

20 - Benefit Design Requirement Waivers

(Rev. 111, 05-03-13, Effective: 05-03-13, Implementation: 05-03-13)

MAOs are permitted to modify the cost sharing, benefit level and/or premium offered only to employers/unions from the levels of cost sharing, benefits and premiums offered to individual enrollees as long as the minimum required Medicare coverage levels (i.e., benefits and coverage equivalent to Fee-For-Service (FFS) Medicare)³ are met and as long as the modification does not violate applicable CMS cost sharing limits for discriminatory cost sharing and mandatory maximum out-of-pocket (MOOP) limit requirements. These requirements can be found in the Medicare Managed Care Manual, Chapter 4 (Benefits and Beneficiary Protections), §50.1.

Also, to the extent that there are specific MA requirements concerning cost sharing or benefit coverage requirements, these requirements apply equally to EGWPs unless explicitly waived or modified.