

Guide to LIS Mailings from CMS, Social Security and Plans SUMMER AND FALL 2007

Date	Sender	Mailing/Color	Main Message	Consumer Action
Mid-May	Social Security	Social Security Letters to those with Limited Income and Resources (SSA Pub. Forms L446, L447 & L448)	Informs people about the Medicare Savings Programs and the extra help available for Medicare prescription drug plan costs.	<ul style="list-style-type: none"> If you think you qualify for extra help, you should apply. For more information about the extra help or if you want to apply, call Social Security at 1-800-772-1213 (TTY 1-800-325-0778).
Late August	CMS	Premium Withhold Letter (Pub No. 11322) (WHITE Letter)	Informs people that their premium was not correctly withheld from their Social Security benefit and they owe payments to their plan.	<ul style="list-style-type: none"> Keep the notice. Contact your plan to make payment arrangements or follow the instructions that your plan sent you regarding this payment. If you have any questions, please call toll free at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
Late August	Social Security	Social Security Letter to Review Eligibility for Extra Help (SSA Form No 1026)	Informs people selected for review that they should see if they qualify for extra help in 2008. Includes an "Income and Resources Summary" sheet.	If you receive this letter, you must return the enclosed form in the enclosed postage paid envelope within 30 days or your extra help may terminate.
September	CMS	Loss of Deemed Status Letter (Pub. No. 11198) (GREY Letter)	Informs people that they no longer automatically qualify for extra help as of January 1, 2008.	Apply for extra help through Social Security (application and postage paid envelope enclosed) or a State Medical Assistance (Medicaid) office.
Early October	CMS	Change in Extra Help Co-payment Letter (Pub. No. 11199) (ORANGE Letter)	Informs people that they will continue to automatically qualify for extra help in 2008, but their co-payment levels will change as of January 1, 2008.	<ul style="list-style-type: none"> Keep the notice. No action, unless you believe an error has occurred.
October	Plans	Plan Marketing Materials	On October 1, plans begin sending marketing materials for 2008.	No action. Use this information to compare options for 2008.

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October	Plans	Plan Termination Letter	By October 2, people whose 2007 plan terminates in 2008 will get notices from plans.	You must look for a new plan for coverage in 2008.
October	Plans	Plan Annual Notice of Change (ANOC) Model ANOC	By October 31, people will get a notice from their current plan outlining 2008 formulary, benefit design, and/or premium changes.	Review changes to decide whether the plan will continue to you're your prescription drug needs in 2008.
October	CMS	Medicare & You 2008 Handbook	Mailed to all Medicare households each fall and includes a summary of Medicare benefits, rights, and protections; lists of health and drug plans available in the area; and answers to frequently asked questions about Medicare.	Keep the handbook as a reference guide. "Medicare & You" can also be found at www.medicare.gov
Late October	CMS	LIS Choosers Letter (Pub. No. 11267) (TAN Letter)	Notifies LIS beneficiaries who chose a plan on their own that their plan's premium is rising above the regional LIS premium subsidy amount by more than \$1 in 2008, and they will be responsible for paying a portion of their plan's premium unless they join a new plan.	<ul style="list-style-type: none"> • Keep the notice • You may want to look for a new plan for coverage for 2008 with a premium below the regional low income subsidy benchmark. (Letter includes list of local plans with no premium liability.) • Change plans in early Dec. if you choose
Late October	CMS	Reassignment Letter (Pub. No. 11208 – Version 1) (BLUE Letter)	Notifies people that their current plan is leaving the Medicare Program and they will be reassigned to a new plan effective January 1, 2008, unless they join a new plan on their own by December 31, 2007.	<ul style="list-style-type: none"> • Keep the notice. • Compare the new 2008 plan with others to meet your needs.
Late October	CMS	Reassignment Letter (Pub. No. 11209 – Version 2) (BLUE Letter)	Notifies auto-enrolled beneficiaries that because their plan's premiums are increasing above the regional LIS premium subsidy amount by more than \$1 in 2008, they will be reassigned to a new plan effective January 1, 2008, unless they join a new plan on their own by December 31, 2007.	<ul style="list-style-type: none"> • Change plans, if you choose, in early December. • For more information call 1-800-MEDICARE; check Medicare & You 2008; go to www.medicare.gov, or contact the State Health Insurance Assistance Program (SHIP) for free personalized help.

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Late November	Social Security	<u>Social Security Letters to those with Limited Income and Resources</u> (SSA Pub. Form L441)	Informs people about the Medicare Savings Programs and the extra help available for Medicare prescription drug plan costs.	<ul style="list-style-type: none"> If you think you qualify for extra help, you should apply. For more information about the extra help or if you want to apply, call Social Security at 1-800-772-1213 (TTY 1-800-325-0778).
Monthly - ongoing	CMS	<u>Deemed Status Letter</u> (Pub No. 11166) (PURPLE Letter beginning in Sept/Oct)	Informs people that they will automatically get extra help, including people 1) with Medicare and Medicaid, 2) in Medicare Savings Program, and 3) who receive Supplemental Security Income (SSI) benefits but not Medicaid.	<ul style="list-style-type: none"> Keep the notice. No need to apply to get the extra help. Compare Medicare prescription drug plans with others to meet your needs. For more information call 1-800-MEDICARE; check Medicare & You 2008; go to www.medicare.gov, or contact the State Health Insurance Assistance Program (SHIP) for free personalized help.
Monthly - ongoing	CMS	<u>Auto-Enrollment Notice</u> (Pub No. 11154) (YELLOW Letter)	Informs people who qualify for Medicare & Medicaid and who currently get their benefits through the Original Medicare Plan that they will be automatically enrolled in a drug plan if they don't enroll themselves or decline coverage.	<ul style="list-style-type: none"> Keep the notice. No need to apply to get the extra help. If you don't join a plan, Medicare will enroll you in one. Compare Medicare prescription drug plans with others to meet your needs. For more information call 1-800-MEDICARE; check Medicare & You 2008; go to www.medicare.gov, or contact the State Health Insurance Assistance Program (SHIP) for free personalized help.
Monthly - ongoing	CMS	<u>Facilitated Enrollment Notice</u> (Pub No. 11186 & Pub No 11191) (GREEN Letter)	Informs people who either 1) belong to a Medicare Savings Program or 2) receive Supplemental Security Income (SSI), or 3) applied and qualified for the extra help that they will be automatically enrolled in a drug plan if they don't enroll themselves or decline coverage.	<ul style="list-style-type: none"> Keep the notice. If you don't join a plan, Medicare will enroll you in one. Compare Medicare prescription drug plans with others to meet your needs. For more information call 1-800-MEDICARE; check Medicare & You 2008; go to www.medicare.gov, or contact the State Health Insurance Assistance Program (SHIP) for free personalized help.