

# IMPORTANT INFORMATION ABOUT YOUR PRESCRIPTION COVERAGE AND MEDICARE PART D

**We always want you to have the right information to help you administer your plan and cover your members.**

Here are important facts about your Anthem prescription drug coverage for your Medicare-eligible group members. These guidelines will show you what steps to take to notify these members — and the Centers for Medicare and Medicaid Services (CMS) — in order to meet the legal requirements.

## How to notify CMS as required

When 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 allows your eligible employees to 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 of your Disclosure Notice to CMS at [cms.hhs.gov/creditablecoverage/](https://cms.hhs.gov/creditablecoverage/).

You are required to 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).

## 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 the beneficiary.

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

**For any questions, please feel free to reach out to your Anthem representative, broker, or consultant.**

**Anthem**  | **SMALL BUSINESS**

These charts show our standard drug plans and their **creditable** or **non-creditable** status, according to cms.

### OH Small Group Plans (ACA 2021)

Product name	Retail prescription drug after deductible	Home delivery prescription after deductible	Deductible (single)	Coinsurance	Out-of-pocket (single)	Creditable?
<b>Bronze</b>						
<b>Anthem Bronze Blue Access PPO 5500EC/0%/7000 w/HSA</b>	Deductible, then \$15/deductible, then \$60/deductible, then \$100/deductible, then 30%	Deductible, then \$38/deductible, then \$180/deductible, then \$300	\$5,500.00	0%	\$7,000.00	No
<b>Anthem Bronze Blue Access PPO 6000EC/20%/7000 w/HSA</b>	Ded, then \$15/Ded, then \$60/deductible, then \$100/deductible, then 30%	Deductible, then \$38/deductible, then \$180/deductible, then \$300	\$6,000.00	20%	\$7,000.00	No
<b>Anthem Bronze Blue Access PPO 7000E/0%/7000 Plus w/HSA</b>	Deductible, then Coinsurance	Deductible, then Coinsurance	\$7,000.00	0%	\$7,000.00	No
<b>Anthem Bronze Blue Access PPO 7500/30%/8500</b>	Deductible, then Coinsurance	Deductible, then Coinsurance	\$7,500.00	30%	\$8,500.00	No
<b>Anthem Bronze Pathway Group HMO 5500EC/0%/7000 w/HSA</b>	Deductible, then \$15/deductible, then \$60/deductible, then \$100/deductible, then 30%	Deductible, then \$38/deductible, then \$180/deductible then \$300	\$5,500.00	0%	\$7,000.00	No
<b>Anthem Bronze Pathway Group HMO 7000E/0%/7000 w/HSA</b>	Deductible, then Coinsurance	Deductible, then Coinsurance	\$7,000.00	0%	\$7,000.00	No
<b>Anthem Bronze Pathway Group HMO 7500/30%/8500</b>	Deductible, then Coinsurance	Deductible, then Coinsurance	\$7,500.00	30%	\$8,500.00	No
<b>Silver</b>						
<b>Anthem Link Silver Blue Connection HMO 4000EC/20%/6900 w/HSA</b>	\$15/\$50/deductible, then \$90/deductible, then \$400	\$38/\$150/deductible, then \$270	\$4,000.00	20%	\$6,900.00	Yes
<b>Anthem Link Silver Blue Connection HMO 5000/30%/8000</b>	\$15/\$50/deductible, then \$90/deductible, then \$400	\$38/\$150/deductible, then \$270	\$5,000.00	30%	\$8,000.00	Yes
