DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

7500 Security Boulevard
Baltimore, Maryland 21244 -1850

Sign up for Medicare Part B now through March 31

Our records show that you don't have Medicare Part B (Medical Insurance). Now's the time to decide whether to sign up for Part B.

- Part B helps cover doctors' services, outpatient care, and more.
- If you want Part B, you have to sign up for it and pay a monthly premium. (See page 3 in the enclosed booklet for premium costs.)

Note: If you already have Part B or signed up after October 2019, you don't need to apply again and may disregard this letter.

Make these 2 important decisions now:

Decision 1: Should I sign up for Part B?

- If you want Part B, you can sign up now through March 31, 2020.

  The premium will be deducted automatically from your monthly Social Security or civil service benefit payments starting in July. If your benefits aren't enough to cover your premium or you don't get benefits, you'll get a bill for your Part B premium every 3 months. You'll get your first bill in June.
- If you don't want Part B, you don't need to do anything. Part B is optional. However if you want to sign up later, you may have to wait for your coverage to start and pay a monthly penalty.

Read pages 3-9 in the booklet to find out if you should sign up for Part B now (based on your situation).

How do I sign up for Part B?

You have until March 31, 2020 to sign up for Part B. If you sign up, your Part B coverage will start July 1, 2020.

To sign up, fill out the enclosed form. Be sure to:

1. Check the "YES" box and sign the application
2. Write in your Medicare Number that's printed on your Medicare card
3. Mail your application by March 31, 2020 (using the envelope in this packet)

You can also sign up by:

- Downloading Form CMS-40B (Application for Enrollment in Medicare Part B) at Medicare.gov/forms-help-and-resources/forms/medicare-forms.html. Complete the application and sign it. Return the completed application to your local Social Security office.
- Calling Social Security at 1-800-772-1213. TTY users can call 1-800-325-0778.
- Visiting your local Social Security office.

Note: DO NOT complete the form in this packet if you have employer or union group health plan coverage based on your own, your spouse's, or a family member's current work (if you're disabled). Contact Social Security to see if you're eligible for the Special Enrollment Period. (See page 4 in the booklet.)

Decision 2: If I sign up for Part B, how do I want to get my Medicare coverage?

You can choose how to get your Medicare coverage:

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

See the next page of this letter and read pages 10-15 in the booklet for additional and important information to make your decision.

Enclosures
CMS Publication Number: 11873
December 2019

Your Medicare options

There are 2 main ways to get your Medicare coverage:

Original Medicare

- Original Medicare includes Medicare Part A (Hospital Insurance) and Part B (Medical Insurance).
- If you want drug coverage, you can join a separate Part D plan.
- To help pay your out-of-pocket costs in Original Medicare (like your 20% coinsurance), you can also shop for and buy supplemental coverage.
- Can use any doctor or hospital that takes Medicare, anywhere in the U.S.

☑ **Part A**

☑ **Part B**

You can add:

☐ **Part D**

You can also add:

☐ **Supplemental coverage**

(Some examples include coverage from a Medicare Supplement Insurance (Medigap) policy, or coverage from a former employer or union.)

Medicare Advantage
(also known as Part C)

- Medicare Advantage is an "all in one" alternative to Original Medicare. These "bundled" plans include Part A, Part B, and usually Part D.
- Plans may have lower out-of-pocket costs than Original Medicare.
- In most cases, you'll need to use doctors who are in the plan's network.
- Most plans offer extra benefits that Original Medicare doesn't cover—like vision, hearing, dental, and more.

☑ **Part A**

☑ **Part B**

Most plans include:

☑ **Part D**

☑ **Extra benefits**

Some plans also include:

☐ **Lower out-of-pocket-costs**

Help in other languages

If you, or someone you're helping, has questions about Medicare, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 1-800-MEDICARE (1-800-633-4227).

