

**Dear Retiree,**

## **Introducing the Life-Sustaining Prescription Drug Assistance Program**

The purpose of this letter is to provide more details about the State of Maryland's Life-Sustaining Prescription Drug Assistance Program. This program has been specifically designed to reimburse eligible participants for out-of-pocket costs for a life-sustaining prescription drug that is covered by the State's in-force prescription drug benefit plan, but is not covered by the participant's Medicare Part D plan. This program aims to ensure that essential medications are accessible to those who need them most.

## **What is a Life-Sustaining Prescription Drug?**

Life-sustaining prescription drugs are all FDA-approved drugs that fall in one of six protected classes recognized under Medicare. These drugs are considered necessary to ensure that Medicare beneficiaries who are reliant upon the drugs would not be substantially discouraged from enrolling in certain Part D plans, as well as to mitigate the risks and complications associated with an interruption of therapy for the vulnerable Medicare population.<sup>1</sup>

### **The six Medicare-designated protected classes are:**

- **Anticonvulsants:** Used primarily for the treatment of epilepsy and the prevention of seizures.
- **Antidepressants:** Used to treat depressive disorders and occasionally other conditions like anxiety disorders.
- **Antineoplastics:** Used for the treatment of cancer.
- **Antipsychotics:** Used to manage psychosis, particularly in schizophrenia and bipolar disorder.
- **Antiretrovirals:** Used to manage HIV/AIDS.
- **Immunosuppressants:** Used to reduce the body's immune response, especially in organ transplantation and autoimmune diseases.

You can find the **2025 Medicare "Protected Classes" Drug List** on [dbm.maryland.gov/benefits/Pages/Retirees.aspx](https://dbm.maryland.gov/benefits/Pages/Retirees.aspx) and [my.viabenefits.com/maryland](https://my.viabenefits.com/maryland).

<sup>1</sup> Centers for Medicare & Medicaid Services, Medicare Prescription Drug Benefit Manual, Ch. 6 – Part D Drugs and Formulary Requirements, sect. 30.2.5, available at <https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/Downloads/Part-D-Benefits-Manual-Chapter-6.pdf>.

# How does the program work?

The Life-Sustaining Prescription Drug Assistance Program is a **reimbursement program**. That means you must pay for the drug first and then request reimbursement from the State. An independent third-party will review your reimbursement request, along with supporting documents, to determine whether the request is medically appropriate and meets the other defined requirements for reimbursement. If the request is approved, you will be reimbursed for your out-of-pocket costs associated with the purchase of the life-sustaining prescription drug.

In order for a participant to request reimbursement, 1) they must meet certain **eligibility requirements**, and 2) they must have first attempted a **formulary exception** from their Medicare Part D plan.

Eligibility Requirement	Formulary Exception Process
<ul style="list-style-type: none"><li>• The retiree must have been hired by the State on or before June 30, 2011<sup>1</sup></li><li>• The participant must be enrolled in the State's group medical plan and be enrolled in an individual Part D plan through Via Benefits</li><li>• The drug must be covered by the State's in-force prescription drug benefit in the group health insurance plan</li><li>• The drug must have been denied twice by the prescription drug benefit in the Part D plan in which the participant is enrolled</li></ul>	<p>The participant must have had their provider request a formulary exception and have received a denial through the first two levels of the Medicare drug plan appeals process, which are:</p> <ol style="list-style-type: none"><li>(1) an internal appeal for redetermination by your Part D carrier (first appeal), and if unsuccessful,</li><li>(2) reconsideration (second appeal) by an independent review entity.</li></ol> <p>Visit <a href="https://www.medicare.gov">medicare.gov</a> for more details around the Medicare Part D appeals process.</p>

If you meet the eligibility requirements above and your formulary exception requests have been denied under Medicare's first two levels of appeals, you can request reimbursement for your out-of-pocket costs through Via Benefits. Follow these steps to request reimbursement:

- 1.** Call Via Benefits at **1-855-556-4419** to request that a life-sustaining prescription drug assistance program reimbursement request form be mailed to you (the form is only available by calling Via Benefits).
- 2.** Gather required supporting documentation, including a copy of your prescription drug receipt showing purchase details, along with a copy of the denials for the first two levels of Medicare appeals.
- 3.** Complete the reimbursement request form, including the following information: 1) date of purchase, 2) patient name, 3) cost of medication, 4) name of your prescribing doctor. You will also need to complete a HIPAA Authorization Form which will be included with the form mailed to you by Via Benefits.
- 4.** Send the completed form, along with the necessary documentation, to Via Benefits at the address provided on the form.

**Note:** If you would like to verify that your medication will qualify for reimbursement prior to purchasing the drug you may do so. **However, if approved, you will need to resubmit the reimbursement request form, along with the supporting documentation including proof of purchase, in order to complete the reimbursement request.**

<sup>1</sup> Defined under §§ Md. Code, State Pers. & Pens. § 2-509.1

**Here is a helpful checklist to consider before proceeding with your reimbursement request:**

- Was I (or was my spouse) hired by the State on or before June 30, 2011?
- Am I enrolled in the State’s group medical plan?
- Am I enrolled in an individual Part D plan through Via Benefits?
- Is the life-sustaining prescription drug I’m taking covered by the State’s in-force prescription drug benefit in the group health insurance plan and included in one of the six Medicare-designated “protected classes”? (You can check your medication against the **2025 Medicare “Protected Classes” Drug List** on [dbm.maryland.gov/benefits/Pages/Retirees.aspx](http://dbm.maryland.gov/benefits/Pages/Retirees.aspx) and [my.viabenefits.com/maryland](http://my.viabenefits.com/maryland).)
- Is the life-sustaining prescription drug I’m taking not included on the formulary of my Medicare Part D Prescription Drug plan?
- Has the formulary exception request submitted by my provider been denied twice by Medicare’s first two levels of appeals?

If you answered yes to **all the questions** above, you may be eligible to receive reimbursement for your out-of-pocket costs associated with the purchase of your life-sustaining drugs. Follow the steps on page 2 to begin the reimbursement process.

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**Questions?**

For any inquiries or further assistance regarding the Life-Sustaining Prescription Drug Assistance Program, participants can contact Via Benefits directly at **1-855-556-4419** or by visiting the website at [my.viabenefits.com/maryland](http://my.viabenefits.com/maryland).

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We are committed to supporting our retirees and ensuring you have access to the medications you need. Thank you for your attention to this important program.

Sincerely,



Christina Kuminski  
Director  
Employee Benefits Division  
Maryland Department of  
Budget and Management



Scan this QR code with your mobile device to watch a video about the Life-Sustaining Prescription Drug Program.

*This document contains selected highlights of the State of Maryland benefits plans. If any statement herein, or any other communication, conflicts with the applicable plan documents, the plan documents will govern. The State of Maryland retains the right to amend, modify or terminate its benefits plans in any respect and at any time for any reason.*

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