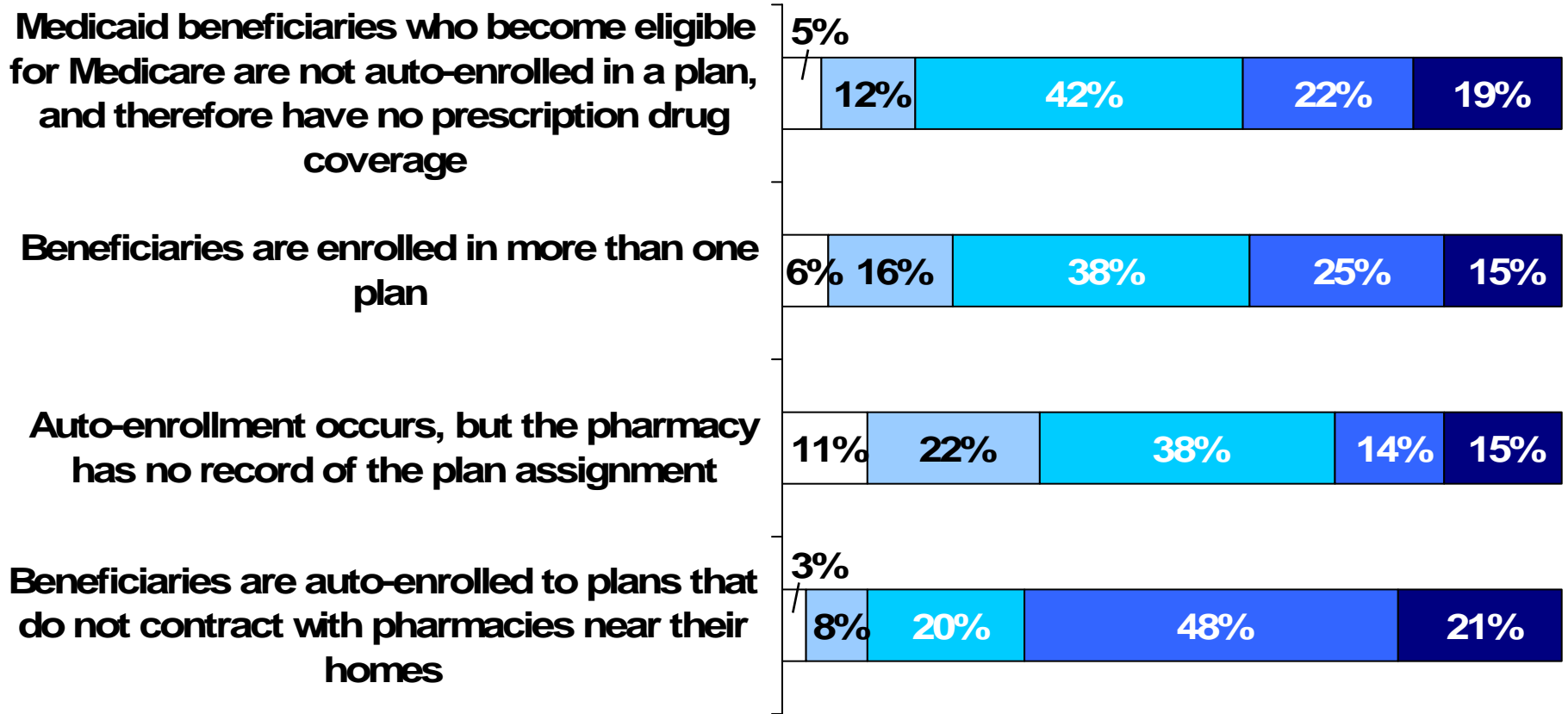


# Figure 1. Issues Related to Auto-Enrollment

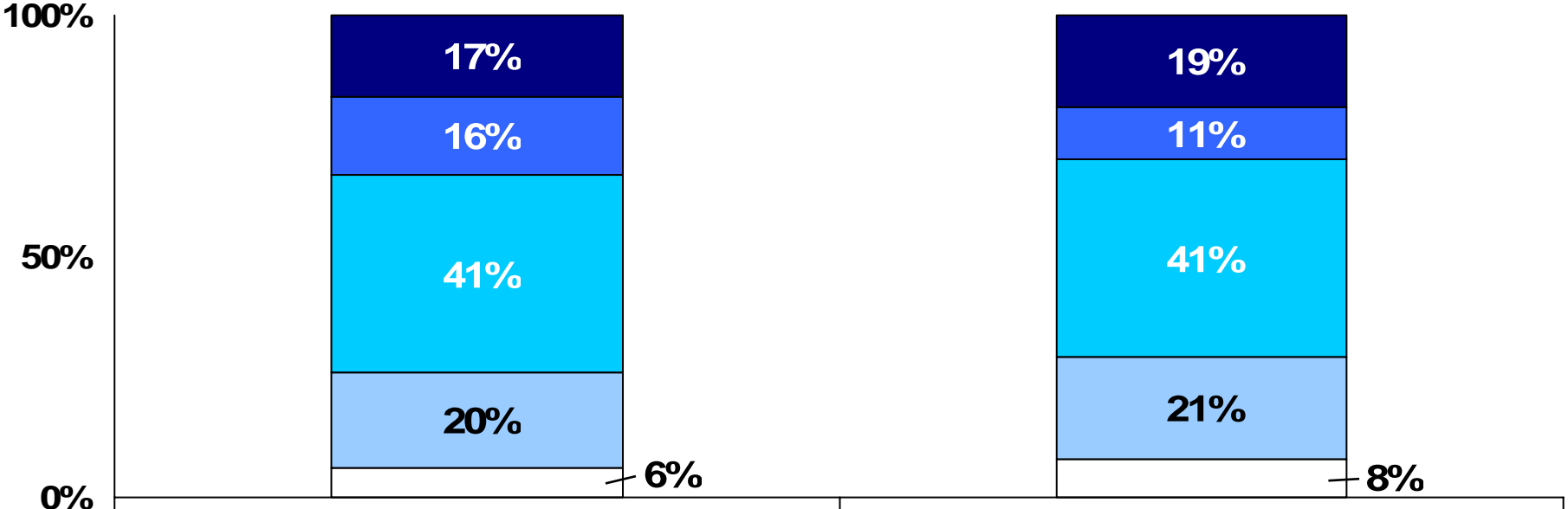
(Percent of Respondents Reporting How Often Issues Occur)

