

**Important Notice from Law Enforcement Firefighters Health & Welfare Trust  
LEOFF Trust Plan 3  
Regarding the Coverage and Medicare in 2016**

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage under your LEOFF TRUST health plan and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join Medicare's prescription drug coverage. 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. The LEOFF TRUST no longer provides prescription drug coverage under LEOFF TRUST Health Plan C so on average for all plan participants will NOT pay out as much as standard Medicare prescription drug coverage pays. Therefore the coverage is considered Non-Creditable Coverage. This is important because, most likely, you will get more help with your drug costs if you join in a Medicare drug plan, than from any prescription drug coverage from the LEOFF TRUST Plan C. This is important because it may mean that you may pay a higher premiums (a penalty) if you do not join a Medicare drug plan when you first become eligible.
  
  3. You can keep your current coverage from Plan C, however because your coverage is non-creditable, you have decisions to make about Medicare prescription drug coverage that may affect how much you pay for that coverage, depending on if and when you join a drug plan. When you make your decision, you should compare your current coverage, including what drugs are covered, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Read this notice carefully – it explains your options.
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## **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.

**If Employer/Union Sponsored Health Plan:** However, if you decide to drop your current coverage with LEOFF TRUST, since it is employer/union sponsored group coverage, you will be eligible for two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan; however you also may pay a higher premiums (a penalty) because you did not have creditable coverage under the LEOFF TRUST Plan C.

**If Previous Coverage Provided by LEOFF TRUST was Creditable Coverage:** Since you are losing creditable prescription drug coverage under a LEOFF TRUST Creditable Plan, you are also eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

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

Since the coverage under LEOFF TRUST Plan C is not creditable, depending on how long you go without creditable prescription drug coverage you may pay a penalty to join a Medicare drug plan. Starting with the end of the last month that you were first eligible to join a Medicare drug plan but didn't join, if you go 63 continuous days or longer without prescription drug coverage that's creditable, 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 (penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

## **What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan?**

If you decide to join a Medicare drug plan, your current LEOFF TRUST Plan coverage will not be affected. If you decide to join a Medicare drug plan and drop your current LEOFF TRUST Plan coverage, your Plan C will not be affected but if you drop Plan C altogether, please be aware that you and your dependents will not be able to get this coverage back.

## **For More Information about This Notice or Your Current Prescription Drug Coverage...**

**CMS Form 10182-CC Updated April 1, 2011** According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0990. The time required to complete this information collection is estimated to average 8 hours per response initially, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Contact the person listed below for further information or call the LEOFF TRUST Office at 509-484-2388. **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 your LEOFF TRUST Plan changes. You also may request a copy of this notice at any time.

**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 coverage:

- Visit [www.medicare.gov](http://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. For information about this extra help, visit Social Security on the web at [www.socialsecurity.gov](http://www.socialsecurity.gov), or call them at 1-800-772-1213 (TTY 1-800-325-0778).

**Remember: Keep this Non 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, therefore, whether or not you are required to pay a higher premium (a penalty).**