

# The road to Medicare

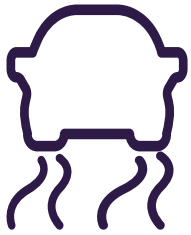
## Planning your drive toward 65

As you are approaching age 65 and Medicare eligibility, it is essential to understand your options. With Medicare, there are many parts and plans you will need to consider, along with when will be the appropriate time for you to join Original Medicare and Medicare plans. Knowing your options and timing will help prevent unexpected problems down the road. This fact sheet will help map your journey to Medicare, highlighting common roadblocks and warning signs.

### Some road signs you need to watch out for are:

#### Caution! Slippery road ahead:

Ways to prepare for Medicare



#### Green light enrollment:

When and how you need to enroll in Medicare

#### Detour - Working past 65:

Information for beneficiaries who plan to work beyond age 65

#### Stop! Get help:

Resources for further information and assistance on the road to Medicare

#### Which way to supplemental coverage?

Choices in health insurance to supplement Medicare

\*Including other Medicare insurance options like Medicare Advantage

### Caution! Slippery road ahead

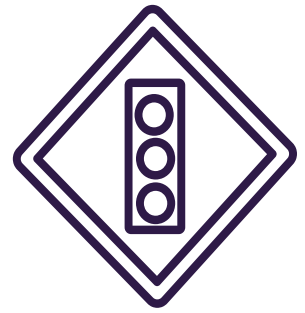
Several months before turning 65 is an important time to start educating yourself about Medicare and how it relates to your circumstances. For example:

- Request a copy of your Social Security statement from the Social Security Administration at **(800-772-1213 or [www.socialsecurity.gov](http://www.socialsecurity.gov))**. This document will specify how many credits of work you have and how much you have paid into the Social Security system. If you or your spouse have 40 or more credits of work and have paid into the Social Security system, you are eligible for premium-free Medicare Part A (Hospital Insurance) at age 65. If you do not have sufficient credits of work to qualify, you can buy Medicare Part A coverage. In addition to Medicare Part A, there is Medicare Part B (Medical Insurance) for which everyone pays a premium.
- If you have been on Medicare due to a disability, you begin a new six-month open enrollment period for purchasing Medicare supplemental insurance when you turn 65.
- Talk to your employer's benefits officer and ask for any information about company health insurance after age 65.
- If you have an Employer Group Health Plan (EGHP) that will continue to pay secondary after you become eligible for Medicare, study the benefits booklet to find out the cost and benefits of the plan. You will then need to decide if you should keep your EGHP as a secondary to Medicare or if you need to drop your EGHP and purchase a Medicare Supplement or join a Medicare Advantage Plan. If your EGHP has drug benefits, make sure they are as good as or better than Medicare Part D.
- If you will not be covered by an EGHP plan that will pay secondary to Medicare, begin to investigate other health insurance options – either an individual Medicare Supplement policy (Medigap) or a Medicare Advantage Plan.
- Learn more about what Medicare will and will not cover. Get a copy of the "Medicare & You" handbook or the guide to health insurance for people with Medicare from the Social Security Administration. Understanding what Medicare covers and does not cover will give you some idea of the health care costs you may incur.
- As a new Medicare beneficiary, you are entitled to a one-time Welcome to Medicare wellness physical within six months of the day your Medicare Part B becomes effective.

## Greenlight enrollment

### Automatic enrollment

If you are already receiving Social Security, railroad retirement or federal retiree benefits, you are automatically enrolled in Medicare. Check with Social Security to verify your automatic enrollment as well as your current address. Your Medicare card should arrive in the mail shortly before your 65th birthday. Check the card when you receive it to verify that you are entitled to both Medicare Parts A and B.



### Initial enrollment

If you are not eligible for automatic enrollment, contact the Social Security Administration at **800-772-1213** or **[www.socialsecurity.gov](http://www.socialsecurity.gov)**, or visit the nearest office to enroll in Medicare Part A and Medicare Part B. You have a seven-month window to enroll in Medicare without incurring a penalty.

