



Medicare Information Source

Turning 65 Guide for Medicare 2010

The Senior Resource Center for Medicare Information

Medicare Information Source

Phone: (800) 678-6404

www.Medicare.org



Medicare Information Source

The Senior Resource Center for Medicare Information

TURNING 65 – A QUICK GUIDE TO MEDICARE	3
APPLY FOR SOCIAL SECURITY AND MEDICARE	3
STEP 1: SIGN UP FOR SOCIAL SECURITY.....	3
STEP 2: ENROLL IN MEDICARE	3
MEDICARE OVERVIEW.....	4
MEDICARE PART A (HOSPITAL INSURANCE).....	4
MEDICARE PART B (MEDICAL INSURANCE)	4
MEDICARE PART C (MEDICARE ADVANTAGE)	5
MEDICARE PART D (MEDICARE PRESCRIPTION DRUG INSURANCE)	6
MEDIGAP (MEDICARE SUPPLEMENTAL INSURANCE)	6
OTHER IMPORTANT MEDICARE INFORMATION	7



Turning 65 – A Quick Guide to Medicare

It can be difficult to navigate through the Medicare Enrollment Process. You may be wondering what forms you should fill out and who to call to make sure you are signed up for Medicare. This guide has been designed as a brief overview of what to do to enroll in Medicare. For more information, please download the [Medicare & You 2010](#) guide which will explain the different parts of Medicare in easy to understand language.

Apply for Social Security and Medicare

Step 1: Sign up for Social Security

Three months before your 65th birthday, you should contact the local Social Security office or go online to <http://www.ssa.gov> to apply for Social Security retirement benefits or Railroad Retirement Board (RRB) benefits. If you are already receiving Social Security benefits or RRB benefits, then you don't need to apply again when you turn 65.

NOTE: if you have opted not to begin receiving your Social Security or RRB benefits when you turn 65, you still can receive Medicare benefits by contacting Medicare directly and applying for benefits.

Step 2: Enroll in Medicare

Once you turn 65 and are receiving Social Security or RRB benefits, Medicare will send you an information kit in the mail about enrolling in Medicare. You will automatically be enrolled in a Medicare Part A (hospital insurance) and a Medicare Part B (medical insurance) plan in the beginning.

NOTE: if you or your spouse is still working and are receiving health insurance from the employer, you do not need to enroll in Medicare until after your health insurance with the employer ends.



Medicare Information Source

The Senior Resource Center for Medicare Information

Medicare Overview

Medicare consists of 3 main parts: Medicare Part A (hospital insurance), Medicare Part B (medically-necessary services which include doctor's visits) and lastly, Medicare Part D (prescription drug coverage). If you would like to buy supplemental coverage to these basic Medicare benefits, you may purchase a Medicare Supplemental plan, also known as Medigap.

Medicare Part A (Hospital Insurance)

If you're already receiving Social Security or Railroad Retirement Board (RRB) benefits, you will automatically receive the Medicare Part A Benefits on the day you turn 65. You will get your Medicare card in the mail about 3 months before your 65th birthday.

If you have not started receiving Social Security or RRB benefits (for instance, if you're still working), you will need to contact Social Security/ RRB three months before you turn age 65 to sign up for Part A.

If you don't sign up for Part A when you are first eligible, you may pay a penalty unless you are eligible for a Special Enrollment Period (SEP). The Special Enrollment Period includes situations such as, if you or your spouse is working and has group health plan coverage through the employer or union, or if you're receiving health insurance while volunteering in a foreign country.

You usually don't have a monthly premium for Part A if you or your spouse paid Medicare taxes for at least 10 years while working.

Medicare Part B (Medical Insurance)

If you're already receiving Social Security or RRB benefits, you will automatically receive the Medicare Part B Benefits on the day you turn 65. You will get your Medicare card in the mail roughly 3 months before your 65th birthday.

If you have not started receiving Social Security or RRB, you will need to contact Social Security and sign up for Part B. You will need to sign up for Part B during your initial enrollment period (from 3 months before until 3 months after your 65th birthday).

If you don't buy Part B when you are first eligible, the monthly premium may go up 10% unless you are eligible for a special enrollment period. The Special Enrollment period includes



Medicare Information Source

The Senior Resource Center for Medicare Information

situations such as if you or your spouse is working and has group health plan coverage through the employer or union, or if you're receiving health insurance while volunteering in a foreign country.

You will have to pay the Part B premium on a monthly basis. For 2010 the standard premium is \$110.50. However, depending on whether you meet the following conditions, you may have a higher premium. The premium breakdown is below:

2010 Medicare Part B premium table

You Pay	If Your Yearly Income is	
	Single	Married Couple
\$110.50	\$85,000 or less	\$170,000 or less
\$154.70	\$85,001 - \$107,000	\$170,001 - \$214,000
\$221.00	\$107,001 - \$160,000	\$214,001 - \$320,000
\$287.30	\$160,001 - \$214,000	\$320,001 - \$428,000
\$353.60	Above \$214,000	Above \$428,000

You Pay	If You Are Married but You File a Separate Tax Return From Your Spouse and Your Yearly Income is:
\$110.50	\$85,000 or less
\$287.30	\$85,001 - \$129,000
\$353.60	Above \$129,000

(NOTE: if you received Social Security benefits in 2009 and you made less than \$85,000 as an individual or less than \$170,000 as a couple, your 2010 Part B premium is \$96.40.).

Medicare Part C (Medicare Advantage)

Medicare Advantage Plans are combination plans that include Medicare Part A, Part B and in some instances, Part D. The plans that include Part D are known as Medicare Advantage with Prescription Drug (MAPD). If you would like to enroll in a Medicare Advantage plan, you should do so when you first become eligible for Medicare.

