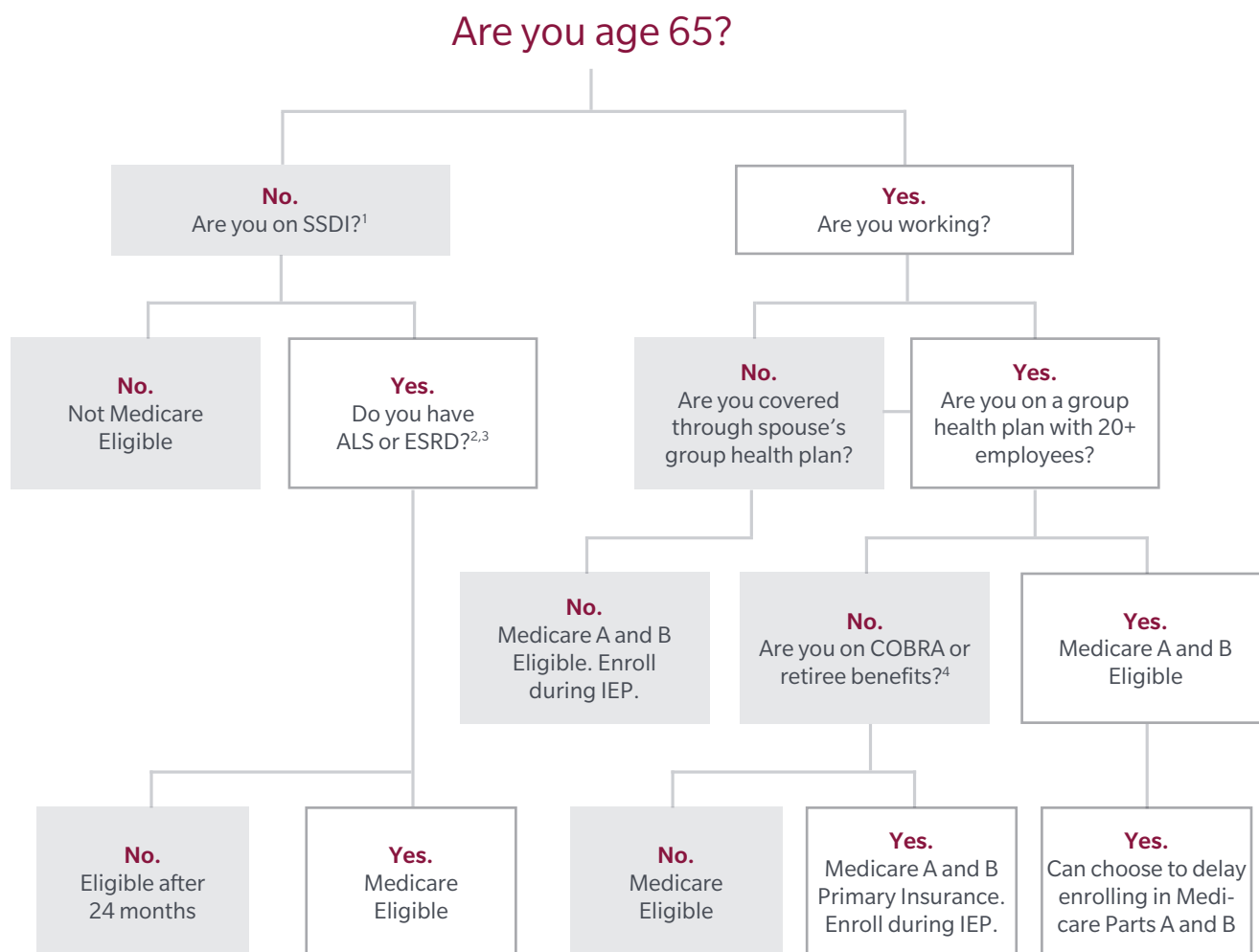


The Whats and Whens of Medicare Eligibility and Enrollment



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As you plan for your retirement, understanding Medicare coverage is important. If you are nearing or have reached age 65, there are a few things to consider before enrolling. The chart below can help you determine when you are eligible. Consider meeting with your financial advisor or investment professional and your Medicare specialist to review each of the enrollment periods.



¹ SSDI stands for Social Security Disability Insurance.

² ALS stands for Amyotrophic Lateral Sclerosis or Lou Gehrig's Disease.

³ ESRD stands for End Stage Renal Disease (Kidney Disease).

⁴ COBRA stands for Consolidated Omnibus Budget Reconciliation Act.

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Initial Enrollment Period (IEP)

When does it start?

The IEP is a seven-month window when you can enroll in Medicare. It starts three months before the month of your 65th birthday, includes your 65th birthday month and extends three months after.

During this period, you can enroll in

- Medicare Parts A and B (often called Original Medicare)
- Medicare Part D Prescription Drug Plan
- Medicare Advantage Plan (Part C)
- Medicare Supplement or Gap Plan

The date your Medicare coverage starts depends on the month when you enroll. If you enroll during the three months prior to the month of your 65th birthday, your coverage will become effective on the first day of the month of your 65th birthday. If you are applying during the month of your 65th birthday or the three following months, your coverage will start the first day of the month following the month you enroll.

