

Kaiser Permanente Medicare Health Plans

# **Creditable Coverage: The Basics**

If a health plan's prescription drug coverage is as good as or better than Medicare Part D, it's considered "creditable." Employers who offer prescription drug coverage to Medicare-eligible individuals are required to notify their beneficiaries and the Centers for Medicare & Medicaid Services (CMS) whether or not their coverage is creditable.

#### **Required Disclosure to Members**

Employer or labor and trust groups are required by CMS, not the health plan, to send a creditable coverage or non-creditable coverage disclosure notice to all Medicare-eligible beneficiaries who are not enrolled in a Part D plan. This notice advises members whether their prescription drug coverage is creditable or non-creditable. Since it can be challenging for employers to know who is Medicare eligible, they enclose a **Notice of Creditable Coverage** in their open enrollment materials. Additional Assistance If you have any questions about creditable coverage notification, please contact your account manager or retiree consultant.

continues



### Why the Creditable Coverage Notification Is Important to Members

The Medicare Modernization Act of 2003 (MMA) imposes a late enrollment penalty on beneficiaries who do not maintain creditable coverage or enrollment in the Medicare Part D prescription drug benefit for a period of 63 days or longer following their initial enrollment period for the Medicare Part D prescription drug benefit.

#### **Timing of Disclosure Notice to Members**

## You'll need to send a creditable or non-creditable coverage disclosure notice to all of your Medicare-eligible beneficiaries who aren't enrolled in a Part D plan:

- Annually, prior to October 15.
- Prior to the member's initial enrollment period for Part D (when they "age-in").
- Prior to enrollment in a plan.
- If you terminate all pharmacy coverage.
- When coverage changes for example, from creditable to non-creditable coverage or from Part D to creditable coverage.
- Upon member request.

#### **Timing of Disclosure Form to CMS**

Employer or labor and trust groups are also required to disclose to CMS whether the prescription drug coverage that is offered to Medicare-eligible individuals is creditable or non-creditable by submitting the **Disclosure to CMS Form**, found online at **www.cms.gov/creditable coverage**:

- Annually, no later than 60 days after the beginning of the plan year.
- Within 30 days after the termination of a prescription drug plan.
- Within 30 days after any change in creditable coverage status.

In California, Kaiser Permanente is an HMO plan and a Cost plan with a Medicare contract. In Hawaii, Oregon, Washington, Colorado, and Georgia, Kaiser Permanente is an HMO plan with a Medicare contract. In Virginia, Maryland, and the District of Columbia, Kaiser Permanente is a Cost plan with a Medicare contract. Enrollment in Kaiser Permanente depends on contract renewal.