Medicare Advantage Plans are health plan options that are approved by Medicare and offered by private companies, and are usually presented as HMO (Health Maintenance Organization), PPO (Preferred Provider Organization), PFFS (Private Fee For Service) or other similar types of plans. Medicare Advantage Plans charge different out-of-pocket costs, in the form of copayments, coinsurance and deductibles. It is important when picking a Medicare Advantage



Medicare Information Source

The Senior Resource Center for Medicare Information

plan that you use a comprehensive tool to compare the plans so you can pick the best plan for you.

Also, when you select a Medicare Advantage plan, you are not eligible to sign up for Medicare Supplemental coverage (also known as Medigap). Medicare Advantage plans include comprehensive coverage and in many cases include vision and dental services too.

Medicare Part D (Medicare prescription drug insurance)

Medicare Part D is a program to help cover the costs of prescription drugs. To get Medicare Part D coverage, you must join a plan from an insurance company or other private company approved by Medicare. Each plan can vary in costs and drugs covered.

In order to get Part D, Prescription Drug Coverage, you have to be enrolled in Medicare Part A and/ or Part B. You should enroll in a Part D plan when you first become eligible for Medicare to avoid being charge a late enrollment penalty. It is important when selecting a Part D plan that you use a comprehensive tool to compare the plans, based on your drugs and zip code, so you can pick the best plan for you.

Medigap (Medicare Supplemental Insurance)

A Medigap policy can help pay for some of the health care costs (or gaps) that Original Medicare doesn't cover. Medigap coverage may help pay for some of the following Medicare costs: copays, deductibles, coinsurance and more. Medigap is offered by private insurance companies, and in order to buy a Medigap policy you generally must have Medicare Part A and B. A Medigap policy only covers one person, so if you and your spouse want Medigap coverage, you each must buy a separate Medigap policy. It is illegal for anyone to try and sell you a Medigap policy if you are on a Medicare Advantage Plan, unless you are switching back to Original Medicare. Medigap will not cover Medicare Advantage copayments and deductibles.

The best time to buy a Medigap policy is during the initial 6-month period that begins on the first day of the month in which you are age 65 and enrolled in Part B. After this initial enrollment period, your options to buy a Medigap policy may be limited.



Other Important Medicare Information

After the initial enrollment period, you can change your Part B and Part D plans only once a year during Open Enrollment (unless you fall into a Special Enrollment Period).

The dates for Open Enrollment are as follows:

November 15 - December 31

Sometimes referred to as "Fall Open Enrollment," the Annual Election Period (AEP) runs from November 15 through December 31 each year. During this period Medicare beneficiaries may change prescription drug plans, change Medicare Advantage plans, return to Original Medicare, or enroll in a Medicare Advantage plan for the first time. Coverage for enrollment changes takes effect on January 1.

January 1 – March 31

If you are not satisfied with your Medicare Advantage plan, you may still be able to switch between January 1 and March 31 even if you enrolled in a Medicare Advantage plan as recently as December. This period is known as the Open Enrollment period.

The table below outlines the rules that apply:

If your current coverage is:	From January 1 to March 31, you can:
Medicare Advantage plan with prescription drug coverage	Enroll in another Medicare Advantage plan with prescription drug coverage. OR Disenroll from a Medicare Advantage plan with prescription drug coverage back to Original Medicare. To do so, however, you must also enroll in a stand-alone prescription drug plan via a Special Election Period. (see below for details) OR



Medicare Information Source

The Senior Resource Center for Medicare Information

	<p>Enroll in a Medicare Advantage Private-Fee-for-Service (PFFS) plan without prescription drug coverage and a stand-alone prescription drug plan (you must keep prescription drug coverage).</p>
<p>Medicare Advantage plan without prescription drug coverage</p>	<p>Enroll in another Medicare Advantage plan without prescription drug coverage,</p> <p>OR</p> <p>Disenroll from the Medicare Advantage plan to return to Original Medicare only</p>
<p>Original Medicare and a prescription drug plan</p>	<p>Enroll in a Medicare Advantage plan with prescription drug coverage</p> <p>OR</p> <p>Enroll in a Medicare Advantage - PFFS plan without prescription drug coverage and keep your prescription drug plan</p>
<p>Original Medicare only</p>	<p>Enroll in a Medicare Advantage plan without prescription drug coverage</p>
<p>Medicare Advantage-PFFS plan without drug coverage and a prescription drug plan</p>	<p>Enroll in a Medicare Advantage plan with prescription drug coverage,</p> <p>OR</p> <p>Enroll in a different Medicare Advantage-PFFS plan without drug coverage and keep your prescription drug plan</p> <p>OR</p> <p>Disenroll from the Medicare Advantage PFFS plan back to Original Medicare and keep your prescription drug plan</p>



Medicare Information Source

The Senior Resource Center for Medicare Information

Between April 1 and November 14 each year you will not be able to switch coverage. This time is often referred to as the “lock-in” period and you generally must stay with your current coverage until January 1, when any new coverage you choose, between November 15 and December 31 begins.

Even if you did not recently become eligible for Medicare, there are some exceptions that allow you to enroll in a prescription drug plan or Medicare Advantage plan any time during the year. Examples of special circumstances include, but are not limited to individuals:

- who were enrolled in a plan and recently moved
- who entered a nursing home
- eligible for both Medicare and Medicaid
- with low income
- disenrolling from an employer group health plan
- who involuntarily lost creditable prescription drug coverage.

For questions about how to enroll if you qualify under other special circumstances, you can call Medicare directly at 1-800-MEDICARE.