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Actor portrayals.

Find out how you can participate in changes to Medicare Part D in 2025

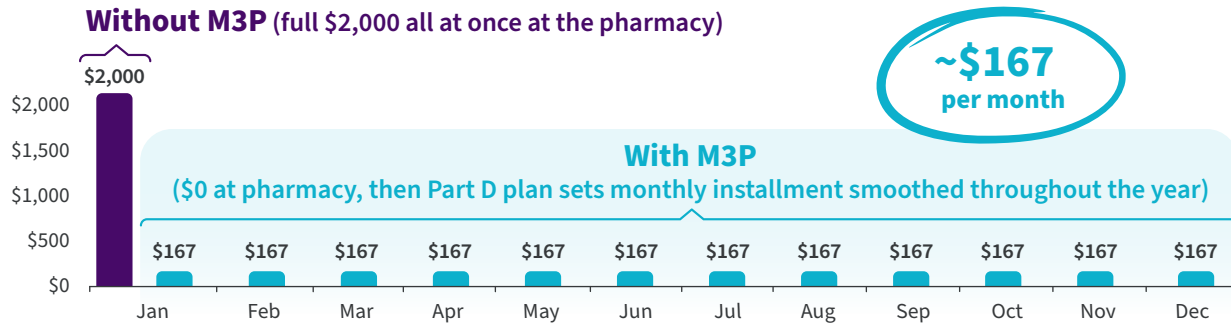
-  **Enroll in Medicare Prescription Payment Plan (M3P)**
-  **See if you're eligible for *Extra Help***

 **Attruby**[™]
(acoramidis)_{356 mg tablet}

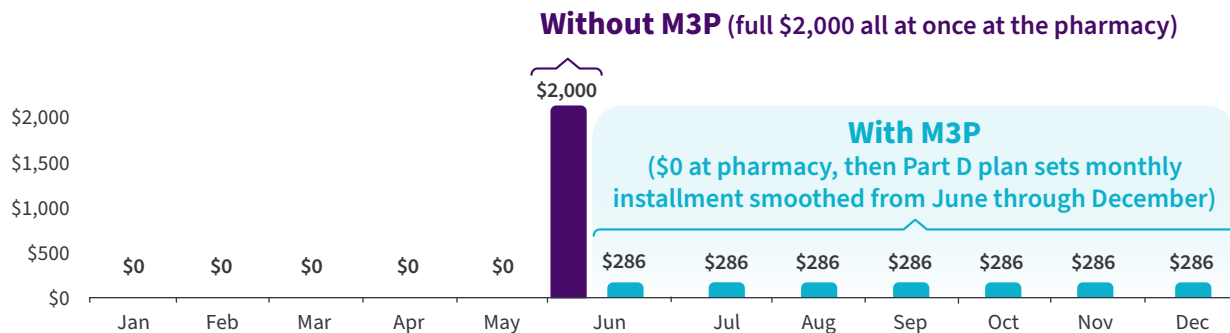
 **forgingbridges**[™]

In 2025, Part D out-of-pocket (OOP) prescription drug costs are capped at \$2000, and enrollees may smooth out drug costs over the course of the plan year instead of paying all at once at the pharmacy^{1,2}

Scenario 1: Monthly OOP costs for an enrollee prescribed Attruby™ in January^{2,3}



Scenario 2: Monthly OOP costs for an enrollee prescribed Attruby in June³



To participate in the M3P, here's how to enroll³:

Enroll in M3P prior to the beginning of the plan year or in any month during the plan year.

- ✓ Call your Part D plan sponsor and verbally attest to participate in the program
- ✓ Complete and submit an electronic participation request form found on your Part D plan's website
- ✓ Whether you are newly enrolled or staying in the same plan, you should have received enrollment information about M3P in your annual plan documents. Alternatively, you may download a participation request form on your Part D plan's website and mail it to the address indicated

Part D enrollees may be eligible for low-income subsidy (LIS), or *Extra Help*, which helps with costs associated with their prescription drug coverage

Extra Help assists eligible enrollees in paying for their prescription drugs (eg, premiums, deductibles, coinsurance) and lowers the cost of their Part D drug coverage. You may qualify if your annual income and resources are below the specified limits for the plan year.⁴

***Extra Help* eligibility requirements (less than 150% of the federal poverty level [FPL])⁴⁻⁸**

Family size*	Annual income limit ^{*,†}	Annual resource limit ^{‡,§}	2025 benefit
Individual	\$22,590	\$17,220	If an individual does not exceed these limits (based on size of the household), they will pay a \$0 deductible and \$0 premiums and no more than \$12.15 for brand-name medications
Couple	\$30,660	\$34,360	
Family of 3[¶]	\$38,730	\$34,360	
Family of 4[¶]	\$46,800	\$34,360	

*For family size of more than 4 and/or for residents of Hawaii or Alaska, see <https://secure.ssa.gov/poms.nsf/lnx/0603001020> for adjusted limits.⁵

†Represents less than 150% of the FPL based on published numbers for 2024. FPL is updated annually by the US Department of Health and Human Services in mid-late January and is used to determine financial eligibility for certain federal programs. The FPL is based on household income and size and is adjusted for inflation each year.^{6,7}

