

Introduction to the Re-assignment Notice: Plan Premium Increase Version

What Is the Purpose of This Notice?

The purpose of this notice is to inform people who qualify for the full extra help and whose plan premiums are increasing what plan they will be re-assigned to if they don't tell their current plan they want to stay or join a new plan on their own by December 31, 2008.

The notice includes two pages. The first page is a letter printed on the front and back of blue paper. The second page includes a list of plans for each region that have premiums at or below the low-income premium subsidy amount.

Who Gets This Notice?

Medicare will re-assign people who qualify for the full extra help whose premium in 2009 would be above the regional low-income premium subsidy amount, and who are still enrolled in the Medicare Prescription Drug Plan in which Medicare enrolled them.

When Do People Get This Notice?

The notice will be mailed by early November.

What Should People Do Next?

People with Medicare should consider their options carefully. People who want more information about Medicare prescription drug coverage can do the following:

- Visit www.medicare.gov and get personalized drug plan information. If they don't have computers, their local libraries or senior centers may be able to help them look at this information.
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
- Call their State Health Insurance Assistance Program (SHIP) for free personalized health insurance counseling. See the "Medicare & You" handbook or call 1-800-MEDICARE for the telephone number for their state.

People can reference CMS Publication No. 11209 when calling Medicare or their SHIP with questions about this notice.



7500 Security Boulevard
Baltimore, MD 21244-1850

<BENEFICIARY FULL NAME>
<ADDRESS>
<CITY STATE ZIP>

HICN <1234>
October 2008

Please read this notice carefully and keep it for your records.

Your Medicare prescription drug coverage is changing. You are getting this notice because your premium costs in <Old Organization Marketing Name>'s <Old name of plan> will increase beginning January 1, 2009. **Because your costs are increasing, Medicare is giving you ways to get lower costs. You have three options to consider:**

Option 1: Medicare will enroll you in <New Organization's Name>'s <New Name of plan>. Your coverage will begin January 1, 2009. Your monthly premium payments will be lower than if you stay in your current plan. With this new Medicare drug plan, you will pay the following:

- \$0 monthly premium
- <\$0 or up to \$60> for your yearly prescription drug plan deductible
- <insert LIS copayment amounts > when you fill a prescription covered by the plan

If you want Medicare to enroll you in this plan, you don't need to do anything to enroll.

Please call <New Name of plan> at <New Plan phone> for more information about this Medicare drug plan. You should ask if your prescriptions are covered, about the drug coverage rules (like prior authorization) that may affect your prescriptions, and what pharmacies you can use. You can also visit <Plan website> on the web for more information.

Note: If you have moved recently, call <New name of plan> to be sure it serves where you live now. If you are getting this notice because you are a representative payee for someone with Medicare, please call this plan to be sure it serves the area where the person with Medicare currently lives. If it doesn't, call 1-800-MEDICARE to choose and join a plan that serves that state. TTY users should call 1-877-486-2048.

Para obtener información en español, llame GRATIS al 1-800-MEDICARE (1-800-633-4227). Los usuarios con teléfono de texto (TTY) deben llamar al 1-877-486-2048.

Option 2: You can stay in your current plan, <Old Organization Marketing Name>'s <Old name of plan>. If you stay, you will pay <cost> each month for your premium in 2009.

Besides your premium cost, here are other things to consider when deciding whether to keep your current plan:

- Whether your plan still covers the prescription drugs you need next year
- Whether your plan will still include the pharmacies you use
- Whether you are satisfied with your current plan's service and quality

If you want to stay in your current plan, call your plan at <Old plan telephone number> before December 31, 2008, and tell them you want to stay a member of this plan. **If you don't tell your plan you want to stay, Medicare will enroll you in a different plan.**

If you choose to stay in your current plan, don't send any money now. Your plan will bill you for your premium payment in the near future.

Option 3: You can switch to a different Medicare drug plan. To switch to a different Medicare drug plan, please see the list of plans included with this notice. Compare plans and join a new plan that meets your needs. You should find out which plans cover the prescriptions you take and include the pharmacies you use. For help comparing plans and joining a plan that works for you, call 1-800-MEDICARE (1-800-633-4227) or your State Health Insurance Assistance Program at <insert state number>, or visit www.medicare.gov.

If you choose a new plan, you should do so before December 31, 2008. This gives the new Medicare drug plan time to mail your membership materials before your new coverage becomes effective.

Please consider your options carefully. For help understanding this notice, please show it to a family member, case manager, or someone else you trust. You can also call your State Health Insurance Assistance Program at <insert state number> or 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. You can join, switch, or drop a Medicare drug plan at any time for coverage effective the first day of the next month.