

Model Part D Drug Management Program Retraction Notice for Exempted Beneficiaries

Instructions: This model can be used to notify a plan enrollee who has received an Initial Notice under the plan sponsor's Drug Management Program that the Initial Notice is rescinded because the sponsor has determined that the beneficiary is exempt, in circumstances where the determination that the beneficiary is exempt is made on a date that is less than 30 days after the date of the Initial Notice. It would not be appropriate for the Part D sponsor to send the enrollee an Alternate Second Notice at the time the sponsor determines the enrollee is exempt if such determination is made less than 30 days after the date of the Initial Notice, due to the timing requirements for Alternate Second Notices under 42 CFR § 423.153(f)(8)(i). Plans may use all or part of the language in this notice.

Date: <date>

Enrollee's Name: <name>

Member Number: <member ID>

On <date of Initial Notice>, we sent you a notice that we planned to limit your access to prescription [insert as appropriate: <opioids> or <benzodiazepines> or <opioids and benzodiazepines>] through our drug management program.

You may disregard the <date of Initial Notice> notice. After further review, we have determined that you are exempt from the drug management program, and your access to these medications will NOT be limited under the drug management program. There are no changes to the way these medications are covered for you under our plan rules.

[Insert this section for Low Income Subsidy (LIS) beneficiaries:]

<As of the date of this notice, you're eligible to use the quarterly Medicare Special Enrollment period because you receive Extra Help with your prescription drug costs. You can also change plans during other limited situations, such as if you move out of the plan's service area or you lose or have a change in your Extra Help. You can also change plans during the Annual Enrollment Period which occurs every year from October 15 – December 7.>

If you have questions about this notice or our drug management program to help enrollees use prescription opioid medications safely, contact us at:

[Insert plan's toll free phone number, TTY, call center hours of operation, website, and mailing address. If the plan has a dedicated line (toll free), staff person, web portal, etc. for its DMP, that information may be included in this section, as applicable.]

If you have questions about your opioid pain medication or other prescription drugs you are taking, speak with your prescriber.