

Medicare

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Medicare

This booklet provides basic information about Medicare for anyone who's covered and some of the options available when choosing Medicare coverage. You can visit *Medicare.gov* or call the toll-free number 1-800-MEDICARE (1-800-633-4227) or the TTY number 1-877-486-2048 for the latest information about Medicare.

What is Medicare?

Medicare is our country's federal health insurance program for people age 65 or older. People younger than age 65 with certain disabilities, permanent kidney failure, or amyotrophic lateral sclerosis (Lou Gehrig's disease), can also qualify for Medicare. The program helps with the cost of health care, but it doesn't cover all medical expenses or the cost of most long-term care. You have choices for how you get Medicare coverage. If you choose to have Original Medicare (Part A and Part B) coverage, you can buy a Medicare Supplement Insurance (Medigap) policy from a private insurance company. Medigap covers some of the costs that Medicare does not, such as copayments, coinsurance, and deductibles. If you choose Medicare Advantage, you can buy a Medicare-approved plan from a private company that bundles your Part A. Part B, and usually drug coverage (Part D) into one plan.

Although the Centers for Medicare & Medicaid Services (CMS) is the agency in charge of the Medicare program, Social Security processes your application for Original Medicare (Part A and Part B), and we can give you general information about the Medicare program.

Social Security can also help you get a replacement Medicare card. Notify us timely of address changes, name changes, and deaths.

Parts of Medicare

Social Security enrolls you in Original Medicare (Part A and Part B).

- Medicare Part A (hospital insurance) helps pay for inpatient care in a hospital or limited time at a skilled nursing facility (following a hospital stay). Part A also pays for some home health care and hospice care.
- Medicare Part B (medical insurance) helps pay for services from doctors and other health care providers, outpatient care, home health care, durable medical equipment, and some preventive services.

Other parts of Medicare are run by private insurance companies that follow rules set by Medicare.

- Supplemental (Medigap) policies help pay Medicare out-of-pocket copayment, coinsurance, and deductible expenses.
- Medicare Advantage Plan (previously known as Part C) includes all benefits and services covered under Part A and Part B — prescription drugs and additional benefits such as vision, hearing, and dental — bundled together in one plan.
- Medicare Part D (Medicare prescription drug coverage) helps cover the cost of prescription drugs.

You can sign up for Original Medicare (Part A and Part B) through *Social Security's online Medicare application*.

Visit Medicare's website, *Medicare.gov*, to get more information about Original Medicare, Medicare Advantage, or Part D coverage; or to download a copy of the publication *Medicare & You* (Publication No. CMS-10050). You can also call the Medicare toll-free number at 1-800-633-4227; TTY users can call 1-877-486-2048.

A word about Medicaid

Medicaid and Medicare are two different programs. Medicaid is a state-run program that provides hospital and medical coverage for people with low income. Each state has its own rules about who's eligible and what Medicaid covers. Some people qualify for both Medicare and Medicaid. For more information about the Medicaid program, contact your local medical assistance agency, social services office, or get state contact information at **www.Medicaid.gov**.

Who can get Medicare?

Medicare Part A (hospital insurance)

People age 65 or older, who are citizens or permanent residents of the United States, are eligible for Medicare Part A. You're eligible for Part A at no cost at age 65 if one of the following applies:

- You receive or are eligible to receive benefits from Social Security or the Railroad Retirement Board (RRB).
- Your spouse (living or deceased, including divorced spouses) receives or is eligible to receive Social Security or RRB benefits.
- You or your spouse worked long enough in a government job through which you paid Medicare taxes.
- You are the dependent parent of a fully insured deceased child.

If you don't meet these requirements, you may be able to get Medicare Part A by paying a monthly premium. Usually, you can purchase this coverage only during designated enrollment periods.

NOTE: Even though Social Security's full retirement age is no longer 65, you should sign up for Medicare three months before your 65th birthday. You can apply at **www.ssa.gov**.

Before age 65, you are eligible for Medicare Part A at no cost if one of the following applies:

- You've been entitled to Social Security disability benefits for 24 months.
- You receive a disability pension from the RRB and meet certain conditions.
- You receive Social Security disability benefits because you have Lou Gehrig's disease (amyotrophic lateral sclerosis).
- You worked long enough in a government job through which you paid Medicare taxes, and you have met the requirements of the Social Security disability program for 24 months.
- You're the child or widow(er) age 50 or older, including a divorced widow(er), of a worker who has worked long enough under Social Security or in a Medicare-covered government job, and you meet the requirements of the Social Security disability program.
- You have permanent kidney failure (end-stage renal disease) and you receive maintenance dialysis or a kidney transplant and one of the following applies:
 - You're eligible for or receive monthly benefits under Social Security or the railroad retirement system.
 - You've worked long enough in a Medicare-covered government job.
 - —You're the child or spouse (including a divorced spouse) of a worker (living or deceased) who has worked long enough under Social Security or in a Medicare-covered government job.

Medicare Part B (medical insurance)

Anyone who's eligible for Medicare Part A at no cost can enroll in Medicare Part B by paying a monthly premium. Some people with higher incomes will pay a higher monthly Part B premium. For more

information, visit our webpage *Medicare Premiums:* Rules for Higher Income Beneficiaries or visit www.ssa.gov/benefits/medicare/mediinfo.

If you're not eligible for Part A at no cost, you can buy Part B without having to buy Part A if you're age 65 or older and you're one of the following:

- A U.S. citizen.
- A lawfully admitted non-citizen, who has lived in the United States for at least five years.

You can only sign up for Part B during designated enrollment periods. If you don't enroll in Part B when you're first eligible for it, you may have to pay a late enrollment penalty for as long as you have Part B coverage. Read the "Signing up for Medicare" section for more information.

Medicare Advantage plans

If you receive your Part A and Part B benefits directly from the government, you have Original Medicare. If you receive your benefits from a Medicare Advantage organization or other private company approved by Medicare, you have a Medicare Advantage plan. Many of these plans provide extra coverage and may lower your out-of-pocket costs.

If you have Medicare Parts A and B, you can join a Medicare Advantage plan. With these plans, you can't have a Medigap policy, because Medicare Advantage plans cover many of the same benefits a Medigap policy covers. This includes benefits like extra days in the hospital after you've used the days that Medicare covers.

Medicare Advantage plans include all of the following:

- Health Maintenance Organization (HMO) plans.
- Preferred Provider Organization (PPO) plans.
- Private Fee-for-Service (PFFS) plans.
- Special Needs Plans (SNPs).

If you decide to join a Medicare Advantage plan, you use the health card that you get from your Medicare Advantage plan provider for your health care. Also, you might have to pay a monthly premium for your Medicare Advantage plan because of the extra benefits it offers.

You can enroll in a Medicare Advantage plan during your initial enrollment period (as explained under the "Signing up for Medicare" section), the first time you're eligible for Medicare. You can also enroll during the annual Medicare open enrollment period from October 15 to December 7 each year. The effective date for the enrollment is January 1 of the following year. For example, if you signed up on November 8, 2020, your coverage would become active on January 1, 2021. There are also special enrollment periods for some situations.

Medicare Part D (Medicare prescription drug coverage)

Anyone who has Original Medicare (Part A or Part B) is eligible for Medicare prescription drug coverage (Part D). Part D benefits are available as a standalone plan or built into Medicare Advantage, unless you have a Medicare private fee-for-service (PFFS) plan. The drug benefits work the same in either plan. Joining a Medicare prescription drug plan is voluntary and you pay an extra monthly premium for the coverage. Some beneficiaries with higher incomes will pay a higher monthly Part D premium. For more information, visit our webpage *Medicare Premiums: Rules for Higher-Income Beneficiaries*, or visit *www.ssa.gov/medicare/mediinfo.html*.

If you don't enroll in a Medicare prescription drug plan when you're first eligible, you may pay a late enrollment penalty if you join a plan later. You'll have to pay this penalty for as long as you have Medicare prescription drug coverage. However, you won't pay a penalty if you have Extra Help (see "Extra Help" section below), or another creditable prescription drug plan. To be creditable, the coverage must pay, on average, at least as much as Medicare's standard prescription coverage.

