



Medicare Part D Annual Notice Reminder

According to Medicare guidelines, any employee, retiree or dependent who is eligible for Medicare Part D and covered under (or who can apply for), your plan's prescription drug coverage must be informed about the plan's creditable coverage status. More specifically, on an annual basis, typically before October 15, and at certain trigger times during the year, the individual must be told whether their current prescription coverage is as good as, or creditable, to Medicare Part D. The notice also explains the penalties (increased cost for coverage and delayed effective date) applied to certain individuals who delay Part D enrollment if they have a gap in creditable coverage of 63 days or more.

As a best practice, FNA recommends mailing the notice annually to all plan participants. Generally, a notice sent to the employee or retiree is sufficient to serve as notice to covered dependents unless the employer knows that a dependent is Medicare eligible and lives at a different address.

The Medicare Part D notice may be included with other open enrollment information, as long as it is "prominent and conspicuous." This means that the notice itself or a reference to the notice must appear on the first page of the information with which the notice is included. If a reference is used, it must be in a separate box, bolded or otherwise offset, and in at least 14-point type. The Centers for Medicare and Medicaid Services (CMS) provides the following linked sample reference.

Click on the links below for more information regarding Medicare Part D disclosure requirements:

- [This notice](#) should be used when prescription drug coverage is creditable
- [This notice](#) should be used when prescription drug coverage is not creditable

NOTE – In addition to the annual Medicare Part D notice to participants described above, a *second notification rule applies*. This second notification rule requires certain plan sponsors to communicate creditable coverage status to CMS. Specifically, the Part D rule directs that employers who sponsor group health plans must also report to CMS within 60 days of the plan's anniversary whether the renewed coverage is creditable.

Further detailed information concerning this separate obligation and access to the Centers for Medicare and Medicaid Services (CMS) online disclosure form is available [HERE](#).

Contact our Medicare expert, Lori Mannello if you are uncertain of the status of your prescription drug plan(s) or have any other questions related to this reminder.

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We do not offer every plan available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800-MEDICARE to get information on all of your options.



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