Getting Medical Care & Prescription Drugs in a Disaster or Emergency Area

If you live in an area that's been declared an emergency or disaster, check for news from both your Medicare plan and the Centers for Medicare & Medicaid Services (CMS) or the Department of Health and Human Services (HHS). Medicare rules for your medical care may change for a short time.

Your area may be affected if:

- **The President has declared it an emergency or disaster.** Visit the Federal Emergency Management Agency at FEMA.gov, or call 1-800-621-FEMA (1-800-621-3362) to find out if your area is affected. TTY users can call 1-800-462-7585.

- **The Secretary of HHS has declared a public health emergency.** Visit ASPR.hhs.gov, or call 1-800-MEDICARE (1-800-633-4227) to find out if your area is affected. TTY users can call 1-877-486-2048.

- **Your state’s governor has declared it an emergency or disaster.** Visit your state government’s website to find out if your area is affected.

- **Your county or city government has declared it an emergency or disaster.** Visit your county or city government’s website to find out if your area is affected. (This situation doesn’t apply to Medicare Advantage Plans.)

**Visiting doctors or other providers**

If you have Original Medicare, you can always go to any doctor or hospital that accepts Medicare. This is true even if you have to leave your city or state.
Visiting doctors or other providers (continued)

If you have a Medicare Advantage Plan or other Medicare health plan, check your plan's website or contact your plan to find out if there are temporary changes to its rules during an emergency or disaster, and whether the rules described below also apply.

During the period that a declared emergency or disaster disrupts access to health care in your area:

- Your health plan must allow you to get care from other health care providers at Medicare-certified facilities, even if they aren't in your plan’s network and your health care need isn’t an emergency. If you have problems finding an out-of-network provider, contact your plan for help.

- Your health plan can’t make you get a referral for out-of-network services.

- If you usually pay more for out-of-network or out-of-area care, your plan must apply the in-network rate. If you go to an out-of-area or out-of-network provider but pay more than the in-network rate for the service, save the receipt and ask your plan to give you a refund for the difference.

Contact your plan as soon as possible to find out if there are other changes in plan rules and when the normal rules will apply.

Getting your prescription drugs

If you have Medicare drug coverage (Part D) and live in an area that’s been declared an emergency or disaster, contact your plan for help:

- Finding another in-network pharmacy nearby.

- Replacing lost or damaged drugs, or replacing a drug you couldn’t take with you when you evacuated.

- Getting drugs at an out-of-network pharmacy when you can’t reasonably get to an in-network pharmacy.

Using in-network pharmacies

- You’ll be able to move most prescriptions from one in-network pharmacy to another, and back to your regular pharmacy when the emergency or disaster ends. If you need help finding the closest in-network pharmacy, contact your plan.

- You’ll need to tell the new pharmacy the name of your regular pharmacy and the drugs you need refilled.

- If you lost your plan membership card and don’t know your plan’s phone number, call 1-800-MEDICARE (1-800-633-4227) to get your plan’s contact information. TTY users can call 1-877-486-2048.
Getting your prescription drugs (continued)

Using out-of-network pharmacies

• Contact your plan for information about its out-of-network rules.

• When you buy your drugs at an out-of-network pharmacy, you’ll probably have to pay full cost for the drugs at the time you fill your prescriptions.

• If you paid full cost for the drugs, save your receipts so you can ask your plan if it will refund you for your costs (Note: You won’t get a refund for the out-of-network cost sharing amount). Ask your plan how to submit your claim.

Getting additional (extended-day) supplies

If you evacuated because of an emergency or disaster and you think you won’t be able to return home for a long time, you may want to get a 60- to 90-day supply of your prescription drugs. Ask your plan if it offers 60–90 day supplies and which pharmacies you can use to get them.

Signing up for Original Medicare

You may have a Special Enrollment Period (SEP) to sign up for Part B and/or premium-paid Part A if you live in an area for which an emergency or disaster has been declared by a federal, state, or local government, and that disaster or emergency kept you from signing up during another qualifying enrollment period. Note: If you’re eligible for premium-free Part A but didn’t automatically get it (for example, because you’re still working and not yet getting Social Security benefits), you can sign up for it anytime after you’re first eligible for Medicare.

This SEP begins on whichever date is earlier, if these 2 dates are different: the date an emergency or disaster is declared, or the start date mentioned in the declaration. The SEP ends 6 months after the emergency or disaster is declared over. You may also be able to use this SEP if the disaster or emergency is declared where your authorized representative, legal guardian, or person who makes health decisions on your behalf lives.

Your Original Medicare coverage begins the first day of the month after the month you sign up.
Joining a Medicare drug plan or Medicare Advantage Plan

You may have a Special Enrollment Period (SEP) to join, switch, or drop your Medicare drug plan or Medicare Advantage Plan if you live in an area affected by an emergency or disaster, and that prevented you from making enrollment changes during another qualifying enrollment period. The SEP starts the date an emergency or disaster is declared, on the start date mentioned in the declaration, or on the incident period start date mentioned by the Federal Emergency Management Agency (FEMA) at FEMA.gov/disaster, whichever comes first. The SEP ends the last day of the month that’s 2 months after the emergency or disaster is declared over. For example, if an emergency or disaster is declared over as of March 19, then the SEP ends 2 months later, on May 31.

To find out if you live in an area affected by an emergency or disaster, visit the FEMA website at FEMA.gov/disaster. This website shows which areas qualify for individual and public assistance because of an emergency or disaster.

