

BlueCross BlueShield of South Carolina I-20 at Alpine Road Columbia, SC 29219-0001 803.788.0222

SouthCarolinaBlues.com

An Independent Licensee of the
Blue Cross and Blue Shield Association

SC CAMPAIGN TO PREVENT TEEN PREGNANCY 1331 Elmwood Ave Ste 140 Columbia SC 29201

Dear Benefits Coordinator:

The Medicare Modernization Act requires employers to provide creditable coverage notices to Medicareeligible employees enrolled in their group health plans. The enclosed notice explains that group drug coverage is creditable when drug benefits are equal to or better than Medicare's prescription drug plan.

Why is this important?

Medicare-eligible individuals must decide if they want to enroll in the new Medicare prescription drug plans offered through private companies. If people with **non-creditable** coverage do not enroll in a Medicare prescription drug plan during their eligibility period and later decide to enroll, they will pay a late-enrollment penalty that is equal to 1 percent of the premium for each month they delay enrollment. They will pay that higher premium as long as they have Medicare prescription drug coverage.

What do you need to do?

We are unable to determine if your group coverage is creditable because we do not know the exact number of employees in your group. Please read the first paragraph of the Facts About Medicare Prescription Drug Plans page included in this package and determine if your coverage is creditable or not. We have enclosed two versions (creditable and non-creditable) of the Important Notice About Your Prescription Drug Coverage and Medicare. Please give the appropriate version of the notice to your Medicare-eligible employees who are covered under your plan so they can decide if they want to enroll in a Medicare prescription drug plan.

All employers who provide group health coverage, offer prescription drug coverage and have Medicareeligible individuals on their health plans must notify the Centers for Medicare & Medicaid Services (CMS) annually as to whether their coverage is creditable or not creditable to Medicare's prescription drug plan. We have enclosed guidelines that explain how you should notify CMS.

You can find details regarding the Medicare Modernization Act and options related to the Medicare Part D prescription drug plan at Medicare.gov. If you have any questions, please contact BlueCross customer service toll free at 800-868-2500, ext. 41010.

Sincerely,

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Vice President of Operations Group and Individual Products

Enclosures

Important Notice from BlueCross® BlueShield® of South Carolina About Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with BlueCross and prescription drug coverage available for people with Medicare. It also explains the options you have under Medicare prescription drug coverage and can help you decide whether or not you want to enroll. At the end of this notice is information about where you can get help to make decisions about your prescription drug coverage.

- 1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare through Medicare prescription drug plans and Medicare Advantage plans that offer prescription drug coverage. All Medicare prescription drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
- 2. BlueCross has determined that your prescription drug coverage is, on average for all plan participants, expected to pay out as much as the standard Medicare prescription drug coverage will pay and is considered Creditable Coverage.

Because your existing coverage is on average at least as good as standard Medicare prescription drug coverage, you can keep this coverage and not pay extra if you later decide to enroll in Medicare prescription drug coverage.

Individuals can enroll in a Medicare prescription drug plan when they first become eligible for Medicare, and each year from October 15 through December 7. Beneficiaries leaving employer/union coverage may be eligible for a Special Enrollment Period to sign up for a Medicare prescription drug plan.

You should compare your current coverage, including which drugs are covered, with the coverage and cost of the plans offering Medicare prescription drug coverage in your area.

If you decide to enroll in a Medicare prescription drug plan and drop your BlueCross prescription drug coverage, be aware that you and your dependents may not be able to get this coverage back. Please contact us for more information about what happens to your coverage if you enroll in a Medicare prescription drug plan.

The details of your current coverage are as follows:

Effective Date of Coverage: July 1, 2017

Type of Prescription Drug Plan: Blue RxSM 100%/60%

BlueCross Group Number: 05-57443-01-0

You should also know that if you drop or lose your coverage with BlueCross and don't enroll in Medicare prescription drug coverage after your current coverage ends, you may pay more (a penalty) to enroll in Medicare prescription drug coverage later.

If you go 63 days or longer without prescription drug coverage that's at least as good as Medicare's prescription drug coverage, your premium will go up at least 1 percent per month for every month that you did not have that coverage. For example, if you go 19 months without coverage, your premium will always be at least 19 percent higher than what many other people pay. You'll have to pay this higher premium as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following November to enroll.

For more information about this notice or your current prescription drug coverage:

Contact BlueCross customer service at 803-264-1010 or toll free at 800-868-2500, ext. 41010. **NOTE**: You will receive this notice annually and at other times in the future, such as before the next period you can enroll in Medicare prescription drug coverage, and if this coverage through BlueCross changes. You also may request a copy of this notice.

For more information about your options under Medicare prescription drug coverage:

Read the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. Medicare-approved prescription drug plans may also contact you directly. For more information about Medicare prescription drug plans:

- Visit <u>Medicare.gov</u>.
- Call your State Health Insurance Assistance Program (see your copy of the "Medicare & You" handbook for its telephone number) for personalized help.
- Call 800-MEDICARE (800-633-4227). TTY users should call 877-486-2048.