العربية (Arabic) إن كان لديك أو لدى شخص تُساعده أسئلة بخصوص Medicare فإن من حقك الحصول على المساعدة و المعلومات بلغتك من دون أي تكلفة. للتحدث مع مترجم إتصل بالرقم 1-800-MEDICARE (1-800-633-4227).

հայերեն (Armenian) Եթե Դուք կամ Ձեր կողմից օգնություն ստացող անձը հարցեր ունի Medicare-ի մասին, ապա Դուք իրավունք ունեք անվճար օգնություն և տեղեկություններ ստանալու Ձեր նախընտրած լեզվով: Թարգմանչի հետ խոսելու համար զանգահարեք 1-800-MEDICARE (1-800-633-4227) հեռախոսահամարով:

中文 (Chinese-Traditional) 如果您，或是您正在協助的個人，有關於聯邦醫療保險的問題，您有權免費以您的母語，獲得幫助和訊息。與翻譯員交談，請致電 1-800-MEDICARE (1-800-633-4227).

فارسی (Farsi) اگر شما، یا شخصی که به او کمک میرسانید سوالی در مورد اعلامیه مختصر مدیکردارید، حق این را دارید که کمک و اطلاعات به زبان خود به طور رایگان دریافت نمایید. برای مکالمه با مترجم با این شماره زیر تماس بگیرید1-800-MEDICARE (1-800-633-4227).

Français (French) Si vous, ou quelqu'un que vous êtes en train d'aider, a des questions au sujet de l'assurance-maladie Medicare, vous avez le droit d'obtenir de l'aide et de l'information dans votre langue à aucun coût. Pour parler à un interprète, composez le 1-800-MEDICARE (1-800-633-4227)

Deutsch (German) Falls Sie oder jemand, dem Sie helfen, Fragen zu Medicare haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 1-800-MEDICARE (1-800-633-4227) an.

Kreyòl (Haitian Creole) Si oumenm oswa yon moun w ap ede, gen kesyon konsènan Medicare, se dwa w pou jwenn èd ak enfòmasyon nan lang ou pale a, san pou pa peye pou sa. Pou w pale avèk yon entèprèt, rele nan 1-800-MEDICARE (1-800-633-4227).

Italiano (Italian) Se voi, o una persona che state aiutando, vogliate chiarimenti a riguardo del Medicare, avete il diritto di ottenere assistenza e informazioni nella vostra lingua a titolo gratuito. Per parlare con un interprete, chiamate il numero 1-800-MEDICARE (1-800-633-4227).

日本語 (Japanese) Medicare (メディケア) に関するご質問がある場合は、ご希望の言語で情報を取得し、サポートを受ける権利があります (無料)。通訳をご希望の方は、1-800-MEDICARE (1-800-633-4227) までお電話ください。

한국어(Korean) 만약 귀하나 귀하가 돕는 어느 분이 메디케어에 관해서 질문을 가지고 있다면 비용 부담이 없이 필요한 도움과 정보를 귀하의 언어로 얻을 수 있는 권리가 귀하에게 있습니다. 통역사와 말씀을 나누시려면 1-800-MEDICARE(1-800-633-4227)로 전화하십시오.

Polski (Polish) Jeżeli Państwo lub ktoś komu Państwo pomagają macie pytania dotyczące Medicare, mają Państwo prawo do uzyskania bezpłatnej pomocy i informacji w swoim języku. Aby rozmawiać z tłumaczem, prosimy dzwonić pod numer telefonu 1-800-MEDICARE (1-800-633-4227).

Português (Portuguese) Se você (ou alguém que você esteja ajudando) tiver dúvidas sobre a Medicare, você tem o direito de obter ajuda e informações em seu idioma, gratuitamente. Para falar com um intérprete, ligue para 1-800-MEDICARE (1-800-633-4227).

Русский (Russian) Если у вас или лица, которому вы помогаете, возникли вопросы по поводу программы Медикэр (Medicare), вы имеете право на бесплатную помощь и информацию на вашем языке. Чтобы воспользоваться услугами переводчика, позвоните по телефону 1-800-MEDICARE (1-800-633-4227).

