Limited Income Newly Eligible Transition Program (LI-NET)

Beginning January 1, 2010, the LI-NET program provides Medicare prescription drug coverage for dual eligibles not enrolled in a Part D plan. The program is administered for Medicare by Humana. This process replaces the Point-of-Sale Facilitated Enrollment (POS-FE) process that was administered by Wellpoint from 2006-2009.

Eligible for coverage:
- Dual eligible not enrolled in a Part D plan, for immediate needs and retroactive coverage
- Medicare and QMB or SLMB recipient not enrolled in a Part D plan
- Medicare and SSI recipient not enrolled in a Part D plan
- Medicare and low-income subsidy eligible (LIS or "extra help")

Three ways for a dual eligible to be enrolled:
1. Auto-enrolled by Medicare for retroactive eligibility, if Medicaid has reported retroactive Medicaid eligibility and the consumer was not enrolled in a Part D plan
2. Enrolled by the pharmacy when a dual eligible does not have Part D coverage and needs prescriptions
3. Consumer who has become a dual eligible submits receipts for reimbursement. The consumer should receive information in the mail from Medicare after their retroactive Medicaid is reported. They must submit receipts to LI-NET within 180 days of becoming eligible for Medicaid. They will receive a check within 30 days of the request.

Once enrolled in LI-NET, the consumer will be auto-enrolled by Medicare into a permanent Part D plan within 2-3 months. If the consumer enrolls himself into a Part D plan, their choice will be used.

All eligible Part D drugs are covered, no formulary or prior authorization requirements. Up to 34 days supply may be billed by the pharmacy.

Pharmacies or consumers should call LI-NET at 1-800-783-1307.

More information is available
General program information:
http://www.humana.com/pharmacists/resources/li_net.asp
Instructions for pharmacies: