10/15/2019

name
address
city, state zip

name:

Prior to enrolling in the Community Blue Medicare PPO, it appears that you did not have prescription drug coverage that met Medicare’s minimum standards. If your records show that you did have prescription drug coverage from mm/dd/yyyy to mm/dd/yyyy, you may be able to avoid paying the monthly penalty by returning the enclosed form.

Please complete the enclosed form and return it immediately to Community Blue Medicare PPO PO BOX 535049 PITTSBURGH, PA15253-5049 or call us at 1-877-807-0710, TTY 711 to provide us with the information by 11/14/2019.

If you don’t contact Community Blue Medicare PPO by 11/14/2019, we will assume the above information is correct and you will owe a late enrollment penalty.

Highmark Senior Health Company is a PPO plan with a Medicare contract. Enrollment in Highmark Senior Health Company depends on contract renewal.
Avoid a Penalty Related to Your Medicare Prescription Drug Plan Premium!

If you fail to respond to this notice by 11/14/2019, you will owe a penalty. You may be able to avoid a penalty by completing the attached “Declaration of Prior Prescription Drug Coverage” form or calling your Medicare drug plan directly to provide this information.

Why am I getting this letter?

Community Blue Medicare PPO has sent you the attached form because it appears that you had a break in prescription drug coverage for 63 days or more and you may owe a penalty. We need you to complete the enclosed form or call us to give more information about your prior drug coverage. This information will help us determine if you had coverage that met Medicare’s minimum standards and can avoid paying the late enrollment penalty.

What is the Part D late enrollment penalty?

The late enrollment penalty is an amount added to your monthly Medicare drug plan (Part D) premium for as long as you have Medicare prescription drug coverage. This penalty is required by law and is designed to encourage people to enroll in a Medicare drug plan when they are first eligible or keep other prescription drug coverage that meets Medicare’s minimum standards.

You may owe a late enrollment penalty if you didn’t join a Medicare drug plan when you were first eligible for Medicare Part A and/or Part B, and:

- You didn’t have other prescription drug coverage that met Medicare’s minimum standards; OR
- You had a break in coverage of at least 63 days.

How do I know if my prior prescription drug coverage met Medicare’s minimum standards?

Most plans that offer prescription drug coverage, like plans from employers or unions, must send their members a notice explaining how their prescription drug coverage compares to Medicare prescription drug coverage. This notice tells you if the prescription drug coverage you had through your prior plan was “creditable prescription drug coverage,” which means that it met Medicare’s minimum standards. If you didn’t get a separate written notice, your plan may have provided this information in its benefits handbook. If you don’t know if the prescription drug coverage you had met this standard, you should contact your prior plan.
**When do I need to respond?**
You must respond by 11/14/2019 to avoid the penalty.

**Where do I return the form?**

**Option 1:**
Complete the “Declaration of Prior Prescription Drug Coverage” form attached to this sheet and mail it back to your Medicare drug plan at:
- Community Blue Medicare PPO
- PO BOX 535049 PITTSBURGH, PA15253-5049

**Option 2:**
Instead of completing the enclosed form, you can call your Medicare drug plan to provide them with additional information they need.
- Community Blue Medicare PPO 1-877-807-0710
- TTY users should call 711

**What if I have questions?**
If you have questions about the information in this form or the late enrollment penalty or would like to complete this form over the telephone, call your Medicare drug plan.
- Community Blue Medicare PPO, 1-877-807-0710 8:00 a.m. to 8:00 p.m., seven days a week.
- TTY users should call 711

You may also contact Medicare:
- Visit www.medicare.gov on the web
- Call 1-800-MEDICARE (1-800-633-4227)
- TTY users call 1-877-486-2048.