



news release

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Time running out for Medicare drug plan changes

DES MOINES, IA (December <date>, 2009) – Time is running out for seniors with Medicare drug coverage to make changes to their insurance plans.

The Annual Election Period for Medicare Part D drug plans ends December 31, 2009. For Medicare beneficiaries already enrolled in a Part D plan, this is the only time you can enroll in or make changes to that plan for 2010 coverage.

“If you’re satisfied with your current plan, there’s no need to re-enroll,” says Keith Heckel, Group Vice President – Sales and Marketing, Wellmark Blue Cross and Blue Shield. “However, you might be able to save money by changing plans – even to a different plan offered by the same carrier. Some plan options may even have lower premiums this year than last year.”

According to Heckel, seniors can review four basic questions to determine if a change may be appropriate:

Will the prescription drugs I take be covered under my plan in 2010?

This is perhaps the most basic question, but seniors should always double check, as the range of covered medications can change from year to year. (To see a list of drugs (the *Formulary*) covered by Wellmark’s MedicareBlue Rx (PDP) plan, visit www.wellmark.com/medicare.)

It’s also helpful to ask your pharmacist for a listing of your current prescriptions – including their name, form, strength and quantity per month – which you can then use to compare plans online.

Will my premium and/or costs go up in 2010?

While some plans will experience a premium increase due to inflation and increasing drug claim costs, some may increase more than others, and some may actually decrease. Also, in addition to premiums, seniors should consider co-pays and deductibles, which can vary depending upon someone’s plan and medications.

Will my plan continue to cover medications after I reach the “doughnut hole?”

In 2010, the lapse in coverage known as the “doughnut hole” will occur once the plan and the member have paid \$2,830 in total out-of-pocket drug costs, and end once the member reaches \$4,550 in costs. Even if you have never reached the doughnut hole, check to be sure that changes to your medications won’t push you into that range in 2010. If you think you will reach \$4,550 and take generic drugs, be sure to look for a plan that maintains generic coverage “in the gap.”

Am I satisfied with the service I receive from my plan?

Good service is still valuable and, depending on your situation, could be worth a few extra dollars a month. “This means any time you are not sure what is covered, your insurance company representatives should take the time to help you understand what drugs are covered, and the specific benefits you receive for the premium dollars you pay,” said Heckel.

Medicare-eligible individuals can review and compare different plans at www.medicare.gov, or use Wellmark’s online tools at www.wellmark.com/medicare. Select “Prescription Drug Plans” and then “plan selector tool (2010).” Or, they may call MedicareBlue Rx at 1-800-650-5669, or TTY/TDD: 1-866-456-1550, 8 a.m. to 8 p.m., daily, Central and Mountain Time. When calling the number shown, you may request to speak to a licensed or unlicensed representative. Please advise them of your choice when you call. MedicareBlue Rx is a Medicare approved Part D sponsor.

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