



MEDICARE PART B VERSUS PART D COVERAGE¹

The Medicare Part D prescription drug benefit is providing necessary medications to millions of Americans. However, there is confusion and uncertainty with respect to whether a particular drug will be covered under the Part D benefit or under Medicare's Part B program. Under the Part B program, drug coverage is generally provided for medications administered by a health care professional in a physician's office, as part of a continuous clinical treatment such as chemotherapy, or for other specified drugs that cannot be self-administered by the patient, such as vaccines. The Medicare Part D benefit was designed to provide coverage for outpatient prescription drugs, which are ordinarily self-administered by the patient. The administrative burdens resulting from certain medications being eligible for coverage under either Part B or Part D has created confusion, delay and expense for all involved: beneficiaries, Part D plan sponsors, providers and the Medicare program itself. Because of this uncertainty, delays in coverage adjudication may place beneficiary health in jeopardy.

AMCP POSITION: AMCP recommends Congressional clarification of Part B and Part D coverage policies. This clarification can be made by defining Part B or Part D coverage status at a drug-specific level, rather than defining coverage status by the circumstances of delivery, as is the case under current law. This change would have a dramatic, valuable impact on beneficiary health and well-being, as well as taxpayer savings.

- **Particular categories of drugs covered under Part D continue to be covered under Part B in a variety of settings, under a variety of payment processes and in varying clinical situations. This creates confusion and delay for patients, as well as Part D plan sponsors, providers and the Medicare program itself.**
 - The difficulties and the delays created by the confusion over Part B versus Part D determinations can create situations where patients cannot obtain needed medications in a timely or safe fashion, potentially leading to further complications to a beneficiary's medical condition.
 - Clarifying Medicare Part B and Part D coverage can have a dramatic, valuable impact on beneficiary health and well-being, as well as taxpayer and government savings.

¹ See AMCP's Medicare Part D Position Statement on Medicare Part B versus Part D Coverage.
<http://69.0.204.76/cfr/waSys/f.cfc?method=getLinkAsset&id=F070BB02>

- **Part B and Part D coverage determination problems would be greatly mitigated by defining coverage status at a drug-specific level, rather than by the circumstances of delivery (e.g. intravenous/IV delivery or oral delivery).**
 - Self-administered drugs, such as oral chemotherapies, blood glucose monitoring DME supply drugs and immunosuppressants, should be moved from Part B to Part D coverage in all situations, with allowances for coverage under Part B for beneficiaries who do not have Part D coverage.
 - All vaccines should be covered under Part B. This will facilitate physician billing and ensure access to vaccines for those who do not have Part D coverage.
 - Absent intent to defraud, good faith coverage determinations and payments under either Part B or Part D should not be subject to allegations of fraud.

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The Academy of Managed Care Pharmacy (AMCP) is a national professional association of pharmacists and other health care practitioners who serve society by the application of sound medication management principles and strategies to assist patients in achieving positive therapeutic outcomes. The Academy's 6,000 members develop and provide a diversified range of clinical, educational and business management services and strategies on behalf of the more than 200 million Americans covered by a managed care pharmacy benefit. More news and information about AMCP can be obtained on its website, at www.amcp.org.