians enrolled in the Medicare program, which include Doctors of Medicine,

Osteopathy, Optometry, Podiatric Medicine and Chiropractic. The site also contains information about other types of health professionals who routinely care for Medicare beneficiaries, including nurse practitioners, clinical psychologists, registered dietitians, physical therapists, physician assistants and occupational therapists.

The Physician Compare website is designed to be consumer friendly and help all patients—whether on Medicare or not—locate health professionals in their communities. The information on the site includes contact and address information for offices, the professional's medical specialty, where the professional completed his or her degree as well as residency or other clinical training, whether the professional speaks a foreign language, and the professional's gender. The tool can also help Medicare beneficiaries identify which physicians participate in the Medicare program.



North Dakota
INSURANCE
DEPARTMENT
PROTECTING THE PUBLIC GOOD
PRESCRIPTION CONNECTION

■ Dear friends,

This newsletter is designed to keep you up to date about the Prescription Connection for North Dakota program and to keep you in the know about the various prescription assistance programs that are available. From time to time, we may also include other items of interest related to Medicare and the State 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 at ssaubin@nd.gov or call her at 1.888.575.6611.



Adam Hamm
Insurance Commissioner

Part B, QMB and balance billing

Medicare Savings Programs (MSPs) help pay Medicare costs if one has limited finances. QMB (Qualified Medicare Beneficiary) pays for Medicare Part A and Part B premiums, deductibles and coinsurances or co-pays. If one has QMB, (s) will have no coinsurance or copayment for Medicare-covered services received from doctors who participate in Medicare or Medicare or are in a Medicare private health plan's network.

QMB is an extremely valuable program, but sometimes its beneficiaries run into problems involved "balance billing." Balance billing occurs when the doctor or hospital charges the patient for a balance on a bill after the Medicare private health plan or Original Medicare has paid its approved amount.

Let's look at a common scenario:

You are enrolled in QMB. You recently received a bill from your doctor for a Medicare-covered service. Do you have to pay it?

The answer is: No. Since you have QMB, the state pays for any coinsurance or deductibles for services covered by Medicare Part A and/or B. Therefore, your doctor or hospital is not allowed to charge you for Medicare coinsurance, co-payments or deductibles. This protection applies when you see any Medicare provider, even if the provider does not participate in Medicaid. This rule also applies if you have Medicaid in addition to QMB and Medicare and see a provider who accepts Medicaid; in that case, your provider cannot bill you for Medicare cost-sharing amounts.

Doctors are not permitted to charge QMB patients for services covered by Medicare part A or Part B under any circumstances.

(The Medicare Counselor)

Health care reform information

Visit the North Dakota Insurance Department website, www.nd.gov/ndins, to find updated information on health care reform. Simply click on the health care reform button on the left side of the page. New information appears in red.



Health care reform
Click here to learn more

Applying for prescription assistance programs

Tips for applying to prescription assistance programs:

- If there are any questions, then call the program. Eligibility requirements, drugs, dosages, even programs, change regularly so it's best to go directly to the program for information. If you do not qualify for the program but cannot afford the medicine, then tell the representative. Some companies may make hardship exceptions and are willing to review situations on a case-by-case basis. Sometimes a health care provider or advocate can write an appeal letter to the program explaining your financial hardship. An example of an appeal letter can be found by clicking [here](#).
- Review the Federal Poverty Guidelines and Percentages Over the Poverty Guidelines when looking at the eligibility guidelines of a program.
- Make it as easy as possible for the doctor's office. Fill out as much information on the application as possible, including the doctor's address and phone number. Highlight the directions for the doctor and where he or she needs to sign. Give the doctor's office an addressed—and stamped—envelope to send in the application or highlight the fax number so it is easy to find.
- Plan ahead so your medicine supply doesn't run out. When sending in an application, pay attention to the refill process and the amount of allowable refills. Each program is different; some may require a call from the doctor's office while another may allow the patient to call directly for a refill; others may require a new application, which takes time.
- Be neat and complete. Some programs are fussy about their applications. The directions on the application should be completed exactly as directed. Print neatly. If something is unreadable or there is a blank, then the application may be denied, which can delay the process of receiving the medicine. Put "N/A" or "not applicable" in blanks that are not filled out to indicate the material was read through and not skipped over. Include supplementary forms if requested. Make sure all accompanying photocopies are clean and readable.

Residents of North Dakota may call 1-888-575-6611 to learn which prescription assistance programs are available to them and to receive the applications. Staff of the North Dakota Insurance Department will also assist residents with information about prescriptions available through the North Dakota State Board of Pharmacy repository.

(NeedyMeds)

Low cost or free health coverage for children

Many working families qualify for Healthy Steps, North Dakota's children's health insurance plan. It covers children ages 0–18. To obtain more information call 1-877-543-7669 or apply online at www.HealthyStepsND.com.



NeedyMeds lists medications used for diabetes treatment

Following is a list of medications used in the treatment of diabetes. Click the links for more information.

