

Eligibility Requirements

To be eligible for this program, you must:

- Live in the state of Indiana
- Have a HIV-positive diagnosis
- Have an income level below 300% of the Federal Poverty Level (FPL)
- Be enrolled in a Medicare prescription plan (i.e., Medicare Part C or D)
- Work with a case manager at a Ryan White-funded care site to enroll and maintain enrollment in this program

Talk with your case manager to see if you are eligible.

Coverage Issues

If you receive a bill or your pharmacy asks you to pay for your prescriptions, contact your case manager right away. They can work with the HIV Services Program to review the situation and help resolve any issues.

Medicare Drug Assistance Program

You may be eligible for assistance with your Medicare prescription out-of-pocket costs, helping you access medications you need for long-term health and well-being.



Division of
**HIV/STI and
Viral Hepatitis**



[in.gov/health](https://www.in.gov/health)

Medicare Drug Assistance Program





Overview

The Medicare Drug Assistance Program, also referred to as MDAP, provides cost-sharing support for individuals enrolled in a Medicare prescription plan (i.e., Medicare part C or D).

How does the program work?

You'll be enrolled in a secondary insurance plan administered by Unified Group. This plan covers 100% of your out-of-pocket costs—including copayments, coinsurance, and deductibles—for medications. However, it only applies to medications that are already covered by your Medicare prescription plan.

How many cards will I receive?

You should already have your Medicare prescription plan card. Once enrolled in the program, you will also receive a card from Unified Group. Below are examples of your Medicare prescription plan card and the Unified Group card that you will receive. Be sure to give both cards to your pharmacist when filling your prescriptions to ensure proper billing.

Medicare Prescription Plan Card (Primary Insurance)

Capital	
MEMBER NAME	Preauthorization
ID # YWW80000000000	Group # 00123456 Plan 361
	Office Visit \$X
	Specialist Visit \$XX
	Urgent Care \$XX
	Emergency Room \$XXX
RxBIN: 610455	RxPCN: CAPDG2
RxGrp: H3923	ISSUER(80840) H3923-XXX
<small>MEDICARE PART D</small> PPO Capital Blue Cross Dental <small>Capital Blue Cross Vision</small>	<small>MedicareRx</small>

Unified Group (Secondary Insurance)

<small>Unified Group</small> <small>Member ID, Eligibility and Benefits Inquiry: 800.291.9837</small> <small>www.unifiedgroup.com</small>	
Member	Pharmacy Plan
Plan: ISDH Plan Name	RxBIN: 123456
Group #: 12345	RxPCN: INP054
Client: Client Name	RxGRF: 123456
Member ID: 123456789123	ProCare Rx <small>www.procarerx.com</small> <small>Pharmacy 800.213.5640</small>

When will coverage be active?

This program will be active the Friday of the week the application is processed by the HIV Services Program (Monday through Thursday). If processed on a Friday, it will become active the following Friday.

Tips

- To prevent any coverage interruptions, be sure to renew your program enrollment with your case manager every six months. You will need to renew during your birth month and again six months later.
- Let your healthcare providers and pharmacists know that you have two insurance plans. Your Medicare prescription plan is your primary coverage and should be billed first. Unified Group is your secondary insurance, covering out-of-pocket costs, and should be billed after your primary plan.
- Always bring both your primary and secondary insurance cards to all doctor visits, lab appointments, and pharmacy visits. Providers require both cards to ensure accurate billing for each insurance plan.

Learn more about
the HIV Services Program:

