

**IMPORTANT NOTICE ABOUT PRESCRIPTION DRUG COVERAGE FOR YOU AND/OR  
YOUR MEDICARE ELIGIBLE DEPENDENTS**

**Medicare Part D Creditable Coverage Notice**

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Lincoln Electric and about your options under Medicare's prescription drug coverage. This information is to help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including covered drugs and costs, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. 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 considerations as to your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You are eligible for 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. Lincoln Electric has determined that the prescription drug coverage offered by the Medical Plans 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.

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**When May You Join A Medicare Drug Plan?**

You may join a Medicare drug plan when you first become eligible for Medicare and each year from October 15<sup>th</sup> through December 7<sup>th</sup>.

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 prescription drug coverage will be affected. Specifically, your current coverage pays for other health expenses in addition to prescription drugs. If you enroll in a Medicare prescription drug plan, you and your eligible dependents will still be eligible to receive all of your current health benefits. However, your prescription drug benefits will be provided by the Medicare Drug Plan in which you enroll.

If you do decide to join a Medicare drug plan and drop your current coverage, be aware that you and your dependents will not be able to get this coverage back until the following open enrollment time period provided you continue to be an active employee and meet the plan's eligibility requirements.

## 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 Lincoln Electric and do not join a Medicare 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 experience 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may increase by 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 have 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.

**NOTE:** You'll receive this notice each year. You will also receive it before the next period in which you may join a Medicare drug plan, and also if this coverage through Lincoln Electric changes. You may request a copy of this notice at any time.

## For More Information Regarding Your Options Under Medicare Prescription Drug Coverage

Contact the person listed below for further information. Detailed information regarding Medicare plans offering prescription drug coverage is in the "Medicare & You" handbook. You'll receive 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 [www.medicare.gov](http://www.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 [www.socialsecurity.gov](http://www.socialsecurity.gov), or call them at 1-800-772-1213 (TTY 1-800-325-0778).

**Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).**

<b>Date:</b>	<b>September 23, 2024</b>
<b>Name of Entity/Sender:</b>	<b>The Lincoln Electric Company</b>
<b>Contact—Position/Office:</b>	<b>U.S. Benefits Team 22801 St Clair Avenue Cleveland, OH 44117</b>
<b>Phone Number:</b>	<b>216 383-2476</b>