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Part D prescription drug
coverage in patients with
chronic kidney disease

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The Medicare Part D prescription drug benefit has been in place since January, 2006. In December, 2011, over 29 million Medicare-enrolled elderly and disabled people, as well as individuals with ESRD, were enrolled in a Medicare Part D prescription drug plan (PDP). Before 2006, these patients obtained drug coverage through various insurance plans, state Medicaid programs, or pharmaceutical assistance programs, received samples from physicians, or paid out-of-pocket. After 2006, however, the majority obtained Part D coverage. Sixty-two percent of general Medicare patients, and 60 and 70 percent of CKD and ESRD patients, were enrolled in Part D in 2011.

Part D benefits can be managed through a stand-alone PDP or through a Medicare Advantage (MA) plan, which provides medical as well as prescription benefits. CKD patients can choose to enroll in an MA plan; ESRD patients, in contrast, are precluded from entering an MA plan if they are not already enrolled in one when they reach ESRD. Most data presented in this chapter encompass both types of plans.

Medicare-enrolled CKD patients obtain outpatient medication benefits through Part B, Part D, retiree drug subsidy plans, or other creditable coverage (equivalent to or better than Part D), including employer group health plans, Veterans Administration benefits, Medicaid wrap-around programs, and state kidney programs. Some also pay out-of-pocket for plan expenses and copayments, over-the-counter medications, and low-cost generic agents at retailers.

The percentage of CKD patients with Part D coverage increased from 58 to 60 percent between 2010 and 2011. A higher proportion of CKD patients have retiree drug subsidy coverage, at 20 compared to 13 percent among general Medicare patients. The percentage of CKD patients with no known coverage increased from 7.8 to 11.2 between 2010 and 2011, but this is lower than the 14 percent seen in the general Medicare population.

Part D does not cover every medication prescribed to Medicare enrollees. Several drug categories — including over-the-counter medications, barbiturates, benzodiazepines, anorexia and weight loss or gain medications, prescription vitamins (except for prenatal vitamins), and cough and cold medications — were excluded from the Part D program by law in 2011. This means that some drugs commonly used in CKD patients (oral iron, ergocalciferol, cholecalciferol) are not currently covered; oral calcitriol, doxercalciferol, and paricalcitol, however, are covered. In January, 2013, Medicare Part D coverage was expanded to benzodiazepines (no restrictions) and barbiturates (for specific indications).

Prior to the start of the Medicare Part D program in 2006, patients dually-enrolled in Medicare and Medicaid received prescription benefits

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