Very often   
  Often   
  Sometimes   
  Rarely or never   
  Unsure or don't know



# Figure 2. Incorrect Charges Associated with Auto-Enrollment (Percent of Respondents Reporting How Often Issues Occur)

Very often
  Often
  Sometimes
  Rarely or never
  Unsure or don't know



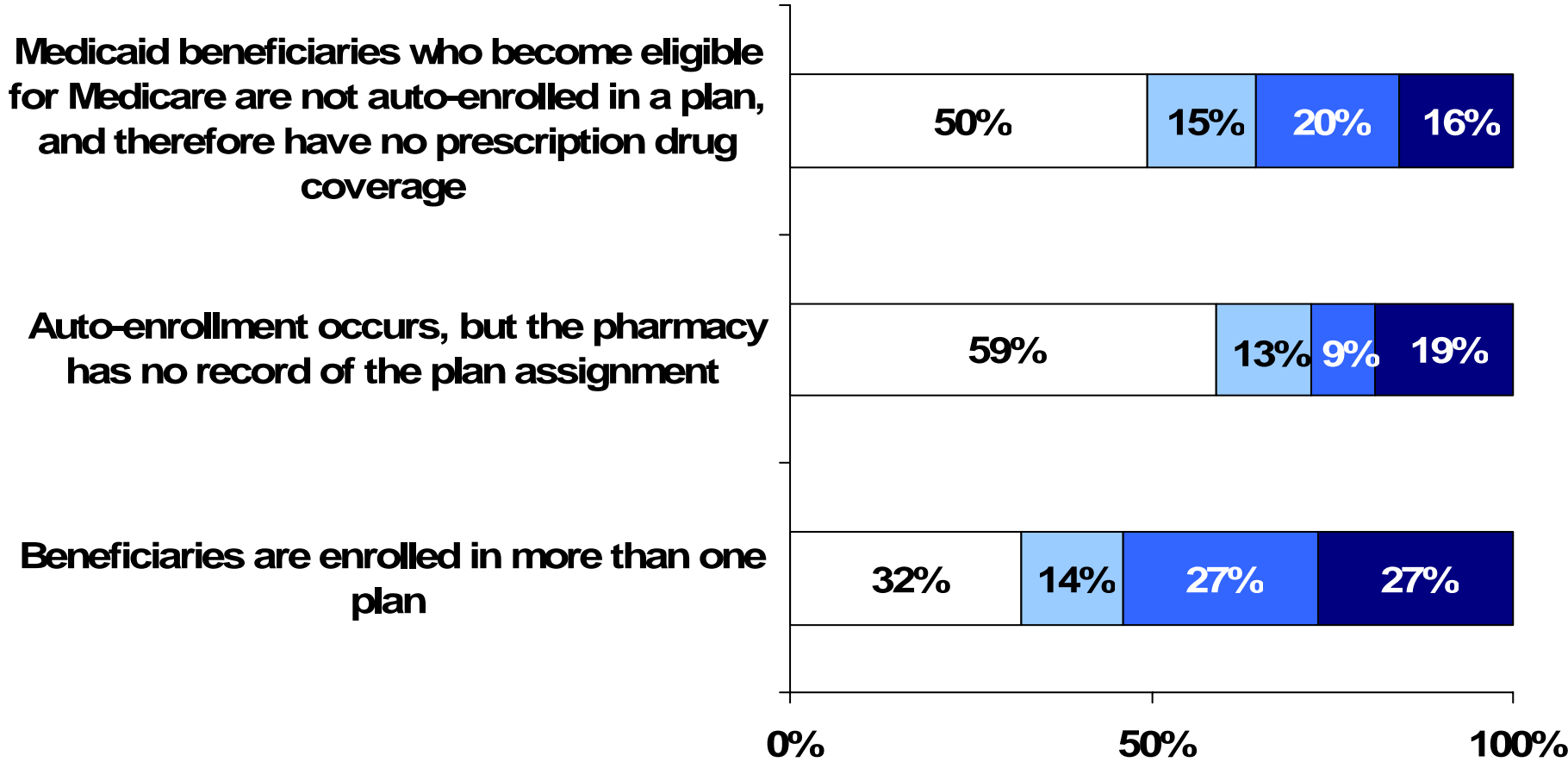
**Beneficiaries who receive the LIS are billed for premium payments (although they are not required to pay premiums).**

