

# IMPORTANT INFORMATION ABOUT YOUR PRESCRIPTION COVERAGE AND MEDICARE PART D

Here are important facts about your Anthem prescription drug coverage for your Medicare-eligible group members. Read on to see how you must notify these members — and the Centers for Medicare and Medicaid Services (CMS) — so you can meet CMS and legal requirements.

## How to notify CMS as required

Because you provide prescription drug coverage to people who are eligible for Medicare Part D, you must let CMS know whether the coverage is **creditable** or **non-creditable**, per the Medicare Prescription Drug, Improvement, and Modernization Act (MMA) of 2003. Creditable coverage means your group drug plan is at least as good as the Medicare drug benefit. This lets your eligible employees keep their current coverage, and avoid higher payments if they sign up later for the Medicare drug benefit.

You can find more details about creditable coverage — including rules, forms and timing your Disclosure Notice to CMS — at [cms.hhs.gov/creditablecoverage/](https://cms.hhs.gov/creditablecoverage/).

You must complete the Disclosure Notice form on the CMS Creditable Coverage Disclosure web page unless exempt as outlined in the Disclosure to CMS guidance. You can find the Disclosure Notice form at [cms.gov/medicare/prescription-drug-coverage/creditablecoverage/ccdisclosureform.html](https://cms.gov/medicare/prescription-drug-coverage/creditablecoverage/ccdisclosureform.html).

IF YOU HAVE QUESTIONS OR NEED MORE INFORMATION, PLEASE CONTACT YOUR ANTHEM REPRESENTATIVE, BROKER OR CONSULTANT.

## How to notify Medicare-eligible members as required

As a Plan Sponsor, you must notify all Medicare-eligible members of your group annually about whether their prescription drug coverage is **creditable** or **non-creditable**, per the MMA of 2003. This includes Medicare-eligible active employees, retirees, dependents, those on COBRA, and people who are eligible for Medicare due to disability or end stage renal disease.

You must provide notices to the Medicare-eligible members of your group:

- Before the person's Initial Enrollment Period (IEP) for Part D.
- Before the Annual Coordinated Election Period (ACEP) each year, which begins October 15.
- Before the effective date of the person's enrollment in the plan.
- At the time of any change that would affect whether or not the prescription plan coverage is creditable.
- Upon request from beneficiary.

You can find model disclosure notice language for beneficiaries online at [cms.hhs.gov/creditablecoverage/](https://cms.hhs.gov/creditablecoverage/).



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# THIS CHART SHOWS OUR STANDARD DRUG PLANS AND THEIR CREDITABLE OR NON-CREDITABLE STATUS, ACCORDING TO CMS.

## 2020 OH MEWA Regulatory Testing Results

Plans	Deductible	OOPM	Coinsurance	PCP copay	Rx deductible	RX generics copay	Creditable?
Blue Access Options SOCA MEWA PPO 1000/10%/6000	\$1,000.00	\$6,000.00	10%	\$20.00	\$0.00	\$15.00	Yes
Blue Access Options SOCA MEWA PPO 1000/10%/6000	\$0.00	\$0.00	0%	\$0.00	\$0.00	\$0.00	Yes
Blue Access Options SOCA MEWA PPO 3000/0%/6600	\$3,000.00	\$6,600.00	0%	\$20.00	\$0.00	\$15.00	Yes
Blue Access Options SOCA MEWA PPO 3000/0%/6600	\$0.00	\$0.00	0%	\$0.00	\$0.00	\$0.00	Yes
Blue Access Options SOCA MEWA PPO 500/10%/3000	\$500.00	\$3,000.00	10%	\$20.00	\$0.00	\$15.00	Yes
Blue Access Options SOCA MEWA PPO 500/10%/3000	\$0.00	\$0.00	0%	\$0.00	\$0.00	\$0.00	Yes
Blue Access SOCA MEWA PPO 1000/20%/4250	\$1,000.00	\$4,250.00	20%	\$30.00	\$0.00	\$15.00	Yes
Blue Access SOCA MEWA PPO 1500/0%/4000	\$1,500.00	\$4,000.00	0%	\$30.00	\$0.00	\$15.00	Yes
Blue Access SOCA MEWA PPO 1500/20%/4500	\$1,500.00	\$4,500.00	20%	\$30.00	\$0.00	\$15.00	Yes
Blue Access SOCA MEWA PPO 2500/0%/3750 w/HSA	\$2,500.00	\$3,750.00	0%	\$0.00	Combined w/Medical	\$15.00	Yes
Blue Access SOCA MEWA PPO 2500/0%/5000	\$2,500.00	\$5,000.00	0%	\$30.00	\$0.00	\$15.00	Yes
Blue Access SOCA MEWA PPO 2800E/0%/4000 w/HSA	\$2,800.00	\$4,000.00	0%	\$0.00	Combined w/Medical	\$15.00	Yes
Blue Access SOCA MEWA PPO 2800E/20%/4000 w/HSA	\$2,800.00	\$4,000.00	20%	\$0.00	Combined w/Medical	\$15.00	Yes
Blue Access SOCA MEWA PPO 3000E/0%/5000 w/HSA	\$3,000.00	\$5,000.00	0%	\$0.00	Combined w/Medical	\$15.00	Yes
Blue Access SOCA MEWA PPO 3000/20%/6500	\$3,000.00	\$6,500.00	20%	\$30.00	\$0.00	\$15.00	Yes
Blue Access SOCA MEWA PPO 3500/0%/5500	\$3,500.00	\$5,500.00	0%	\$30.00	\$0.00	\$15.00	Yes
Blue Access SOCA MEWA PPO 3500E/20%/6350 w/HSA	\$3,500.00	\$6,350.00	20%	\$0.00	Combined w/Medical	\$15.00	Yes
Blue Access SOCA MEWA PPO 4000E/0%/5500 w/HSA	\$4,000.00	\$5,500.00	0%	\$0.00	Combined w/Medical	\$15.00	Yes
Blue Access SOCA MEWA PPO 500/20%/4000	\$500.00	\$4,000.00	20%	\$20.00	\$0.00	\$15.00	Yes
Blue Access SOCA MEWA PPO 500/30%/4000	\$500.00	\$4,000.00	30%	\$20.00	\$0.00	\$15.00	Yes
Blue Access SOCA MEWA PPO 5000E/0%/6550 w/HSA	\$5,000.00	\$6,550.00	0%	\$0.00	Combined w/Medical	\$15.00	No
Blue Access SOCA MEWA PPO 5000/0%/6850	\$5,000.00	\$6,850.00	0%	\$30.00	\$0.00	\$15.00	Yes
Blue Access SOCA MEWA PPO 6000/0%/7000	\$6,000.00	\$7,000.00	0%	\$30.00	\$0.00	\$15.00	Yes
Blue Access SOCA MEWA PPO 6350E/0%/6350 w/HSA	\$6,350.00	\$6,350.00	0%	\$0.00	Combined w/Medical	\$0.00	No