

Keeping Medicare Affordable in Kansas

Every day, the <u>Medicare Improvements for Patients and Providers Act</u> (MIPPA) helps people with Medicare afford their prescriptions, premiums, and doctor visits.

Who MIPPA Helps in Kansas

48,253 Medicare beneficiaries connected to benefits

148,406 Medicare beneficiaries living at or below \$22,500

(150% of the federal poverty level)



TC's Story

TC was concerned about his upcoming Medicare eligibility and the cost of premiums as he transitioned off Medicaid. A benefits counselor screened him for the Low-Income Subsidy and Medicare Savings Program. Together, they completed both applications and created a Medicare.gov account. The counselor also helped TC enter his prescription information and choose a Part D plan. TC expressed many thanks for the support navigating the process and getting the benefits he earned.

What MIPPA Does



Connects eligible individuals to benefits like the Medicare Savings Program and Medicare Part D Low-Income Subsidy, which help pay for prescription drugs, premiums, and copays



Promotes preventive health services and screenings



Keeps older adults healthy and out of hospitals



Potential Medicare Savings through MIPPA

One of the main components of MIPPA is to connect eligible Medicare Beneficiaries to programs to help them afford prescription drugs through Medicare Part D. Research shows that having prescription drug coverage through Medicare Part D could reduce hospitalization rates by 7%. With an average Medicare hospital stay costing \$14,700,2 connecting individuals to prescription drug coverage could create significant health care savings for both the patient and the government.

How MIPPA is Delivered in Kansas

- 1 State Health Insurance Assistance Program
- 11 Area Agencies on Aging
- 3 Benefits Enrollment Centers

Community Health Center of Southeast Kansas Northeast Kansas Area Agency on Aging Northwest Kansas Area Agency on Aging



How to Access Benefits Online

BenefitsCheckUp is a free tool where individuals can see if they may be eligible for these moneysaving programs.

Learn More



BenefitsCheckUp.org 800-794-6559

For more information, contact:

Natalie.zellner@ncoa.org

Natalie Zellner 571-527-3953 Sophie Morgado 571-527-3953

Sophie.morgado@ncoa.org

Daniel Wilson (571) 527-4031

Daniel.Wilson@ncoa.org

^{*} Data from 10/1/23 to 9/30/24 from SHIP Tracking and Reporting System and BenefitsCheckUp

¹ Afendulis CC, He Y, Zaslavsky AM, Chernew ME. The impact of Medicare Part D on hospitalization rates. Health Serv Res. 2011 Aug;46(4):1022-38. doi: 10.1111/j.1475-6773.2011.01244.x. Epub 2011 Feb 9. PMID: 21306369; PMCID: PMC3165176.

² Moore BJ, Liang L. Medicare Advantage Versus the Traditional Medicare Program: Costs of Inpatient Stays, 2009–2017. 2020 Aug 4. In: Healthcare Cost and Utilization Project (HCUP) Statistical Briefs [Internet]. Rockville (MD): Agency for Healthcare Research and Quality (US); 2006 Feb. Statistical Brief #262.