

# State of California-Health and Human Services Agency Department of Health Services



November 15, 2006

### TO: ALL GENETICALLY HANDICAPPED PERSONS PROGRAM (GHPP) CLIENTS

Important Notice from Genetically Handicapped Persons Program
About Your Prescription Drug Coverage and Medicare

## YOU MAY DISREGARD THIS LETTER IF YOU DO NOT QUALIFY FOR MEDICARE DURING THE 2007 CALENDAR YEAR

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 Genetically Handicapped Persons Program (GHPP) 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. 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 Prescription Drug Plan 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. GHPP has determined that its prescription drug coverage is, on average for all plan participants, expected to pay out as much as the standard Medicare prescription drug coverage pays and is considered Creditable Coverage.

Because your existing coverage is, on average, at least as good as standard Medicare prescription drug 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 can join a Medicare drug plan when you first become eligible for Medicare and each year from November 15<sup>th</sup> through December 31<sup>st</sup>. This may mean that you may have to wait to join a Medicare drug plan and that you may pay a higher premium (a penalty) if you join later. You may pay that higher premium (a penalty) as long as you have Medicare prescription drug coverage. However, if you lose creditable prescription drug coverage, through no fault of your own, you will be eligible for a sixty (60) day

Internet Address: http://www.dhs.ca.gov/pcfh/cms

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Special Enrollment Period because you lost creditable coverage to join a Part D plan. 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.

If you decide to join a Medicare drug plan, your GHPP coverage will be affected. See below for more information about what happens to your current coverage if you join a Medicare drug plan.

If you do decide to enroll in a Medicare prescription drug plan, be aware that this will be your principal source of drug coverage. GHPP will not provide wraparound drug coverage. This means that GHPP will not be supplementing the drug coverage of the Part D drug plan that you chose. However, GHPP will provide coverage for drugs specifically excluded in the Medicare drug plans.

At this time, enrollment into a Medicare drug plan is not required by GHPP. You will retain your current GHPP drug coverage if you choose not to enroll in a Medicare Part D drug plan. However, if you do choose to enroll into a Medicare drug plan, you will lose your GHPP drug coverage except for those drugs that are specifically excluded in the Part D drug plans.

If you currently are designated a Medicare-Medi-Cal (Medi-Medi) recipient, enrollment into a Medicare drug plan is mandatory and you will receive a notice from Medicare that you have been auto-enrolled into one of the participating prescription drug plans. If you have been auto-enrolled, GHPP will only pay for drugs that are specifically excluded in the Part D drug plans.

Your current GHPP coverage pays for other health expenses, in addition to prescription drugs, and you will still be eligible to receive all of your current other health benefits if you choose to enroll in a Medicare prescription drug plan.

You should also know that if you drop or lose your coverage with GHPP 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 prescription drug coverage that's at least as good as Medicare's prescription drug coverage, your monthly premium may go up by at least 1 percent of the base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without coverage, your premium may consistently be at least 19 percent higher than the base beneficiary

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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 this notice or your current prescription drug coverage contact the GHPP office in Sacramento at (916)-327-0470. NOTE: You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through GHPP changes. You also may request a copy.

For more information about your options under Medicare prescription drug coverage see "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 drug plans.

For more information about Medicare prescription drug coverage:

- Visit <u>www.medicare.gov</u>
- Call your State Health Insurance Assistance Program (see the inside back cover of 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 K(1-877-486-2048).

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at <a href="https://www.socialsecurity.gov">www.socialsecurity.gov</a>, 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 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 whether or not you are required to pay a higher premium (a penalty).

Sincerely,

#### **Original Signed by Marian Dalsey**

Marian Dalsey, M.D., M.P.H., Chief Children's Medical Services Branch