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NOTICE OF CREDITABLE COVERAGE FOR PERSONS WITH MEDICARE WHO ARE COVERED BY THE NEW YORK STATE HEALTH INSURANCE PROGRAM (NYSHIP)

This important notice is being sent to all NYSHIP enrollees to fulfill the annual creditable coverage notice requirements of the Medicare Prescription Drug Program. If you or a covered dependent are not yet eligible for Medicare, it does not pertain to you at this time, but may provide you with helpful information about how the Medicare Prescription Drug Program and NYSHIP work together. Please keep this notice.

Medicare prescription drug coverage has been available to everyone with Medicare since January 1, 2006. This notice has information about your current NYSHIP prescription drug coverage and Medicare prescription drug coverage.

NYSHIP provides creditable prescription drug coverage through The Empire Plan. This means that, on average for all Plan participants, The Empire Plan is expected to pay out as much or more than standard Medicare prescription drug coverage will pay. Because The Empire Plan prescription drug coverage is creditable coverage, you can keep your prescription drug coverage with The Empire Plan instead of joining a Medicare Prescription Drug Plan and not pay extra if you later decide to enroll in a Medicare Prescription drug coverage. In addition, there are limited times during the year that you can join a Medicare prescription drug plan. You may join when you are first eligible for Medicare or you may have to wait until the annual enrollment period October 15 – December 7 to enroll if your NYSHIP prescription drug coverage ends mid-year.

Required Notice

Employers are required by Medicare to provide a notice of creditable coverage to enrollees who are eligible to join a Medicare Prescription Drug Plan. The notice must be sent:

- Annually, by October 15 (the beginning of the open enrollment in a Medicare Prescription Drug Plan)
- Upon notification that a NYSHIP enrollee is Medicare eligible or prior to a NYSHIP enrollee's 65th birthday
- If the prescription drug coverage under The Empire Plan is no longer creditable
- Upon request

(over)

If Medicare is your primary coverage (pays before The Empire Plan)

Effective January 1,2013, if you are Medicare primary (Medicare pays claims before The Empire Plan), your prescription drug coverage will be provided under Empire Plan Medicare Rx, which includes a Medicare Prescription Drug Plan (PDP). Since Medicare rules allow enrollment in only one Medicare PDP, if you enroll in another Medicare PDP, you will be automatically disenrolled from the Empire Plan for all coverage. If you are an enrollee with family coverage, NYSHIP coverage for your covered dependent (s) also will end.

EXCEPTION: If you are approved for extra help with the cost of the Medicare prescription drug coverage and wish to enroll in a Medicare Prescription Drug Plan, you may be permitted to drop your Empire Plan prescription drug coverage and pay a lower monthly premium. Ask your former employer if this option is available to you and how to apply for it. If you have Empire Plan family coverage, you and all covered dependents must be eligible for the extra help and enrolled in a Medicare Prescription Drug Plan to drop your Empire Plan prescription drug coverage. If you decide to drop your Empire Plan prescription drug coverage, you may reenroll without a waiting period by contacting your former employer.

How do I get more Information?

- For information about your Empire Plan prescription drug coverage, refer to your plan documents or contact The Empire Plan Prescription Drug Program at 1-877-7-NYSHIP (1-877-769-7447).
- If you have questions about your Empire Plan prescription drug benefits and Medicare prescription drug coverage, please call your former agency.
- If you have questions about your Medicare benefits, call Medicare at 1-800-MEDICARE (1-800-633-4227) or visit www.medicare.gov, or refer to the *Medicare and You* handbook sent to you each year. (TTY 1-877-486-2048)
- If you have questions about getting extra help to pay for the cost of Medicare prescription drug coverage and how to apply, call Social Security at 1-800-772-1213 or visit www.socialsecurity.gov. (TTY 1-800-325-0778)