



STATE OF CONNECTICUT
TEACHERS' RETIREMENT BOARD
765 ASYLUM AVENUE HARTFORD, CT 06105-2822
Toll free 1-800-504-1102 (860) 241-8402 Fax (860) 622-2845
"An Affirmative Action/Equal Opportunity Employer"
www.ct.gov/trb

NOTICE OF CREDITABLE COVERAGE January, 2009

Please read this notice carefully and keep it with your permanent records.

Effective January 1, 2006, Medicare Part D prescription coverage became available to everyone participating in Medicare A (Hospitalization coverage) and Medicare B (Medical coverage). All Medicare prescription drug plans provide a minimum standard level of coverage. Some plans offer more coverage for a higher monthly premium.

Is my current coverage through the TRB's prescription plan equivalent to or better than the Medicare Part D prescription coverage?

Yes. The TRB has determined that the prescription drug coverage offered to you by the TRB's prescription drug plan is "on average" expected to pay out at least as much as the standard Medicare prescription drug coverage. **Because your existing TRB coverage is "on average" as good as standard Medicare Part D prescription coverage, you can stay with your TRB coverage. If you decide later you want to enroll in Medicare Part D prescription coverage and drop the TRB plan, you will NOT incur a penalty to your Medicare Part D premium PROVIDED there is no lapse in prescription coverage.**

What are the consequences if I choose to enroll in the Medicare Part D prescription coverage?

You will remain in your TRB health coverage but will be dropped from your TRB prescription coverage. There will be no reduction or refund to your TRB premium. You would only be allowed back into the TRB prescription coverage during the next open enrollment period, provided you submit evidence that you have cancelled your Medicare Part D prescription coverage.

How will I decide whether to remain in the TRB prescription plan or choose Medicare Part D prescription coverage?

Medicare Part D prescription coverage is different from the health coverage available under Medicare Parts A and B. To obtain prescription coverage under Medicare Part D, you will have to choose a plan from a private company. While there is standard coverage required by Medicare Part D prescription coverage, each private plan is likely to have unique attributes, including which drugs are covered, the level of co pays, and which pharmacies you can use. Accordingly, you should compare your current coverage and cost with the coverage and cost of the plans offering Medicare Part D prescription drug coverage in your area.

ATTN LOW INCOME HEALTH PLAN MEMBERS: If you are a single individual with income of \$15,315 or less per year or a married couple with joint income of \$20,535 or less per year, extra help is available for paying for a Medicare prescription drug plan. For more information about this extra help, please visit SSA online at www.ssa.gov/pubs/10506.htm or call them at 1-800-772-1213 (TTY 1-800-325-0778). If you qualify for this extra help and would like to cancel your TRB prescription plan, contact us for the necessary paperwork at: TRB, 765 Asylum Avenue, Hartford, CT 06106 or 1-800-504-1102 x 8411 or 860-241-8411.

Here are the basic components of the TRB and standard Medicare D prescription plans:

TRB Plan

1. Deductible: \$250 per year.
2. **Mail Order:** Co-Insurance: Individual pays 5% of the cost for generic drugs, 20% of the cost for preferred brand name drugs, and 30% of the cost for non-preferred brand name.
Local Pharmacy: Co-Insurance (non-maintenance drugs): Individual pays 10% of the cost for generic drugs, 25% of the cost for preferred brand name drugs, and 35% of the cost for non-preferred brand name.
3. Coverage Gap: None.
4. Catastrophic Coverage: After the individual pays \$1,000 (this includes the deductible of \$250) out of pocket, individual pays nothing for the remainder of the year.

Medicare Part D (standard required attributes)

1. Deductible: \$295 per year.
2. Co-Insurance: Individual pays 25% (\$601.25) of the costs for total drug purchases for the next \$2,405 per year.
3. Coverage Gap: Individual pays 100% of the cost of total drug purchases for the next \$3,453.75 within the calendar year.
4. Catastrophic Coverage: After individual pays \$4,350 out of pocket, individual pays 5% of the additional cost for the remainder of the year.

