

# AHCA MEDICARE PART D UPDATE

**TO:** AHCA Members  
**FROM:** AHCA Public Affairs  
**RE:** UPDATES TO HELP DETERMINE RESIDENT PDP PLANS:  
Mail In Option for Finding 100+ Dual Eligibles' Auto-Assigned Part D Plans & Other Updates  
**DATE:** December 15, 2005

---

In follow up to the December 8<sup>th</sup> White House meeting on Medicare Part D implementation, AHCA/NCAL is working closely with CMS to identify operational issues and to answer Members' questions about Medicare Part D.

We understand that many facilities are experiencing difficulties or delays as they try to obtain information about auto-assigned Medicare Part D Plans for dual eligible residents. **CMS now tells us that requests for this information can take up to ten (10) business days** to process. Again, the fax number LTC facilities should use in requesting PDPs for multiple residents is (785) 830-2593. **If your facility is seeking PDP information for more than 100 residents, CMS has indicated that at this time you MUST use the new MAIL in option.** See the step-by-step instructions below.

AHCA also confirmed that LTC pharmacies can now use an "E1 Query" to obtain auto-assigned PDPs for dual eligibles. We understand that volume for these E1 Queries has been high and that CMS is adding a server to better accommodate the number of requests.

All of this information has been noted in our updated [Part D Q & A](#) that has been posted to our Members Only website. Listed below, we have included many frequently asked questions and the corresponding answers that we have been able to obtain from CMS.

Should you have additional questions, please contact us at [PartD@ahca.org](mailto:PartD@ahca.org); we have ongoing discussions and weekly calls established with CMS that will enable us to speed answers to your specific inquiries.

## INSTRUCTIONS ON FINDING AUTO-ASSIGNED PDPs FOR 1 - 100 RESIDENTS

**BY PHONE** Call 1.800.MEDICARE (1.800.633.4227), TTY users should call 1.877.486.2048.

**BY WEB** Use the Medicare Prescription Drug Plan Finder, click here:  
<https://www.medicare.gov/MPDPF/Public/Include/DataSection/Questions/Questions.asp>

**BY FAX** **FOR MULTIPLE RESIDENTS, UP TO 100 SNF, NF, OR ICF/MR RESIDENTS**  
*Expect a reply within ten (10) business days by overnight mail.*  
*Due to privacy concerns, CMS' reply will list only: residents' first initial, last name, and PDP.*

**Fax to (785) 830-2593**

- **A fax cover sheet.**  
Date and list number of pages; do NOT put individually identifiable or sensitive information on the fax cover sheet.
- **Your contact information**  
Include a voice contact and phone number in case there are questions, as well as a fax back number that includes the area code and fax number.
- **Your facility identification** (i.e., institution name, Medicare billing number)

- **Attestation statement** using the following language, and which must be signed:  
*I attest that the Medicare prescription drug plan enrollment information to be provided by CMS about patients on the attached list will be used by the nursing home only for Medicare prescription drug coverage purposes.*
- An Excel spreadsheet (or other easy-to-read document) that lists each of these five items per resident:
  - Beneficiary/resident name
  - HIC or Medicare #
  - Date of Birth
  - If entitled to Part A or B (*yes or no*)
  - Address

Use the resident's pre-admission address zip code found in admissions documents, or the address zip code the resident lists on his/her correspondence with the Social Security Administration.

**BY MAIL**

**FOR MORE THAN 100 RESIDENTS**

*Expect a reply within ten (10) business days by overnight mail.  
Due to privacy concerns, CMS' reply will list only: residents' first initial, last name, and PDP.*

**Mail to:**

MEDICARE Nursing Home Requests  
3822 Greenway Drive  
Lawrence, Kansas 66046-5504

(For overnight or other delivery services that require a phone number at the physical mailing address, use (785) 838-2107. Do NOT call with inquiries).

- **Your contact information**  
Include a voice contact and phone number in case there are questions, as well as a fax back number that includes the area code and fax number.
- **Your facility identification** (i.e., institution name, Medicare billing number)
- **Attestation statement** using the following language, and which must be signed:  
*I attest that the Medicare prescription drug plan enrollment information to be provided by CMS about patients on the attached list will be used by the nursing home only for Medicare prescription drug coverage purposes.*
- An Excel spreadsheet (or other easy-to-read document) that lists each of these five items per resident:
  - Beneficiary/resident name
  - HIC or Medicare #
  - Date of Birth
  - If entitled to Part A or B (*yes or no*)
  - Address

Use the resident's pre-admission address zip code found in admissions documents, or the address zip code the resident lists on his/her correspondence with the Social Security Administration.

