

Part D Model EOB Crosswalk

60-Day PRA Package

Model 2023 EOB and instructions (old version)	Model 2025 EOB and instructions (new version)	Type of Change ¹	Reason for Change	Burden Change ²
Throughout	Updated year to 2025. Updated months in exhibits to reflect benefits used in March and an EOB provided in April.	Rev.	Accuracy	Yes
Instructions – Drug Pricing Information	Revised instructions to remove “appropriate” and include that “plans should use their clinical expertise when deciding which alternative drugs to list”.	Rev.	Clarity	No
Instructions – Drug Pricing Information	Revised “gross drug spend or TrOOP” as “gross covered prescription drug costs or true out-of-pocket (TrOOP) amounts”.	Rev.	Clarity	No
Instructions: Other things to know	Revised as “Important things to know”	Rev.	Clarity	No
Instructions – Other things to know	Redefined “Extra Help” as referring to the low-income subsidy (LIS) described in Subpart P of the Part D regulations.	Rev.	Clarity	No
Instructions – Other things to know	Redefined “Out-of-Pocket Costs” and “TrOOP” as referring to the enrollee’s incurred costs, as defined at 1860D-2(b)(4)(C).	Rev.	Clarity	No
Instructions – Other things to know	Redefined “Total Drug Costs” as referring to gross covered prescription drug costs, as defined at 1860D-15(b)(3).	Rev.	Clarity; Statutory change	No
N/A	Added to Instructions – Important things to know: “Do not provide information in the Part D EOB about drugs or supplies that would be covered for a beneficiary in original Medicare under Parts A and/or B; for an enrollee in a Part C plan under the plan’s Part A/B coverage.”	Add	Clarity; moved from Chart 1 instructions.	No
N/A	Added to Instructions – Important things to know: “In charts 1, 1A, and 2, the amounts to be used for ‘you paid’ are the final amounts after ‘other payments’ (those made by programs, organizations, or other plans; ‘other payments’ may include TrOOP and non-TrOOP amounts).”	Add	Clarity	Yes

¹ Types of Change: Rev. = Revision, Del. = Deletion, Add = Addition

² We estimate the changes to the Part D Model EOB, overall, will increase the one-time burden for a business operations specialist to program the model template into plan systems. See sections 12 and 15 of the Supporting Statement for detailed discussion.

Model 2023 EOB and instructions (old version)	Model 2025 EOB and instructions (new version)	Type of Change¹	Reason for Change	Burden Change²
Throughout	Capitalized defined terms “Out-of-Pocket Costs” and your “Total Drug Costs”.	Rev.	Clarity	Yes
Chart 1, 1A, and 2 instructions.	Added that “other payments” are “(those made by programs, organizations, or other plans; “other payments” may include TrOOP and non-TrOOP amounts)”.	Rev.	Clarity	Yes
Throughout instructions to plans: out-of-pocket threshold	Revised instructions to plans to display the amount of an enrollee’s TrOOP limit instead of the enrollee’s out-of-pocket costs threshold.	Rev.	Accuracy	Yes
Chart 1 and 2 instructions	Revised instructions to plans to display the amount of an enrollee’s TrOOP limit instead of the enrollee’s out-of-pocket costs.	Rev.	Statutory change	Yes
Throughout	Removed decimal points and cents when dollar amounts ended in “.00”	Rev.	Readability	Yes
Throughout	Changed curly brackets to square brackets	Rev.	Clarity and consistency	Yes
Throughout – Other Payments description: Removed reference to Medicare’s Coverage Gap Discount Program	Added to Other Payments explanation: employer or union health plans and TRICARE. Also added “some of these payments may not count towards your Out-of-Pocket Costs.”	Rev.	Clarity	Yes
Chart 1A: Removed explanations of Out-of-Pocket Costs, Total Drug Costs, and Other Payments	Deleted	Del.	Clarity; Chart 1A does not include any amounts that count toward TrOOP or total drug costs.	Yes
Chart 2: Removed emphasis and total drug cost reference in chart.	Deleted	Del.	Statutory change	Yes
N/A	Chart 2: Added “year-to-date” to Out-of-Pocket Costs total	Add	Clarity	Yes
Throughout: revised description of Out-of-Pocket Costs Include	Added to description: employer or union health plans and TRICARE	Rev.	Statutory change	Yes
Throughout: revised description of “Out-of-Pocket Costs DON’T include payments made for”	Removed from description: “Payments made for your drugs by employer or union health plans; some government-funded programs (including TRICARE)”	Rev.	Statutory change	Yes
Throughout: revised instructions for including “Drugs you got from a non-network pharmacy that doesn’t meet our requirements”	Revised instructions to include “Drugs you got from a non-network pharmacy that doesn’t meet our requirements” if applicable.	Rev.	Clarity	Yes
Throughout	Removed references to Coverage Gap phase in text and charts. Revised references to Drug	Rev.	Statutory change	Yes

