

ADA Offers Q&A Primer on Opting In or Out of Medicare

In response to member questions, the ADA Practice Institute has put together the following Q&A to help clarify which practitioners should opt in or out of Medicare.

Dentists who treat Medicare patients must either enroll in the program or opt out in order to prescribe medication to their qualifying patients with Part D drug plans.

The requests to the ADA for more information came in response to a June 16 ADA News article alerting dentists to the program requirements.

Q: I read the June 16 article in the ADA News that I have to opt in or out of Medicare or else Medicare won't pay for the prescriptions I write for my patients who have Medicare Part D prescription drug coverage. How do I go about this?

A: In order for Medicare to pay for prescriptions under Medicare Part D, a dentist must do one of the following:

- Enroll as a Medicare provider
- Opt-out of the Medicare program.
- Enroll as an ordering/referring provider.

Q: If I opt out of Medicare, will my Medicare eligible patients still receive their Part D prescription drug coverage?

A: Yes, as confusing as this may be, once a dentist is in the Medicare system either by enrolling in or opting out, patients are eligible to receive their Part D prescription drug coverage.

Q: If I already enrolled as a Medicare ordering/referring provider do I need to take more action?

A: No. Since you are now in the system, your Medicare patients will be eligible for Part D prescription drug coverage.

Q: What happens if I choose not to do any of the above?

A: If you choose to do none of the above, your Medicare eligible patients will have their prescription drug coverage denied for the prescriptions you write.

Q: What if I do not see any Medicare patients or do not prescribe drugs for Medicare patients?

A: If you do not see any Medicare patients or do not prescribe drugs for Medicare patients, then you do not need to do anything.

Q: When does this new regulation take effect?

A: This new regulation takes effect June 1, 2015.



Q: This seems like it will create an unnecessary burden on dentists. What has the ADA done to help its members?

A: The ADA has voiced its opposition to this requirement twice in letters to the Centers for Medicare & Medicaid Services and will continue to advocate on behalf of our member dentists.

Q: When does a private contract need to be signed?

A: When a patient wants to receive a Medicare-covered service and understands that the dentist has opted out of the program and is willing to pay out of pocket, a private contract should be signed. A private contract is not necessary for the patient to be eligible to receive Part D prescription drug reimbursement prescribed by a dentist who has opted out of the program.