Spanish (Español) Si usted, o alguien que está ayudando, tiene preguntas sobre Medicare, usted tiene el derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 1-800-MEDICARE (1-800-633-4227).

Tagalog (Tagalog) Kung ikaw, o ang isang tinutulungan mo, ay may mga katanungan tungkol sa Medicare, ikaw ay may karapatan na makakuha ng tulong at impormasyon sa iyong lenguwahe ng walang gastos. Upang makipag-usap sa isang tagasalin ng wika, tumawag sa 1-800-MEDICARE (1-800-633-4227).

Tiếng Việt (Vietnamese) Nếu quý vị, hay người mà quý vị đang giúp đỡ, có câu hỏi về Medicare, quý vị sẽ có quyền được giúp và có thêm thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện qua thông dịch viên, gọi số 1-800-MEDICARE (1-800-633-4227).

You have the right to get Medicare information in an accessible format, like large print, Braille, or audio. You also have the right to file a complaint if you feel you've been discriminated against. Visit Medicare.gov/about-us/accessibility-nondiscrimination-notice, or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

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Sign up for Part B

January 1 – March 31

Now's the time to make some important decisions about your Medicare coverage.

Read this booklet carefully before you make any decisions.

Medicare Overview

Medicare Part A (Hospital Insurance) helps cover inpatient care in hospitals, skilled nursing facility care, hospice care, and home health care.

Medicare Part B (Medical Insurance) helps cover services from doctors and other health care providers, outpatient care, durable medical equipment (like wheelchairs, walkers, hospital beds, and other equipment), and many preventive services (like screenings, shots or vaccines, and yearly "Wellness" visits).

Visit Medicare.gov/coverage, or use our "What's covered" mobile app to find out if your test, item, or service is covered. It's available for free on both the App Store and Google Play. You can also call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

Note: If you're not lawfully present in the U.S., Medicare won't pay for your Part A and Part B claims, and you can't enroll in a Medicare Advantage Plan or a Medicare Prescription Drug Plan.

What does Part B Cost?

You'll pay a monthly premium for Part B. In 2020, the standard Part B premium is $144.60. You'll pay more if you have a higher income. The premium amount can change each year. (See page 10 for more on costs.)

If you have limited income and resources, you may be able to get help from your state to pay your Part B premium if you meet certain conditions. (See page 16.)

Decision 1: Should I sign up for Part B?

Read this section carefully. **If you don't sign up for Part B and you don't have other coverage based on active or current employment, there are some risks:**

- You most likely will have to pay all of the costs for doctors' services, outpatient care, medical supplies, and preventive services.
- If you change your mind and want to get Part B later, you'll have to wait until the next General Enrollment Period (January 1–March 31 each year) to sign up, and your coverage won't start until July 1 of that year. This may cause a gap in your health coverage.

- In most cases, if you decide you want Part B later, you'll also have to pay a **late enrollment penalty** for as long as you have Part B coverage. The penalty amount is added to your monthly Part B premium, and it goes up the longer you go without Part B coverage. (See page 9 for the cost of the penalty.)

Whether it's best for you to sign up for Part B depends on your situation. The next few pages cover common situations and explain the risks for not signing up for Part B.

Common Situations

I'm still working and have coverage through my employer. Or, my spouse (or my family member, if I'm disabled) is still working and I'm covered through his or her employer:

- You may need to sign up for Part B right away if your employer has less than 20 employees. Check with your benefits administrator to see if they require you to enroll in Part B. If your employer has 20 or more employees, you can sign up for Part B later during a Special Enrollment Period without a late enrollment penalty if:
  - You're 65 or older, you or your spouse is currently working, and you're covered by an employer or union group health plan based on that current employment.
  - You're under 65 and disabled, you or a family member is currently working, and you're covered by an employer or union group health plan based on that current employment. (If the group health plan coverage is based on the current employment of a family member, the employer must have 100 or more employees.)

If you're eligible for a Special Enrollment Period, you can sign up for Part B:

- Anytime while you're covered by the employer or union group health plan based on current employment.
- For up to 8 months after the group health plan coverage or the employment ends, whichever happens first.

I'm retired and have coverage through a former employer, or I have COBRA or VA coverage:

- You may need both Part A and Part B to get full benefits from this coverage, and your current coverage might not pay your medical costs once you're eligible for Medicare.
- You're also not eligible for a Special Enrollment Period when this coverage ends. This means:
  - You'll have to wait until the next General Enrollment Period (January 1–March 31 each year) to sign up for Part B, and your coverage would start July 1 of that year.

  - In most cases, you'll pay a late enrollment penalty added to your monthly premium for as long as you have Part B coverage.

Note: If you're retired and have retiree health insurance from a former employer or union, or you have COBRA coverage, Medicare generally will become your primary health insurance. Medicare will pay its part of the costs for any covered health care services you get, and then any amount not covered by Medicare can be submitted to your non-Medicare plan.

If you have Medicare and U.S. Department of Veterans Affairs (VA) coverage, you can get treatment under either program. Medicare can't pay for the same service that was covered by VA benefits, and your VA benefits can't pay for the same service that was covered by Medicare.

I have coverage through the Health Insurance Marketplace for individuals or families:

You should consider signing up for Part B and stopping your Marketplace plan when your Medicare starts.

- You won't be eligible for premium tax credits or cost-sharing reductions for a Marketplace plan once you're considered eligible for Part A coverage, and you might have to pay back any credits you got for coverage after that time when you file your taxes.
- If you choose to enroll in Part B later, you'll have to wait for the General Enrollment Period to sign up. Also, you may have to pay a late enrollment penalty for as long as you have Part B coverage. (See page 9.)
- Plans may not be allowed to renew your Marketplace coverage (for you and your family) at the end of the year you become eligible for Medicare. This means you could have a gap in your coverage starting on January 1.

I have employer coverage through the Marketplace (sometimes called Small Business Health Options Program or "SHOP" coverage):

You may be able to wait until you stop working or no longer have SHOP coverage to enroll in Part B under a Special Enrollment Period without a penalty. (See page 4.) Visit HealthCare.gov and Medicare.gov to learn more.

I have coverage through a private insurance plan, (not through the Health Insurance Marketplace or an employer):

- If you get Part B, Medicare will pay its part of the costs for any health care services you get, and then any amount Medicare doesn't cover can be submitted to your private plan.

- If you choose to enroll in Part B later, you won't be eligible for a Special Enrollment Period, so you'll have to wait to sign up. Also, you may have to pay a late enrollment penalty for as long as you have Part B coverage. (See page 9.)

I have TRICARE coverage (insurance for active-duty military, military retirees, and their families) or CHAMPVA coverage:

You must have Part B to keep your coverage. However, if you're an active-duty service member or the spouse or dependent child of an active-duty service member, you don't have to get Part B right away.

I have Medicaid:

You should sign up for Part B. Medicare will pay first, and Medicaid will pay second. Your state may also help pay for your Medicare premiums. (See page 16.)

I don't have other medical insurance:

You should sign up for Part B, so you have coverage for things like doctors' services or preventive services. Be aware of the risks for not signing up for Part B. (See page 3.)

Other things to consider:

You must have Part B to join a Medicare Advantage Plan or buy a Medicare Supplemental Insurance (Medigap) policy. (See pages 10-15 for more information.)

How much is the penalty if I enroll later?

If you sign up for Part B later and you aren't eligible for a Special Enrollment Period, you'll pay 10% more for each full 12-month period you could've had Part B but didn't take it. In most cases, you'll have to pay this late enrollment penalty each time you pay your premiums, for as long as you have Part B. The penalty increases the longer you go without Part B coverage.