You can enroll during your initial enrollment period (as explained under the "Signing up for Medicare" section), the first time you're eligible for Medicare. You can also enroll during the annual Medicare open enrollment period from October 15 to December 7 each year. The effective date for the enrollment is January 1 of the following year. There are also special enrollment periods for some situations.

Rules for higher-income beneficiaries

If you have higher income, the law requires an adjustment to your monthly Medicare Part B (medical insurance) and Medicare prescription drug coverage premiums. We call the additional amount the income-related monthly adjustment amount. This affects less than five percent of people with Medicare, so most people don't pay a higher premium.

If you're single and your income is above \$88,000, or married with an income above \$176,000, you are considered to be a higher-income beneficiary. For more information, visit our webpage *Medicare Premiums:* Rules for Higher Income Beneficiaries or visit www.ssa.gov/benefits/medicare/medicare-premiums.

Monthly Medicare premiums for 2021

The standard Part B premium for 2021 is \$148.50. If you're single and filed an individual tax return, or married and filed a joint tax return, *our online chart* applies to you, regardless of your income. If you disagree with the decision about your income-related monthly adjustment amounts, you have the right to appeal. You can find more information on our webpage *Medicare Premiums: Rules for Higher Income Beneficiaries*.

Medicare Savings Programs (MSP)

If you can't afford to pay your Medicare premiums and other medical costs, you may be able to get help from your state. States offer Medicare Savings Programs for people entitled to Medicare who have low income. Some programs may pay for Medicare premiums and some pay Medicare deductibles and coinsurance. To qualify, you must have Medicare Part A and have limited income and resources.

You can go online to get more information about these programs from Medicare's website by visiting *Medicare.gov*. Find the tab titled, "Your Medicare Costs" and go to "Get help paying costs." You can also visit *www.medicare.gov/publications* to read *Get Help With Your Medicare Costs: Getting Started* (Publication No. CMS-10126).

Only your state can decide if you qualify for help under these programs. To find out, contact your state or local medical assistance (Medicaid) agency, social services, or welfare office.

Extra Help

You may also be able to get Extra Help paying for the monthly premiums, annual deductibles, and prescription co-payments related to the Medicare prescription drug program. You may qualify for Extra Help if you have limited resources and income (tied to the federal poverty level). These resources and income limits usually change each year, and you can check for the current numbers at www.ssa.gov/extrahelp.

You automatically qualify and don't need to apply for Extra Help if you have Medicare and meet one of the following conditions:

- Have full Medicaid coverage.
- Have Supplemental Security Income (SSI).

 Take part in a state program that pays your Medicare premiums.

For more information about getting help with your prescription drug costs or to apply for Extra Help, visit us at **www.socialsecurity.gov/extrahelp**. You can also contact us for more information.

Signing up for Medicare

When should I apply?

If you live in Puerto Rico, you don't automatically get Part B. You must sign up for it. See "Initial enrollment period for Part B" below for more information or read *Medicare in Puerto Rico* (Publication No. 05-10521).

Some People Get Part A and Part B Automatically

If you're already getting benefits from Social Security or the Railroad Retirement Board (RRB), you'll automatically be enrolled in both Part A and Part B starting the first day of the month you turn 65 (if your birthday is on the first day of the month, Part A and Part B will start the first day of the prior month). If you're under 65 and have a disability, you'll automatically get Part A and Part B after you get disability benefits from Social Security or certain disability benefits from the RRB for 24 months. If you have ALS, you'll get Part A and Part B automatically the month your Social Security disability benefits begin.

NOTE: Medicare Part B is voluntary and you must pay a premium if you decide you want the coverage.

If You Are 65 and Not Getting Social Security or Railroad Retirement Benefits

If you're not already getting benefits, you should contact Social Security about three months before your 65th birthday to sign up for Medicare. You should sign up for Medicare even if you don't plan to retire at age 65.

