Responses to Public Comments on CMS - 10182 – Model Creditable Coverage Disclosure Notices

Background:

Model Creditable Coverage Disclosure Notices and General Creditable Coverage Guidance were posted in the Federal Register for Emergency Clearance on February 11, 2006 and on May 15, 2006 for a 60 day comment period. There were no public comments submitted during the 30 day emergency posting of these documents. There was one public commenter that submitted two comments to the May 15, 2006 Federal Register posting of these documents. The document that follows reflects a summary of the comments and recommendations made by the close of business July 11, 2006, and our responses to these questions and concerns. Final Model Creditable Coverage Disclosure Notices and Guidance is expected to be released for final posting on August 15, 2006.

Model Personalized Disclosure Notice

Comment: We received one comment regarding the use of an individual's social security number (SSN) on the Model Personalized Disclosure Notice. The commenter indicated that due to security concerns, most entities have replaced the social security number with a unique member identification number or the individual's date of birth. The commenter recommended that we delete the social security number from the Model Personalized Disclosure Notice and replace it with Date of Birth or another unique member identification number.

Response: In the General Creditable Coverage Guidance paper released in April 2006, we indicated that the entity could use either the Social Security Number or a beneficiary's Health Insurance Claim (HIC) number on the Personalized Creditable Coverage Notice. CMS included these two data elements on the Personalized Disclosure Notice as a way to identify that the disclosure notice was prepared for the named individual and as a tool for Part D plans checking the prior creditable coverage history of a beneficiary with CMS systems. During the regulation process, many entities commented that they do not have available an individual's HIC. Due to the fact that the HIC is not readily available to all entities preparing a Personalized Disclosure notice, we felt that another unique identifier, such as a Social Security number, was needed.

In response to this comment received, CMS is in agreement that the SSN could be replaced by an individual's date of birth or another member identification number unique to the individual. We will be issuing a revised Model Personalized Disclosure Notice and updating the General Creditable Coverage Guidance to reflect this change.

All Model Creditable Coverage Disclosure Notices

Comment: We received one comment requesting that all three model disclosure forms be consistently formatted the same.

Response: The Model Disclosure Notices contain the same basic disclosure and beneficiary information. They were formatted to emphasize different areas to help educate the beneficiary

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on key issues they need to know regarding whether the coverage they have is creditable or not. For instance, if the coverage they have is not creditable, the information regarding the Initial Enrollment Period and the Late Enrollment Penalty appears toward the beginning of the Model Non-Creditable Disclosure Notice. In the Model Creditable Coverage Notice, because they have creditable coverage, this information is toward the end of the document with more emphasis on what the impact of enrolling in a Part D plan will have on their current coverage (i.e., current plan will coordinate benefits, current plan will terminate if they enroll in Part D, etc.).

CMS agreed that making some minor formatting changes to the disclosure notices would make the documents more consistent. However, CMS believes that there is a need to have the order of information in the Creditable Disclosure Notice differ from the Non-Creditable Disclosure Notices to assist in beneficiary education about the status of the prescription drug plan being provided by the entity and whether the individual can retain their coverage and delay enrolling in a Medicare prescription drug plan without being subject to a late enrollment penalty.