



EmblemHealth City of New York/GHI Standard/Enhanced Medicare Prescription Drug Plan (PDP) offered by EmblemHealth (EmblemHealth Plan, Inc.)

Annual Notice of Change for 2027

You're enrolled as a member of EmblemHealth City of New York/GHI Standard/Enhanced Medicare Prescription Drug Plan (PDP).

This material describes changes to our plan's costs and benefits next year.

- **You have from October 15 - December 7 to make changes to your Medicare coverage for next year.** If you don't join another plan by December 7, 2026, you'll stay in EmblemHealth City of New York/GHI Standard/Enhanced Medicare Prescription Drug Plan (PDP).
- To change to a **different plan**, visit [Medicare.gov](https://www.Medicare.gov) or review the list in the back of your *Medicare & You 2027* handbook.
- Note this is only a summary of changes. More information about costs, benefits, and rules is in the *Evidence of Coverage*. Get a copy at emblemhealth.com/medicare or call Customer Service at **1-833-998-5351** (TTY users call **711**) to get a copy by mail.

More Resources

- This material is available for free in Spanish.
- Call Customer Service at **1-833-998-5351** (TTY users call **711**) for more information. Hours are 8 am to 8 pm 7 days a week from October 1 to March 31 and 8 am to 8 pm Monday - Saturday, April 1 to September 30. This call is free.
- We can also provide information in a way that works for you (information in alternate formats). Please call Customer Service at the number listed above if you need plan information in another format or language.

About EmblemHealth City of New York/GHI Standard/Enhanced Medicare Prescription Drug Plan (PDP)

- EmblemHealth Plan, Inc. is a standalone PDP plan with a Medicare contract. Enrollment in EmblemHealth Plan, Inc. depends on contract renewal.

- When this material says “we,” “us,” or “our,” it means EMBLEMHEALTH PLAN, INC. When it says “plan” or “our plan,” it means EmblemHealth City of New York/GHI Standard/Enhanced Medicare Prescription Drug Plan (PDP).
- **If you do nothing by December 7, 2026, you’ll automatically be enrolled in EmblemHealth City of New York/GHI Standard/Enhanced Medicare Prescription Drug Plan (PDP).** Starting January 1, 2027, you’ll get your drug coverage through EmblemHealth City of New York/GHI Standard/Enhanced Medicare Prescription Drug Plan (PDP). Your group may have different requirements. Go to Section 2 for more information about how to change plans and deadlines for making a change.

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Summary of Important Costs for 2027

It is important to read the rest of this *Annual Notice of Changes* and review the *Evidence of Coverage* document to see if other benefit or cost changes affect you.

It is also important for you to review the *Cost Sharing Guide* that we will send you in the mail under separate cover. The *Cost Sharing Guide* will provide you with your benefit details and cost sharing amounts for 2027. A copy of the *Evidence of Coverage* is located on our website at emblemhealth.com/medicare. You may also call Customer Service to ask us to mail you an *Evidence of Coverage*.

SECTION 1 Changes to Benefits & Costs for Next Year

Section 1.1 Changes to the Monthly Plan Premium

Please contact your benefits administrator or see your *Cost Sharing Guide* for details on what your plan premium will be for 2027. (You must also continue to pay your Medicare Part B premium.)

Factors that could change your Part D Premium Amount

- Late Enrollment Penalty - Your monthly plan premium will be more if you're required to pay a lifetime Part D late enrollment penalty for going without Part D or other drug coverage that's at least as good as Medicare drug coverage (also referred to as creditable coverage) for 63 days or more.
- Higher Income Surcharge - If you have a higher income, you may have to pay an additional amount each month directly to the government for Medicare drug coverage.
- Extra Help - Your monthly plan premium will be *less* if you get Extra Help with your drug costs. Go to Section 3 for more information about Extra Help from Medicare.

Section 1.2 Changes to the Pharmacy Network

Amounts you pay for your prescription drugs can depend on which pharmacy you use. Medicare drug plans have a network of pharmacies. In most cases, your prescriptions are covered *only* if they are filled at one of our network pharmacies.

There are no changes to our network of pharmacies for next year.

Section 1.3 Changes to Part D Drug Coverage

Changes to Our Drug List

Our list of covered drugs is called a formulary or Drug List. A copy of our Drug List is provided electronically.

We made changes to our Drug List, which could include removing or adding drugs, changing the restrictions that apply to our coverage for certain drugs, or moving them to a different cost-sharing tier.

