

## **Exhibit 4 - Part D Sponsor Notification of Voluntary Removal from the Medicare Prescription Payment Plan**

Referenced in [insert draft part 2 guidance section]

<Part D sponsors may insert a title for the notice, such as “You’re no longer participating in the Medicare Prescription Payment Plan through <plan sponsor>”>

<Member #>

<RxID>

<RxGroup>

<RxBin>

<RxPCN>

Dear <Member>,

Starting <insert effective date>, you’re no longer participating in the Medicare Prescription Payment Plan through <plan sponsor>. As of <effective date>, you’ll pay the pharmacy directly for your out-of-pocket drug costs.

You’re getting this letter because you either asked to stop participating in this payment option, **or** you changed your Medicare drug plan or Medicare health plan with drug coverage (like a Medicare Advantage Plan). If you changed plans, and you’d like to join the Medicare Prescription Payment Plan offered through your new plan, contact your new plan.

**This letter only applies to your participation in the Medicare Prescription Payment Plan. Your Medicare drug coverage and other Medicare benefits won’t be affected, and you’ll continue to be enrolled in <plan name> for your drug coverage.**

### **How do I pay my balance?**

You can choose to pay the amount you owe all at once or be billed monthly. You’ll never pay any interest or fees on the amount you owe, even if your payment is late.

You owe <insert unpaid>. You can pay:

- Online at <plan’s website>, by credit or debit card.
- Through the mail, by check.
- <insert other payment methods offered by the plan sponsor like electronic funds transfer (including automatic charges of an account at a financial institution or credit or debit card account)>.

If you have questions about your payment, call us at <phone number>, <days and hours of operation>. TTY users can call <TTY number>.

### **What happens if I don’t pay my balance?**

Like any other debt, you’re required to pay the amount you owe. As long as you continue to pay your plan premium (if you have one), you’ll still have drug coverage.

## Can I use this payment option in the future?

- **If you're still in <plan name>:** Yes. Visit <insert PDP webpage where the application is>, or call us at <phone number> <days and hours of operation>. TTY users can call <TTY number>.
- **If you're joining a new plan:** Yes. All Medicare drug plans and Medicare health plans with drug coverage must offer this payment option. No matter what Medicare drug plan you're in, you can choose to rejoin the Medicare Prescription Payment Plan at any time.

## Are there programs that can help lower my costs?

You may be eligible for programs that can help lower your costs, like:

- **Extra Help:** A Medicare program that helps pay your Medicare drug costs if you have limited income and resources. Visit [secure.ssa.gov/i1020/start](https://secure.ssa.gov/i1020/start) to find out if you qualify and apply. You can also apply with your state's Medicaid office. Visit [Medicare.gov/basics/costs/help/drug-costs](https://www.medicare.gov/basics/costs/help/drug-costs) to learn more.
- **Medicare Savings Program:** A state-run program that helps people with limited income and resources pay some or all of their Medicare premiums, deductibles, and coinsurance. Visit [Medicare.gov/medicare-savings-programs](https://www.medicare.gov/medicare-savings-programs) to learn more.
- **State Pharmaceutical Assistance Program (SPAP):** A program that may include coverage for your Medicare drug plan premiums and/or cost sharing. SPAP contributions may count toward your Medicare drug coverage out-of-pocket limit. Visit [go.medicare.gov/spap](https://go.medicare.gov/spap) to learn more.
- **Manufacturer's Pharmaceutical Assistance Programs (PAPs):** (sometimes called Patient Assistance Programs (PAPs)): A program from drug manufacturers to help lower drugs costs for people with Medicare. Visit [go.medicare.gov/pap](https://go.medicare.gov/pap) to learn more.

Many people qualify for savings and don't realize it. Visit [Medicare.gov/basics/costs/help](https://www.medicare.gov/basics/costs/help), or contact your local Social Security office to learn more. Find your local Social Security office at [secure.ssa.gov/ICON/main.jsp](https://secure.ssa.gov/ICON/main.jsp) or call 1-800-772-1213. TTY users can call 1-800-325-0778.

**Note:** The programs listed above can help lower your costs, but they can't help you pay off your Medicare Prescription Payment Plan balance.