

**Important Notice**  
**from the**  
**Retiree Medical Plan of the Santa Monica Police Officers' Association**  
**Reimbursement Trust**  
**about Your Prescription Drug Coverage and Medicare**

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with the Retiree Medical Plan of the Santa Monica Police Officers' Association Reimbursement Trust (Trust) and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are three important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. The Trust has determined that the reimbursements for prescription drug coverage offered by the Trust is, on average for all plan participants, **NOT** expected to pay out as much as standard Medicare prescription drug coverage pays, meaning that the coverage provided by the Trust is not considered creditable coverage. Thus, the Trust coverage is considered Non-Creditable Coverage. This is important, because most likely, you will get more help with your drug costs if you join a Medicare drug plan, than if you only obtain reimbursements for prescription drug reimbursement from the Trust. This also is important, because it may mean that you may pay a higher premium (a penalty) if you do not join a Medicare drug plan when you first become eligible.
3. You remain eligible for reimbursements from the Trust. However, because your coverage is non-creditable, you have decisions to make about Medicare prescription drug coverage that may affect how much you pay for that coverage, depending on if and when you join a drug plan. When you make your decision, you should compare your current coverage, including what drugs are covered, with the coverage and cost of the plans offering Medicare prescription drug coverage in your area. Read this notice carefully - it explains your options.

**When Can You Join A Medicare Drug Plan?**

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15<sup>TH</sup> to December 7<sup>th</sup>.

## **When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?**

Since the coverage under Trust, is **not** creditable, depending on whether you have other creditable prescription drug coverage, and how long you go without creditable prescription drug coverage you may pay a penalty to join a Medicare drug plan. Starting with the end of the last month that you were first eligible to join a Medicare drug plan but didn't join, if you go 63 continuous days or longer without prescription drug coverage that's creditable, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

## **What Happens To Your Current Trust Reimbursements If You Decide to Join A Medicare Drug Plan?**

If you decide to join a Medicare drug plan, your current eligibility under the Trust will not be affected. In addition, the Trust can reimburse your Medicare drug plan premiums. This means that the Trust will reimburse Eligible Retirees an amount not to exceed twelve (12) times their Monthly Reimbursement Amount for Premiums, i.e., contributions to health care plans and for other qualifying medical expenses, which are incurred in a calendar year. These Monthly Reimbursement Amounts will be paid quarterly in (or for) the calendar year when the date of service occurred. For more information about the Retiree Medical Plan of the Santa Monica Police Officers' Association Reimbursement Trust, please see the Restated Plan Document, effective September 1, 2022. You may also contact the Trust Fund Office at (562) 463-5050 or email at [SMPOAtrust@bpabenefits.com](mailto:SMPOAtrust@bpabenefits.com), requesting a copy.

Remember that your current eligibility under the Trust remains. Know that there is no advantage for you to terminate your coverage under the Trust.

**For More Information About This Notice Or Your Current Prescription Drug Coverage.**

Contact the administrative Office at (562) 463-5050 for further information. **NOTE:** You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan and if this coverage through the Trust changes. You also may request a copy of this notice at any time.

**For More Information About Your Options Under Medicare Prescription Drug Coverage.**

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans. For more information about Medicare prescription drug coverage:

- Visit [www.medicare.gov](http://www.medicare.gov)
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at [www.socialsecurity.gov](http://www.socialsecurity.gov), or call them at 1-800-772-1213 (TTY 1-800-325-0778).

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