

1. **Changes to Part D Formula:** A visual chart explaining all Part D changes along with examples is available in the recorded presentation as well as posted in the Broker Link.
2. **Catastrophic Phase:** In this phase, the member pays nothing, and the plan will be responsible for most of the drug cost.
3. **TROOP vs MOOP:** Although the max out of pocket is \$2k for the member, in most cases they will pay far less than that due to the change in how MOOP is calculated as opposed to TROOP.
4. **Medicare.gov and Sunfire Updates:** It is expected that both will update all the changes by October, to include the new MOOP calculation formula to determine when a member will reach the catastrophic phase. It is TBD whether non-commissionable plans will populate in Sunfire.
5. **Formularies and Drug Tiers:** The changes might possibly affect the plans' formularies and some drugs might change tiers.
6. **Premiums for 2025:** There is an anticipation of a significant increase in PDP premiums for 2025.
7. **Impact on MAPD Plans:** It is undetermined how these changes will affect the premiums of MAPD plans, but we expect that most will remain \$0 premium. We may also see a slight degradation of MAPD benefits to account for the added cost burden on the plan from Part D.
8. **Impact to Agents:** You will not need to explain the bid process for Part D plans, or the formulas discussed in this webinar. You will need to explain the new coverage stage structure: Deductible Stage > Standard Coverage Stage > Catastrophic Phase. There is no more Coverage Gap and MOOP is calculated differently from the former TROOP.
9. **Agent Commissions:** Some Part D plans will be non-commissionable for 2025. We will know which ones in late August or early September. Unless otherwise stated by the carriers, renewals will continue to be paid on existing business.
10. **Copay Smoothing:** This program allows beneficiaries to spread out the cost of their deductible and Rx cost share throughout the remaining months of the year. They will be notified at the pharmacy and by the plan about the program and how to opt in. Members can opt in for as few or as many of their prescriptions as they want and can add new prescriptions to the payment plan throughout the year. The carrier will adjust the monthly amount due as new prescriptions are added. They can pay the plan off early if they wish. There is currently no recourse by the plan in the event the member defaults on payments, and they will continue receiving their drugs, as far as we know.
11. **Impact on Employer Group Plans:** As of now, group plans that were deemed creditable for 2024 will remain so for 2025. We do not yet know how they will be treated beyond that.
12. **Impact on LIS or MSP Members:** The changes to Part D do not affect members that have LIS or the MSP.
13. **Changes in SEP for DSNPs:** There will be a webinar soon to discuss for clarity and detail about the changes of the SEP specifically for DSNPs. But as it relates to Part D, Dual-eligibles will have a monthly SEP to return to Original Medicare and enroll in a stand-alone Part D plan.