

Keeping Medicare Affordable in North 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 North Carolina

217,480 Medicare beneficiaries connected to benefits¹

675,823 Medicare beneficiaries living at or below \$23,475 (150% of the federal poverty level)



Mr. G's Story

As he approached age 65, Mr. G began to worry about how he would afford Part B premiums when he enrolled in Medicare. A benefits counselor screened him for Medicaid and Medicare Extra Help. As winter was arriving, the counselor also encouraged him to apply for the Low-Income Home Energy Assistance Program. She walked Mr. G through the process. Shortly before Christmas, Mr. G received news that he was eligible for all. He was overjoyed at starting the new year with greater financial security.

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

¹ Data from 10/1/24 to 9/30/25 from SHIP Tracking and Reporting System and BenefitsCheckUp.

Government Savings

Research shows that having prescription drug coverage through Medicare Part D could reduce hospitalization rates by 7%². With an average Medicare hospital stay costing \$14,700³, connecting individuals to prescription drug coverage could create significant health care savings for the federal government.

Individual Savings

In 2025, MIPPA saved individuals \$8,400 annually in out-of-pocket health care costs. With the average monthly Social Security payment at \$1,980 in North Carolina⁴, MIPPA can significantly improve older adults' budgets.

MIPPA Funding for North Carolina

Each year, MIPPA provides \$1,849,563 in funding to state and area agencies on aging (AAAs) and local nonprofit organizations.

How MIPPA is Delivered in North Carolina

- [Medicare and Seniors' Health Insurance Information Program \(SHIIP\)](#)
- 16 [Area Agencies on Aging](#)
- 2 [Benefits Enrollment Centers](#)
- 1 [American Indian Tribe or Tribal Organization](#)



**Benefits
CheckUp®**

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

BenefitsCheckUp.org

800-794-6559

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² 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.

³ 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.

⁴ Social Security Administration, Master Beneficiary Record, 100 percent data; and U.S. Postal Service geographic data.