However, if you are eligible for Medicare and your medical insurance coverage is through a current employer's group health plan, Medicare has a Special Enrollment Period (SEP) to sign up for Medicare Part B. This SEP qualifies you to delay enrolling in Medicare Part B without having to wait for a general enrollment period and paying the penalty for late enrollment. You can find more information, under the section titled "Special enrollment period for people covered under an employer group health plan."

Getting Your Medicare Card

After you enroll in Medicare, you'll receive a red, white, and blue Medicare card showing whether you have Part A, Part B, or both. Keep your card in a safe place so you'll have it when you need it. If your card is lost or stolen, you can request a replacement card online by setting up a my Social Security account at www.ssa.gov/myaccount, or call Social Security's toll-free number at 1-800-772-1213, TTY 1-800-325-0778. You'll also receive Medicare & You (Publication No. CMS-10050), a handbook that describes your Medicare benefits and plan choices.

Other enrollment situations

You should also contact Social Security about applying for Medicare if one of the following applies:

- You're a disabled widow or widower between age 50 and age 65, but haven't applied for disability benefits because you're already getting another kind of Social Security benefit.
- You're a government employee and became disabled before age 65.
- You, your spouse, or your dependent child has permanent kidney failure.
- You had Medicare Part B in the past, but dropped the coverage.

- You turned down Medicare Part B when you first got Part A.
- You or your spouse worked for the railroad industry.

Initial enrollment period for Part B

If you are already getting benefits from Social Security or the RRB, you will automatically get Part A and Part B starting on the first day of the month when you turn 65 (if your birthday is on the first day of the month, Part A and Part B will start the first day of the prior month).

You will need to choose which way to get your Medicare health coverage:

- Original Medicare includes Part A and Part B. You can buy supplemental coverage from a private company to help pay your out-of-pocket costs. You can also add Medicare drug coverage (Part D).
- Medicare Advantage a Medicare-approved plan from a private company that bundles your Part A, Part B, and usually drug coverage (Part D) into one plan.

Most plans include extra benefits , like vision, hearing, dental, and more.

If you're under 65 and have a disability, you'll automatically get Part A and Part B after you get disability benefits from Social Security or certain disability benefits from the RRB after 24 months.

If you are not receiving Social Security benefits or Railroad Retirement at age 65, you can first sign up for Part A and/or Part B during the seven-month period that begins three months before the month you turn 65, includes the month you turn 65, and ends three months after the month you turn 65. **NOTE:** If you don't enroll in Part B when you're first eligible for it, you may have to pay a late enrollment penalty for as long as you have Part B coverage. Also, you may have to wait to enroll, which will delay this coverage.

When does my enrollment in Part B become effective?

If you accept the automatic enrollment in Medicare Part B or if you enroll during the first three months of your initial age 65 enrollment period, your coverage will start with the month you're first eligible. If you enroll during the last four months, your coverage will start from one to three months after you enroll.

The following chart shows when your Medicare Part B becomes effective:

If you enroll in this month of your initial enrollment period	Then your Part B Medicare coverage starts	
One to three months before you reach age 65	The month you reach age 65	
The month you reach age 65	One month after the month you reach age 65	
One month after you reach age 65	Two months after the month of enrollment	
Two or three months after you reach age 65	Three months after the month of enrollment	

General enrollment period for Part B

If you don't enroll in Medicare Part B during your initial enrollment period, you have another chance each year to sign up during a "general enrollment period" from January 1 through March 31. Your coverage begins on July 1 of the year you enroll. However, you may have to pay a late enrollment penalty for as long as you have Part B coverage. Your monthly premium will go up 10% for each 12-month period you were eligible for Part B, but didn't sign up for it.

Medicare Advantage Open Enrollment Period for people leaving Medicare Advantage plan

If you're in a Medicare Advantage plan, you can leave that plan and switch to Original Medicare from January 1 through March 31. If you use this option, you also have until March 31 to join a Medicare Part D (Medicare prescription drug plan). Your coverage begins the first day of the month after the plan gets your enrollment form.

Special enrollment period for people covered under an employer group health plan

If you're 65 or older and covered under a group health plan, either from your own or your spouse's **current employment**, you may have a "special enrollment period" in which to sign up for Medicare Part B. This means that you may delay enrolling in Medicare Part B without having to wait for a general enrollment period and paying the penalty for late enrollment. There are limits, so we strongly advise you to contact Social Security up to three months before your 65th birthday if you are unsure of your situation.