**Beneficiaries who receive the LIS are told at the pharmacy that they must pay amounts for drugs that exceed the minimal copayment they should be charged.**

N=505.  
Source: Georgetown University Health Policy Institute Survey, *Part D and Vulnerable Medicare Beneficiaries*, Nov. 2006.

**Figure 3. Resolving Issues Related to Auto-Enrollment**  
 (Percent of Respondents Reporting on Average Time Required to Resolve Issues)

< 2 weeks    
  2 weeks to 1 month    
  1 month or more    
  Frequently unresolved

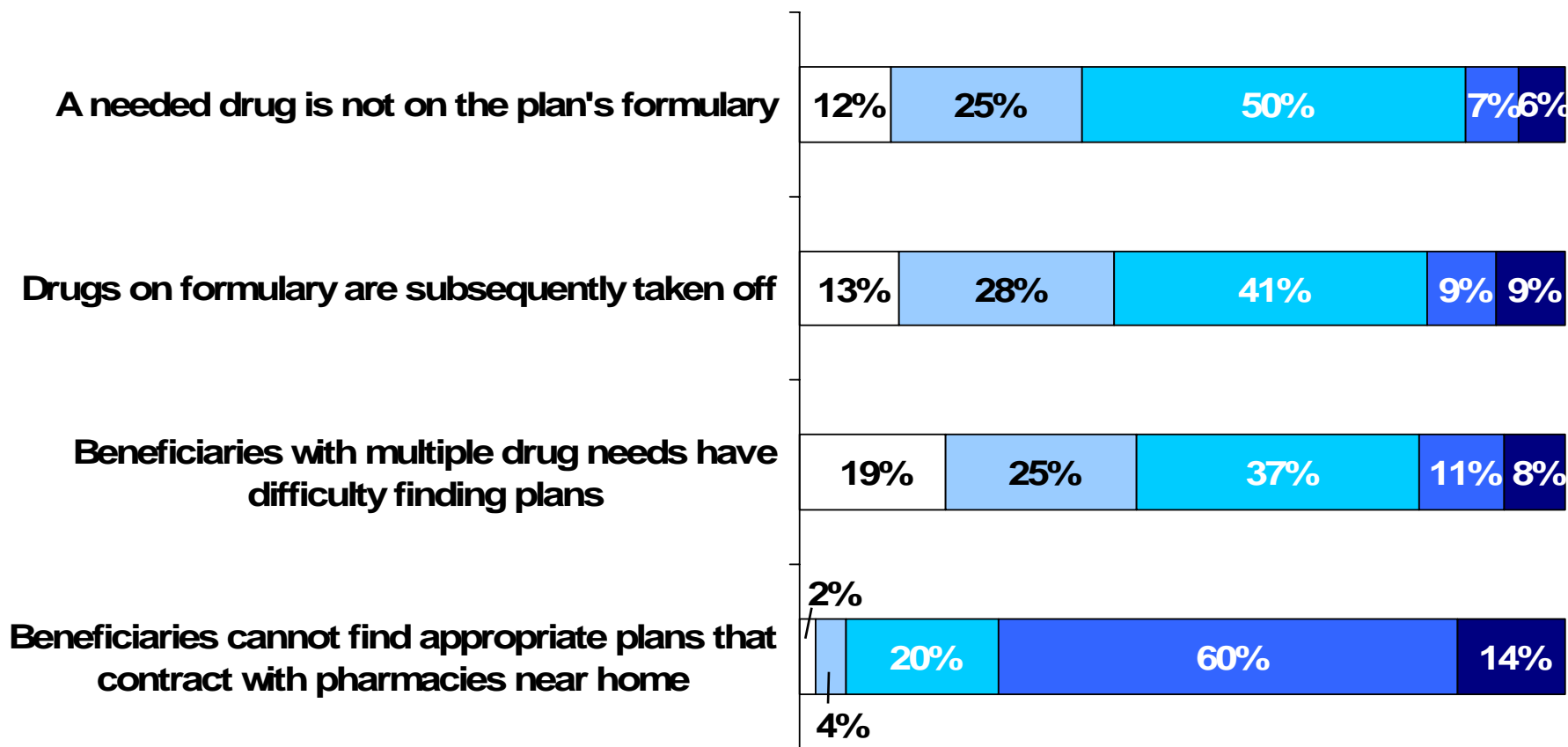


N=Number of respondents who report experience attempting to resolve these issues—279, 301, 273—respectively.  
 Source: Georgetown University Health Policy Institute Survey, *Part D and Vulnerable Medicare Beneficiaries*, Nov. 2006.

