

OFFICE OF THE COUNTY EXECUTIVE ALL-EMPLOYEES MEMORANDUM

DATE: October 20, 2015

IMPORTANT REMINDER ENROLLING IN MEDICARE

ENROLLMENT IN MEDICARE PARTS A (Hospital) and B (Medical)

Retirees and their eligible dependents must enroll in both Medicare Part A and Medicare Part B at the time they are “first eligible” (see below for when you are considered “first eligible” to enroll in Medicare); otherwise, you and/or your dependent(s) risk substantial reduction of medical benefits available under the EMHP. You will be responsible for the full cost of medical services that Medicare would have covered, because EMHP will not provide any benefits for coverage that should have been covered by Medicare as primary had you timely enrolled.

In order to enroll, simply retain the Medicare Card sent to you and/or your dependent(s) by the Department of Health & Human Services, Centers for Medicare & Medicaid Services, and do nothing else. Do not delay your enrollment because you have EMHP coverage – EMHP becomes secondary to Medicare when you become first eligible for Medicare coverage.

As a Retiree when am I “first eligible”?

- If you are a **disabled retiree**, under age 65 and receiving disability benefits from Social Security or certain disability benefits from the Railroad Retirement Board (RRB), you are automatically enrolled in Part A and Part B after you get Social Security or Railroad Retirement benefits for 24 months. Your Medicare card will be mailed to you about three months before your 25th month of disability benefits. **DO NOT** reject Part B coverage as EMHP will become secondary on that 25th month. Retain the Part B card.
- If you **retire prior to age 65 and you subsequently become Medicare eligible** due to a disability, ALS (Lou Gehrig’s disease), etc. or End Stage Renal, you are automatically enrolled in Part A and Part B after you get Social Security or Railroad Retirement benefits for 24 months. Your Medicare card will be mailed to you about three months before your 25th month of disability benefits. **DO NOT** reject Part B coverage as EMHP will become secondary on that 25th month. Retain the Part B card.
- If you **retire prior to age 65**, you must contact Medicare four months prior to your 65th birthday, so your Medicare will be effective the first day of the month in which you turn 65.

- If you **retire at age 65 or older**, you must contact Medicare four months prior to your retirement so your Medicare will be effective the first of the month following your retirement.

When are the Spouses, Domestic Partners* or Dependents of Retirees “first eligible”?

*(*A Domestic Partner of an active employee who is covered under your health plan **must** also enroll in both Medicare Part A and Part B when he/she becomes first eligible as defined herein. Medicare is then primary for the domestic partner. Failure to enroll could result in significant expense to the domestic partner as EMHP will only pay benefits on a secondary basis.)*

A dependent of a **retired** employee, (your spouse, domestic partner, or child) that is covered for health benefits as your dependent must also enroll in both Medicare Part A and Part B when they become first eligible. Medicare will then become primary for that dependent.

- Regardless of age, when they have been classified by Social Security as disabled for more than 24 months, or receiving disability benefits from the Railroad Retirement Board (RRB), they must enroll in Medicare no later than the 25th month they are receiving disability.
- Unless you are still **actively employed** and depending upon their health benefits plan requirements, they must enroll in Medicare when they become first eligible (e.g., retired and they reach age 65).
- Regardless of age, when they have end stage renal disease (permanent kidney failure), they must enroll in Medicare when first eligible. Eligibility is determined by the Social Security Administration (SSA). You should contact the SSA as soon as dialysis treatments begin. Their Medicare coverage will still start the fourth month of dialysis treatments.
- If you are retired, and they are 65 years of age or older and are not covered for health benefits by virtue of their employment, they must contact Medicare four months prior to your date of retirement, or their 65th birthday, which comes later.

If you have any questions about when you or your dependent(s) first become eligible for Medicare, please call Employee Benefits Unit (EBU) at 631-853-4866. Failure to enroll when you and your eligible dependents are “first eligible” could result in significant expense to you.

ENROLLMENT IN MEDICARE PART D (PRESCRIPTION DRUGS)

When you and/or your dependent(s) become Medicare eligible, Employee Benefits will automatically enroll you in the Express Scripts Medicare (PDP) for Suffolk County Employee Medical Health Plan (EMHP) unless you notify the Suffolk County Employee Benefits Unit (EBU) that you do not want to be enrolled in that plan. EBU will send you an “opt out” form, which you must complete and return to EBU.

If you and/or your eligible dependent(s) decide **not** to be enrolled in this plan, you **will not lose** your hospital and medical coverage and you will be able to re-enroll at a later time. However, you **will lose** your prescription drug coverage under the EMHP.

REIMBURSEMENT FOR MEDICARE PREMIUMS

(Only if you and/or your dependent(s) are not being reimbursed from another source)


- You will **not** be reimbursed for **Medicare Part A** premium costs, if any.
- You will be reimbursed for an amount equal to the usual cost of the **Medicare Part B** premiums once Medicare becomes primary provided you and/or your eligible dependent(s) have submitted a copy of your Medicare Card and the Certification for Medicare Part B Premium Reimbursement (form available from EBU) to the Employee Benefits Unit and are not receiving reimbursement from another source.
- You will be reimbursed for any **Income Related Surcharges** associated with Medicare Part B and Medicare Part D, provided **all required documentation is received and you and/or your eligible dependent(s) are not receiving reimbursement from another source.** **Note:** If you or your eligible dependents are **not** enrolled in the County's Medicare Part D Prescription Drug Program, you **will not** be eligible for reimbursement of the Medicare Part D Income Related Surcharge.

The Employee Benefits Unit will arrange to reimburse you for you and/or your dependents' Medicare Part B premiums (**excluding penalties for late enrollment**) automatically, unless you and/or your dependent receive reimbursement from another source, provided you have provided copies of the Medicare card and Certification form.

In order to receive reimbursement, please forward a photocopy of your Medicare Card and/or your dependents' Medicare Card, as well as the Certification for Medicare Part B Reimbursement, to the Employee Benefits Unit, Suffolk County Department of Civil Service/Human Resources, P.O. Box 6100, Hauppauge, NY 11788-0099.

You are also eligible for reimbursement of the Medicare Parts B and D Income Related Surcharges, unless you or your dependent receives reimbursement from another source. If you are eligible for reimbursement of these Income Related Surcharges, in addition to submitting your Medicare Card, you must complete an "Application for Medicare Parts B & D Income Related Surcharge Reimbursement" annually and submit the required documentation requested on the form (i.e. Social Security Benefit Statement, Form SSA-1099, from the Social Security Administration) to EBU by the date specified on the form. This form will be mailed to you by EBU each year.

Please contact the Employee Benefits Unit via e-mail at ebu@suffolkcountyny.gov or via telephone at 631-853-4866 to obtain the Medicare Part B Certification Form or if you have any questions regarding Medicare enrollment or reimbursement.



Dennis M. Cohen
Chief Deputy County Executive

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One copy per employee/retiree