

Questions to ask before you choose

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-- Susan Jaffe

Questions to ask insurance companies offering the new Medicare drug benefit before you sign with a plan:

Q: Is the plan offered in my ZIP code and does it cover my drugs?

Q: Will it cover my drugs when I am in another state?

Q: Can I be assured the drugs I use will not be dropped from the plan in 2006?

Q: Is there a quantity limit for any of my drugs? Is prior authorization (see glossary) required?

Q: Are any drugs that I expect to need in the future covered?

Q: Is there a gap or interruption in coverage of these drugs? (See "coverage gap" in glossary) How will I know when coverage stops and resumes? Do you cover any drugs in the gap?

Q: Are my local pharmacies part of the plan's network? How much more will I pay if I go outside my pharmacy network? If I spend part of the year in another state, is my preferred pharmacy there part of the plan's pharmacy network?

Q: How much are the monthly premiums, and what will I pay for each prescription (either a co-payment or a percentage of the prescription cost)?

Q: If I have drug coverage from my former employer, is it better than any of these plans?

Q: What is the deductible? If I qualify for a zero-premium, and a waiver of the deductible and other charges, will I have to pay for this plan?

Q: If I receive both Medicare and Medicaid and was randomly assigned to a plan, can I switch into this plan without paying anything extra?

Q: Does this plan cost more than what I would pay if I used a drug manufacturer's discount card or joined a drug maker's patient-assistance program for free medicine if I'm eligible?

Q: Is it cheaper than buying my drugs from a Canadian pharmacy or Web site? Is it cheaper than getting drugs from the VA if I'm eligible?

Q: If I don't sign up for a plan by the end of this enrollment period (May 2006), will I pay more in monthly premiums because I waited and chose a plan that is better than the coverage I had?

Q: Do I have to join an HMO or PPO to get this drug plan?

Q: Is this HMO drug plan offered in my ZIP code and, if so, is it accepting new members?

Q: If I belong to an HMO now and I choose a different drug plan, will I lose my HMO medical benefits?