# Figure 4. Difficulties Related to Obtaining Needed Drugs

(Percent of Respondents Reporting How Often Issues Occur)

Very often   
  Often   
  Sometimes   
  Rarely or never   
  Unsure or don't know



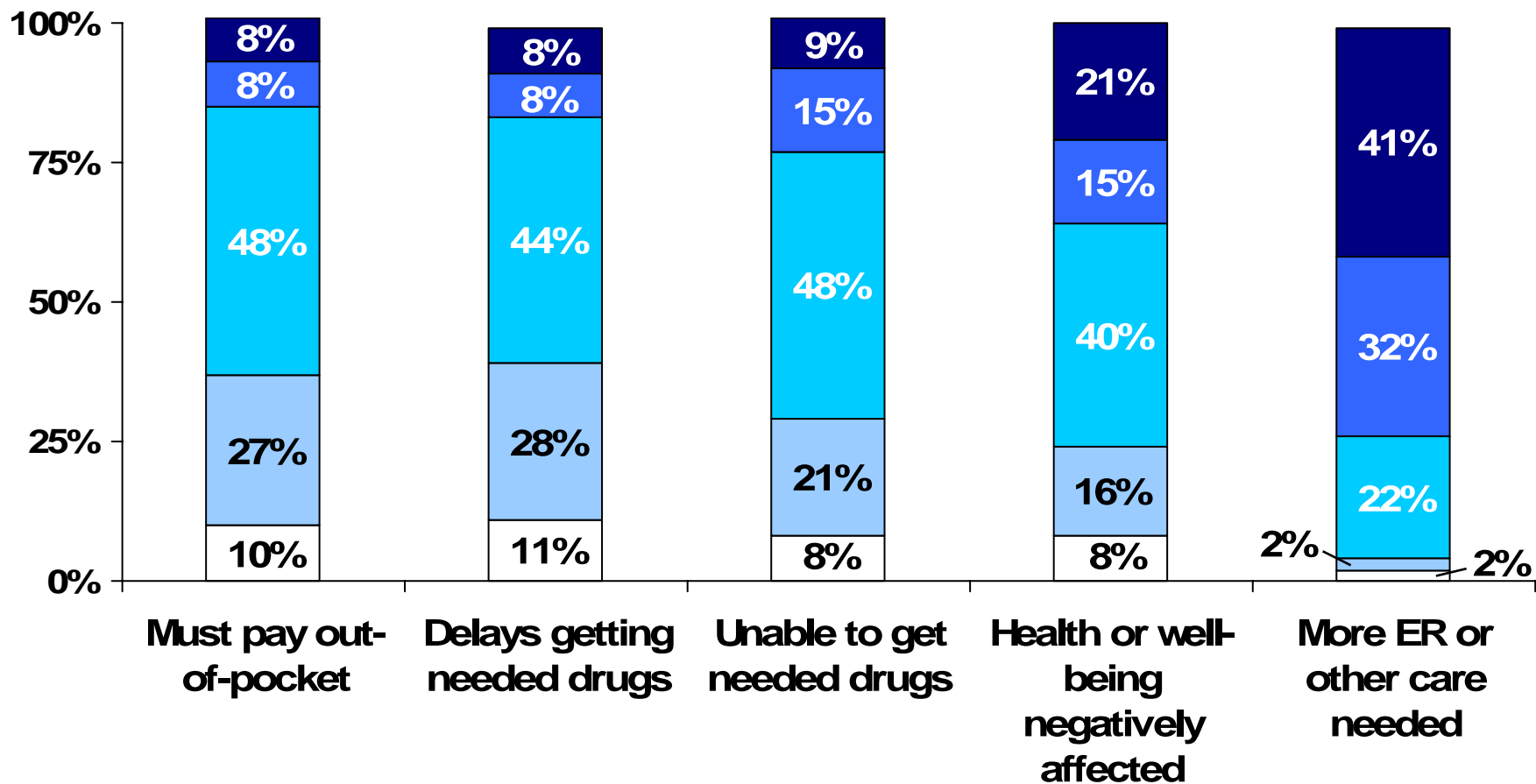
N=562.

Source: Georgetown University Health Policy Institute Survey, *Part D and Vulnerable Medicare Beneficiaries*, Nov. 2006.

# Figure 5. Consequences of Difficulties Related to Procedures to Obtain Drugs

(Percent of Respondents Reporting How Often Consequences Occur)

□ Very often   
 ■ Often   
 ■ Sometimes   
 ■ Rarely or never   
 ■ Unsure or don't know

