



Individual and Group Medicare Part D Drug Plans
2025 Medicare Prescription Payment Plan (M3P)
Frequently Asked Questions
October 2024

THIS DOCUMENT IS TO BE USED AS A TOOL ONLY TO VERBALLY ANSWER QUESTIONS FROM PROSPECTIVE ENROLLEES OR CURRENT MEMBERS. THIS DOCUMENT IS NOT TO BE ISSUED OR PROVIDED TO PROSPECTIVE ENROLLEES OR CURRENT MEMBERS.

Beginning January 1, 2025, there will be a new payment option to help Medicare Advantage and standalone Part D plan members manage their out-of-pocket Part D drug costs. This new option is called the Medicare Prescription Payment Plan (M3P).

1. What is the M3P?

The Inflation Reduction Act has provisions for the Medicare Prescription Payment Plan where, beginning January 1, 2025, all Medicare prescription drug plans must offer their Part D enrollees the option to pay their out-of-pocket (OOP) Part D drug costs through monthly payments over the course of the plan year, instead of as upfront payments at the pharmacy point-of-sale (POS). Sign-ups for the M3P's January 1, 2025 effective date starts during the Annual Enrollment Period (October 15th through December 7th).

2. How do I set up the M3P payment plan?

You will need to complete the M3P participation request form online by logging into your Blue Shield of California Member Portal, or by submitting your completed Medicare Prescription Payment Plan enrollment election form by mail, or by calling (833) 696-2087, 8 a.m. to 8 p.m. 7 days a week. TTY users can call 711.

If you have questions or need help completing the M3P enrollment election form, call us at (833) 696-2087, 8 a.m. to 8 p.m. 7 days a week. TTY users can call 711.

In 2024, for 2025: If you want to participate in the Medicare Prescription Payment Plan beginning on January 1, 2025, contact Blue Shield of California now.

During 2025: On or after January 1, 2025, you can contact Blue Shield of California to start participating in the Medicare Prescription Payment Plan anytime during the calendar year. Once Blue Shield of California receives your participation request, we will process the request within 24 hours and, if approved, you will then be able to begin using the Medicare Prescription Payment Plan. If your request to participate in the Medicare

Prescription Payment Plan is denied, Blue Shield of California will notify you and explain the reason for denial (such as failing to submit the information requested within the timeframe listed on the request) within 10 calendar days of the denial.

3. How does the M3P work?

When you fill a prescription for a drug covered by your plan's Part D pharmacy benefit, you will not need to pay your applicable copayment or coinsurance at the pharmacy, (including home delivery and specialty pharmacies). Instead, you'll receive a bill each month from your Blue Shield Medicare health or drug plan. Although the pharmacy will not charge you when you pick up your prescriptions, you are responsible for the cost through the payment plan.

4. How is my monthly bill calculated?

Your monthly bill is based on what you would have paid (your copayment or coinsurance) for any prescriptions you get, plus your previous month's balance, divided by the number of months left in the year. All Part D plans will use the same formula to calculate their members' monthly payments. There is no interest or fees charged for this plan, even if your payment is late.

5. Will my payments be adjusted and/or change monthly? Will there be interest charged?

Your payments might change every month, so you might not know what your exact bill will be ahead of time. Future payments might increase when you fill a new prescription (or refill an existing prescription) because as new out-of-pocket costs get added to your monthly payment, there are fewer months left in the year to spread out your remaining payments.

In a single calendar year (January – December), you'll never pay more than:

- The total amount you would have paid out of pocket to the pharmacy if you weren't participating in this payment option.
- The Medicare drug coverage annual out-of-pocket maximum (\$2,000 in 2025).

6. Will I receive a Part D explanation of benefit (EOB) or itemized statement of my prescriptions, and the payments made?

You will not receive a Part D explanation of benefits (EOB) for the Medicare Prescription Payment Plan. You will receive a separate bill with a list of prescriptions received while participating in the Medicare Prescription Payment Plan, along with the total monthly amount due, the due date, and the overall plan balance for the remainder of the year.

7. Will this help me?

You're most likely to benefit from participating in the Medicare Prescription Payment Plan if you have high drug costs earlier in the calendar year. Although you can start participating in this payment option at any time in the year, starting earlier in the year (for example, before September), gives you more months to spread out your drug costs.

This payment option may not be the best choice for you if:

- Your yearly drug costs are low.
- Your drug costs are the same each month.
- You're considering signing up for the payment option later in the calendar year (after September).
- You don't want to change how you pay for your drugs.
- You get or are eligible for "Extra Help" from Medicare.
- You get or are eligible for a Medicare Savings Program.
- You get help paying for your drugs from other organizations, like a State Pharmaceutical Assistance Program (SPAP), a coupon program, or other health coverage.

8. Who can help me decide if I should participate?

- **Your health or drug plan:** Visit the Blue Shield of California Medicare website: <https://www.blueshieldca.com/en/medicare/what-is-medicare/savings-programs-financial-help> , or call (833) 696-2087, 8 a.m. to 8 p.m. 7 days a week (TTY users can call 711) to get more information.
- **Medicare:** Visit [Medicare.gov/prescription-payment-plan](https://www.medicare.gov/prescription-payment-plan) to learn more about this payment option and if it might be a good fit for you.
- **State Health Insurance Assistance Program (SHIP):** Visit shiphelp.org to get the phone number for your local SHIP and get free, personalized health insurance counseling.