---

## AHCA'S Q&A ON MEDICARE PART D (UPDATED DECEMBER 15, 2005)

Should you have any questions or need additional information, please contact AHCA by emailing [PartD@ahca.org](mailto:PartD@ahca.org).

---

**Q Where can I find the Medicare Part D Plan (PDP) a dual eligible resident has been automatically assigned by Medicare?**

A Ask your resident for the letter from Medicare notifying him or her about which PDP was automatically assigned **OR** contact Medicare - via Web, phone, fax, or mail (see step-by-step instructions below).

**Q What information will I need to find the Medicare Part D Plan a dual eligible resident has been automatically assigned?**

A Whether you use Medicare's Web, phone, fax, or mail in options to locate auto-assigned PDPs for dual eligibles, you will need to have the following personal information about each resident: 1) Medicare claim number (also known as HIC or Health Information Card number); 2) last name; 3) date of birth; 4) effective date for Medicare Part A or B; and 5) zip code.  
**Important note:** Use the resident's zip code that matches what he/she has on file at the Social Security Administration (SSA); SSA provides basic data to Medicare, so Medicare's Plan Finder and other data searches for beneficiaries' SSA-recorded zip code. Check for the resident's pre-admission address.

**Q When should I expect to hear back from Medicare if I fax or mail a PDP information request?**

A Expect to receive a reply from Medicare within ten (10) business days.  
**Note:** Initially, Medicare expected to respond within three (3) business days, but modified that expectation due to the volume of requests submitted).

**Q Can assisted living facilities use the fax option to determine to which PDP a resident has been automatically assigned?**

A No. At present, the fax option is only available for nursing homes, which operate under CMS' institution-based authority.

**Q Will ICF/MR facilities be able to use the fax-based option to locate dual eligibles' auto-assigned PDPs?**

A Yes. CMS has told us that ICF/MRs using the fax-based option should indicate their ICF/MRDD status where the facility identification is listed.

**Q How will I receive the PDP information that I request from Medicare?**

A Medicare will send your residents' PDP information to your facility via fax (if you use the fax-back option) or overnight delivery. Expect to receive a reply within ten (10) business days.

When sending information to Medicare, be sure to include your facility's physical address for overnight delivery (NO Post Office boxes), along with the name and phone number of a voice contact person in case there are questions. If faxing, your fax confirmation page will serve as your indication that your fax has been received.

**Q Where can I find the "authentication form" needed to use the fax-based option?**

A There is no authentication form. CMS needs to "authenticate" or verify that the request for PDP details for dual eligibles is coming from a legitimate nursing home. Therefore, CMS requires that facilities "authenticate" their requests by including a signed attestation statement; the facility name; the facility's Medicare billing information; and beneficiary/resident information. Taken together, CMS will have the appropriate authentication it needs to issue the PDP information being requested by a nursing home facility.

**Q What address should I list on the fax-based request to determine to which PDP a resident has been automatically assigned?**

A Use your resident's pre-admission address. If you do not have the pre-admission address for each resident included in your faxed request to CMS, use your facility address. Residents' re-admission address should be listed in the admission documents.

**Q What Web address should I use to locate dual eligibles' auto-assigned PDPs via the Web?**

A Use the Medicare Prescription Drug Plan Finder found here:  
<https://www.medicare.gov/MPDPF/Public/Include/DataSection/Questions/Questions.asp>

**Q Can long term care pharmacies obtain auto-assigned PDP information about multiple numbers of dual eligible beneficiaries/residents?**

A Yes. Pharmacies can submit an "E1 Query" that will provide auto-assigned PDP information. We understand that CMS is working with pharmacies on a "batch" process using this E1 Query feature to submit multiple residents' contact information.

**Q Can facilities submit an E1 Query to obtain auto-assigned PDP information for dual eligibles?**

A No. Only pharmacies can submit an E1 Query.