Not Applicable to those in the HSA/HD Plan

City of Fort Wayne

Important Notice from City of Fort Wayne (we or us) About Your Prescription Drug Coverage under the City of Fort Wayne Employee Benefit Plan (our plan) and Medicare Part D Prescription Drug Coverage.

Important: This Notice applies to you <u>only if</u> you are a Part D eligible individual. A Part D eligible individual is someone who <u>has coverage under Medicare Part A or Part B</u> which may include active employees, disabled employees, COBRA participants, retirees, and their covered spouses and dependents. If you do not currently have Medicare Part A or Part B and have not recently applied for Medicare Part A or Part B, then this Notice does not apply to you.

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with us and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

- Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare prescription drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
- 2. We have determined that the prescription drug coverage offered by our plan is, on average for all plan participants, expected to pay out as much as the standard Medicare prescription drug coverage will pay and is considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join A Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th through December 7th. However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happens TO Your Current Coverage If You Decide to Join a Medicare Drug Plan?

If you do decide to join a Medicare drug plan and drop your medical expense coverage under our plan including your prescription drug coverage, be aware that you and your dependents may not be able to get this coverage back. Your prescription drug coverage under our plan is described in the Summary Plan Description we provided you. The portion of the cost of covered prescription drugs you are required to pay is indicated in the Schedule of Benefits. While you continue to be eligible for coverage under our plan, you will not lose coverage under our plan just because you choose to enroll for Medicare prescription drug coverage. However only drugs obtained in accordance with the requirements of our plan will be covered under our plan.

When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?

You should also know that if you drop or lose your coverage with us and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For more information about this notice or your current prescription drug coverage...

Contact our office for further information. **NOTE**: You will receive this notice annually and at other times in the future such as before the next period you can enroll in Medicare prescription drug coverage, and if this coverage through our plan changes. You also may request a copy of this notice at any time.

For more information about Medicare prescription drug coverage...

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare prescription drug plans.

For more information about Medicare prescription drug plans:

- Visit www.medicare.gov
- Call your State Health Insurance Assistance Program (see your copy of the Medicare & You handbook for their telephone number) for personalized help,
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

For people with limited income and resources, extra help paying for Medicare prescription drug coverage is available. Information about this extra help is available from the Social Security Administration (SSA) on the web at www.socialsecurity.gov, or you call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Date: October 14, 2017

Name of Entity/Sender: City of Fort Wayne

Contact--Position/Office: Human Resource Department

Address: 200 East Berry Street, IN 46802

Phone Number: 260-427-2634