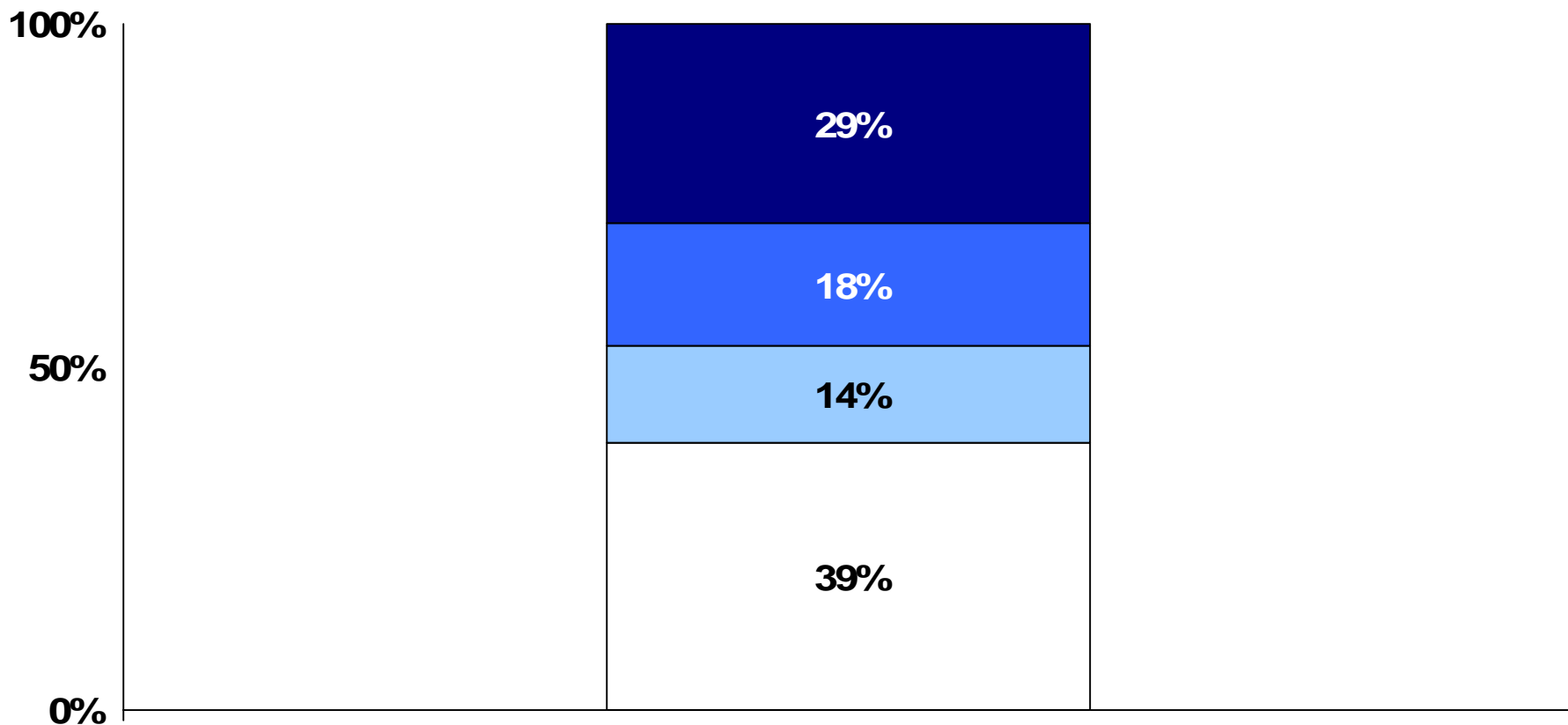


N=537.

Source: Georgetown University Health Policy Institute Survey, *Part D and Vulnerable Medicare Beneficiaries*, Nov. 2006.

# Figure 6. Average Time Required for Resolving Difficulties Related to Utilization Management Rules (Percent of Respondents Reporting on Average Time to Resolve Issues)

□ < 2 weeks    □ 2 weeks to 1 month    □ 1 month or more    ■ Frequently unresolved

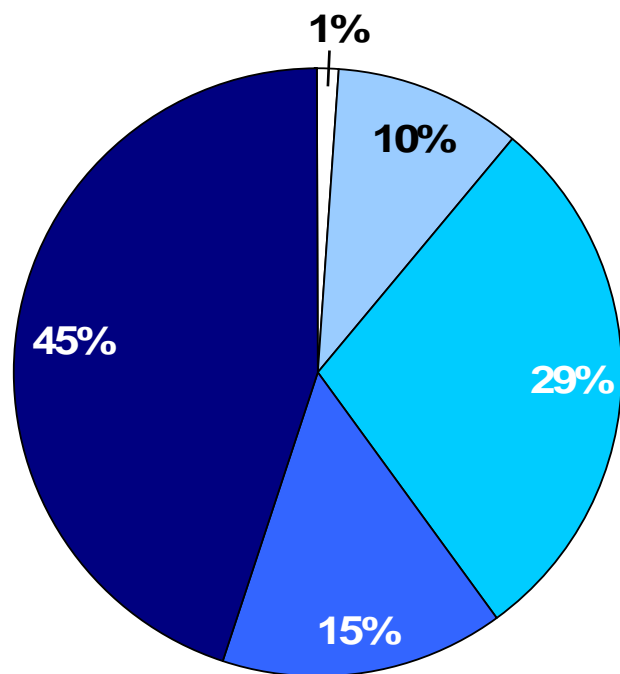


N=271 respondents who report experience attempting to resolve this issue.

