

Keeping Medicare-eligible individuals informed about creditable coverage

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 medication coverage options, you are required to let them know if their current drug plan is “creditable” or “noncreditable.”

Creditable prescription plans:

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:

A noncreditable prescription plan 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 drugs. Those with noncreditable drug plans may want to enroll in Medicare Part D to reduce their drug costs.

How to notify your Medicare-eligible individuals

You must send a *Notice of Non-Creditable Coverage* every year to let Medicare-eligible individuals know if their current prescription drug benefit is noncreditable coverage. You need to do this yearly 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 63 days or longer following their initial enrollment period for the Medicare prescription drug benefit may apply. This information is essential to an individual’s decision to enroll in a Medicare Part D prescription drug plan. You can view a sample letter at cms.hhs.gov/creditablecoverage.

You should notify Medicare-eligible members about their coverage:

- Before their initial enrollment period for Part D.
- Before the annual coordinated election period each year, which begins October 15.
- Before the effective enrollment date in the plan.
- Every time a change impacts a plan’s creditable status.
- 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. For details about creditable coverage and forms you need, visit cms.hhs.gov/creditablecoverage.

Are your plans creditable?

The 2026 Connecticut Small Group ACA Plans that include “noncreditable” prescription drug benefits are outlined on the next page. Plans not listed on the next page are considered “creditable.”

We are here to help

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



Anthem Blue Cross and Blue Shield is the trade name of: In Colorado: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc. Copies of Colorado network access plans are available on request from member services or can be obtained by going to anthem.com/co/networkaccess. In Connecticut: Anthem Health Plans, Inc. In Indiana: Anthem Insurance Companies, Inc. In Georgia: Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. and Community Care Health Plan of Georgia, Inc. In Kentucky: Anthem Health Plans of Kentucky, Inc. In Maine: Anthem Health Plans of Maine, Inc. In Missouri (excluding 30 counties in the Kansas City area): RightCHOICE® Managed Care, Inc. (RIT), Healthy Alliance® Life Insurance Company (HAUC), and HMO Missouri, Inc. RIT and certain affiliates administer non-HMO benefits underwritten by HAUC and HMO benefits underwritten by HMO Missouri, Inc. RIT and certain affiliates only provide administrative services for self-funded plans and do not underwrite benefits. In Nevada: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc. also HMO Nevada. In New Hampshire: Anthem Health Plans of New Hampshire, Inc. HMO plans are administered by Anthem Health Plans of New Hampshire, Inc. and underwritten by Matthew Thornton Health Plan, Inc. In 17 southeastern counties of New York: Anthem Healthchoice Assurance, Inc. and Anthem Healthchoice HMO, Inc. In these same counties Anthem Blue Cross and Blue Shield HP is the trade name of Anthem HP, LLC. In Ohio: Community Insurance Company, Inc. In Virginia: Anthem Health Plans of Virginia, Inc. trades as Anthem Blue Cross and Blue Shield, and its affiliate HealthKeepers, Inc. trades as Anthem HealthKeepers providing HMO coverage, and their service area is all of Virginia except for the City of Fairfax, the Town of Vienna, and the area east of State Route 123. In Wisconsin: Blue Cross Blue Shield of Wisconsin (BCBSWI) underwrites or administers PPO and indemnity policies and underwrites the out of network benefits in POS policies offered by CompCare Health Services Insurance Corporation (CompCare) or Wisconsin Collaborative Insurance Corporation (WCIC). CompCare underwrites or administers HMO or POS policies; WCIC underwrites or administers Well Priority HMO or POS policies. Independent licensees of the Blue Cross and Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.

2026 Connecticut Small Group ACA Plans

2026 Connecticut Small Group ACA Plans	Contract code	Creditable coverage status
Bronze Pathway CT PPO	90GW	Noncreditable