<b>Anthem Silver Blue Access PPO 2500/50%/7500</b>	\$15/\$60/\$100/30% up to \$550 per script; \$250/\$500 pharmacy deductible Tiers 2-4	\$38/\$180/\$300; \$250/\$500 pharmacy deductible Tiers 2-4	\$2,500.00	50%	\$7,500.00	Yes
<b>Anthem Silver Blue Access PPO 3000EC/0%/7000 w/HSA</b>	Deductible, then \$15/deductible, then \$60/deductible, then \$100/deductible, then 30%	Deductible, then \$38/deductible, then \$180/deductible, then \$300	\$3,000.00	0%	\$7,000.00	Yes
<b>Anthem Silver Blue Access PPO 3000EC/10%/5500 w/HSA</b>	Deductible, then \$15/deductible, then \$60/Ded, then \$100/deductible, then 30%	Deductible, then \$38/deductible, then \$180/deductible, then \$300	\$3,000.00	10%	\$5,500.00	Yes
<b>Anthem Silver Blue Access PPO 3750E/0%/6500 Plus w/HSA</b>	Deductible, then Coinsurance	Deductible, then Coinsurance	\$3,750.00	0%	\$6,500.00	No
<b>Anthem Silver Blue Access PPO 4000/20%/8000 Focus</b>	\$15/\$60/\$100/30% up to \$500 per script; \$250/\$500 pharmacy deductible Tiers 2-4	\$38/\$180/\$300; \$250/\$500 pharmacy deductible Tiers 2-4	\$4,000.00	20%	\$8,000.00	Yes
<b>Anthem Silver Blue Access PPO 4000/30%/8000</b>	\$15/\$60/\$100/30% up to \$550 per script; \$250/\$500 pharmacy deductible Tiers 2-4	\$38/\$180/\$300; \$250/\$500 pharmacy deductible Tiers 2-4	\$4,000.00	30%	\$8,000.00	Yes
<b>Anthem Silver Blue Access PPO 4000E/20%/7000 w/HSA</b>	Deductible, then Coinsurance	Deductible, then Coinsurance	\$4,000.00	20%	\$7,000.00	Yes
<b>Anthem Silver Blue Access PPO 5000E/0%/7000 Plus w/HSA</b>	Deductible, then Coinsurance	Deductible, then Coinsurance	\$5,000.00	0%	\$7,000.00	No
<b>Anthem Silver Blue Access PPO 5500/20%/8400 Focus</b>	\$15/\$60/\$100/30% up to \$500 per script; \$250/\$500 pharmacy deductible Tiers 2-4	\$38/\$180/\$300; \$250/\$500 pharmacy deductible Tiers 2-4	\$5,500.00	20%	\$8,400.00	Yes
<b>Anthem Silver Blue Access PPO 5500/25%/8150</b>	\$15/\$60/\$100/30% up to \$550 per script; \$250/\$500 pharmacy deductible Tiers 2-4	\$38/\$180/\$300; \$250/\$500 pharmacy deductible Tiers 2-4	\$5,500.00	25%	\$8,150.00	Yes
<b>Anthem Silver Blue Access PPO 6250/0%/8500</b>	\$15/\$60/\$100/30% up to \$550 per script; \$250/\$500 pharmacy deductible Tiers 2-4	\$38/\$180/\$300; \$250/\$500 pharmacy deductible Tiers 2-4	\$6,250.00	0%	\$8,500.00	Yes
<b>Anthem Silver Blue Access PPO 6500/30%/8000</b>	\$15/deductible, then \$60/deductible, then \$100/deductible, then 30% up to \$550 per script	\$38/deductible, then \$180/deductible, then \$300	\$6,500.00	30%	\$8,000.00	No
<b>Anthem Silver Pathway Group HMO 3000EC/0%/7000 w/HSA</b>	Deductible, then \$15/deductible, then \$60/deductible, then \$100/deductible, then 30%	Deductible, then \$38/deductible, then \$180/deductible, then \$300	\$3,000.00	0%	\$7,000.00	Yes
<b>Anthem Silver Pathway Group HMO 4000/30%/8000</b>	\$15/\$60/\$100/30% up to \$550 per script; \$250/\$500 pharmacy deductible Tiers 2-4	\$38/\$180/\$300; \$250/\$500 pharmacy deductible Tiers 2-4	\$4,000.00	30%	\$8,000.00	Yes

