

Medicare Coordination of Benefits

There are a number of important decisions you must make when you turn 65. For instance; whether to enroll in Medicare Part B, Medicare Part D, buy a Medigap policy and/or keep employer/retiree coverage. Medicare does not automatically know if you have other health insurance. Three months prior to becoming eligible, Medicare will send you an Initial Enrollment Questionnaire. Your answers to these questions will help Medicare set up your file and ensure that your claims, once you are eligible for Medicare benefits, are paid accurately. If you are already eligible and you have had a change in your other insurance coverage, or your employment status, you should call the Medicare Coordination of Benefits office at 1-855-798-2627.

Medicare consists of three parts:

Part A: Provides hospitalization coverage at no additional premium cost to you.

Part B: Physician and outpatient coverage. When you enroll, your monthly premium for this coverage is deducted from your Social Security check. If you are retired, most of the A&M System plans are designed to pay secondary to Medicare even if you do not enroll in Medicare. This means, your health plan will pay benefits as if Medicare had paid a portion of the bill. Your health plan will pay less, leaving you with most of the bill to pay. If you are still an active employee with the A&M System and have System health coverage as an employee, you may postpone enrollment until you retire, without penalty.

Part D: Prescription Drug Coverage. This coverage has a monthly premium and is optional. The drug benefits provided by A&M System health coverage are certified to be comparable or better than those provided by Medicare Part D. If you decide to enroll in Medicare Part D after your initial eligibility date, you can avoid a late penalty since you had coverage through an A&M System health plan. View the printable copy of the [Notice of Creditable Coverage for Medicare Part D](#).

Many factors dictate whether your A&M System health plan or Medicare will be primary or secondary. In general, coverage is determined by the status of the A&M health plan policy holder. If the policy holder is Medicare-eligible and working at the A&M System at least 50% time (20 hours a week) for at least 4½ consecutive months, the A&M System health plan will be primary to Medicare for you and your spouse (if your spouse is covered on your plan).

You can receive prescription drug benefits either from your A&M System plan or from Medicare Part D. **You cannot receive benefits from both.** Be sure to tell your doctors and other providers about your coverage once you become eligible for Medicare or if you have any change in your health insurance coverage *or your employment status*.

For more information

View [Your Guide to Who Pays First](#), or contact Medicare to get a copy. You can also find information about Medicare Coordination of Benefits on the [System Benefits Administration website](#).

Visit medicare.gov for detailed booklets on Medicare topics.

View the [“Medicare & You”](#) publication sponsored by the Centers for Medicare & Medicaid Services.

You can also log on to Medicare’s free and secure site, mymedicare.gov, for access to your personalized Medicare information and benefits.

Medicare Coordination of Benefits 1-855-798-2627
Medicare 1-800-MEDICARE (1-800-633-4227)
Social Security Administration 1-800-772-1213