

Keeping Medicare-eligible individuals informed about creditable coverage

2024 Connecticut Small Group ABF

There are certain communications needed to keep your Medicare-eligible employees and retirees up to date about their plans. Medicare Part D drug coverage helps to cover the cost of prescription drugs. To help your individuals with Medicare make an informed decision about their available medication coverage options, you are required to let them know whether their current prescription drug plan is “creditable” or “noncreditable.”

Creditable prescription plans ensure that when a Medicare-eligible individual pays for prescription medication, the costs are **the same or less** than what Medicare covers.

Noncreditable prescription plans means that drugs **cost more**, on average, than what Medicare's plan covers.

Medicare-eligible individuals with creditable plans can keep their current coverage to avoid higher costs for medications. Those with noncreditable drug plans may want to enroll in Medicare Part D to reduce their medication costs.

How to notify your Medicare-eligible individuals

Once a year, you must send a Notice of Non-Creditable Coverage to let Medicare-eligible individuals know if their current prescription drug benefit is noncreditable coverage. You need to do this every year for all Medicare eligible active employees and their dependents, Medicare eligible COBRA individuals and their dependents, Medicare eligible disabled individuals covered under the prescription drug plan, and any retirees and their dependents. A late enrollment penalty on individuals who do not maintain creditable coverage for a period of 63 days or longer following their initial enrollment period for the Medicare prescription drug benefit may apply. Accordingly, this information is essential to an individual's decision whether to enroll in a Medicare Part D prescription drug plan. For tips on what to include in your letter, take a look at the sample letter at cms.hhs.gov/creditablecoverage.

You should notify Medicare-eligible members about their coverage:

- 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.

How to notify CMS

This information must also be recorded with the Centers for Medicare & Medicaid Services (CMS). Go to cms.hhs.gov/creditablecoverage and complete the [Disclosure to CMS Form](#) unless your organization is exempt, as outlined in the disclosure to CMS guidance.

You can find details about creditable coverage, such as rules, forms, model disclosure notice language for beneficiaries, and requirements for your CMS disclosure notice, at cms.hhs.gov/creditablecoverage.

Are your plans creditable?

The 2024 Connecticut Small Group ABF plan(s) that include “noncreditable” prescription drug benefits are outlined on the next page.

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The following plans are noncreditable:

2024 Connecticut Small Group ABF	Contract code	Creditable coverage status
Anthem Balanced Pathway CT PPO 6000/20%/8000 w/HSA	AHA4	Noncreditable
Anthem Balanced Pathway CT PPO 8000/0%/8000 w/HSA	AHAC	Noncreditable

We are here to help

If you have questions about creditable and noncreditable coverage, please contact your Anthem representative.