

42 C.F.R. § 423.884

Requirements for qualified retiree prescription drug plans.

- (a) *General.* Employment-based retiree health coverage is considered to be a qualified retiree prescription drug plan if all of the following requirements are satisfied:
- (1) An actuarial attestation is submitted in accordance with paragraph (d) of this section. The rules for submitting attestations as part of subsidy applications are described in paragraph (c) of this section.
- (2) Part D eligible individuals covered under the plan are provided with creditable coverage notices in accordance with § 423.56.
- (3) Records are maintained and made available for audit in accordance with paragraph (f) of this section and § 423.888(d).
- (b) *Disclosure of information.* The sponsor must have a written agreement with its health insurance issuer (as defined in 45 CFR 160.103), or group health plan (as applicable) regarding disclosure of information to CMS, and the issuer or plan must disclose to CMS, on behalf of the sponsor, the information necessary for the sponsor to comply with this subpart.
- (c) Application—(1) Submitting an application. The sponsor (or its designee) must submit an application for the subsidy to CMS that is signed by an authorized representative of the sponsor. The application must be provided in a form and manner specified by CMS.
- (2) Required information. In connection with each application the sponsor (either directly or through its designee) must submit the following:
- (i) Employer Tax ID Number (if applicable).
- (ii) Sponsor name and address.
- (iii) Contact name and email address.
- (iv) Actuarial attestation that satisfies the standards specified in paragraph (d) of this section and any other supporting documentation required by CMS for each qualified retiree prescription drug plan for which the sponsor seeks subsidy payments.
- (v) A list of all individuals the sponsor believes (using information reasonably available to the sponsor when it submits the application) are qualifying covered retirees enrolled in each prescription drug plan (including spouses and dependents, if Medicare-eligible), along with the information about each person listed below in this paragraph:
- (A) Full name.

- (B) Health Insurance Claim (HIC) number or Social Security number.
- (C) Date of birth.
- (D) Gender.
- (E) Relationship to the retired employee.
- (vi) A sponsor may satisfy paragraph (c)(2)(v) of this section by entering into a voluntary data sharing agreement (VDSA) with CMS (or any other arrangement CMS may make available).
- (vii) A signed sponsor agreement.
- (viii) Any other information specified by CMS.
 - (3) *Terms and conditions.* To receive a subsidy payment, the sponsor (through the signed sponsor agreement or as otherwise specified by CMS) must specifically accept and agree to:
- (i) Comply with the terms and conditions of eligibility for a subsidy payment set forth in this regulation and in any related CMS guidance;

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