



***Important Notice From
The Department of Employee Trust Funds
About Your Prescription Drug
Coverage and Medicare***

**Certificate of Creditable Coverage for Medicare Part D
KEEP THIS NOTICE – DO NOT DISCARD**

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with the State of Wisconsin Group Health Insurance program (State) and prescription drug coverage for people with Medicare. **Read this notice carefully. It explains the options you have under Medicare prescription drug coverage, and can help you decide if you want to enroll.** Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

- 1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Part D Prescription Drug Plan (Medicare PDP) or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare 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. The Department of Employee Trust Funds (ETF) has determined that the prescription drug coverage offered by the State is, on average for all plan participants, expected to pay as much as the standard Medicare prescription drug coverage and is therefore 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.**

You may have wondered how Medicare's prescription drug coverage (Part D) might affect you. For 2008 prescription drug coverage will be available to everyone with Medicare through various Medicare PDP's. All Medicare PDP's will provide at least a standard level of coverage set by Medicare. Some plans might also offer more coverage for a higher monthly premium.

Because ETF has determined that the existing prescription drug coverage administered by Navitus Health Solutions (Navitus) is "Creditable Coverage", it is not necessary to enroll in a Medicare PDP. You will not be penalized and pay extra if you later decide to enroll.

People with Medicare can enroll in a Medicare PDP from November 15, 2008 to December 31, 2008. However, because you have "**Creditable Coverage**" through Navitus, while you can choose to join a Medicare PDP, you are not required to. Each year, you will have the opportunity to enroll in a Medicare PDP from November 15th through December 31st.

Important note: If you drop or lose your prescription drug coverage with the State, you and your dependents may not be able to get this coverage back later.

If you lose your current creditable prescription drug coverage through Navitus, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare PDP.

You should also know that if you drop or lose your coverage with the State and do not enroll in Medicare prescription drug coverage within 63 continuous days after your current coverage ends, you might pay more to enroll in Medicare Part D PDP later.

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If you are Medicare eligible, and go without creditable prescription drug coverage for 63 consecutive days or longer, your monthly Medicare PDP premium may go up by 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 November to join. For more information about your Medicare premium, please contact Medicare directly.

This notice may be sent to you at various points in the future, such as prior to the next Medicare prescription drug coverage enrollment period or whenever coverage changes. You may also request a copy of this notice from ETF at any time. For more information about this notice, your current prescription drug coverage, or your options under the Medicare prescription drug coverage, please **contact Navitus or ETF.**

Navitus Customer Care

Phone toll free: 1-866-333-2757

Hours: 24 hours a day, 7 days a week
(Closed Thanksgiving and Christmas Day)

Department of Employee Trust Funds

Phone toll free..... 1-877-533-5020

Mailing Address:

Local to Madison.... 608-266-3285

P.O. Box 7931

Web site..... <http://etf.wi.gov>

Madison, WI 53707-7931

In addition, more detailed information about Medicare plans that offer prescription drug coverage is available in the “Medicare & You” handbook, which is updated annually. You will get a copy of the handbook in the mail from Medicare when you become eligible. While you may also be contacted directly by Medicare PDP providers, you can get more information about Medicare prescription drug coverage from the following sources:

- Visit www.medicare.gov
- Call your State Health Insurance Assistance Program for personalized help (see the inside back cover of the “Medicare & You” handbook for their telephone number)
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
- **Prescription Drug Helpline:**.....Phone toll free: 1-866-456-8211, Monday through Friday
- **Medigap Helpline:**.....Phone toll free: 1-800-242-1060 (leave a message)

For people with limited income and resources, extra help paying for a Medicare prescription drug plan is available. Information about this extra help is available from the Social Security Administration (SSA). For more information about this extra help, visit SSA online at www.socialsecurity.gov, or 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 prescription drug plans approved by Medicare you may need to provide a copy of this notice when you join to show that you have maintained creditable coverage and, therefore, are not required to pay a higher premium (penalty)

Additional copies of this notice can be requested from ETF.