The Special Enrollment Period (SEP) rules allow you to do one of the following:

 Enroll in Medicare Part B any time while you or your spouse have a group health plan based on current employment. Enroll in Medicare Part B during the eight-month period that begins the month after the employment ends or the group health coverage ends, whichever happens first.

You can't enroll using a special enrollment period until your age 65 initial enrollment period is over. If your employment or the employer-provided group health plan coverage ends during your age 65 initial enrollment period, see the enrollment chart under the "When does my enrollment in Part B become effective?" section.

When you enroll in Medicare Part B while you're still in the group health plan, or during the first full month when you are no longer in the plan, your coverage begins in one of the following:

- · On the first day of the month you enroll.
- By your choice, on the first day of any of the following three months.

If you enroll during any of the remaining seven months of the special enrollment period, your Medicare Part B coverage begins on the first day of the following month.

If you don't enroll by the end of the eight-month period, you'll have to wait until the next general enrollment period, which begins January 1 of the next year. You may also have to pay a late enrollment penalty for as long as you have Part B coverage, as described previously.

If you get Social Security disability benefits and have coverage under a large group health plan (100 or more employees) from either your own or a family member's current employment, you may also have a special enrollment period. If so, you have premium rights similar to those for current workers age 65 or older.

NOTE: COBRA and retiree health coverage don't count as current employer coverage.

Signing up for Part B during the Special Enrollment Period

You can do **one** of the following:

- Go to "Apply Online for Medicare Part B During a Special Enrollment Period" and complete CMS-40B and CMS-L564. Then, upload your evidence of Group Health Plan or Large Group Health Plan.
- 2. Fax your CMS-40B and employer-signed CMS-L564 forms to **1-833-914-2016**.
- 3. Mail your CMS-40B and employer-signed CMS-L564 to your local Social Security office.

Note: When completing the CMS-L564:

- State, "I want Part B coverage to begin (MM/YY)" in the remarks section of the CMS-40B form or online application.
- If your employer is unable to complete Section B, please complete that portion as best as you can on behalf of your employer without your employer's signature and submit one of the following forms of secondary evidence:
 - —Income tax returns that show health insurance premiums paid.
 - —W-2s reflecting pre-tax medical contributions.
 - Pay stubs that reflect health insurance premium deductions.
 - —Health insurance cards with a policy effective date.
 - —Explanations of benefits paid by the GHP or LGHP.
 - Statements or receipts that reflect payment of health insurance premiums.

Choices for receiving health services

Medicare beneficiaries have choices for getting health care services.

You can get more information about your health care choices from the following publications:

- Medicare & You (Publication No. CMS-10050) —
 CMS mails this guide to people after they enroll in
 Medicare and sends them an updated version each
 year after that.
- Choosing a Medigap Policy: A Guide to
 Health Insurance for People with Medicare
 (Publication No. CMS-02110) This guide describes
 how other health insurance plans supplement
 Medicare and offers some shopping hints for people
 looking at those plans.

To get a copy of these publications, visit *Medicare.gov/publications* or call the toll-free number, 1-800-MEDICARE (1-800-633-4227). If you're deaf or hard of hearing, call TTY 1-877-486-2048.

If you have other health insurance

Medicare Part A (hospital insurance) is free for almost everyone. You have to pay a monthly premium for Medicare Part B (medical insurance). If you already have other health insurance when you become eligible for Medicare, is it worth the monthly premium costs to sign up for Part B?

The answer varies with each person and the kind of other health insurance you have. Although we can't give you "yes" or "no" answers, we can offer information that can help you decide. We can also advise if you'll be subject to a late enrollment penalty if you delay signing up.

If you have a private insurance plan

Get in touch with your insurance agent to see how your private plan fits with Medicare Part B. This is especially important if you have family members who have coverage under the same policy. And remember, just as Medicare doesn't cover all health services, most private plans don't either. In planning your health insurance coverage, keep in mind that most nursing home care isn't covered by Medicare or private health insurance policies.