Review the Drug List to make sure your drugs will be covered next year and to see if there will be any restrictions, or if your drug has been moved to a different cost-sharing tier.

Most of the changes in the Drug List are new for the beginning of each year. However, we might make other changes that are allowed by Medicare rules that will affect you during the calendar year. We update our online Drug List at least monthly to provide the most up-to-date list of drugs. If we make a change that will affect your access to a drug you're taking, we'll send you a notice about the change.

If you're affected by a change in drug coverage at the beginning of the year or during the year, review Chapter 7 of your *Evidence of Coverage* and talk to your prescriber to find out your options, such as asking for a temporary supply, applying for an exception, and/or working to find a new drug. Call Customer Service at **1-833-998-5351** (TTY users call **711**) for more information.

Section 1.4 Changes to Prescription Drug Benefits & Costs

Do you get Extra Help to pay for your drug coverage costs?

If you're in a program that helps pay for your drugs (Extra Help), **the information about costs for Part D drugs may not apply to you.** We sent you a separate material, called the *Evidence of Coverage Rider for People Who Get Extra Help Paying for Prescription Drugs*, which tells you about your drug costs. If you get Extra Help and you don't get this material by December 31, 2026, call Customer Service at **1-833-998-5351** (TTY users call **711**) and ask for the *LIS Rider*.

Drug Payment Stages

There are **3 drug payment stages**: the Yearly Deductible Stage, the Initial Coverage Stage, and the Catastrophic Coverage Stage.

- **Stage 1: Yearly Deductible**

You start in this payment stage each calendar year. We will send you a Cost Sharing Guide that tells you if your plan has a deductible and what it will be in 2027. During this stage, you may pay the full cost of your Part D drugs until you've reached the yearly deductible. If you have no deductible, this payment stage doesn't apply to you.

- **Stage 2: Initial Coverage**

Once you pay the yearly deductible, you move to the Initial Coverage Stage. In this stage, our plan pays its share of the cost of your drugs, and you pay your share of the cost. You generally stay in this stage until your year-to-date Out-of-Pocket costs reach **\$2,400**.

- **Stage 3: Catastrophic Coverage**

This is the third and final drug payment stage. In this stage, you pay nothing for your covered Part D drugs. You generally stay in this stage for the rest of the calendar year.

Changes to Your Cost Sharing in the Deductible and Initial Coverage Stages

To get information about your costs in these stages, look at Chapter 6, Sections 4 and 5 in the *Evidence of Coverage*. (You may also call Customer Service to ask us to mail you an Evidence of Coverage.)

We will send you a Cost Sharing Guide in the mail under separate cover that will provide you with your benefit details and cost-sharing amounts for 2027.

SECTION 2 How to Change Plans

To stay in EmblemHealth City of New York/GHI Standard/Enhanced Medicare Prescription Drug Plan (PDP), you don't need to do anything. Please contact your benefit administrator to find out if you will automatically be enrolled in our EmblemHealth City of New York/GHI Standard/Enhanced Medicare Prescription Drug Plan (PDP).

If you want to change plans for 2027, please contact your benefits administrator for additional information.

Section 2.1 Deadlines for Changing Plans

If you want to change to a different plan or to Original Medicare for next year, please contact your benefits administrator for additional information.

People with Medicare can make changes to their coverage from **October 15 – December 7** each year.

If you enrolled in a Medicare Advantage plan for January 1, 2027, and don't like your plan choice, you can switch to another Medicare health plan (with or without separate Medicare drug coverage) or switch to Original Medicare (with or without Medicare separate drug coverage) between January 1 – March 31, 2027.

Section 2.2 Are there other times of the year to make a change?

In certain situations, people may have other chances to change their coverage during the year. Examples include people who:

- Have Medicaid
- Get Extra Help paying for their drugs
- Have or are leaving employer coverage
- Move out of our plan's service area

If you recently moved into or currently live in an institution (like a skilled nursing facility or long-term care hospital), you can change your Medicare coverage **at any time**. You can change to any other Medicare health plan (with or without Medicare drug coverage) or switch to Original Medicare (with or without separate Medicare drug coverage) at any time. If you recently moved out of an institution, you have an opportunity to switch plans or switch to Original Medicare for 2 full months after the month you move out.

