

Medicare's Limited Income NET Program

administered by Humana®

Tip sheet for pharmacy providers

Medicare's Limited Income Newly Eligible Transition (NET) program is designed to eliminate gaps in coverage for low-income individuals transitioning to Medicare Part D drug coverage. Enrollment in the Limited Income NET Program is temporary while Medicare enrolls these individuals in a standard Medicare Part D plan for the future.

Point-of-sale prescription drug coverage: The Limited Income NET Program ensures individuals with Medicare's low-income subsidy (LIS), or "Extra Help," who are not yet enrolled in a Part D prescription drug plan are still able to obtain immediate prescription drug coverage.

Retroactive prescription drug coverage: The Limited Income NET Program provides retroactive coverage for new dual eligibles (those individuals who are eligible for both Medicare and Medicaid or Medicare and Supplemental Security Income). Medicare automatically enrolls these individuals into the Limited Income NET Program for eligible periods with an effective date retroactive to the start of their full-benefit, dual-eligible status.

Humana administers the Limited Income NET Program on behalf of the Centers for Medicare & Medicaid Services (CMS).

Two ways to submit a claim

1. Use the 4Rx data in the patient's enrollment confirmation letter, along with the **full** Medicare claim number (including the alphabetical character) on the red, white and blue Medicare card.
2. If the patient does not have a confirmation letter, use the **full** Medicare claim number (including the alphabetical character) and the 4Rx data below:
 - BIN: 015599
 - PCN: 05440000
 - Cardholder ID: Medicare claim number (also called Medicare Beneficiary Identifier [MBI])
 - Group ID: may be left blank
 - Patient ID (optional): Medicaid ID or Social Security number

Before processing Limited Income NET claims, pharmacy providers need to verify:

- The beneficiary's Medicare eligibility
- That the beneficiary has no active Part D plan enrollment
- The beneficiary's Medicaid or LIS eligibility

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Note: If the beneficiary has both Medicare and Medicaid, please transmit **both** the Medicare and Medicaid numbers.

Minimal claims reversals

Claims reversals are minimal under the Limited Income NET Program. We require front-end edits to ensure claims are rejected immediately for individuals who are not Medicare-eligible or who have an existing Part D plan enrollment. We recover funds from Medicare beneficiaries who use the Limited Income NET process and are ultimately determined ineligible for the program. Finally, Humana has a temporary Medicare Part D Contract ID (X0001) to use for enrolling individuals in this program. The individuals are then automatically assigned by CMS to their permanent Medicare Part D contract within two months. Pharmacies do experience reversals for duplicate claims.

Eligibility determinations for claims older than 30 days

If you need to submit a claim greater than 30 days old for an individual, you should call Humana at 1-800-783-1307 for an immediate eligibility determination. You also can submit the request using the fax form found at Humana.com/LINET. If a claim is submitted within 30 days of the date of service, it can be submitted online and processed without intervention.

Individuals later determined ineligible

Humana will perform subsequent validation of eligibility for individuals receiving services under the Limited Income NET program. If state systems do not confirm Medicaid eligibility in the given service month, and LIS eligibility cannot be confirmed through CMS, Humana will request proof of Medicaid/LIS eligibility from the individual. If no documentation is provided within 60 days, **Humana will seek reimbursement from the individual for the costs of the claims.**

What is the process if the beneficiary is out of medication?

If the beneficiary has three days or less of medication left (or a new prescription), he/she might qualify for an immediate need. The pharmacist will need to complete the fax form request (located at www.humana.com/pharmacy/pharmacists/linet under the heading "Additional forms and resources for pharmacy providers") and fax it to **1-502-580-6644**. Once the request has been received and validated, the pharmacy will receive a call back within 24 hours to process the immediate need request.

What drugs are covered under Medicare's Limited Income NET program?

Medicare's Limited Income NET Program has an open formulary. However, drug categories excluded from Medicare Part D coverage by law or drugs used for an unapproved use are not

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payable under this program.

Problems?

If you are unable to process a Limited Income NET claim, contact our help desk at 1-800-783-1307, then select option 1. Assistance is available Monday through Friday from 8 a.m. to 7 p.m. Eastern time. Our automated phone system may answer your call outside of these hours and on some holidays. Please leave a message with your name and telephone number when prompted. We will return your call by the end of the next business day.

More information

For more information about the Limited Income NET process, please visit [Humana.com/LINET](https://www.humana.com/LINET).