Example:

If you waited 2 full years (24 months) to sign up for Part B and didn't qualify for a Special Enrollment Period, you'll have to pay a 20% late enrollment penalty (10% for each full 12-month period that you could have been enrolled), plus your standard Part B monthly premium ($144.60 in 2020).

$144.60 (2020 Part B standard premium)

\+ $28.92 (10% [of $144.60] for each full 12-month period you could have had Part B)

$173.52 (rounded to $173.50) will be your Part B monthly premium for 2020.

This amount is rounded to the nearest $.10 and includes the late enrollment penalty.

Note: The example above applies if you delayed enrolling in Part B for **24 months**. You don't pay a late enrollment penalty if you enroll before the first full 12-month period has passed or if you qualify for a Special Enrollment Period. (See page 4.) The amount could also be different if your income is above a certain amount.

Decision 2: How should I get my Medicare coverage?

If you choose to sign up for Part B, you have 2 main ways to get your Medicare coverage:

Original Medicare
or
Medicare Advantage

Original Medicare

Original Medicare includes Part A and Part B. When you get services, you'll pay a deductible, and you usually pay 20% of the cost of the Medicare-approved service, called coinsurance.

The deductible for Part B is $198 in 2020.

With Original Medicare, you:

- Can go to any doctor or hospital that takes Medicare, anywhere in the U.S.
- Generally pay a portion of the cost for each covered service. There's no yearly limit on what you pay out-of-pocket, unless you have supplemental coverage (like a Medigap policy).
- Can join a Medicare Prescription Drug Plan (Part D) to get drug coverage. (See page 12.)
- Can get supplemental coverage (like a Medigap policy) to help pay your remaining out-of-pocket costs (like your 20% coinsurance). (See page 14.)

When you sign up for Part B, you'll have Original Medicare unless you enroll in a Medicare Advantage Plan.

Medicare Advantage (also known as Part C)

Medicare Advantage is an "all-in-one" alternative to Original Medicare. These "bundled" plans include Part A, Part B, and usually Part D (drug coverage). These plans are approved and follow the rules set by Medicare. The costs in plans vary and plans may have lower out-of-pocket costs than Original Medicare. **You must have both Medicare Part A and Part B to join.**

With Medicare Advantage, you:

- Can get extra benefits that Original Medicare doesn't cover—like vision, hearing, dental, and more.
- Need to use doctors who are in the plan's network (for non-emergency or non-urgent care).
- May pay a premium for the plan in addition to the monthly Part B premium. Plans may have a $0 premium or may help pay all or part of your Part B premiums.
- Can't buy or use separate supplemental coverage (like Medigap).

How do I get Medicare Advantage?

If you sign up for Part B, you can join a Medicare Advantage Plan from **April 1 - June 30**. Your plan coverage will start July 1 (when your Part B starts).

Visit Medicare.gov/plan-compare to find out which plans are available in your area, or call 1-800-MEDICARE.

You can also join by contacting the plan directly.

Do I need Medicare prescription drug coverage (Part D)?

If you don't have prescription drug coverage, or the coverage you have isn't at least as good as Medicare drug coverage (called creditable coverage), you should consider enrolling in a Medicare Prescription Drug Plan (also called Part D).

Creditable prescription drug coverage could include drug coverage from a current or former employer or union, TRICARE, Indian Health Service, the Department of Veterans Affairs, or individual health insurance coverage. Your plan must tell you each year if your drug coverage is creditable coverage.

If you need prescription drug coverage, you have to sign up for it. You can get drug coverage by joining a Medicare Prescription Drug Plan or a Medicare Advantage Plan that includes drug coverage.

You have up to 3 months after your Medicare coverage first starts to join a Part D plan.

If you don't join a Medicare drug plan when you're first eligible for Medicare, and you don't have creditable prescription drug coverage or Extra Help, you may have to pay a late enrollment penalty, if you join later. Generally, you'll pay this penalty for as long as you have Medicare prescription drug coverage. And, the penalty goes up the longer you wait to enroll.