SECTION 3 Get Help Paying for Prescription Drugs

You may qualify for help paying for prescription drugs. Different kinds of help are available:

- **Extra Help from Medicare.** People with limited incomes may qualify for Extra Help to pay for their prescription drug costs. If you qualify, Medicare could pay up to 75% or more of your drug costs including monthly drug plan premiums, yearly deductibles, and coinsurance. Also, people who qualify won't have a late enrollment penalty. To see if you qualify, call:
 - 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048, 24 hours a day, 7 days a week.
 - Social Security at 1-800-772-1213 between 8 a.m. and 7 p.m., Monday – Friday for a representative. Automated messages are available 24 hours a day. TTY users can call 1-800-325-0778.
 - Your State Medicaid Office.
- **Prescription Cost-sharing Assistance for Persons with HIV/AIDS.** The AIDS Drug Assistance Program (ADAP) helps ensure that ADAP-eligible people living with HIV/AIDS have access to life-saving HIV medications. To be eligible for the ADAP operating in your state, you must meet certain criteria, including proof of state residence and HIV status, low income as defined by the state, and uninsured/under-insured status. Medicare Part D drugs that are also covered by ADAP qualify for prescription cost-sharing help through New York AIDS Drug Assistance Program. For

information on eligibility criteria, covered drugs, how to enroll in the program, or, if you're currently enrolled, how to continue getting help, call **1-800-542-2437**. Be sure, when calling, to inform them of your Medicare Part D plan name or policy number.

- **The Medicare Prescription Payment Plan.** The Medicare Prescription Payment Plan is a payment option that works with your current drug coverage to help you manage your out-of-pocket costs for drugs covered by our plan by spreading them across the calendar year (January – December). Anyone with a Medicare drug plan or Medicare health plan with drug coverage (like a Medicare Advantage plan with drug coverage) can use this payment option. If you're participating in the Medicare Prescription Payment Plan and stay in the same Part D plan, your participation will be automatically renewed for 2027, and you do not need to submit a new election request to continue participating in 2027. **This payment option might help you manage your expenses, but it doesn't save you money or lower your drug costs.**

Extra Help from Medicare and help from your SPAP and ADAP, for those who qualify, is more advantageous than participation in the Medicare Prescription Payment Plan. To learn more about this payment option, call us at **1-833-746-5914** (TTY users call **711**) or visit [Medicare.gov](https://www.Medicare.gov).

SECTION 4 Questions?

Get Help from EmblemHealth City of New York/GHI Standard/Enhanced Medicare Prescription Drug Plan (PDP)

- **Call Customer Service at 1-833-998-5351. (TTY users call 711).**

We're available for phone calls 8 am to 8 pm 7 days a week from October 1 to March 31 and 8 am to 8 pm Monday - Saturday, April 1 to September 30. Calls to these numbers are free.

- **Read your 2027 Evidence of Coverage**

This *Annual Notice of Change* gives you a summary of changes in your benefits and costs for 2027. For details, go to the 2027 *Evidence of Coverage* for EmblemHealth City of New York/GHI Standard/Enhanced Medicare Prescription Drug Plan (PDP). The *Evidence of Coverage* is the legal, detailed description of our plan benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs. Get the *Evidence of Coverage* on our website at emblemhealth.com/medicare or call Customer Service at **1-833-998-5351** (TTY users call 711) to ask us to mail you a copy.

- **Visit emblemhealth.com/medicare**

Our website has the most up-to-date information about our pharmacy network (*Pharmacy Directory*) and our *List of Covered Drugs* (formulary/Drug List).

Get Free Counseling about Medicare

The State Health Insurance Assistance Program (SHIP) is an independent government program with trained counselors in every state. In New York State, the SHIP is called Health Insurance Information Counseling and Assistance Program (HIICAP).

Call HIICAP to get free personalized health insurance counseling. They can help you understand your Medicare plan choices and answer questions about switching plans. Call HIICAP at **1-800-701-0501**. Learn more about HIICAP by visiting <http://www.aging.ny.gov>.

Get Help from Medicare

- **Call 1-800-MEDICARE (1-800-633-4227)**

You can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users can call 1-877-486-2048.

- **Chat live with [Medicare.gov](https://www.medicare.gov)**

You can chat live at [Medicare.gov/talk-to-someone](https://www.medicare.gov/talk-to-someone).

- **Write to Medicare**

You can write to Medicare at PO Box 1270, Lawrence, KS 66044

- **Visit [Medicare.gov](https://www.medicare.gov)**

The official Medicare website has information about cost, coverage, and quality Star Ratings to help you compare Medicare prescription drug plans in your area.

- **Read *Medicare & You 2027***

The *Medicare & You 2027* handbook is mailed to people with Medicare every fall. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. Get a copy at [Medicare.gov](https://www.medicare.gov) or by calling 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.