

Keeping Medicare Affordable in Arizona

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 Arizona

35,169 Medicare beneficiaries connected to benefits

434,082 Medicare Beneficiaries living at or below \$22,500
(150% of the federal poverty level)



Jane's Story

Jane had lost her Medicare D plan when she moved from California to Arizona. She was receiving MSP and LIS, but she didn't know if she needed to apply in Arizona. After checking Jane's income, a benefits counselor discovered she would qualify for MSP in Arizona. The counselor also enrolled Jane in a new Medicare Part D plan and the LI-NET program, so Jane could have her prescriptions filled while waiting for her new plan to start.

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 Arizona

- 1 [State Health Insurance Assistance Program](#)
- 8 [Area Agencies on Aging](#)
- 2 **Benefits Enrollment Centers**
[Aster Aging, Inc.](#)
[Chicanos Por La Causa, Inc](#)

Learn More



BenefitsCheckUp.org

800-794-6559



How to Access Benefits Online

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

For more information, contact:

Natalie Zellner

571-527-3953

Natalie.zellner@ncoa.org

Sophie Morgado

571-527-3953

Sophie.morgado@ncoa.org

Daniel Wilson

571-527-4031

Daniel.Wilson@ncoa.org

* 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.