

Keeping Medicare Affordable in Kentucky

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 Kentucky

76,884 Medicare beneficiaries connected to benefits

342,843 Medicare beneficiaries living at or below \$22,500 a year (150% of the federal poverty level)



Larry's Story

Larry, 67, had gone \$1,200 into debt coping with a cancer diagnosis. Luckily, he reached out to a benefits counselor, who discovered he was eligible for a Medicare Savings Program. The counselor helped him enroll and instructed his debtors to resubmit their claims for coverage. Larry was able to begin radiation treatment without fear of being denied service or coverage. "Y'all saved my life," Larry said. "I couldn't have done this by myself."

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%.¹ 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 Kentucky

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

Legal Aid of the Bluegrass



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 571-527-3953 Natalie.Zellner@ncoa.org 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.

National Council on Aging | @NCOAging | ncoa.org | ©2025 All Rights Reserved

251 18th Street South, Suite 500, Arlington, VA 22202