9. How do I sign up?

If you are a member of a Blue Shield of California Medicare Part D plan:

- Complete the Medicare Prescription Payment Plan enrollment form that is being sent to all new Blue Shield Medicare Part D plan members with a January 1, 2025 effective date prior to the beginning of the plan year, and send it to:
Blue Shield of California
Mailstop: 1003
MPPP Election Dept.
13900 N. Harvey Ave
Edmond, OK 73013
- Download the Medicare Prescription Payment Plan enrollment form from the Blue Shield of California Medicare website and send it to the above address.
<https://www.blueshieldca.com/en/medicare/what-is-medicare/savings-programs-financial-help>
- Log in to your Blue Shield of California Member Portal and then click on the Medicare Prescription Payment Plan participation link, [Sign up online](#)
- Call us at (833) 696-2087, 8 a.m. to 8 p.m. 7 days a week (TTY users can call 711)

In 2024, for 2025: If you want to participate in the Medicare Prescription Payment Plan for 2025, contact your plan now. Your participation will start January 1, 2025.

During 2025: Starting January 1, 2025, you can contact your plan to start participating in the Medicare Prescription Payment Plan anytime during the calendar year. Once Blue Shield of California receives your participation request, we will process the request within 24 hours, and if approved you will then be able to begin using the Medicare Prescription Payment Plan. If your request to participate in the Medicare Prescription Payment Plan is denied, Blue Shield of California will notify you and explain the reason for denial (such as failing to submit the information requested within the timeframe listed on the request) within 10 calendar days of the denial

Remember, this payment option may not be the best choice for you if you sign up late in the calendar year (after September). This is because as new out-of-pocket drug costs are added to your monthly payment, there are fewer months left in the year to spread out your payments.

10. What happens after I sign up?

Once Blue Shield of California reviews your participation request, they'll send you a letter confirming your participation in the Medicare Prescription Payment Plan. Once your participation in the M3P plan is confirmed by Blue Shield of California, you will be able to

log in to your Blue Shield of California Member Portal and click on the Medicare Prescription Payment Plan link to access and update your Medicare Prescription Payment Plan account.

Then, when you get a prescription for a drug covered by Part D, your plan will automatically let the pharmacy know that you're participating in this payment option, and you won't pay the pharmacy for the prescription. Even though you won't pay for your drugs at the pharmacy, you're still responsible for the costs.

Each month, Blue Shield of California will send you a bill with the amount you owe for your prescriptions, when the billed amount is due, and information on how to make a payment. You'll get a separate bill for your monthly plan premium (if you have one).

11. How do I pay my bill?

After Blue Shield of California approves your participation in the Medicare Prescription Payment Plan, you'll get a letter with information about how to pay your bill.

12. What happens if I don't pay my bill?

If you miss a payment, you will receive a reminder notice to make your payment within 15 calendar days of the payment due date. You will be considered to have failed to pay your monthly billed amount after the conclusion of a two-month grace period.

If you do not pay your bill by the end of the two-month grace period, you will be removed from the Medicare Prescription Payment Program. However, you will still be required to pay the amount you owe and may not be able to re-enroll in the Medicare Prescription Payment Program. **If you are removed from the Medicare Prescription Payment Plan, you will continue to be enrolled in your Medicare health or drug plan.**

Always pay your health or drug plan monthly premium first (if you have one), so you don't lose your drug coverage.

Blue Shield will reinstate a participant who has been terminated from the Medicare Prescription Payment Plan if the individual demonstrates good cause for failure to pay the program's billed amount within the two-month grace period and pays all overdue amounts billed.

Call (833) 696-2087, 8 a.m. to 8 p.m. 7 days a week (TTY users can call 711) if you think there is a mistake on your Medicare Prescription Payment Plan bill. If you think there's been a mistake, you have the right to file a complaint following the grievance process found in your Member Handbook or Evidence of Coverage.

13. How do I leave or opt out of M3P?

You can leave or opt out of the Medicare Prescription Payment Plan at any time by contacting Blue Shield of (833) 696-2087, 8 a.m. to 8 p.m. 7 days a week (TTY users can call 711). Leaving the Medicare Prescription Payment Plan will not affect your Medicare drug coverage and other Medicare benefits. Keep in mind:

- If you still owe a balance, you are still required to pay the amount you owe, even though you're no longer participating in this payment option. You will continue to receive an invoice each month for any outstanding amount until your balance is paid in full.
- You can choose to pay your balance all at once or be billed monthly.

You will pay the pharmacy directly for new out-of-pocket drug costs after you leave the Medicare Prescription Payment Plan.

14. What happens if I change my health or drug plans?

If you leave or are disenrolled from your current Blue Shield of California plan for any reason, or change to a new Medicare drug plan or Medicare health plan with drug coverage (like a Medicare Advantage Plan with drug coverage), your participation in the Medicare Prescription Payment Plan will end.

- If you change plans within Blue Shield of California, your participation will end in the Medicare Prescription Payment Plan with the prior plan. You can then enroll into the Medicare Prescription Payment Plan for the new plan that you choose with Blue Shield of California.
- If you change your plan to another carrier, please contact your new plan carrier if you'd like to participate in the Medicare Prescription Payment Plan with them.

If you still owe a balance, you are required to pay the amount you owe, even though you're no longer participating in this payment option. You will continue to receive an invoice each month for any outstanding amount until your balance is paid in full. Upon disenrollment from the Medicare Prescription Payment Plan, you remain responsible for the amount due under the existing Medicare Prescription Payment Plan.

15. Where can I get more information?

- Blue Shield Medicare Website:
<https://www.blueshieldca.com/en/medicare/what-is-medicare/savings-programs-financial-help>

- Medicare: Visit [Medicare.gov/prescription-payment-plan](https://www.medicare.gov/prescription-payment-plan), or call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users can call 1-877-486-2048.
 - Blue Shield Medicare Prescription Payment Plan: (833) 696-2087, 8 a.m. to 8 p.m. 7 days a week (TTY users can call 711).
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