

Keeping Medicare Affordable in South Carolina

Every day, the [Medicare Improvements for Patients and Providers Act](#) (MIPPA) helps people with Medicare afford their prescriptions, premiums, and doctor visits.

Who MIPPA Helps in South Carolina

45,754 Medicare beneficiaries connected to benefits

363,030 Medicare beneficiaries living at or below \$22,500
(150% of the federal poverty level)



Mr. Neal's Story

Mr. Neal lives with his wife and teenage grandson. He was seeking food assistance for the family since he and his wife are on a fixed income. A benefits counselor screened Mr. Neal and his family, and together they applied for food benefits. The family was approved, and Mr. Neal said the additional food assistance allowed him to catch up on pressing monthly bills.

What MIPPA Does

-  Connects eligible individuals to benefits like the Medicare Savings Program and Medicare Part D Low-Income Subsidy, which help pay for prescription drugs, premiums, and copays
-  Promotes preventive health services and screenings
-  Keeps older adults healthy and out of hospitals

Potential Medicare Savings through MIPPA

One of the main components of MIPPA is to connect eligible Medicare Beneficiaries to programs to help them afford prescription drugs through Medicare Part D. Research shows that having prescription drug coverage through Medicare Part D could reduce hospitalization rates by 7%.¹ With an average Medicare hospital stay costing \$14,700,² connecting individuals to prescription drug coverage could create significant health care savings for both the patient and the government.

How MIPPA is Delivered in South Carolina

- 1 [State Health Insurance Assistance Program](#)
- 10 [Area Agencies on Aging](#)
- 1 [Benefits Enrollment Center](#)
 - Little River Medical Center



How to Access Benefits Online

BenefitsCheckUp is a free tool where individuals can see if they may be eligible for these money-saving programs.

Learn More



[BenefitsCheckUp.org](#)

800-794-6559

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* Data from 10/1/23 to 9/30/24 from SHIP Tracking and Reporting System and BenefitsCheckUp

¹ Afendulis CC, He Y, Zaslavsky AM, Chernew ME. The impact of Medicare Part D on hospitalization rates. *Health Serv Res*. 2011 Aug;46(4):1022-38. doi: 10.1111/j.1475-6773.2011.01244.x. Epub 2011 Feb 9. PMID: 21306369; PMCID: PMC3165176.

² Moore BJ, Liang L. Medicare Advantage Versus the Traditional Medicare Program: Costs of Inpatient Stays, 2009–2017. 2020 Aug 4. In: *Healthcare Cost and Utilization Project (HCUP) Statistical Briefs [Internet]*. Rockville (MD): Agency for Healthcare Research and Quality (US); 2006 Feb-. Statistical Brief #262.