Topics

• Understanding Medicare
• Enrolling in Medicare
• Working past age 65
• Medicare and your state health insurance
• Split households
• Private Part C and Part D plans
• Resources
Understanding Medicare
What is Medicare?

Medicare is a federal health insurance program for people:

- age 65+
- medically disabled and under age 65 or
- any age with end-stage renal disease.
Four Parts of Medicare

**Medicare Part A**
- Hospital

**Medicare Part B**
- Medical Services

**Medicare Part C**
- Combines Part A & B

**Medicare Part D**
- Prescription drugs
# How Much Does It Cost?

<table>
<thead>
<tr>
<th>Part A</th>
<th>Part B</th>
<th>Part C</th>
<th>Part D</th>
</tr>
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<tbody>
<tr>
<td>No monthly premium</td>
<td>Standard monthly premium is $135.50*</td>
<td>No monthly premium for full-time retirees**</td>
<td>No monthly premium for most*</td>
</tr>
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*Premium will increase if you are subject to the Income-Related Monthly Adjustment Amount (IRMAA).

** Unless you are subject to the tiered insurance premiums

Contact the SSA for details about Medicare premiums and how they’re calculated.
Paying Your Medicare Premiums

Medicare premiums will be:

• deducted from your Social Security check (if you’re drawing it);

• billed to you every three months; or

• deducted from your bank account after you set up Medicare Easy Pay
Enrolling in Medicare
Automatic Enrollment

For individuals:
- drawing SSA benefits, or
- disabled under 65 (after you’ve received 24 months of payment).

The Social Security Administration will send you information in the mail.
Initial Enrollment Period

If you’re retired and not receiving SSA benefits enroll during the:

• three months prior to your 65th birthday,
• month of your 65th birthday or
• three months after your 65th birthday.

If you miss your initial enrollment period you may have a penalty for signing up late.
Active state employees and their Medicare-eligible dependents can delay Medicare Part B.

Contact SSA before your retirement date to enroll yourself or dependent in Medicare Part B.

SSA will send you a form your employer must fill out to verify your employment.

You can enroll in Medicare Part A even if you’re delaying Medicare Part B.
How Much Does Medicare Cover?

Traditional Medicare only covers 80% after you’ve met the $183 deductible.

If you don’t enroll in Medicare Part A & B you’ll be responsible for paying the 80% Medicare would have covered.
Works together with your Medicare Part A & B to cover 100% of most of your services.

- no deductible
- no coinsurance
- a lower monthly premium for Medicare-eligible dependents and survivors

Make sure your doctor accepts Medicare and is willing to bill Humana.
Pays secondary to Medicare.

- you pay a $200 calendar-year deductible
- 30% co-insurance – you pay 30% of the 20% not covered by Medicare.
Plan features include:

- a lower monthly premium for Medicare-eligible dependents and survivors and
- no annual deductible and many services covered at 100%.

You must use Kelsey-Seybold network providers.

KelseyCare MA HMO bills Medicare their portion.
• Call ERS to enroll!

• Declining coverage means, you’ll lose all GBP prescription drug coverage.

• If you decline, sign up for a private Part D plan within 63 days or you may be penalized.
Health Maintenance Organizations

- You must live in an eligible county to enroll.
- Coverage is secondary to Medicare.
- No calendar year deductible!
- Prescription drug coverage is provided through the HMO.

See the Medicare Comparison Chart for applicable copays and co-insurance.
If you switch from a Medicare Advantage plan to a non-Medicare Advantage plan, it will be effective the first of the month following your request.

If you switch from a non-Medicare Advantage plan to a Medicare Advantage plan and there’s a 29-day Medicare enrollment period before the plan will be effective.

Switch between a Medicare Advantage plan and your previous non-Medicare Advantage plan anytime.
Return to Work Retirees

• Not eligible for HealthSelect Medicare Advantage.

• Re-enrolled in previous non-Medicare Advantage health plan.

• Option to choose active employee benefits.
Split Households
Retiree is Medicare-Eligible

The retiree is eligible for Medicare, the dependent is not

Retiree – Should provide ERS with Medicare info and can enroll in HealthSelect MA PPO.

Dependent – remains on his or her non-Medicare Advantage health plan.
Retiree Is Not Medicare-Eligible

The retiree is not eligible for Medicare Parts A and B?

Retiree – remains on his or her current health plan.

Dependent – can enroll in HealthSelect MA PPO.
Active Employee with Medicare-Eligible Dependent Dependent

Active employee with a dependent who is eligible for Medicare

Active employee – remains on his or her current health plan.

Dependent can delay Medicare Part B – remains on same health plan as active employee.
Private Part C and Part D Plans
Enrolling in Private Part C and D Plans

- Enrolling in a private or group Part C plan cancels your GBP Medicare Advantage plan.
- Enrolling in a private or group Part D plan cancels your HealthSelect Medicare Rx coverage.

You can cancel your private or group Part C and Part D plan to re-enroll in your GBP coverage.
Resources

Social Security Administration
Toll-free (800) 772-1213 or online at www.ssa.gov

Medicare
Toll-free (800) 633-4227 or online at www.medicare.gov

ERS
Toll-free (877) 275-4377
Monday – Friday, 7:30 a.m. – 5:30 p.m. CT
or online at www.ers.texas.gov
Recap

- Four parts of Medicare
- Automatic enrollment vs. the Initial Enrollment Period
- Medicare premiums
- Medicare and your state health insurance
- Split households
- Private Part C and Part D plans
- You have resources available to you
THANK YOU!