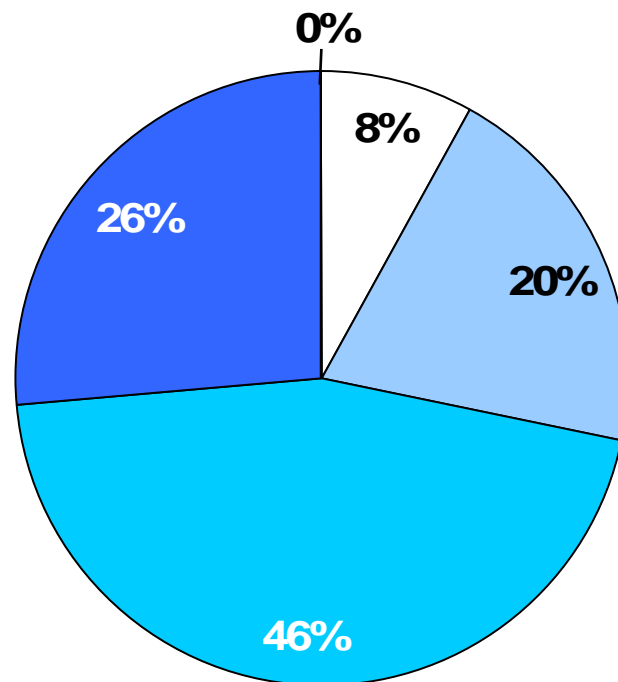
Source: Georgetown University Health Policy Institute Survey, *Part D and Vulnerable Medicare Beneficiaries*, Nov. 2006.

# Figure 7. Issues Related to Obtaining Prescription Drugs (Proportion of Respondents Reporting How Often Events Occur)

□ Always; almost always   
 □ Often   
 □ Sometimes   
 □ Rarely or never   
 ■ Don't know or unsure



**Plans handle coverage determinations in a timely fashion (72 hours for a standard and 24 hours for an expedited coverage determination).**

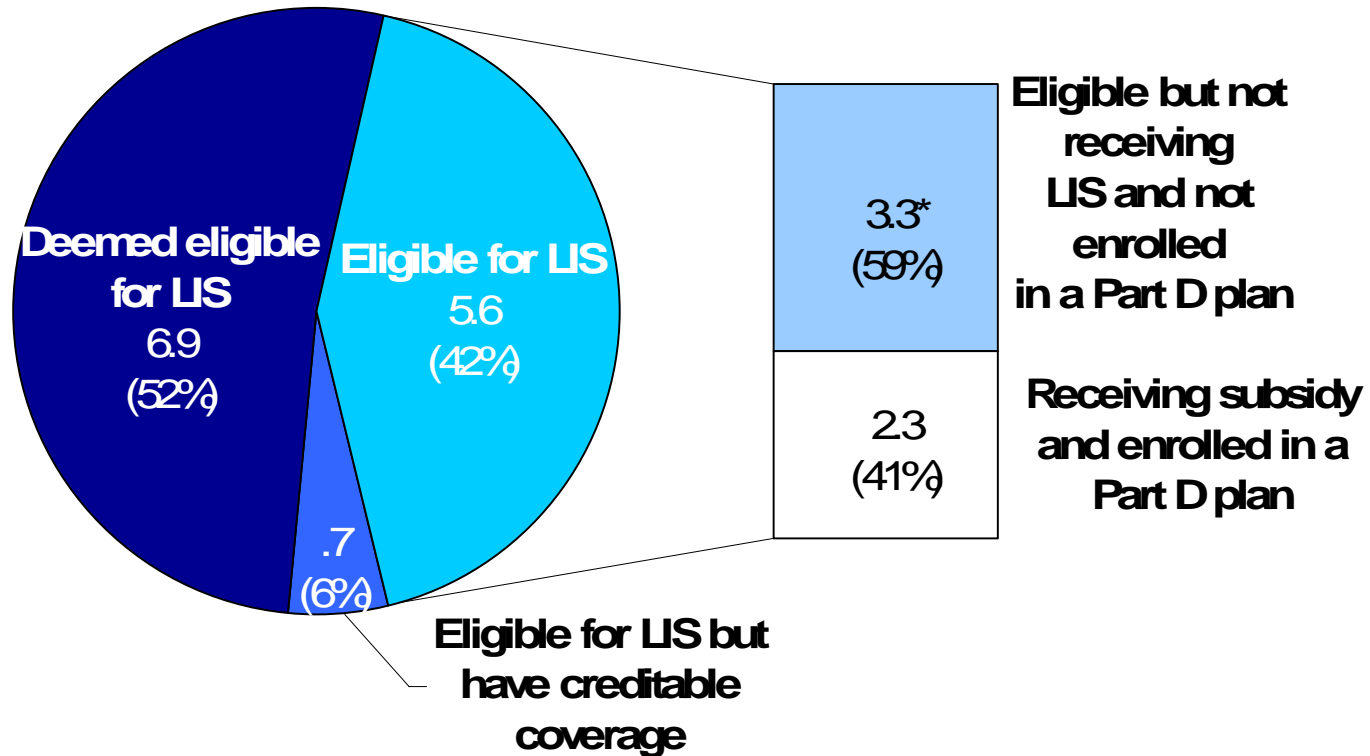


**Beneficiaries are able to obtain drugs in the six protected classes in a timely manner.**

N=282, 227 respondents who report experience with these issues.

