

Keeping Medicare Affordable in Tennessee

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 Tennessee

188,245 Medicare beneficiaries connected to benefits

455,733 Medicare beneficiaries living at or below \$22,500
(150% of the federal poverty level)



Mrs. P's Story

Mrs. P, age 71, had a Medicare Savings Program (MSP) and Medicare Advantage plan. A benefits counselor told her she should be receiving the full Medicare Low-Income Subsidy (LIS) since she was on an MSP. The full LIS qualified Mrs. P for a better Medicare plan for no premium. The counselor helped her contact her insurance company, verify her eligibility, and get her plan switched. Now Mrs. P has a lower copay on many services, receives transportation, and has an emergency button to wear.

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 Tennessee

- 1 [State Health Insurance Assistance Program](#)
- 9 [Area Agencies on Aging](#)
- 2 Benefits Enrollment Centers
 - [AgeWell Middle Tennessee](#)
 - [Knoxville-Knox County Community Action Committee](#)



Learn More



[BenefitsCheckUp.org](#)

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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.