Initial enrollment period (seven months)			
Three months before 65th birthday	Birthday month	First month after 65th birthday	Two to three months after 65th birthday
Enroll now and your Medicare is effective the first day of your birth month.	Enroll now and your Medicare effective date will be delayed until the first day of the month following the month you actually enrolled.	Enroll now and your Medicare effective date will be delayed until the first day of the second month following the month you actually enrolled.	Enroll now and your Medicare effective date will be delayed until the first day of the third month following the month you actually enrolled.

During this initial enrollment period, you will also have the option to enroll in a Medicare Prescription Drug Plan (PDP), which is available under Medicare Part D. Enrollment in a Medicare PDP is strictly voluntary. These plans are offered by insurance companies and private companies approved by Medicare, who also helps pay for the coverage. If you fail to enroll in a Medicare PDP during your initial enrollment period and you do not have equal or better coverage through an EGHP, you will incur a 1-percent penalty for each month you are late enrolling, and you will only be allowed to enroll during the annual coordinated election period.

### General enrollment

If you do not enroll in Medicare Parts A and B during your seven-month window of eligibility you cannot enroll until the general enrollment period, which is January 1 through March 31 each year (unless you are entitled to special enrollment, see next page). Your Medicare eligibility will not begin until the first day of the month following the submission of an enrollment request. Your monthly Medicare Part B premium will increase to include a permanent 10-percent penalty for each year of delayed enrollment (unless you are eligible for special enrollment).

General enrollment period for Medicare Parts A and B (every year)	
Jan. 1 through March 31	Starts on the 1st day of the month following the submission of an enrollment request
Enroll here	Medicare coverage begins with a penalty



## Detour - Working past 65 (special enrollment)

If you or your spouse are actively working at age 65, are covered by an EGHP, and the company has 20 or more employees, you may be able to delay Medicare Part B coverage without penalty. As long as you or your spouse has 40 credits of work, you will still be eligible for Part A without having to pay a premium.

Talk to your employer's benefits officer and ask for information about company health insurance options for people who continue working past their 65th birthday. In addition, make sure to ask how many hours you must work to keep your health insurance plan and whether the EGHP will be "primary" or "secondary" coverage to Medicare.

Carefully study the company's current benefit booklet to determine cost and benefits of the plan.

If your EGHP is primary to Medicare, you do not have to enroll in Medicare Part B at this time. You will need to enroll in Medicare Part B within eight months of the EGHP's termination of coverage or when it is no longer considered as primary coverage. If your EGHP is secondary to Medicare despite active employment, you must enroll in Medicare Part B during the seven-month initial enrollment period to avoid future penalties. If you voluntarily dis-enroll from your EGHP before terminating your employment, you could potentially lose any EGHP benefits when you retire.

Contact the Social Security Administration at **800-772-1213**, or go to **[www.socialsecurity.gov](http://www.socialsecurity.gov)** or the nearest Social Security Administration to confirm you are enrolled in Medicare Part A (hospital insurance).

Give written notice to your company of your intention to continue working after age 65. When you decide to stop working, notify the Social Security Administration immediately. It is also advisable to notify the Social Security Administration that you or your spouse if covered under your EGHP, will continue to work beyond age 65.



## Which way to supplemental coverage?

Medicare is a major medical plan that provides a basic foundation of benefits. However, it does not pay 100 percent of all medical bills. Medicare beneficiaries are responsible for premiums, deductibles and coinsurance. These amounts may be more significant than expected. Due to these costs, most beneficiaries need some kind of plan, policy or program to fill in the "gaps."

## Medicare Supplement Insurance

Medicare Supplement is a health insurance option for people with Medicare. There are standardized Medicare Supplement insurance plans available to fill the gaps left by original Medicare (Parts A and B). These types of plans are sold by private companies as individual insurance policies and are regulated by the Department of Insurance. After age 65 and for the first six months of eligibility for Medicare Part B, beneficiaries have an open enrollment period and are guaranteed the ability to buy any of these plans from any company that sells them. During this time, companies cannot deny coverage or charge more for current or past health problems. If you fail to apply for a Medicare Supplement plan within your open enrollment period, you may lose the right to purchase such policy without regard to your health.