Source: Georgetown University Health Policy Institute Survey, *Part D and Vulnerable Medicare Beneficiaries*, Nov. 2006.

# Figure 8. Number of Beneficiaries Eligible for and Receiving the Low-Income Subsidy (in millions)



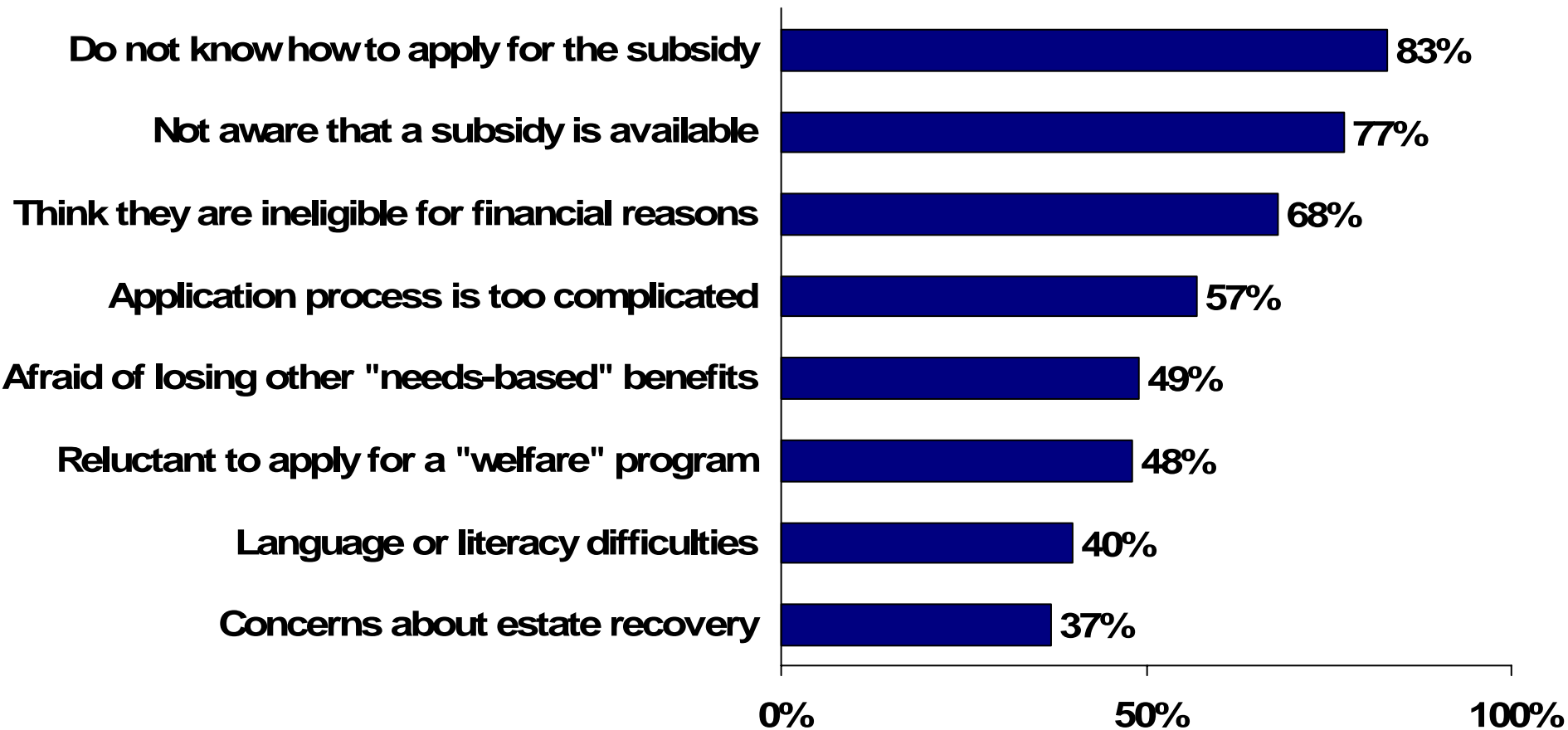
\* Includes 30,000 anticipated facilitated enrollments.

Source: Centers for Medicare and Medicaid Services, "Medicare Drug Plans Strong and Growing," Press Release, Jan. 30, 2007.



# Figure 9. Reasons Beneficiaries Do Not Apply for the Low-Income Subsidy

(Percent of Respondents Reporting that Reasons Are Very Common or Common)



Note: Other respondents indicated that these reasons were not too common or not at all common or said they were unsure or didn't know.

N=508.

Source: Georgetown University Health Policy Institute Survey, *Part D and Vulnerable Medicare Beneficiaries*, Nov. 2006.

# Figure 10. Challenges Associated with the Part D Program

(Open-ended responses: “Based on your experience, what are the two biggest challenges in assuring that Part D works well for beneficiaries?”)

Challenges	Percent of Responses
Difficult to get and understand information	23%
Program complexity	17%
Computer system problems	13%
Coverage restrictions	13%
Affordability	11%
Enrollment difficulties	9%
Other*	14%

Note: Respondents could specify up to two challenges.

