

IMPORTANT INFORMATION FOR **MEDICARE ELIGIBLE RETIREES**

Effective January 1, 2013, the prescription plan for Medicare eligible retirees and long-term disability recipients is an *enhanced* Medicare Part D plan. The name of the plan is Express Scripts Medicare PDP for the State of Delaware. The prescription coverage under this plan is largely the same as the prescription plan in place prior to January 1, 2013.

Important Facts to know:

- With the State of Delaware's enhanced Part D Prescription Drug Plan;
 - The member will not be responsible for a deductible at the beginning of each calendar year; co-pays will remain the same.
 - The member will not be subjected to an increased cost in the Coverage Gap (Donut Hole) stage; co-pays will remain the same.
 - Enrollment in Medicare Parts A & B is required when eligible due to either age 65 or disability; late Part B enrollment may result in a permanent late enrollment penalty levied by the Social Security Administration (SSA). Upon retirement or placement on long-term disability benefits members must apply for Medicare Parts A & B as early as possible to avoid delays in receiving prescription coverage. (*Effective date should be equal to the pension or long-term disability effective date*)
 - Member enrollment in the State of Delaware Medicare Supplement plan, *Special Medicfill with prescription coverage*, will enroll the member in the State's enhanced Part D plan. A member cannot enroll in other Part D prescription coverage with another provider. Medicare limits members to one Part D plan; the only exception is Tricare for Life enrollment.
 - The State of Delaware does offer Special Medicfill without prescription coverage if a member wishes to purchase prescription coverage through an outside vendor.
 - The State of Delaware Medicare Supplemental Plan is a Medigap Plan and per Medicare regulations CANNOT coordinate with a Medicare Advantage Plan. Enrollment in both plans is not permitted. The Spousal Coordination of Benefits policy is applicable to spousal coverage under the Special Medicfill plan. Completion of the electronic Spousal Coordination of Benefits form is required for all new spousal healthcare enrollments under pension or long-term disability. Policy information and the electronic Spousal Coordination of Benefits form for pensioners are both available on the Statewide Benefits Office website.

❖ **Important – Time Sensitive Information**

- *Completed, Signed Pension Application Packets including required health applications and copy of Medicare Card(s) should be at the Office of Pensions 45 days prior to the pension effective date. This deadline is imposed to help ensure a smooth transition to your Medicare Supplement and your Part D Prescription Plan with the Pension Group of the State's coverage. In addition, there are Medicare regulations on the time frame permitted for retroactive Part D prescription plan enrollments.*
- **All members enrolled in healthcare benefits under the pension group (which includes long-term disability recipients) must apply for Medicare Part B insurance at the time of retirement or long-term disability if they are eligible. The agency's benefit representative must complete the CMS-L564 form for each member that requires Part B enrollment.**
 - The CMS-L564 form is known as the "Request for Employment Information" form. The agency's benefit representative should instruct the member(s) to take the completed CMS-L564 form(s) to their nearest local SSA field office as soon as possible to apply for Part B. Members should not go to a SSA field office to apply for Part B without a completed CMS-L564 form. The SSA will not process a Medicare Part B application without a completed CMS-L564 form. CMS-L564 forms are available on the CMS website and can be obtained using an internet search for CMS-L564 form.

❖ **Important – Time Sensitive Information** (continued)

- Medicare Part B eligibility is due to either obtaining age 65 or after 24 months of receiving Social Security disability benefits. If a member has Medicare Part A insurance, this means that the member must now enroll in Medicare Part B insurance at the time of retirement or placement on long-term disability benefits.

Required documents to be provided to the Office of Pensions

- Completed Health Application(s)
 - If one member is enrolling in the Special Medicfill plan and the other is not Medicare eligible, two separate health applications will be completed and submitted. One application for Special Medicfill and the other application for the non-Medicare health plan selection.
- Medicare Card (copy)
 - Must show effective dates for Parts A & B
 - Must be signed
 - Member's name must match Medicare records and all personal health information
- If the member does not have a Medicare Card showing Part A & B
 - If the member has not yet applied through Social Security Administration (SSA)
 - Member must apply for Medicare Parts A & B *immediately*
 - *Effective date should be equal to the pension or long-term disability benefit effective date*
 - CMS-L564 form should be completed and given to each member enrolling in Part B **prior** to the member's SSA appointment or visit to their local SSA field office
 - The SSA will not process a Part B application without the completed CMS-L564 form. The CMS-L564 form can be obtained from the CMS.gov website and can be located by using an internet search for CMS-L564 form.
 - Member must provide a signed copy of their Medicare Card showing both Parts A & B immediately upon receiving it.
 - Late Part B enrollment may result in a permanent late Part B enrollment penalty levied by the SSA, which would be included in their Part B insurance cost with the SSA. Remember Medicare Part B eligibility is also due to disability, which would occur after 24 months of receiving disability benefits from Social Security. If a member has Medicare Part A only then they need to apply for Medicare Part B with an effective date equal to the pension or long-term disability effective date.
 - When applying for Medicare Part B, the member should ask the SSA field office representative to mail them a benefit verification letter showing their Part B enrollment date. The SSA can generate and mail this letter once they process the Medicare Part B application, which usually takes several days. A copy of this letter can be sent to the Office of Pensions until the Medicare Card arrives. The member can also create an online account with SSA.gov and print their own benefit verification letter.
 - If the member does not have a Medicare Card with Parts A & B, a SSA Benefit Entitlement letter, AND the member is going onto pension benefits more than three months retroactively, or if there is another extenuating circumstance:
 - Have the pensioner or long-term disability recipient complete and sign a healthcare application for a non-Medicare plan selection to enroll them in a non-Medicare health plan until they receive their Medicare card or their SSA Benefit Entitlement letter.
 - Please contact the Office of Pensions and advise of the situation
 - This is a last resort option.
 - If the member has Medicare Part A information it should be included on the application.
 - Please place a note at the top of the application that the member has enrolled in Medicare Part B.