Choosing and joining a plan

You can compare ways to get your Medicare coverage and explore how different plans work together. You can also shop and compare plans to find ones that meet your needs. Visit Medicare.gov/plan-compare, call 1-800-MEDICARE, or contact the plan directly.

If you didn't join a Medicare Advantage Plan or a Medicare drug plan when you were first eligible, you'll have at least one

chance each year to make changes to your Medicare coverage:

October 15-December 7: You can join, switch, or leave a Medicare Advantage Plan or a Medicare drug plan during this period each year. Your new coverage will begin on January 1 of the following year.

January 1-March 31: If you're in a Medicare Advantage Plan, you can make one change to a different Medicare Advantage Plan or switch back to Original Medicare (and join a stand-alone Medicare Prescription Drug Plan) once during this time.

Special Enrollment Periods: In certain situations, you may be able to join, switch, or drop Medicare Advantage or Medicare drug plans when certain events happen in your life.

Your enrollment generally lasts for a calendar year.

Do I need a Medicare Supplement Insurance (Medigap) policy?

Original Medicare pays for much, but not all, of the cost for covered health care services and supplies. If you choose Original Medicare, you may be able to buy a Medicare Supplement Insurance (Medigap) policy from a private company to help pay your out-of-pocket costs in Original Medicare (like your 20% coinsurance). **You need both Part A and Part B to buy a Medigap policy**.

Medigap policies:

- Can cover costs like coinsurance, copayments, and deductibles.
- May offer coverage for services that Original Medicare doesn't cover, like medical care when you travel outside the U.S.

When can I get a Medigap policy?

The best time to buy a Medigap policy is during your Medigap Open Enrollment Period. This 6-month period begins on the first day of the month in which you're 65 or older **and** enrolled in Part B. (Some states have additional Open Enrollment Periods.) **After this enrollment period, you may not be able to buy a Medigap policy. If you're able to buy one, it may cost more.**

Tip: If you buy a Medigap policy during this time, you can buy any Medigap policy sold in your state, even if you have health problems.

If you're under 65, you might not be able to buy the Medigap policy you want, or any Medigap policy, until you turn 65. If you're able to buy one when you're under 65, it may cost more.

Visit Medicare.gov to learn more and compare Medigap policies in your area, or call 1-800-MEDICARE.

Help for people with limited income and resources

You may be able to get help paying for some of your health care and prescription drug costs.

- **Medicaid and Medicare Savings Programs**—States have programs that pay Medicare costs for people with limited income and resources. Visit Medicare.gov to learn more. You can also call 1-800-MEDICARE (1-800-633-4227) to get the number for your state Medicaid office. TTY users can call 1-877-486-2048.
- **Extra Help with Part D prescription drug costs**—If you have limited income and resources, you may qualify to get help paying your drug costs. To apply for this program, visit socialsecurity.gov/i1020, or call Social Security at 1-800-772-1213. TTY users can call 1-800-325-0778.
- **Supplemental Security Income (SSI)**—SSI is a monthly benefit paid by Social Security to people with limited income and resources who are disabled, blind, or 65 or older. For more information, call Social Security.

Note: If you live in a U.S. Territory, there are different programs to help you pay your Medicare costs. Call your local Medical Assistance (Medicaid) office to learn more.

Get answers to your Medicare questions

For questions about enrolling in Medicare, visit socialsecurity.gov or call Social Security at 1-800-772-1213.

For information about Medicare in general, and Medicare health and prescription drug plans choices in your area, visit Medicare.gov, or call 1-800-MEDICARE.

Notes

Notes

You have the right to get Medicare information in an accessible format, like large print, Braille, or audio. You also have the right to file a complaint if you feel you've been discriminated against. Visit Medicare.gov/about-us/accessibility-nondiscrimination-notice, or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

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CENTERS FOR MEDICARE & MEDICAID SERVICES

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