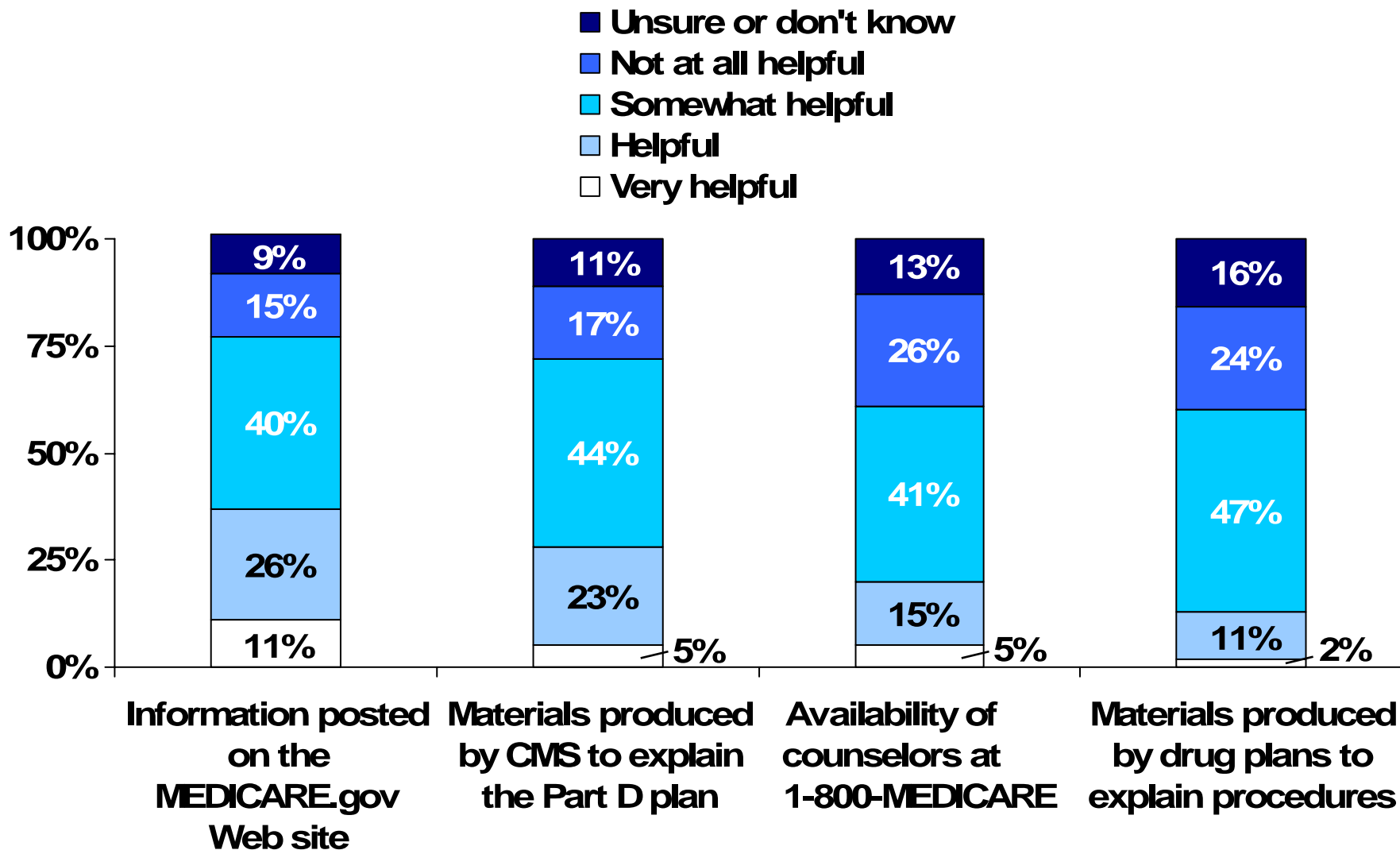
\* “Other” includes various challenges, each representing 4% or less of responses.

Total responses=717.

Source: Georgetown University Health Policy Institute Survey, *Part D and Vulnerable Medicare Beneficiaries*, Nov. 2006.

# Figure 11. Activities to Help Beneficiaries

(Percent of Respondents Reporting How Helpful Activities Are)



N=490.

Source: Georgetown University Health Policy Institute Survey, *Part D and Vulnerable Medicare Beneficiaries*, Nov. 2006.

# Figure 12. Recommendations for Program Changes

(Percent of Respondents Rating the Change  
Very Helpful or Helpful for Beneficiaries)

Expand the Point-of-Service system	79%
Extend enrollment periods	78%
Use a standard exceptions process for Part D plans	77%
Eliminate the asset test for the Low-Income Subsidy	73%
Make more information on plan choice available	68%
Make more materials available that are easier for beneficiaries with limited English proficiency to understand	67%
Increase the number of 1-800-MEDICARE counselors	64%

N=490.

Source: Georgetown University Health Policy Institute Survey, *Part D and Vulnerable Medicare Beneficiaries*, Nov. 2006.