

## Evidence of Coverage - Helpful Information and Hints

Important Date(s): **January 31, 2006** - The Evidence of Coverage must be in the hands Plan enrollee.

- The Evidence of Coverage is required to be distributed at the time of enrollment and annually thereafter.
- If Plan is using the CMS Model EOC (**WITHOUT ANY MODIFICATION**), the review period is 10 –days.
- If Plan is submitting a non-Model EOC, the review period is **45-days**

When any EOC marketing material submission, is disapproved and then resubmitted by the Plan, the “review clock” starts over again at zero days.

- Model EOC is disapproved, and resubmitted, the new review period is **45-days**
- non-Model EOC is disapproved, and resubmitted, the new review period is **45-days**
- Plans are *strongly* submit the EOC early for review. Waiting until the last minute may result in not having the EOC reviewed and approved, and printed in time to have the document in the hands of the enrollee by January 31, 2006.
- If you are unsure about what you are planning to submit, please contact the PDP Marketing Resource Line –PDP Only (1-888-770-PLAN) or the appropriate CMS Regional Office Plan Manager - MA and MA-PD Only.

### **PDP EOC:**

- Refer to and follow the Medicare Marketing Guidelines, Evidence of Coverage for PDPs on pages 63-64
- The Model EOC includes and Non- Model EOCs must include the follow:
  - Definition of “formulary”
  - Describe how the formulary functions
  - State that drugs on the formulary may change during the year
  - Explain how to obtain an exception to the formulary or tiered cost sharing structure
  - Describe how to obtain additional information about the drugs included on the Part D Plan’s Formulary

### **MA/MA-PD EOC:**

- Refer to and follow the Medicare Marketing Guidelines, Evidence of Coverage for MA, MA-PD and 1876 Cost Plans on pages 64-67
- The Model MA/MA-PD EOC includes and Non- Model MA/MA-PD EOCs must include information on the follow:
  - Lock-In requirements/Selecting a Primary Care Physician – How to Access Care in the Plan
  - Describe Emergency Care and Post-Stabilization Care
  - Rules for Urgent Care
  - EOC Appeals process and rights to appeal
  - Benefit, Plan Premium and Billing Information