Accu-Chek (glucose test strips)
ACTOplus met (metformin/pioglitazone)
ACTOS (pioglitazone)
Apidra (insulin glulisine rdna origin)
Apidra Solostar (insulin glulisine rdna origin)
Ascensia Breeze (glucose meter)
Ascensia Contour System (glucose monitoring system)
Avandia (rosiglitazone)
Byetta (exenatide)
Diabeta (glyburide)
Diabinese (chlorpropamide)
FreeStyle Flash Meter (glucose meter)
FreeStyle Glucose Test Strips (glucose test strips)
FreeStyle Meter (glucose meter)
Glucophage (metformin)
Glucophage XR (metformin)
Glucotrol (glipizide)
Glucotrol XL (glipizide)
Glucoavance (glyburide/metformin)
Glynase (glyburide)
Glynase PresTab (glyburide)
Glyset (meglitol)
Humalog (insulin)
Humalog Mix (insulin)
Humulin 70/30 (insulin human)
Humulin R (insulin human)
Janumet (sitagliptin/metformin)
Januvia (sitagliptin)
Lantus SoloSTAR Pen (insulin glargine)
Lantus U-100 (insuline glargine)
Levemir (insulin detemir rdna origin)
Levemir FlexPen (insulin detemir rdna origin)
Levemir FlexPen Cartridges (insulin detemir rdna origin)

Micronase (glyburide)
Novolin 70/30 InnoLet (insulin human)
Novolin 70/30 Vials (insulin human)
Novolin N InnoLet (insulin human)
Novolin N Vials (insulin human)
NovoLog (insulin aspart rdna origin)
NovoLog FlexPen (insulin aspart rdna origin)
NovoLog Mix (insulin aspart protamine and aspart)
NovoLog Mix 70/30 FlexPen (insulin aspart (rdnaorigin))
NovoLog Mix 70/30 FlexPen Cartridges (insulin aspart protamine and aspart)
Onglyza (saxagliptin)
Prandin (repaglinide)
Precose (acarbose)
Symlin (pramlintide)

Other sources of assistance:

- Abbott Patient Assistance Foundation—Diabetes Care Patient Assistance Program
- ACCU-CHEK Patient Assistance Program
- BD Insulin Syringe Assist Program
- Charles Ray III Diabetes Association, Inc
- Eye Care America Diabetes EyeCare Program
- IPump.org
- IPump.org—Insulin Monthly Assistance Program
- Patient Advocate Foundation
- Patient Advocate Foundation (PAF) Co-Pay Relief Program
- Xubex Free Diabetes Kit & Supplies
- Joslin Diabetes Center—JumpStart Program
- Abby's All Stars

For those without insurance or unable to pay for a visit with a physician, NeedyMeds has compiled a nationwide list of free, low cost and sliding scale clinics. Click here to find the clinic nearest you.

Aging and Disability Resource-LINK

This website is your one-stop connection to information about services that enhance independence, assure quality of life and meet the unique needs of seniors and people with disabilities living in North Dakota and other states.

Information may also be discovered by calling 1-800-451-8693 or emailing carechoice@nd.gov.

When will a generic be available for Lipitor ?

Lipitor® (atorvastatin calcium) is a prescription medication that has been licensed to treat several conditions. These Lipitor uses include:

- Treatment of high cholesterol (hypercholesterolemia)
- Treatment of high triglycerides
- Prevention of heart or blood vessel disease (known as cardiovascular disease).

Lipitor is manufactured by Pfizer, Inc. There are no generic versions of Lipitor approved for use in the United States. However, if you search the Internet for “generic Lipitor” or “generic atorvastatin” (which is the generic name for Lipitor), you may

find a number of companies selling it. The fact is that these medicines may be fake, substandard, and potentially dangerous. You should not buy any generic form of Lipitor until there is an approved version available.

The first patent for Lipitor was set to expire in March 2010. However, a generic version is not expected until November 2011. Pfizer and Ranbaxy (a generic manufacturer) have entered into a settlement agreement that will not allow Ranbaxy to make generic Lipitor until November 2011.

Kristi Monson, PharmD
Arthur Schoenstadt, MD

Homestead Credit for senior citizens or persons with disability



If you are 65 or older, a person with a disability and if your income is not more than \$26,000, you may qualify for a credit to reduce your property taxes or a partial refund of the rent you pay.

For more information, contact the Office of the State Tax Commissioner, Property Tax Division, 1-877-328-7088 Option 6 or 701-328-3127.

Low-income subsidy resource limits change

The Centers for Medicare and Medicaid Services has announced the Medicare Part D Subsidy Resource Limits for 2011.

Resource limits including the \$1,500 per person burial exclusion		
For full subsidy	\$8,180 individual	\$13,020 couple
For partial subsidy	\$12,640 individual	\$25,260 couple
Resource limits without the burial exclusion		
For full subsidy	\$6,680 individual	\$10,020 couple
For partial subsidy	\$11,140 individual	\$22,260 couple

(CMS)