To make enrollment changes, call the plan or 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048. To qualify for this Special Enrollment Period, try to have paperwork that shows that you live in an affected area (like a driver’s license, utility bills, etc.). If you can’t show proof, the plan must accept your word that you live in an affected area.
**Paying your premiums when Medicare bills you directly**

You can mail in your payment if you didn't get your Medicare Premium Bill (CMS-500), but Medicare bills you directly for one or more of these:

- Medicare Part A (Hospital Insurance)
- Medicare Part B (Medical Insurance)
- Part D (Medicare drug coverage) Income-Related Monthly Adjustment Amounts (Part D-IRMAA) premiums

Also, you can mail in your payment if Medicare bills you directly for the Part B immunosuppressive drug benefit, but you didn't get your Immunosuppressive Drug Medicare Premium Bill (CMS-500ID).

Mail your payment(s) to:

Centers for Medicare & Medicaid Services  
Medicare Premium Collection Center  
P.O. Box 790355  
St. Louis, MO 63179-0355

Make your check payable to “CMS Medicare Insurance,” and write your full name and Medicare Number on your check or money order.

If you have internet access, you can pay your premiums through your secure Medicare.gov account using a credit or debit card, or from a checking or savings account. Log into (or create) your Medicare account at Medicare.gov, then select “Pay my Premium.” This is the fastest way to pay your premiums.

If your bank offers an online bill payment service, you can use this option to pay your Medicare premiums. Contact your bank to set up this service.

Make sure to give your bank this information:

- **Your Medicare Number:** Enter the numbers and letters with NO DASHES, spaces, or extra characters. (The letters B, I, L, O, S, and Z aren’t used in Medicare Numbers.)

- **Payee name:** “CMS Medicare Insurance.”

- **Payee address:** Use the mailing address above.

If you have questions about how much you owe, contact 1-800-MEDICARE (1-800-633-4227) for help. TTY users can call 1-877-486-2048.
Paying the premium for your Medicare health plan or Medicare drug plan

If you have a Medicare Advantage Plan, other Medicare health plan, or Medicare drug plan, and you pay your plan’s premium directly to the plan each month, you’re still responsible for paying your premium on time each month.

To avoid being disenrolled for not paying your premium on time, contact your plan to find out how to pay your premiums.

If your plan disenrolls you for not paying your monthly premiums and you didn’t pay on time because of the emergency or disaster, you can ask your plan about getting your coverage back.

Getting chemotherapy or other cancer treatments

If you have Original Medicare, the National Cancer Institute (NCI) can help you find other cancer care providers. Call 1-800-4 CANCER (1-800-422-6237) between 9 a.m.–4:30 p.m., Monday through Friday. TTY users can call 1-800-332-8615.

If you’re in a Medicare Advantage Plan or other Medicare health plan, contact your plan to find out what rules change during an emergency or disaster.

Getting dialysis treatments

If you have Original Medicare, your End-Stage Renal Disease (ESRD) Network can help you:

- Get your dialysis treatments
- Find out who to contact for your supplies, drugs, transportation to dialysis services, and emergency financial assistance if you need it

Call 1-800-MEDICARE (1-800-633-4227) to get your ESRD Network’s contact information. TTY users can call 1-877-486-2048.

If you’re in a Medicare Advantage Plan or other Medicare health plan and have ESRD, contact your plan to find out what rules change during an emergency or disaster. Your Medicare Advantage Plan must cover dialysis services at the in-network rate, even if the plan doesn’t have a contract with an ESRD facility in the area where you’re staying temporarily. Contact your plan or your ESRD Network for help finding a dialysis facility outside the Medicare Advantage Plan’s service area.
Replacing a lost Medicare card or Medicare plan membership card

If you have Original Medicare, you can replace a lost or damaged Medicare card by calling 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048. You can also visit Medicare.gov to log into (or create) your secure Medicare account to print an official copy of your Medicare card.

Also, contact Social Security if you temporarily or permanently change your address. Visit Social Security at SSA.gov or by calling 1-800-772-1213. TTY users can call 1-800-325-0778.

If you’re in a Medicare Advantage Plan, other Medicare health plan, or a Medicare drug plan, contact your plan to replace a lost or damaged membership card. You can get your plan’s contact information by calling 1-800-MEDICARE.

Replacing lost or damaged durable medical equipment or supplies that Medicare paid for

If you have Original Medicare and it already paid for durable medical equipment (like a wheelchair or walker) or supplies (like diabetic supplies) that were damaged or lost due to an emergency or disaster:

- In most cases, Medicare will cover the cost to repair or replace your equipment or supplies, but only when you get them from a supplier that Medicare approves.
- If your equipment is damaged and needs to be repaired, generally Medicare will cover the cost of rentals for items like wheelchairs.

Call 1-800-MEDICARE to get more information about how to replace your equipment or supplies, or to get help finding a Medicare-approved supplier.

If you’re in a Medicare Advantage Plan or other Medicare health plan, contact your plan directly to find out how it replaces durable medical equipment or supplies damaged or lost in an emergency or disaster.
For more information

- If you have Original Medicare and want more information about getting care from doctors or other providers during an emergency or disaster, call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

- If you’re in a Medicare Advantage Plan or other Medicare health plan, contact your plan to get more information about getting care from doctors or other providers during an emergency or disaster. You can get your plan’s contact information by calling the customer service number found on your plan membership card. You can also call 1-800-MEDICARE.

- If you have a Medicare drug plan and want more information on getting prescription drugs during an emergency or disaster, contact your plan, or call 1-800-MEDICARE.

- If you want free, personalized health insurance counseling, call your State Health Insurance Assistance Program (SHIP). Visit shiphelp.org, or call 1-800-MEDICARE to get the phone number for your local SHIP.

You have the right to get Medicare information in an accessible format, like large print, braille, or audio. You also have the right to file a complaint if you feel you’ve been discriminated against. Visit Medicare.gov/about-us/accessibility-nondiscrimination-notice, or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

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