



October 2018

Dear Former DPAP Member: We have sent you this letter because you received help from the Delaware Prescription Assistance Program (DPAP) in the past.

The Division of Medicaid and Medical Assistance (DMMA) is pleased to tell you that DPAP is returning. DPAP will start again on January 1, 2019. We have sent you an application for DPAP and a postage paid return envelope if you want to apply for the returning program.

To be eligible for DPAP you must meet the following requirements:

- Be a Delaware resident;
- Be 65 years of age or older or under 65 years of age and receiving Social Security Disability benefits;
- Cannot have full Medicaid coverage that includes drugs;
- Cannot have prescription insurance except for Medicare Part D; and
- For 2018, you must receive less than \$24,276 per year or less than \$2,023 per month.

If you would like to reapply for DPAP, there are some steps you must take. You must fill out, sign and return the DPAP application. The application has to be mailed by Monday December 3, 2018. **You must send us some other information.**

The other information we need from you includes:

- Proof of your income for 2018 (Social Security Award Letter, etc.);
- Proof of your Prescription Drug Plan (PDP)/Medicare Part D coverage; and
- *A letter from Social Security showing proof of your approval or denial for Low Income Subsidy (LIS)/"Extra Help" for this year.
 - If you need an LIS/Extra Help application call Social Security at 800-772-1213.

*If you do not have your LIS letter yet, you should still send us your application and the other information we need.

You may enroll into the PDP of your choice. You should check to make sure that your regular medications are covered by the plan you choose. This is very important!

- ✓ You should check the cost of the deductible for each plan. A higher deductible means that more of your DPAP benefit will be used to cover that cost.
- ✓ You should check the cost of the plan premium. A higher premium means that more of your annual DPAP benefit will be used to cover that cost.

If you need help picking a plan please call Medicare at 800-633-4227.

If you have any questions about this letter, there is a place you can call. We can answer questions about your application or eligibility. Please call, 1-800-996-9969, and select option 0 to speak with someone. Representatives are available Monday through Friday 8:00 AM until 4:30 PM.