STATE OF NEW YORK

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## DEPARTMENT OF CIVIL SERVICE
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PA06-01

To:        Health Benefits Administrators
From:      Employee Benefits Division
Subject:   Changes for Medicare Part D Implementation
Date:      January 4, 2006

Medicare Part D, a prescription drug plan introduced by Congress, becomes effective 01/01/2006 to provide prescription drug coverage to Medicare eligible enrollees not currently employed (**Title 42 § 411.104**).  To be eligible, the enrollee must be entitled to Medicare benefits under Part A or enrolled in Medicare Part B and live in the service area of a Part D plan.

When all members on a contract are enrolled in Medicare Part D based on Low Income Subsidy eligibility, NYSHIP policy allows the contract holder to choose to enroll in a non-drug benefit program or to retain prescription drugs offered by NYSHIP.  If the enrollee remains enrolled in NYSHIP prescription drugs, Medicare Part D would be secondary coverage for active employees and their dependents.  Non-active enrollees and their dependents that chose to remain enrolled in NYSHIP drug coverage would have Medicare Part D as their primary coverage and NYSHIP as secondary coverage.

Changes have been made to NYBEAS, the New York State Health Insurance Program (NYSHIP) enrollment system, to implement the tracking of Medicare Part D enrollment.  NYBEAS will track each member enrolled in Medicare Part D and/or identified as Low Income Subsidy (LIS) eligible.

Changes to the NYBEAS Update History inquire page Benefits and Benefits/Billing tabs include three new check boxes to track Med D enrollment, Low Inc Subsidy eligibility and No-Drug coverage authorization.



| **NYBEAS** | | | | | Home | | Worklist | | Help | |
|---|---|---|---|---|---|---|---|---|---|---|

Home > Compensate Employees > Administer NYBEAS Updates > Inquire > **NYBEAS Update History**      New Window

| Events | Benefits | Programs | Billings | Benefits/Billings | Accounting | Card #'s | Job | Ben. Status | ▶ |

**Employee Information**

SMITH, JANE                              EmplID: 123456789      Empl Rcd#: 0

**Plan Type**                                        View All    First ◀ 1 of 4 ▶ Last

Plan Type:  Medical   10

**Benefits Details**                                    View All    First ◀ 1-7 of 12 ▶ Last

| Effective Date | Covrg ElectDt | Election | CBR Evtld | Ben Plan | Plan Descr | Covrg Desc | Ben Prog | Program | Med Prmy | Med Reimb | Med D Enrolled | Low Inc Subsidy | No-Drug Authorized | View Deps |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 01/01/2006 | 12/12/2005 | Elect | 0 | 001 | Empire | Family | R51 | Re90/75NoR | ☑ | ☑ | ☑ | ☑ | ☑ | ℹ |
| 05/01/2005 | 12/12/2005 | Elect | 0 | 001 | Empire | Family | R01 | Ret 90/75 | ☑ | ☑ | ☐ | ☐ | ☐ | ℹ |
| 02/20/2004 | 02/12/2004 | Elect | 0 | 001 | Empire | Family | R16 | Ret w/Rx | ☐ | ☐ | ☐ | ☐ | ☐ | ℹ |
| 06/06/2003 | 05/21/2003 | Elect | 0 | 001 | Empire | Family | R01 | Ret 90/75 | ☑ | ☑ | ☐ | ☐ | ☐ | ℹ |
| 05/01/2001 | 05/21/2003 | Elect | 0 | 001 | Empire | Family | R16 | Ret w/Rx | ☑ | ☑ | ☐ | ☐ | ☐ | ℹ |
| 04/01/2001 | 10/17/2001 | Elect | 0 | 001 | Empire | Family | R16 | Ret w/Rx | ☐ | ☐ | ☐ | ☐ | ☐ | ℹ |
| 12/14/1999 | 02/03/2000 | Elect | 0 | 001 | Empire | Family | R01 | Ret 90/75 | ☐ | ☐ | ☐ | ☐ | ☐ | ℹ |

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The dependent summary has two new check boxes; Med D enrollment and Low Income Subsidy eligibility.



NYBEAS update and Job pages were modified to invoke program control behind the scenes. No new fields were added to these pages.

NYBEAS created a new page "Medicare Part D Change" for EBD to track Med D enrollments, Low Income Subsidy eligibility, and authorization of Drug/No-Drug program change. Currently, this change panel will only be available to Employee Benefits Division staff.

Participating Agencies, who act as the benefits administrator for their non-active enrollees, will be required to obtain information relative to Medicare Part D from their enrollees and forward copies to the Employee Benefits Division PA processing unit. Documentation should include proof of enrollment in a Part D plan, eligibility information from Social Security confirming eligibility for Low Income Subsidy help, and if requested, written confirmation of request to move to a no-drug coverage option.

**Enclosed** are error reports received from the Center for Medicare and Medicaid Services (CMS) for enrollees in your agency. These enrollees have "rejected" in our match with CMS and will not be deemed subsidy eligible until the enrollment records are corrected and a match is achieved. Subsidy eligibility will be granted retroactively, when appropriate, upon correction of the NYBEAS records. The three possible error reports are:

**Beneficiary Deceased** – these enrollees or enrolled dependents show as deceased on the CMS records. In most cases a date of death is provided. The Employee Benefits Division (EBD) will attempt to independently confirm the enrollee's / dependent's date of death and process the deceased transaction (CAN/ DEC or CCO/ DEC or DEP/DEL). This processing is being done at EBD due to the six month retroactivity rule for transactions that involve premium. You will be provided with a report of the enrollee / dependent deceased transactions that were processed.

**Medicare Not Entitled** – this report represents enrollees (dependents) that show Medicare primary on NYBEAS, but are not Medicare eligible according to CMS records.  These enrollees should be contacted to determine their correct Medicare status and NYBEAS files updated accordingly.


**Record does not exist on CMS** – these records represent enrollees / dependents for which a match to CMS records was not achieved.  The elements which were matched between NYBEAS and CMS were Last Name, First Initial, SSN and Date of Birth.  Verify that the NYBEAS items listed are correct for your enrollees, and make appropriate corrections to the file (remember to request documentation when changing items such as SSN or DOB).  If your enrollee indicates all items are correct, have them contact Social Security to verify their records carry the same information.


**Note:** your agency will only receive reports if you have enrollees that rejected for the reasons stated above – no blank reports will be produced.


Any questions regarding this information may be referred to the PA processing unit at 518-457-2364.