Model 2023 EOB and instructions (old version)	Model 2025 EOB and instructions (new version)	Type of Change¹	Reason for Change	Burden Change²
	Payment Stages as having 3, not 4, stages			
Chart 3	Added to description of You're in Stage 1: "The deductible doesn't apply to covered insulin products and most adult Part D vaccines, including shingles, tetanus and travel vaccines."	Add	Statutory change	Yes
Chart 3	Replaced "initial coverage limit" with "TrOOP limit"	Rev.	Statutory change	Yes
Throughout	Added to the description of Catastrophic Coverage that covered drugs are "covered Part D drugs."	Rev.	Clarity	Yes
Chart 3	Replaced "total drug costs" with "Out-of-Pocket Costs"	Rev.	Clarity	Yes
Chart 3: Stage 2, What Happens Next?	Revised What Happens Next? Text box reference to TrOOP and Catastrophic Coverage: "Once you have an additional \$[insert amount needed in additional TrOOP to meet the TrOOP limit] in Out-of-Pocket Costs, you move to the next payment stage (Stage 3: Catastrophic Coverage)."	Rev.	Statutory change	Yes
Chart 3 for enrollees who are in the coverage gap stage	Deleted	Del.	Statutory change	Yes
Chart 3 for enrollees with partial LIS	Deleted	Del.	Statutory change	Yes
Chart 3	Replaced "initial coverage limit" with "TrOOP limit"	Rev.	Statutory change	Yes
Throughout	Revised misspellings, punctuation, and capitalization where there were errors	Rev.	Accuracy	Yes
Chart 4	Replaced ampersand with "and"	Rev.	Consistency	Yes
Important things to know about your drug coverage	Replaced "Chapter 7" with "[MA-PD insert: Chapter 9.] [PDP insert: Chapter 7.]"	Rev.	Accuracy	Yes
Exhibits	Added that all examples use 2024 benefit parameters where 2025 benefit parameters are not yet available and will be updated in the final version.	Rev.	Clarity	No
Exhibit B, Example 2	Clarified that Example 2 depicts the initial coverage stage for an enrollee with LIS with payments from plan and from Extra Help or from another organization	Rev.	Clarity	No
Exhibits	Updated fictional cost and payment amounts	Rev.	Clarity	No
Exhibit B, Example 4	Changed "his/her" to "their"	Rev.	Clarity	No
Exhibit B, Examples 5 and 6	Revised Examples 5 to reflect an enrollee without LIS and Example 6 to reflect an enrollee with LIS.	Rev.	Clarity	No

Model 2023 EOB and instructions (old version)	Model 2025 EOB and instructions (new version)	Type of Change¹	Reason for Change	Burden Change²
	Removed Worker's Compensation from Example 6.			
Exhibit C	Removed examples of charts depicting limited gap coverage, no additional gap coverage, LIS enrollees with a deductible, and coverage gap.	Del.	Accuracy	No
Exhibit C, Example 5	Revised Example 5 to reflect a brand-name/tier level only deductible	Rev.	Usefulness	No
Exhibit D	Replaced "consumer" with "enrollee"	Rev.	Consistency	No
Exhibit G	Added cover sheet with instructions.	Add	Clarity	No

30-Day PRA Package

Model 2023 EOB and instructions (old version)	Model 2025 EOB and instructions (new version)	Type of Change³	Reason for Change	Burden Change⁴
Instructions and Exhibits A, B, and G: Cover Page, Charts 1 and 2	Added that Medicare Prescription Payment Plan (MPPP) participants will receive a separate monthly billing statement, and amounts shown in the EOB might differ from what an enrollee paid. Added that enrollees can visit Medicare.gov for information about the MPPP.	Add	Statutory change	Yes
Instructions and Exhibits F and G: Important Information	Added that MPPP can help enrollees manage drug costs by spreading them out during the year as monthly payments. Added that the program is available to anyone with Medicare Part D and can be especially helpful to people with high cost sharing earlier in the plan year. Added that enrollees can visit Medicare.gov for information about the MPPP.	Add	Statutory change	Yes
Instructions	Added that plans are permitted to eliminate empty spaces between sections and/or widen text boxes and columns to save space.	Add	Clarity	No
Instructions	Added that plans may display EOBs in portrait or landscape orientation.	Add	Clarity	No
Instructions	Clarified that plans must include the following information as a footer on every page excluding the	Add	Clarity	No

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Model 2023 EOB and instructions (old version)	Model 2025 EOB and instructions (new version)	Type of Change³	Reason for Change	Burden Change⁴
	cover page (where the information is already included): the plan name, plan phone number, including the TTY number and a statement that calls to the plan are free, and plan URL.			
Instructions	Added that costs included may be displayed with or without decimals and cents (e.g. \$0.00).	Add	Clarity	No
Instructions	Clarified that the Drug Price column shows the negotiated price as defined at § 423.100.	Rev.	Clarity	No
Instructions	Added that if no lower-cost therapeutically equivalent drug is available, plans may enter “No lower-cost alternative drug is available.”	Add	Clarity	No
Instructions, Exhibit A	Clarified that plans should use the return address that meets the plan’s business needs.	Add	Clarity	No
Instructions	Replaced fictional costs with “\$X.”	Rev.	Readability	No
Instructions, Exhibits B and G: Chart 1	Revised Drug Price definition to reference “payments made by you, your plan, and others.”	Rev.	Clarity	Yes
Instructions, Exhibits B and G: Chart 1, You Paid definition	Removed “out-of-pocket”	Del.	Readability	Yes
Instructions, Exhibits B and G: Charts 1 and 2	Revised Other Payments definition to include any payments not in the “You Paid” and “Plan Paid” columns, such as those made by Extra Help from Medicare, employer or union health plans, TRICARE, Indian Health Service, AIDS drug assistance programs, Manufacturer Discount Program, charities, and State Pharmaceutical Assistance Programs (SPAPs).	Rev.	Statutory Change	Yes
Instructions: Chart 2	Added optional note that plans can include as a bullet under Out-of-Pocket Costs include: “Supplemental drug benefits paid by your plan.”	Add	Accuracy	No
Instructions, Exhibits B and G: Chart 2	Inserted You Paid and Plan Paid definitions	Add	Clarity	Yes
Instructions, Exhibits B and G: Chart 2, Out-of-Pocket Costs Include definition	Removed “other”	Del.	Readability	Yes
Instructions, Exhibits B and G: Chart 2	Added Manufacturer Discount Program and Selected Drug Subsidy to description of “Out-of-Pocket Costs DON’T Include Payments Made for.”	Add	Statutory Change	Yes