



## **Important Notice from HealthPartners About Your Prescription Drug Coverage and Medicare**

The Centers for Medicare and Medicaid Services (CMS) require us to send this notification to all individuals with prescription drug coverage who may be eligible for Medicare. We're sending you this letter because we don't know if you're entitled to Medicare or not. Medicare entitlement includes individuals who qualify for Medicare because of a disability or End Stage Renal Disease (ESRD), as well as individuals who are over age 65.

You'll 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 changes. You also may request a copy by calling HealthPartners Member Services. **If you or a covered dependent has Medicare Part A and/or B (or will be eligible within the next 12 months), you'll want to read this entire notice carefully and keep it for future reference. If not, you can disregard this notice.**

This notice contains information about your current prescription drug coverage with HealthPartners and your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to enroll in Medicare prescription drug coverage. At the end of this notice is information about where you can get help to make decisions about your prescription drug coverage.

Medicare prescription drug coverage (known as "Part D") became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare prescription drug plan or join a Medicare Advantage or Medicare Cost plan 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.

HealthPartners has determined that your prescription drug coverage is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and therefore is considered Creditable Coverage.

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

You can join a Medicare drug plan when you first become eligible for Medicare and each year from Oct. 15 to Dec. 7. This may mean that you may have to wait to join a Medicare drug plan and that you may have to pay a higher premium (a penalty) if you join later. You may pay that higher premium as long as you have Medicare prescription drug coverage. However, if you lose creditable prescription drug coverage, through no fault of your own, you will be eligible for a 60 day Special Enrollment Period (SEP) to join a Part D plan due to your loss of creditable coverage. In addition, if you lose or decide to leave employer or union sponsored coverage, you will be eligible to join a Part D plan at that time through a Special Enrollment Period (SEP).

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

If you decide to join a Medicare drug plan, your HealthPartners coverage will be affected. See the next page for more information about what happens to your current coverage if you join a Medicare drug plan.

## Here are your Medicare prescription drug coverage options:

1. You can retain your existing coverage and choose **not** to enroll in a Part D plan.
  - Because your existing coverage is on average at least as good as standard Medicare prescription drug coverage, you can keep your coverage and not pay extra if you later decide to enroll in a Medicare prescription drug plan.
2. You can retain your existing coverage and choose to enroll in a Part D plan as a supplement.
  - If you enroll in a Medicare prescription drug plan you may qualify for more assistance than if you had prescription drug coverage exclusively through your existing plan.
  - Your current coverage pays for other health expenses in addition to prescription drug costs. You and your eligible dependents will still be eligible to receive all of your current health and prescription drug benefits.
3. You can cancel your existing coverage and enroll in a Medicare Advantage or Medicare Cost plan with Medicare prescription drug coverage.
  - If you decide to drop your existing coverage, be aware that you and your dependents may not be able to get this coverage back. Please contact us for more information.
  - HealthPartners has Medicare Advantage plans available. For more information, please call us at **952-883-5601** or **800-247-7015 (TTY 711)**. From **Oct. 1 through March 31**, we take calls from 8 a.m. to 8 p.m. CT, **seven days a week**. You'll speak with a representative. From **April 1 through Sept. 30**, call us 8 a.m. to 8 p.m. CT, **Monday through Friday** to speak with a representative. On Saturdays, Sundays and Federal holidays, you can leave a message and we'll get back to you within one business day.

If you drop or lose coverage with HealthPartners and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later. If you go 63 continuous days or longer without drug coverage at least as good as Medicare's drug coverage, your monthly premium may go up by at least 1% of the base beneficiary premium per month for every month that you did not have that coverage. For example, if you went 19 months without coverage, your premium might be at least 19% higher than the base beneficiary premium. You might 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 October to join.

**For more information about this notice or your current prescription drug coverage**, please contact Member Services by calling the number listed on the back of your HealthPartners member ID card.

**For more detailed information about your Medicare prescription drug coverage options**, refer to the *Medicare & You* handbook from Medicare. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans. For more information:

- Visit [www.medicare.gov](http://www.medicare.gov)
- Call the Minnesota Senior LinkAge Line at 1-800-333-2433
- Call your State Health Insurance Assistance Program (see your copy of the *Medicare & You* handbook for their telephone number)
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For more information, visit the Social Security Administration (SSA) online at [www.socialsecurity.gov](http://www.socialsecurity.gov) or call them at 1-800-772-1213 (TTY 1-800-325-0778).

**Remember: Keep this creditable coverage notice. If you join a new plan which offers prescription drug coverage, you may be asked to provide a copy of this notice to show you're not required to pay a higher premium amount.**