MED D - Inflation Reduction Act

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**Description:** This document provides information regarding the 2022 Inflation Reduction Act.

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| Inflation Reduction Act |

On **August 16, 2022**, the 2022 Inflation Reduction Act (IRA) was signed into law. This law includes many changes to Medicare Part D that will take place over several years. However, for the 2023 plan year, two provisions from the IRA went into place beginning **January 1, 2023** and continue to be in effect through the 2025 plan year.

**Coverage of Adult Vaccines**

* The plan covers those adult **Part D** vaccines recommended by the Centers for Disease Control and Prevention’s (CDC) Advisory Committee on Immunization Practices at $0 for individuals 19 years of age and older.
* In order to qualify for the IRA, the vaccine must be:
  + Licensed by the Food and Drug Administration (FDA) for use in adults
  + Administered to an individual who is an adult
  + Recommended by the Advisory committee on Immunization Practices (ACIP) for use in adults
* ACIP recommendations must be:
  + Approved by the Centers for Disease Control and Prevention (CDC) director
  + Approved by the US Department of Health and Human Services
* The Inflation Reduction Act does not apply for age 18 or younger, or for other adult age groups not supported by ACIP recommendations.
* For human papillomavirus, (HPV) vaccines, the IRA $0 vaccine cost-share will be limited to adults aged 19 through 45.
* For Respiratory Syncytial Virus (RSV) vaccines, the IRA $0 vaccine cost share will be limited to adults age 60 and above.
* The listing of IRA eligible vaccine products may be updated periodically as new vaccines become available in the market or if CMS provides changes to the list.
* Refer to [MED D - Vaccines](https://thesource.cvshealth.com/nuxeo/thesource/" \l "!/view?docid=afbc9491-7e41-4847-a19b-ea98936ae626).

**Appropriate Cost-Sharing for Covered Insulin Product**s

* The plan covers a one-month supply of each covered **Part D** insulin product with a copay of no more than $35, no matter what cost-sharing tier it’s on, and will not charge a deductible.

**Note**: Inflation Reduction Act cost-sharing changes for insulins covered under **Part B** took effect on July 1, 2023.

**Annual Enrollment Period (AEP)**

* During AEP, prospective enrollees should confirm that insulin is on the plan formulary.
* Refer to [MED D - 2025 SilverScript PDP Readiness Plan Design Reference](https://thesource.cvshealth.com/nuxeo/thesource/" \l "!/view?docid=2b21522b-c27b-4b5a-a6c0-fc8805816fcc) or [MED D - Blue MedicareRx (NEJE) 2025 AEP Readiness](https://thesource.cvshealth.com/nuxeo/thesource/" \l "!/view?docid=f60711f5-97b8-491f-a9e0-1e73b5ca03fc).

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| Frequently Asked Questions |

Refer to the following FAQs:

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| **#** | **Question** | **Answer** |
|  | **Will my vaccine be covered?** | * The plan will cover those adult Part D vaccines recommended by the Center for Disease Control’s (CDC) Advisory Committee on Immunization Practices at $0 for individuals 19 years of age and older. * The Inflation Reduction Act does not apply for age 18 or younger, or for other adult age groups not supported by ACIP recommendations. * For human papillomavirus, (HPV) vaccines (e.g., Gardasil), the IRA $0 vaccine cost-share will be limited to adults aged 19 through 45. * For Respiratory Syncytial Virus (RSV) vaccines, the IRA $0 vaccine cost-share will be limited to adults age 60 and above.   + **Note**: For questions about vaccine claim processing, refer to [MED D - Vaccines](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=afbc9491-7e41-4847-a19b-ea98936ae626). |
|  | **Will there be changes to IRA eligible vaccines?** | Yes. CMS can modify the list of ACIP Recommended Adult Vaccines File at any time, or when new vaccines are available in the market. |
|  | **What if I already received a vaccine which has been removed from the IRA eligible vaccine list?** | If you will be receiving additional doses of the same vaccine in which you were originally paying with a $0 copay, you will now pay your normal plan cost share for the additional dose(s). |
|  | **Will my insulin copay be $35?** | Under the Inflation Reduction Act, you will pay no more than a $35 copay for a one-month supply of each Part D insulin product covered by the plan through all coverage phases. |
|  | **What if my insulin is not on formulary, but was approved with a prior authorization?** | If your insulin is approved for coverage through a prior authorization, it will be available to you at no more than $35 for a one-month supply. |
|  | **Will the $35 copay apply to insulin alternatives? (Example: Metformin or non-insulin injectables like Ozempic)** | The $35 insulin copay cap only applies to products that contain a form of insulin. This would include special types of insulin such as Levemir. Other drugs to treat diabetes, for example drugs you take by mouth in pill form (for example, metformin or Januvia) or other injectable drugs that do not contain insulin (for example, Ozempic), were not included in the Inflation Reduction Act requirements. |
|  | **Will the $35 copay apply to all cost-sharing tiers?** | You won’t pay more than $35 for a one-month supply of each insulin product covered by your plan, no matter what cost-sharing tier it’s on, even if you haven’t met your deductible. |
|  | **Will I receive a notification outlining the changes?** | * Yes, you should have received an update to your Annual Notice of Change (ANOC), your Evidence of Coverage (EOC), and a notice of formulary change outlining insulin benefits and coverage. |
|  | **Am I still able to get a 60 or 90 day supply?** | If you get a 60 or 90-day supply of insulin, your costs can’t be more than $35 for each month’s supply of each covered insulin. |
|  | **How does cost sharing for covered insulins apply across the coverage phases?** | The Act requires insulin copays be applicable on the very first day of the plan even if the plan deductible is unmet. Covered insulin copays with the $35 cap for a 30-day supply, will apply through each phase of the plan (i.e., deductible, initial coverage, coverage gap, and catastrophic phases) until year end. |
|  | **Why did my insulin prescription cost more than $35?** | Fully research the situation for verification. It is likely because their insulin claim was submitted for more than one month’s supply.  **Examples:** Review CIF, work instructions, View Activities, member-level comments, Run Test Claim; Check Plan Summary  If it is confirmed the copay does not match the plan design, refer to [Account Executive Consideration Task (AE Task)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=497dcdb2-2c97-4a3a-afe9-1fa95f6dd734). |
|  | **What if I am receiving Extra Help (LIS)?** | * **Insulins:** Under the Inflation Reduction Act, you will pay no more than a $35 copay for a one-month supply of each Part D insulin product covered by the plan through all coverage phases. LIS beneficiaries will likely pay their LIS cost-share unless their plan copay for insulins is less than their normal LIS cost-share.  * **Vaccines:** Under the Inflation Reduction Act, your plan will cover those adult Part D vaccines recommended by the Center for Disease Control’s (CDC) Advisory Committee on Immunization Practices at $0 for individuals 19 years of age and older. For LIS beneficiaries, regardless of LIS eligibility category or benefit coverage phase, you will not pay a copay for vaccines covered under your plan.  * + **Note**: For questions about vaccine claim processing, refer to [MED D - Vaccines](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=afbc9491-7e41-4847-a19b-ea98936ae626). |
|  | **Do these insulin copays change how I move through my Part D benefit?** | * Dollars spent by you for your insulins apply toward your True Out of Pocket (TrOOP) limit. * In addition, any dollars paid by supplemental payors (State Pharmaceutical Assistance Programs, Extra Help from the Government, etc.) apply towards your TrOOP balance. * Once your TrOOP limit is met, you pay no copays in Catastrophic for all Part D prescriptions. |
|  | **What happens once my TrOOP level was reached, and I hit the Catastrophic phase of the benefit?** | * Your insulin copays were from $0 up to the $35 cap for a one-month supply until you reached the Catastrophic phase of the benefit. * Once your TrOOP limit is met, you pay no copays in Catastrophic for all Part D prescriptions. |
|  | **My state has approved a cap on insulin copays, how does this impact my Medicare Part D Prescription Plan?** | * The legislation approved in your state does not apply to Medicare Part D Plans; however, the Inflation Reducation Act (IRA) does impact your Medicare Part D Prescription Plan. * I’m happy to look up pricing for your specific insulin product for 2025, or if you would prefer, you can visit your plans website and use the Drug Pricing Quote Tool.   Refer to [MED D - Drug Pricing Tool](file:///C:\Users\C337799\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\40ZZSJWS\CMS-PCP1-040984). |

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| SilverScript EGWP (OHI) Clients |

Refer to the following list of clients:

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| **Client Code** | **Client Name** |
| 9544 | STATE OF MARYLAND |
| 9453 | NATIONAL GRID |
| 9503 | PFIZER |
| 9532 | UMR WESTCHESTR |
| 9482 | NYSHIP |
| 9447 | JOHN HANCOCK |
| 9511 | GIC |
| 9515 | CA'S VALUED TRUST |
| 9573 | VIATRIS |
| 9513 | LAUSD |
| 9586 | HOWMET |
| 9514 | WORLD BANK |
| 9528 | CCPF |
| 9582 | UNIV OF CHICAGO |
| 9519 | BRIDGESTONE |
| 9457 | GOODYEAR |

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| Related Documents |

* [MED D - Vaccines](https://thesource.cvshealth.com/nuxeo/thesource/" \l "!/view?docid=afbc9491-7e41-4847-a19b-ea98936ae626)

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