Some things to know

- If you are working and covered by a group health plan or by a spouse's plan, you may delay filing for Medicare Part B if the employer has 20 or more employees.
- If you make contributions to a Health Savings Account (HSA) while enrolled in Medicare Part A, there could be tax penalties.
- If you are currently enrolled in Social Security, you will automatically be enrolled in Medicare Parts A and B.
- If you do not enroll when first eligible and don't have alternate creditable insurance, you can face penalties such as higher monthly premiums. COBRA and retiree benefits don't qualify as creditable insurance.
- If you are on Social Security Disability (SSDI) or Railroad Retirement Disability, you will automatically be enrolled in Medicare Parts A and B after 24 months.
- If you have creditable insurance through an employer with 20 or more employees and do not want to enroll in Medicare Part B, follow the instructions that come with your Medicare card.

Special Enrollment Period (SEP)

When does it start?

If you worked past age 65 and were covered by your group health plan or a spouse's while they were working, SEP begins when you lose work-based coverage or your employment ends, whichever comes first, and extends eight months after. You may also utilize the SEP prior to losing work-based coverage and choose to have your Medicare start once that ends.

During this period, you can enroll in

- Medicare Parts A and B, if delayed
- Medicare Part D Prescription Drug Plan
- Medicare Advantage Plan (Part C)
- Medicare Supplement or Gap Plan

The date your Medicare coverage starts depends on the month when you enroll. Generally, your coverage will begin the month after you sign up. If you enroll prior to losing coverage, your coverage will start on a chosen date up to three months in advance. If you enroll during the month you first lose coverage or the eight months following, it will start the first day of the month following the month of your enrollment.

Some things to know

- COBRA and retiree benefits don't qualify as creditable insurance.
- If you delayed filing for Medicare Part A because of contributions to an HSA, your application will be backdated to six months before the date you apply.
- If your SEP overlaps with your IEP, you must adhere to IEP rules.

If you have creditable insurance through an employer with 20 or more employees and do not want to enroll in Medicare Part B, follow the instructions that come with your Medicare card.

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General Enrollment Period (GEP)

When does it start?

If you missed your IEP and are not eligible for an SEP for Medicare Parts A and B, the General Enrollment Period is January 1 through March 31 of each year. If you enroll during the GEP, your Medicare Part A coverage will start January 1 and your Medicare Part B coverage will start the month following.

Some things to know

- If you enroll during the GEP, you may have to pay late enrollment penalties.

Annual Enrollment Period (AEP)

When does it start?

This period runs from October 15 through December 7. During this period, you can

- change from Medicare Parts A and B to a Medicare Advantage (Part C) Plan
- switch from a Medicare Advantage Plan with a prescription drug plan to one without such a plan
- join or switch Medicare Part D Prescription Drug Plans
- alter coverage by switching from one plan with your current insurer to another or change insurers.

Some things to know

- Changes during this period will take effect January 1.

Medicare Advantage Open Enrollment

When does it start?

This period runs from January 1 through March 31. During this time, those enrolled in a Medicare Advantage/Part C Plan can make a one-time change to a different Medicare Advantage/Part C Plan with or without a prescription drug plan or change to Medicare Parts A and B. You can also enroll in a standalone Part D prescription drug plan.

Best Practices

For Medicare Advantage (Part C) Plans and Part D Supplemental Drug Plans, review your Annual Benefit Notification for the following:

- Changes in Provider Network
- Changes to Prescription Drug Coverage
- Changes to the maximum out-of-pocket coverage

For more information and answers to your questions about Medicare, visit [medicare.gov](https://www.medicare.gov).

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Who Pays First

If you are past age 65 and have other coverage, it can be confusing to understand which insurance pays when. This is called the Primary and Secondary payer.

Much will depend on whether you plan to continue working past 65 and have your own Group Health Plan or if you're not working past 65 but covered by a working spouse's Group Health Plan.

It's important to know that the Primary Payer will cover costs up until the plan's limit. Following that, the Secondary Payer only covers costs the Primary Payer did not, and may not pay all of the remaining uncovered costs.

If Medicare is your Primary Payer working in conjunction with a Group Health Plan, you will need to join both Medicare Parts A and B before your Group Health Plan could cover any Part B services.

If you have any questions about coverage and limits, please contact your Group Health Plan provider or The Medicare Benefits Coordination & Recovery Center (BCRC), who can be reached at (855) 798-2627.

YOUR SITUATION	WHO PAYS FIRST?
Working Past 65 Company has 20+ employees On company Group Based Health Plan Coverage is Creditable	Group Based Health Plan
Not Working Past 65, but your spouse is employed Spouses' company has 20+ employees On spouses' companies Group Based Health Plan Coverage is Creditable	Group Based Health Plan
Working or not working past 65 Your company or spouses has less than 20 employees	Medicare
Age 65 or older On COBRA benefits or Retiree benefits	Medicare
On TRICARE for Life (TFL)	Medicare*

Contact your financial advisor or investment professional for more information or visit mfs.com.

* If the care is not part of coverage for either Medicare or TRICARE for Life, you will have out of pocket costs.

Sources: [medicare.gov](https://www.medicare.gov), [tricare.mil](https://www.tricare.mil).

For more information and answers to your questions about Medicare visit [medicare.gov](https://www.medicare.gov).

For informational purposes only. Each person's situation is different. For help determining what role Medicare will play in your financial future, work closely with your financial advisor, or investment professional and local Medicare specialist. They will provide the perspective you need to help you build and maintain a retirement strategy that may work best for you. MFS® does not provide tax, legal, accounting, Social Security, or Medicare advice. Clients of MFS should obtain their own independent tax and legal advice based on their particular circumstances.