BlueCross BlueShield Nebraska

PO Box 3248
Omaha, Nebraska 68180-0001

October 1, 2026

Important Notice from Blue Cross and Blue Shield of Nebraska
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 Blue Cross and Blue Shield of Nebraska 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 two 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. **Blue Cross and Blue Shield of Nebraska has determined that the prescription drug coverage offered by the University of Nebraska is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage.** Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

CMS FORM 10182-CC Updated April 1, 2011

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0990. The time required to complete this information is estimated to average eight hours per response initially, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy or the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Office, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

When Can You Join a Medicare Drug Plan?

Blue Cross and Blue Shield of Nebraska is an Independent Licensee of the Blue Cross Blue Shield Association.

You can join a Medicare drug plan when you first become eligible for Medicare and each year from Oct. 15 to Dec. 7.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happens to Your Current Coverage if You Decide to Join a Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current University of Nebraska coverage will be affected. See below for more information about what happens to your current coverage if you join a Medicare drug plan.

If you decide you do not want to enroll in one of the new plans that provide Medicare prescription drug coverage, you can keep your current Medigap policy without changes. However, you cannot have prescription drug benefits from both a Medigap policy with Blue Cross and Blue Shield of Nebraska and a Medicare prescription drug plan at the same time. So if you enroll in one of the plan that provides Medicare prescription drug coverage and wish to keep your Medigap policy, please let us know as soon as possible. Federal law requires us to remove the prescription drug benefit from your Medigap policy, and your premium will be adjusted.

When Will You Pay a Higher Premium (Penalty) to Join a Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with the University of Nebraska and don't join a Medical drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up 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 (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

If you choose to get your Medicare prescription drug coverage through a Medicare Advantage plan, which is a company such as an HMO that contracts with the federal government to provide your Medicare benefits, you may decide it is best for you to cancel your Medigap policy with Blue Cross and Blue Shield of Nebraska. This is because a Medigap policy can't work with a Medicare Advantage plan.

In making your decision about what to do, please keep in mind that recent changes in law required us to make certain changes to our Medigap plans. These changes will have an effect on future coverage, be aware that you and your dependents will not be able to get this coverage back.

For More Information About This Notice or Your Current Prescription Drug Coverage

Contact our Customer Service Center listed below 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

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0990. The time required to complete this information is estimated to average 8 hours per response initially, including the time to review instructions, search existing date resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy or the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Office, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

coverage through Blue Cross and Blue Shield of Nebraska changes. You may also 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 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 SocialSecurity.gov, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Date:	October 2026
Name of Entity/Sender:	Blue Cross and Blue Shield of Nebraska
Contact – Position/Office:	Customer Service Center
Address:	1919 Aksarben Drive Omaha, NE 68180-0001
Phone Number:	888-592-8960

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0990. The time required to complete this information is estimated to average 8 hours per response initially, including the time to review instructions, search existing date resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy or the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Office, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.