

Not every person who's eligible for both Medicare and Medicaid, or who gets both Medicare and SSI, will have retroactive coverage

Certain people with Medicare/Medicaid or Medicare/SSI partial-benefit dual eligibility don't qualify for retroactive coverage.

How to find out if a person qualifies for retroactive coverage through Medicare's LINET Program

People should check the yellow auto-enrollment notice they get in the mail to find out if they're eligible for retroactive Medicare drug coverage through LINET. Medicare sends a yellow notice to everyone newly eligible for Medicaid or SSI. This notice lets them know they automatically get Medicare drug coverage and includes their coverage effective date.

There are 2 versions of the yellow auto-enrollment notice:

- **Retroactive coverage through LINET (Notice 11429)**
People with retroactive coverage get a yellow auto-enrollment notice in the mail with "CMS Product No. 11429 – YELLOW" printed in the bottom right corner. This notice tells the person they qualify for retroactive Medicare drug coverage through LINET. It also lists the name and phone number of the Medicare drug plan that will give their future drug coverage, and includes LINET contact information for dates of retroactive coverage. People with retroactive coverage also get a separate notice from LINET with coverage details and steps they can take to get reimbursed for any covered prescriptions they filled during their retroactive coverage period.
- **No retroactive coverage through LINET (Notice 11154)**
People who don't qualify for retroactive coverage get a yellow auto-enrollment notice in the mail with "CMS Product No. 11154 – YELLOW" printed in the bottom right corner. This notice lists the name and phone number of the Medicare drug plan that will give their future drug coverage. People who get this notice will still get temporary LINET coverage until their Medicare drug plan coverage starts.

Reimbursing people with retroactive LINET coverage

If a person paid for Medicare-covered drugs in a month they qualify for retroactive drug coverage through LINET, they may be able to get reimbursed for their out-of-pocket costs for those drugs. LINET covers most Medicare drugs, subject to certain standard safety, abuse, and prior authorization limitations.

For qualifying drugs, LINET will reimburse the money the person paid out of pocket, minus any applicable copayments (up to \$4.15 for a generic and up to \$10.35 for a brand-name drug in 2023). For more information on filing for reimbursement, people should read the materials they get in the mail from LINET, or call Humana at 1-800-783-1307. TTY users can call 711.

Once LINET gets a written reimbursement request, it has 14 calendar days to reply with a coverage decision. If the claim **is** eligible for reimbursement, LINET will mail a check no later than 30 days after that. If the drug isn't covered, the person who made the reimbursement request will get a letter explaining why.

Other people who may qualify for Medicare's LINET Program

Medicare may not always have the most current information about a person's Medicaid or SSI eligibility. A person may qualify for retroactive coverage through LINET as long as they qualified for both Medicare drug coverage **and** either Medicaid or SSI on the date they filled the prescription. Also, the person must submit a reimbursement claim within 90 days of the retroactive coverage date that's listed on their yellow notice.

In some cases, this means people may get "CMS Product No. 11154 – YELLOW," when they should've gotten "CMS Product No. 11429 – YELLOW." They can visit [Medicare.gov](https://www.Medicare.gov), or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048. Or, they can contact their State Health Insurance Assistance Program (SHIP) for free, personalized help by visiting [shiphelp.org](https://www.shiphelp.org).

Get more information

Visit [humana.com](https://www.humana.com) or call the LINET help desk at 1-800-783-1307. TTY users can call 711. Someone will be available to take your call from 8 a.m. – 11 p.m. (Eastern time).

You have the right to get Medicare information in an accessible format, like large print, braille, or audio. You also have the right to file a complaint if you feel you've been discriminated against. Visit [Medicare.gov/about-us/accessibility-nondiscrimination-notice](https://www.Medicare.gov/about-us/accessibility-nondiscrimination-notice), or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

This product was produced at U.S. taxpayer expense.

