



CENTER FOR MEDICARE

DATE: September 6, 2022

TO: All Prescription Drug Plans, Medicare Advantage-Prescription Drug Plans,
and Section 1876 Cost Plans

FROM: Amy Larrick Chavez-Valdez
Director, Medicare Drug Benefit and C & D Data Group

Kathryn A. Coleman
Director, Medicare Drug & Health Plan Contract Administration Group

SUBJECT: Updates to Part D Member Materials for Contract Year 2023

On August 16, 2022, President Biden signed the Inflation Reduction Act of 2022 into law. While the law includes many changes to Medicare Part D, this memorandum is focused on making people with Medicare aware of their benefits under two provisions, Sections 11401 (Coverage of Adult Vaccines Recommended by the Advisory Committee on Immunization Practices Under Medicare Part D) and 11406 (Appropriate Cost-Sharing for Covered Insulin Products Under Medicare Part D), that will go into effect on January 1, 2023. To make sure enrollees understand how these changes affect their Part D coverage and to make sure, pursuant to 42 CFR §§ 422.2262(a)(1)(i) and 423.2262(a)(1)(1), that information provided to people with Medicare pertaining to this benefit is accurate, we are requiring changes to certain CMS required materials specified at §§ 422.2267(e) and 423.2267(e), as well as to plan websites as required under §§ 422.111(h)(2) and 423.128(d)(2).

In addition, as we approach the Annual Enrollment Period (AEP), CMS wants to make sure that people with Medicare are not confused by the information contained in communications materials that fall outside of those required under §§ 422.111(h)(2), 422.2267(e), 423.128(d)(2), and 423.2267(e). Therefore, plans should review all communications, as defined under §§ 422.2260 and 423.2260, and not just the specific materials addressed in this memorandum, to make sure information and guidance for enrollees related to coverage of insulin or vaccines are accurate in light of the changes under Sections 11401 and 11406 of the Inflation Reduction Act of 2022.

The following information outlines the materials that must be updated, including instructions for the content and timing of updates.

Evidence of Coverage (EOC) – Under §§ 422.2267(e)(1) and 423.2267(e)(1), plans are required to provide enrollees with their EOC by October 15th listing all of the benefits offered under the plan.

Required Updates for Part D plans (including MA-PDs and cost plans with Part D contracts):

- Replace the first paragraph under “Section 9 – Part D Vaccines. What you pay for depends on how and where you get them” with the following paragraph (bolded formatting should remain): **Important Message About What You Pay for Vaccines** - Our plan covers most Part D vaccines at no cost to you *[insert only if plan’s benefit design includes a deductible: , even if you haven’t paid your deductible]*. Call Member Services for more information.
- Insert the sentence below (bolded formatting should remain) at the end of the “What you pay for your Part D prescription drugs” chapter, under section 2.1 “What are the drug payment stages for *[insert 2023 plan name]* members?”: **Important Message About What You Pay for Insulin** - You won’t pay more than \$35 *[update the cost sharing amount, if lower than \$35]* for a one-month supply of each insulin product covered by our plan, no matter what cost-sharing tier it’s on *[plans may update the tiering language if some insulins will be available at a tier lower than \$35]* *[insert only if plan’s benefit design includes a deductible: , even if you haven’t paid your deductible]*.
- Plans must also update other instances, as applicable, where information or guidance related to coverage of insulin or vaccines are inconsistent with the Part D benefits as outlined under Sections 11401 and 11406 of the Inflation Reduction Act of 2022.

Timing:

- EOCs delivered electronically, as permitted under §§ 422.2267(d)(2)(i) and 423.2267(d)(2)(i), must be updated before being made available to enrollees by October 15th.
- Hard copy EOCs, as defined under §§ 422.2267(d)(1) and 423.2267(d)(1), must be updated before they are mailed to enrollees by October 15th whenever possible. If updates to the hard copy EOC are not practicable – for example, if they have already been printed – the model EOC errata may be used to communicate the updated and accurate information until current stock of outdated EOC documents is depleted. Where applicable, EOC errata intended to fix inaccurate or inconsistent information or guidance related to coverage of insulin or vaccines must be received by the enrollees by November 15th.

Annual Notice of Change (ANOC) – Under §§ 422.2267(e)(3) and 423.2267(e)(3), plans are required to provide current enrollees with an ANOC no later than September 30th to notify enrollees of changes to their benefits that will take effect on January 1st.

TO VIEW THE REST OF THIS DOCUMENT,
PLEASE VISIT **REAGAN.AI**