NOTE: For your own protection, do not cancel any health insurance you now have until after your Medicare coverage begins.

If you have insurance from an employer-provided group health plan

By law, group health plans of employers with 20 or more employees have to offer current workers and their spouses who are age 65 (or older) the same health benefits as younger workers.

If you or your spouse are still working and covered under an employer-provided group health plan, talk to the personnel office before signing up for Medicare Part B.

If you have a Health Savings Account

You can't contribute to your Health Savings Account (HSA) once Medicare Part A or Part B coverage begins. However, you may use money that's already in your HSA after you enroll in Medicare to help pay for deductibles, premiums, copayments, or coinsurance. If you contribute to your HSA after your Medicare Part A or Part B coverage starts, you may have to pay a tax penalty.

Remember, premium-free Part A coverage begins six months before the date you apply for Medicare (or Social Security/RRB benefits), but no earlier than the first month you were eligible for Medicare. To avoid a tax penalty,

you should stop contributing to your HSA at least six months before you apply for Medicare. If you are unsure of how Medicare Parts A or B will work with your employer coverage, talk with your employer about your HSA options up to six months before you turn age 65.

If you have health care protection from other plans

If you have TRICARE (insurance for active-duty, military retirees, and their families), your health benefits can change or end when you become eligible for Medicare. This applies for any reason, regardless of age or place of residence. If you're retired from the military or are a military retiree's family member, you must enroll in Part A and Part B when first eligible to keep TRICARE coverage. You can find a military health benefits adviser at https://milconnect.dmdc.osd.mil, or call the Defense Manpower Data Center, toll-free at 1-800-538-9552 (TTY 1-866-363-2883) before you decide whether to enroll in Medicare medical insurance (Part B).

If you have health care protection from the Indian Health Service, Department of Veterans Affairs, or a state medical assistance program, contact those offices to help you decide if it's to your advantage to have Medicare Part B.

IMPORTANT: If you have VA coverage and don't enroll in Part B when you're first eligible, you may have to pay a late enrollment penalty for as long as you have Part B coverage. Also, you may have to wait to enroll, which will delay this coverage.

For more information on how other health insurance plans work with Medicare, visit **www.medicare.gov/publications** to view the booklet *Medicare and Other Health Benefits: Your Guide to Who Pays Firs*t

(Publication No. CMS-02179) or call Medicare's toll-free number, **1-800-MEDICARE** (**1-800-633-4227**). If you're deaf or hard of hearing, call TTY **1-877-486-2048**.

Contacting Social Security

There are several ways to contact us, such as online, by phone, and in person. We're here to answer your questions and to serve you. For more than 85 years, Social Security has helped secure today and tomorrow by providing benefits and financial protection for millions of people throughout their life's journey.

Visit our website

The most convenient way to conduct Social Security business from anywhere is online at **www.ssa.gov**. You can accomplish a lot.

- Apply for Extra Help with Medicare prescription drug plan costs.
- · Apply for most types of benefits.
- Find copies of our publications.
- Get answers to frequently asked questions.

When you create a personal *my* Social Security account, you can do even more.

- · Review your Social Security Statement.
- Verify your earnings.
- · Get estimates of future benefits
- · Print a benefit verification letter.
- Change your direct deposit information.
- · Request a replacement Medicare card.
- Get a replacement SSA-1099/1042S.
- Request a replacement Social Security card, if you have no changes and your state participates.

Call us

If you don't have access to the internet, we offer many automated services by telephone, 24 hours a day, 7 days a week. Call us toll-free at **1-800-772-1213** or at our TTY number, **1-800-325-0778**, if you're deaf or hard of hearing.

A member of our staff can answer your call from 7 a.m. to 7 p.m., Monday through Friday, if you need to speak with someone. We ask for your patience during busy periods since you may experience a high rate of busy signals and longer hold times to speak to us. We look forward to serving you.

Schedule an office visit

You can find the closest office location by entering your ZIP code on our office locator webpage.

If you are bringing documents for us to see, remember that they must be original or certified copies that are certified by the issuing agency.

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