For people with limited income and resources, extra help paying for Medicare prescription drug coverage is available. Information about this extra help is available from the Social Security Administration (SSA) online at SocialSecurity.gov, or you can call 800-772-1213 (TTY: 800-325-0778).

Remember: Keep this notice. If you enroll in one of the new plans approved by Medicare that offer prescription drug coverage, you may be required to provide a copy of this notice when you join to show that you are not required to pay a higher premium amount.

Date: June 6, 2018

Name of Entity/Sender: SC CAMPAIGN TO PREVENT TEEN PREGNANCY

Contact - Position/Office: Contact the group

Address: 1331 Elmwood Ave Ste 140

Columbia SC 29201

Phone Number: Contact the group

Important Notice From BlueCross® BlueShield® of South Carolina About Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with BlueCross and prescription drug coverage available for people with Medicare. It also explains the options you have under Medicare prescription drug coverage, and can help you decide whether or not you want to enroll. At the end of this notice is information about where you can get help to make decisions about your prescription drug coverage.

- 1. Medicare prescription drug coverage became available to everyone with Medicare through Medicare prescription drug plans and Medicare Advantage plans that offer prescription drug coverage in 2006. All Medicare prescription drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
- 2. BlueCross has determined that your prescription drug coverage is, on average for all plan participants, NOT expected to pay out as much as the standard Medicare prescription drug coverage will pay and is considered Non-Creditable Coverage. This is important, because for most people enrolled in that plan, enrolling in Medicare prescription drug coverage means you will get more assistance with drug costs than if you had prescription drug coverage exclusively through BlueCross.
- 3. You have decisions to make about Medicare prescription drug coverage that may affect how much you pay for that coverage, depending on if and when you enroll. Read this notice carefully it explains your options.

Consider enrolling in Medicare prescription drug coverage.

Because the coverage you have with BlueCross is, on average for all plan participants, NOT expected to pay out as much as the standard Medicare prescription drug coverage will pay, consider enrolling in a Medicare prescription drug plan. Individuals can enroll in a Medicare prescription drug plan when they first become eligible for Medicare, and each year from October 15 through December 7. Beneficiaries leaving employer/union coverage may be eligible for a Special Enrollment Period to sign up for a Medicare prescription drug plan.

This may mean that you will have to wait to enroll in Medicare prescription drug coverage and that you may pay a higher premium (a penalty) if you join later, and you will pay that higher premium as long as you have Medicare prescription drug coverage.

As we informed you last year, May 15, 2006, was the deadline for enrolling in a Medicare prescription drug plan. After this date, a late enrollment penalty applies. If you go 63 days or longer without prescription drug coverage that is at least as good as Medicare's prescription drug coverage, your premium will go up at least 1 percent per month for every month after May 15, 2006, that you did not have that coverage.

You will have to pay this higher premium as long as you have Medicare prescription drug coverage. For example, if you go 19 months without coverage, your premium will always be at least 19 percent higher than what many other people pay. In addition, you may have to wait until the following November to enroll.

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BlueCross Group Number: 05-57443-01-0

You need to make a decision.

When you make your decision, you should also compare your current coverage, including which drugs are covered, with the coverage and cost of the plans offering Medicare prescription drug coverage in your area.

For more information about this notice or your current prescription drug coverage:

Contact BlueCross customer service at 803-264-1010 or toll free at 800-868-2500, ext. 41010. **NOTE**: You will receive this notice annually and at other times in the future, such as before the next period you can enroll in Medicare prescription drug coverage, and if this coverage through BlueCross changes. You also may request a copy of this notice.

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CMS NOTIFICATION GUIDELINES

How to notify CMS of your creditable or non-creditable coverage status

Who Must Provide the Disclosure Notice to CMS

All employers who provide group health coverage, offer prescription drug coverage and have Medicareeligible individuals covered under their plans must notify the Centers for Medicare & Medicaid Services (CMS) annually as to whether their coverage is creditable or not creditable to Medicare's prescription drug plan.

These employers must complete the online Disclosure Notice and submit it to CMS annually and any time there is a change in the drug coverage that affects the creditable coverage status. At a minimum, employers must also provide the disclosure to CMS at these times:

- 1. For plan years that end in 2007 and beyond, disclosure of creditable coverage status must be submitted within 60 days after the beginning date of the plan year for which the entity is providing the disclosure to CMS.
- 2. Within 30 days after the termination of the prescription drug plan.
- 3. Within 30 days after any change in the creditable coverage status of the prescription drug plan.

Completing the CMS Disclosure Form

For more information about CMS requirements, go to the CMS Creditable Coverage Disclosure Web page at http://www.cms.hhs.gov/creditablecoverage. There you will find the Disclosure to CMS Guidance document. The Disclosure to CMS Form may be accessed under the "Related Links Inside CMS" heading located on this page.

The form is also located at http://www.cms.hhs.gov/CreditableCoverage/45_CCDisclosureForm.asp. All employers must complete the online Disclosure Form. There is no paper (or printable) form available.