

**Frequently Asked Questions (Set #2)
for IRA/Medicare Insulin Benefit**

11. Does the Inflation Reduction Act’s \$35 insulin cap apply to disposable “patch” pumps?

People with Medicare with Part D coverage who use an insulin patch pump (i.e., a small wireless, tubeless pump worn directly on the body, for example Insulet Omnipod) will continue to obtain their insulin through their Part D prescription drug plan benefit. For these people, the \$35 cost sharing cap for a month’s supply of each covered insulin product (i.e. the insulin that goes into their pump) applies starting January 1, 2023. The disposable pump itself can be covered under Part D as an insulin **supply**, but because it is a supply and not a covered insulin product, the cost-sharing for the disposable pump is not subject to the \$35 cost-sharing cap, and the plan deductible may apply. Also, because the disposable pump is a supply (and not a drug), people with Medicare cannot add the pump to a drug list in Medicare Plan Finder.

12. Are other types of prescription drugs that I take to manage diabetes (e.g., Trulicity, Bydureon BCise, Byetta, Mounjaro, Ozempic, Symlin, Victoza) included in the monthly \$35 cost-sharing cap?

Prescription drugs, including injectable drugs, that aren’t insulin products or combination products that combine an insulin product with another drug (e.g. a diabetes management drug), aren’t covered by the Inflation Reduction Act’s cost-sharing cap of \$35 for a month’s supply of a covered insulin product.

13. What amounts paid for insulin and recommended preventive vaccines will count toward the Medicare 2023 Part D deductible?

If someone with Medicare fills a prescription for a Part D covered insulin product before meeting the Part D deductible, their cost-sharing amount (up to \$35 maximum for a month’s supply) will be applied to their deductible. Under the IRA, a person with Medicare isn’t required to meet the Part D deductible before Medicare will cover a Part D covered insulin product or recommended preventive vaccine, and recommended preventive vaccines have zero cost sharing.

In addition, for plan year 2023, under the IRA, the amount Medicare pays for a covered insulin product or recommended preventive vaccine that would otherwise have been paid by the Medicare enrollee (i.e., if the IRA’s cost sharing caps did not apply) will **also** count toward the person’s deductible and total true out of pocket (TrOOP) costs, and will count toward the person’s progression into the catastrophic phase of the Part D benefit.

14. How can someone with Medicare who takes insulin estimate when they’ll move through the coverage phases in Medicare Part D?

In the Medicare Plan Finder, once someone adds their insulin products to their drug list and compares plans, the coverage phase details shown are accurate estimates for moving through the phases. The full cost amount of insulin (more than the \$35/month’s supply cap) will be counted toward out-of-pocket costs.

15. If a person with Medicare pays more than \$35 for a month's supply of a covered insulin product at the pharmacy using their Medicare Part D coverage after January 1, 2023, will they get reimbursed for the amount that exceeds \$35?

For a month's supply of covered insulin products dispensed between January 1, 2023 and March 31, 2023, a Medicare Part D prescription drug plan must reimburse the person with Medicare within 30 calendar days for any cost-sharing amount the person is charged that exceeds \$35. By March 31, 2023, all plans should have their systems updated to process point of sale pharmacy claims so that enrollees aren't charged more than the maximum \$35 cost sharing amount for a month's supply of each covered insulin product.