

Medicare Coverage Disclosure Notice

This notice includes information about your current prescription drug coverage with the City and prescription drug coverage available to people with Medicare.

The prescription drug coverage the City offers is, on average, expected to pay out as much as standard Medicare prescription drug coverage and is considered creditable coverage.

- You can keep your City coverage and you will not pay extra if you later decide to enroll in Medicare coverage.
- If you drop or lose your coverage with the City and don't enroll in a credible prescription drug plan or Medicare coverage, you may pay more to enroll in Medicare later.
- If you decide to enroll in a Medicare prescription drug plan and drop your City coverage, you may not be able to get this coverage back.
- You can enroll in a Medicare prescription drug plan when you first become eligible for Medicare and each year from Oct. 15th to Dec. 7th.
- If you leave the City's coverage, you may be eligible for a special enrollment period to sign up for a Medicare prescription drug plan.
- If you go 63 days or longer without prescription drug coverage that's at least as good as Medicare's, your monthly premium will go up at least one percent per month for every uncovered month. For example, 20 months without

coverage results in a premium at least 20 percent higher for as long as you have Medicare coverage, and you may have to wait until the following November to enroll.

Please refer to the Medical Summary Plan Description (SPD) for information about how our plan pays benefits for participants also enrolled in Medicare. Our prescription plan is the primary payer.

COBRA beneficiaries and dependents who are also covered by Medicare receive the same coverage as active employees and elect coverage during open enrollment. For more information, refer to your COBRA notice. When COBRA ends, or absent a coverage election, coverage under the City plan ends.

Please contact the Benefits and Wellness office at 385-5125 for further information. You will receive this notice annually and as necessary.

For More Information:

- Visit www.medicare.gov or call 800-633-4227, or 877-486-2048 for TTY.
- Call your State Health Insurance Assistance Program (Number listed in the *Medicare & You Handbook*.)

Please keep this notice. You may need to present a copy of this notice when you join a Medicare Part D Plan to show that you are not required to pay a higher Medicare Part D premium.