‡Represents resource limits for 2024.^{4,6}

§Resources include the value of things you own, such as real estate (other than your primary residence), bank accounts, stocks, bonds, mutual funds, individual retirement accounts (IRAs), and cash at home or anywhere else.⁴

¶If an individual who applies for the subsidy is married and attests to paying at least one-half support for another relative(s) who lives with them, the relative is considered in the family size when determining applicable poverty level.⁶

If you think you may be eligible for *Extra Help*, here's how to apply:

- ✓ Call **1-800-772-1213**
- ✓ Enroll online by visiting: <https://www.ssa.gov/medicare/part-d-extra-help>
- ✓ Enroll in person by visiting your local Social Security office. Find one near you: <https://secure.ssa.gov/ICON/main.jsp>

Frequently asked questions (FAQs)

Is it mandatory to enroll in M3P?

While it is not mandatory, you are encouraged to participate in the Medicare Prescription Payment Plan (M3P) if you are prescribed a high-cost specialty medication like Attruby™. There is no fee to opt in to the program, and your payment amounts are adjusted monthly if the medications you take change. However, you will not pay more than \$2,000, and M3P allows you to smooth the payments throughout the year instead of paying all at once at the pharmacy.¹⁻³

What happens if I don't fill a prescription within a given month and have not reached my maximum monthly OOP responsibility?

You will only pay for what you use, but it's all based on your \$2,000 maximum out-of-pocket (OOP) cap. For example, if you're on a high-cost specialty medication that costs \$2,000 or more, and fill the prescription in January, you will owe \$167/month for the next 12 months whether or not you refill the prescription the remainder of the year because the \$2,000 maximum OOP cap was already met in January. However, if you chose not to enroll in M3P, you'll be responsible for \$2,000 at the pharmacy the same day you pick up the prescription (in January).³

What happens if I choose to enroll in M3P later in the year?

You may opt in to M3P prior to the beginning of the plan year or in any month during the plan year. If you enroll later in the year, such as in June of the plan year, the costs you have paid without M3P up until that point (if any) are deducted from the \$2,000 cap and then divided by the 7 months remaining in the year. That amount is what you will pay each remaining month, unless your medication costs change, at which point, your subsequent-month payments are recalculated.³

What if I miss one of my monthly payments under M3P?

You will receive a notice from your Part D plan if you miss a payment and will be granted a grace period. However, if you fail to pay the monthly billed amount within the grace period communicated, your participation in M3P will be terminated and you will return to paying the pharmacy directly for all your OOP drug costs. However, while your participation in M3P would be terminated, you would still be responsible for paying the Part D plan any unpaid balance owed toward the cost smoothing option.³

I want to opt in to M3P, but my Part D plan notified me that I may also be eligible for *Extra Help*. Which should I choose?

It depends on each individual's situation. If you don't qualify for *Extra Help*, M3P helps manage these costs by allowing you to smooth them out over the course of the plan year, particularly if you opt in at the beginning of the year or during Open Enrollment.^{2,3}

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References: **1.** Changes to Medicare Part D in 2024 and 2025 under the Inflation Reduction Act and how enrollees will benefit. Kaiser Family Foundation website. Accessed November 12, 2024. <https://www.kff.org/medicare/issue-brief/changes-to-medicare-part-d-in-2024-and-2025-under-the-inflation-reduction-act-and-how-enrollees-will-benefit/> **2.** Fact sheet: what's the Medicare Prescription Payment Plan? Medicare.gov. Accessed October 28, 2024. <https://www.medicare.gov/publications/12211-whats-the-medicare-prescription-payment-plan.pdf> **3.** Medicare Prescription Payment Plan: final part one guidance on select topics, implementation of Section 1860D-2 of the Social Security Act for 2025, and response to relevant comments. Centers for Medicare and Medicaid Services website. Accessed November 12, 2024. <https://www.cms.gov/files/document/medicare-prescription-payment-plan-final-part-one-guidance.pdf> **4.** Social Security Administration. Understanding the *Extra Help* with your Medicare prescription drug plan. Published February 2024. Accessed November 12, 2024. <https://www.ssa.gov/pubs/EN-05-10508.pdf> **5.** Social Security Administration. HI 03001.020 eligibility for Extra Help (prescription drug low-income subsidy). Accessed November 12, 2024. <https://secure.ssa.gov/poms.nsf/lnx/0603001020> **6.** Social Security Administration. HI 03020.055 income limits for subsidy eligibility. Accessed November 12, 2024. <https://secure.ssa.gov/poms.nsf/lnx/0603020055> **7.** Federal Register. Annual update of the HHS poverty guidelines. Published January 17, 2024. Accessed November 12, 2024. <https://www.govinfo.gov/content/pkg/FR-2024-01-17/pdf/2024-00796.pdf> **8.** Announcement of calendar year (CY) 2025 Medicare Advantage (MA) capitation rates and Part C and Part D payment policies. Centers for Medicare and Medicaid Services website. Published April 1, 2024. Accessed November 12, 2024. <https://www.cms.gov/files/document/2025-announcement.pdf>