

A Deep Dive into Medicare (FAQs)

Is Original Medicare enough coverage? What are my options for enhancing Medicare?

Everyone's individual circumstances differ. Ask yourself how much financial liability you are willing to risk for services that may not be covered by Original Medicare. Options to enhance Medicare are the following: Medicare Advantage plans, Medicare Supplemental or Medigap plans, and Medicare Prescription Drug plans.

Can I enroll my spouse or children, or parents in Medicare as long as I am eligible for it?

Eligibility for Medicare does not extend to one's spouse or children. Each individual must achieve eligibility for Medicare him or herself by turning 65, being permanently disabled for a specified period of time, or having end-stage renal disease (ESRD).

What is the difference between a Medicare Advantage Plan and a Medicare Supplement or Medigap Plan?

A Medicare Advantage Plan usually covers medical services with a set of predictable costs. Many plans include prescription coverage. Some plans include dental and vision benefits. Providers covered are usually limited to those who are in the plan's network. Medicare Advantage plans are simpler, as all services go through one network and all claims are paid by one carrier.

Medigap is an additional policy you can purchase to enhance Original Medicare. Depending on which Medigap plan you choose, the cost of Medicare's deductibles and coinsurances may be picked up by the Medigap plan. When you elect a Medigap plan, you also need to elect a Medicare Prescription Drug Plan. Medicare is billed by providers as your primary coverage. Once Medicare processes the claim, it is sent to your Medigap plan carrier for secondary processing.

Are all Medigap plans the same?

Yes and No. Medigap plans -- informally known as “letter” plans -- are standardized by federal and state regulations. The following will help illustrate the standardization:

Medigap Plan A will have the same benefits regardless of which insurance carrier sponsors it. To illustrate, Medigap Plan A will have the same benefit structure under Insurance Carrier I, Insurance Carrier II, and Insurance Carrier III. Similarly, Medigap Plan M will have the same benefit structure under Insurance Carrier I, Insurance Carrier II, and Insurance Carrier III.

The benefit structure of Medigap Plan A is different from the benefit structure of Medigap Plan G, which in turn is different from the benefit structure for Medigap Plan M.

How do I choose a Medigap Plan?

Choosing the Medigap plan that you want is a two-step process:

- Pick which letter plan you want for your supplemental medical coverage.
- Compare premium costs associated with the plans offered by different insurance carriers.

Medicare.gov provides a list of Medigap plans in your area. Premiums can vary by carrier, your age, and your smoking status.

If I have coverage through an employer, a spouse’s employer, or a retiree association in addition to Medicare, how do I know which coverage is primary and which is secondary?

Typically, coverage from an employer or spouse’s employer active plan is the primary payer and Medicare is the secondary payer. However, this can vary depending on the size of the employer.

If you have an employer-sponsored retiree plan and are not eligible for Medicare, the retiree group coverage is the primary payer. Once you are enrolled in Medicare, Medicare becomes primary payer, and the retiree group coverage becomes the secondary payer.

Are there action steps to complete if I decide not to enroll in Medicare while actively working?

If you or your spouse plan to continue working at or past age 65 and are satisfied with the coverage you have through your active employment, you do not have to take any steps, and will have an SEP (**S**pecial **E**nrollment **P**eriod) when you or your spouse retire and lose the coverage you once had through an active employer group plan.

If you are automatically enrolled by the SSA, which will occur if you are collecting SS retirement income benefits:

- You will receive a welcome packet with your Medicare card.
- You will need to send the card back with a letter stating that you are declining Medicare enrollment at this time because you have coverage through your (or your spouse's) active employment.

If I did not contribute to Social Security through payroll contributions, can I still get Medicare?

Yes, you will still be able to enroll in Medicare once you are eligible for it. If you or your spouse did not contribute for 10 years to Social Security through payroll contributions, you will be responsible for Medicare part A premiums. Everyone pays part B premiums, which may vary according to your income. If you choose to enroll in a Medicare Advantage Plan, a Medicare Prescription Drug plan, or a Medigap plan, those premiums would be in addition to the Medicare part A and B premiums.

How can I find out whether a service is covered by Medicare?

Check your “Medicare & You” handbook that is mailed to you each Fall. To view or download this booklet online, visit <https://www.medicare.gov/medicare-and-you>. You can also call 800-633-4227. TTY users can call 1-877-486-2048. There is also a tool on the Medicare website where you can look up which services are covered, at: <https://www.medicare.gov/coverage/your-medicare-coverage.htm>

How can I find out if my doctor will accept what Medicare pays?

Ask your doctor whether he or she accepts Medicare assignment. You can confirm by calling Medicare @ 1-800-633-4227 and reviewing the Medicare website, at <http://www.medicare.gov>. Or you can use the tool on the Medicare website to search for your provider: <https://www.medicare.gov/care-compare/>.

Accepting Medicare assignment means that your doctor will accept the amount Medicare allows for a service and you will not be charged beyond that allowed amount.

If I leave my job, am I eligible for COBRA if I am enrolled in Medicare?

If you are enrolled in Medicare at the time your employment ends you are eligible for COBRA. However, if you have COBRA and are not enrolled in Medicare, once you become eligible for age-attained Medicare, your COBRA coverage will usually end.

What happens if I sign up for more than one Medicare plan for medical and/or prescription coverage?

When it is discovered that you are enrolled in more than one plan, you will be disenrolled from one or both plans and risk being without coverage.

What steps should I take when considering a retirement date?

- Begin educating yourself six months prior to retirement.
- Understand coverage options available to you through your employer or union as a retiree, or through your spouse's employer, union, or retiree association.
- Once you decide to enroll with Medicare, familiarize yourself with Medicare enrollment timelines to avoid late enrollment penalties.

We hope this information has been helpful to you. For more information, or further clarification please consult with Member Care Services.

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