For individuals who use generic drugs, the TRB coverage will generally be less costly to the individual. For non-preferred name brand drugs, the relative costs will depend on the volume used: low volume users of non-preferred drugs may have a lower cost under Medicare Part D, whereas those with high volume usage will often pay more under Medicare Part D. **If you enroll in Medicare Part D prescription coverage, you will lose access to your TRB prescription plan but will still be required to pay the full premium for the health and prescription plans.**

Is there a penalty if my TRB coverage lapses and I enroll in the new Medicare Part D Plan late?

Yes. If you drop or lose your coverage with TRB and do not enroll within 63 days in a Medicare prescription drug plan, you will be subject to a permanent lifetime penalty of at least 1% per month for every month you did not have prescription coverage. For example, if you are without prescription coverage for nineteen months, your premium will always be at least 19% higher than normal cost for the Medicare prescription plan.

How can I get more information about my options under Medicare prescription drug coverage?

More detailed information about Medicare plans that offer prescription drug coverage is available now in the "Medicare & You" handbook

Visit <http://www.medicare.gov/> for personalized help,

- Call your State Health Insurance Assistance Program (see your copy of the Medicare & You handbook for their telephone number)
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.



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December, 2008

PRIVATE HEALTH INFORMATION PRIVACY POLICY

Dear Health Plan Member:

As a participating member of one or more of the Connecticut Teacher Retirement Board (TRB) health plans, you entrust us and/or our agents with certain personal information about yourself. We want you to know: 1) how we protect your privacy and your rights, and 2) our responsibilities regarding recorded information about you. This recorded information is known as Protected Health Information (PHI). We will not use or disclose your PHI without your permission, except as described below.

- A record is made each time you visit a physician, or other healthcare provider. Typically this record is a legal document that contains your symptoms, examinations and test results, diagnoses, treatments, and plans for future care. Federal and state laws allow us to disclose the *minimum necessary* private health information (PHI) for treatment, payment, or healthcare operations.
- *For Planning Your Care and Treatment*, as documentation of care you received, and as a means of communication among the many health professionals who contribute to your care.
- *For Payment and treatment* of services you receive.
- *Verification of Services* as a means by which you can verify that services billed were actually provided.
- *For Health Care Operations* used as a tool in educating health professionals.
- *For Public Health Officials* used as a source of information charged with improving the health of the nation.
- *Legal Actions* if used to defend a legal action brought by an individual.
- *As Required by Law* for judicial and administrative proceedings pursuant to legal authority; to report information related to victims of abuse, neglect or domestic violence; and to assist law enforcement officials in their duties.
- *With Your Authorization* as a source of data for medical research or facility planning; as a tool with which we can access and continually work to improve the outcomes we achieve; to better understand who, what, when, where and why others may access your health information; and to make more informative decisions when authorizing disclosures to others.

Private health information privacy policy

December 2008

TRB will:

- **Maintain the privacy of your protected health information;**
- **Provide you with a notice of our legal duties and privacy practices with respect to information we collect and maintain about you;**
- **Abide by the terms of this notice;**
- **Notify you if we are unable to fulfill a request in relation to your PHI; and**
- **Accommodate reasonable requests you may have to communicate health information by alternative means and/or at alternative locations. For example, rather than contacting you in writing at home, you may request we contact you at work.**

You have the right to:

- Request a restriction on certain uses and disclosures of your information as provided by 45 CFR part 164.522, however, the TRB is not required to agree to a requested restriction;
- Obtain a paper copy of the notice of information practices upon request;
- Inspect and obtain a copy of your health record as provided for in 45 CFR part 164.524;
- Request that TRB amend your health record for as long as TRB maintains the record, as provided in 45 CFR part 164.526;
- Request communications of your health information by alternative means or at alternative locations;
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken; and
- Receive an accounting of disclosures or amendments made of your health information as provided by 45 CFR, part 164.528.
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We may impose a reasonable fee for:

- Copying, including cost of supplies and labor;
- Postage; and/or
- Preparing an explanation or summary of the requested PHI.

If you believe your privacy rights have been violated, you may direct your complaint to TRB by contacting:

**TRB, HIPAA Privacy Officer
765 Asylum Avenue
Hartford, CT 06105-2822**

We may change our practices and make the new provisions effective for all PHI we maintain. Should our practices change, we will mail a revised notice to you. Except when required by law, a material change to any term of the notice may be implemented prior to the effective date of the revised notice.

Sincerely,

Darlene Perez
HIPAA Privacy Officer