

Medicare Part D Notice of Creditable Coverage

Notice of Creditable Coverage

This notice is being provided to you by Ohio PERS as required by Medicare. Your OPERS-sponsored prescription drug coverage through Express Scripts will end on June 30, 2016. This notice confirms that your 2016 prescription drug coverage through Express Scripts was Creditable Coverage and enrollment in a plan during 2016 open enrollment is available without penalty to you. Some insurers require proof that your previous plan constituted Creditable Coverage; therefore, you should keep this with your other important health insurance papers.

Important Notice about our prescription drug coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Express Scripts 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 during 2016. You should compare 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:

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. OPERS has determined that the prescription drug coverage offered by Express Scripts during the 2016 plan year is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your 2016 coverage is Creditable Coverage, you will not pay a higher premium (a penalty) if you decide to join a Medicare drug plan prior to July 1, 2016. The impact of delaying enrollment is discussed later in this notice.

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 to December 7th. However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also 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?

Your current coverage through Express Scripts is ending on June 30, 2016. If you want to join a Medicare drug plan for the remainder of the 2016 plan year, you must enroll in one prior to July 1, 2016.

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

You may pay a higher premium (a penalty) to join a Medicare drug plan if you don't join a Medicare drug plan within 63 continuous days after your current coverage ends.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly 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 this notice or your current prescription drug coverage:

Contact our office at the number below for further information.

For more information about your options under 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 drug plans. For more information about Medicare prescription drug plans:

- Call the OPERS Medicare Connector, powered by OneExchange, to speak with a licensed benefit advisor and learn about the Medicare Plans that meet your needs (1-844-287-9945). TTY users should call 1-877-486-2048. Online at www.medicare.oneexchange.com/opers.
- Visit www.medicare.gov
- 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 1-877-486-2048.

If you have 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) online at www.socialsecurity.gov, or you call them at 1-800-772-1213 (TTY 1-800-325-0778).



Medicare Part D Notice of Creditable Coverage *(continued)*

Updated April 28, 2016

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 that you are not required to pay a higher premium penalty.

<i>Date:</i>	<i>April 28, 2016</i>
<i>Name of Entity/Sender:</i>	<i>Ohio Public Employees Retirement System</i>
<i>Address:</i>	<i>277 E. Town Street, Columbus, OH 43215</i>
<i>Phone:</i>	<i>1-800-222-7377</i>

2016 OPERS Prescription Drug Plan	Jan. 1, 2016 - June 30, 2016
Retail pharmacy network	55,000 pharmacies
Annual deductible(s)	\$0 (generics)* \$0 (brands)*
Formulary	High performance
Generics	20% Co-insurance \$4 min/\$8 max retail \$10 min/\$20 max mail
Formulary brand	30% Co-insurance \$30 min/\$60 max retail \$75 min/\$150 max mail
Non-formulary brand	NOT COVERED
Specialty drugs	40% Co-insurance \$150 max
Value-based insurance design (VBID) - Generics for chronic conditions	\$0
VBID - Diabetes items for disease management participants	30% Co-insurance \$30 min/\$60 max retail \$75 min/\$150 max mail
OTC/generic PPIs (heartburn meds)	No OTCs, Generic 50% Co-insurance \$25 retail \$62.50 mail min
Brand PPIs	NOT COVERED
maximum out-of-pocket	\$1,950 (per ACA limits)