## Medicare Prescription Drug Coverage (Medicare Part D)

The Medicare prescription Drug plans (PDPs) are sold by private insurance companies approved by Medicare and require a monthly premium. Everyone new to Medicare will have a seven-month window to enroll in a PDP—three months before, the month of and three months after their Medicare becomes effective. The month you enroll will have an impact on the PDP's effective date. Even though each individual with Medicare is eligible to enroll in a PDP there are stipulations on the enrollment period. Unless you are new to Medicare or are entitled to a special enrollment period, you must enroll during the annual coordinated election period. With regard to the premium, if you have limited income and assets/resources, assistance may be available to help pay the premiums, deductibles and co-payments. You may be entitled to Low-Income Subsidy assistance (LIS) or "extra help" through the Social Security Administration. For more information or to check eligibility, you may contact the Social Security Administration at **800-772-1213** or **[www.socialsecurity.gov](http://www.socialsecurity.gov)**.

## Employer or military retiree coverage

If you or your spouse has an EGHP as retiree health coverage from an employer or the military (TRICARE for life), you may not need additional insurance. Review the EGHP's costs and benefits and contact your employer benefit representative or the Senior Health Insurance Information Program (SHIIP) to learn how your coverage works with Medicare.

## Medicaid or Medicare savings programs

Medicare beneficiaries with low income or very high medical costs may be eligible to receive assistance from the Medicaid program. There are also Medicare savings programs for other low-income beneficiaries that may help pay for Medicare premiums, deductibles and coinsurance. There are specified income and resource limits for both programs. To find out more or to apply for one of these programs, contact your local county department of social service.

## Other Medicare insurance options

### Medicare Advantage (Medicare Part C)

Medicare advantage plans are another health insurance option for Medicare beneficiaries. These plans (HMOs, PPOs, PFFS plans and/or MSAs) provide all Medicare Part A and Part B benefits and possibly additional benefits. Check state availability. Members may be required to use a network or group of preferred providers. Check with your doctors and hospital to see if they accept the insurance plan you are considering joining. All four plan options may not be available in the county where you reside. If you join a Medicare Advantage Plan, you are in the Medicare program but receive your Medicare benefits from the private carrier. You are no longer enrolled in original Medicare. You may enroll in a Medicare Advantage Plan during your initial enrollment period (see Page 2), during the annual election period, or during the annual Medicare Advantage open enrollment period from Jan. 1 through March 31. There are limitations as to what a Medicare beneficiary may do during the Medicare Advantage open enrollment period.



## Stop! Get help

### Medicare: 800-633-4227 or [www.medicare.gov](http://www.medicare.gov)

Medicare provides information 24 hours a day, seven days a week about eligibility, enrollment, and coverage.

### Social Security Administration: 800-772-1213 or [www.socialsecurity.gov](http://www.socialsecurity.gov)

Contact the Social Security Administration to enroll in Medicare or to request a replacement Medicare card.

## Employer benefits representative

Schedule a visit with your representative for information about EGHP coverage.

## Local Department of Social Services (DSS)

County DSS offices have information about Medicaid and Medicare savings program eligibility and applications. You can locate their contact information in the blue pages of the phone book.

## TRICARE for life: 866-773-0404 or [www.tricare.mil](http://www.tricare.mil)

TRICARE for life representatives can assist military retirees with questions on eligibility and coverage.

**To learn more, contact a Truist Life Insurance Services (LIS) Medicare specialist at 800-474-1471 or [Medicare@TruistLife.com](mailto:Medicare@TruistLife.com).**

We do not offer every Medicare Advantage or Prescription Drug plan that is available in your area. Any information we provide is limited to those plans we do offer in your area. Please contact Medicare.gov or 1-800-MEDICARE to get information on all of your options.

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