## OH Small Group Plans (ACA 2021) (continued)

Product name	Retail prescription drug after deductible	Home delivery prescription after deductible	Deductible (single)	Coinsurance	Out-of-pocket (single)	Creditable?
<b>Gold</b>						
Anthem Gold Blue Access PPO 1000/20%/7000	\$15/\$60/\$100/30% up to \$500 per script	\$38/\$180/\$300	\$1,000.00	20%	\$7,000.00	Yes
Anthem Gold Blue Access PPO 1000/20%/7000 Focus	\$15/\$60/\$100/30% up to \$500 per script; \$250/\$500 pharmacy deductible Tiers 2-4	\$38/\$180/\$300; \$250/\$500 pharmacy deductible Tiers 2-4	\$1,000.00	20%	\$7,000.00	Yes
Anthem Gold Blue Access PPO 1500/20%/7000	\$15/\$60/\$100/30% up to \$500 per script	\$38/\$180/\$300	\$1,500.00	20%	\$7,000.00	Yes
Anthem Gold Blue Access PPO 1500C/0%/3500 w/ HSA	Deductible, then \$15/deductible, then \$60/deductible, then \$100/deductible, then 30%	Deductible, then \$38/deductible, then \$180/deductible, then \$300	\$1,500.00	0%	\$3,500.00	Yes
Anthem Gold Blue Access PPO 2000/20%/7000	\$15/\$60/\$100/30% up to \$500 per script	\$38/\$180/\$300	\$2,000.00	20%	\$7,000.00	Yes
Anthem Gold Blue Access PPO 2000/20%/7500 Focus	\$15/\$60/\$100/30% up to \$500 per script; \$250/\$500 pharmacy deductible Tiers 2-4	\$38/\$180/\$300; \$250/\$500 pharmacy deductible Tiers 2-4	\$2,000.00	20%	\$7,500.00	Yes
Anthem Gold Blue Access PPO 2250/0%/4000 Plus w/HSA	Deductible, then Coinsurance	Deductible, then coinsurance	\$2,250.00	0%	\$4,000.00	Yes
Anthem Gold Blue Access PPO 2500/0%/7500	\$15/\$60/\$100/30% up to \$500 per script	\$38/\$180/\$300	\$2,500.00	0%	\$7,500.00	Yes
Anthem Gold Blue Access PPO 2500/10%/5000 Plus w/HSA	Deductible, then Coinsurance	Deductible, then coinsurance	\$2,500.00	10%	\$5,000.00	Yes
Anthem Gold Blue Access PPO 3000/20%/7000	\$15/\$60/\$100/30% up to \$500 per script	\$38/\$180/\$300	\$3,000.00	20%	\$7,000.00	Yes
Anthem Gold Blue Access PPO 500/20%/7000 Focus	\$15/\$60/\$100/30% up to \$500 per script; \$250/\$500 pharmacy deductible Tiers 2-4	\$38/\$180/\$300; \$250/\$500 pharmacy deductible Tiers 2-4	\$500.00	20%	\$7,000.00	Yes
Anthem Gold Blue Access PPO 500/25%/7000	\$15/\$60/\$100/30% up to \$500 per script	\$38/\$180/\$300	\$500.00	25%	\$7,000.00	Yes
Anthem Gold Pathway Group HMO 2500/0%/7500	\$15/\$60/\$100/30% up to \$500 per script	\$38/\$180/\$300	\$2,500.00	0%	\$7,500.00	Yes
Anthem Gold Pathway Group HMO 500/25%/7000	\$15/\$60/\$100/30% up to \$500 per script	\$38/\$180/\$300	\$500.00	25%	\$7,000.00	Yes
Anthem Link Gold Blue Connection HMO 2000/20%/5000	\$15/\$50/deductible, then \$90/deductible, then \$400	\$38/\$150/deductible, then \$270	\$2,000.00	20%	\$5,000.00	Yes
Anthem Link Gold Blue Connection HMO 2000C/20%/4000 w/HSA	\$15/\$50/deductible, then \$90/deductible, then \$400	\$38/\$150/deductible, then \$270	\$2,000.00	20%	\$4,000.00	Yes
Anthem Link Gold Blue Connection HMO 3000/20%/6000	\$15/\$50/deductible, then \$90/deductible, then \$400	\$38/\$150/deductible, then \$270	\$3,000.00	20%	\$6,000.00	Yes

Meeting your needs continues to be a top priority for Anthem. We are here to support you and answer any questions you may have.