

Medicare Overview

When you Reach Age 65

If you are enrolled in a health plan through the State of Maryland Retiree Health Benefits Program, the State will send you a Medicare eligibility letter approximately 90 prior to your 65th birthday. The letter asks that you confirm your eligibility for Medicare benefits.

If you are actively working, the State health plan will be your primary coverage and Medicare will be secondary. If you retire, Medicare is primary and the State Health Plan is secondary.

The State health plan coordinates benefits with Medicare. The Plan is a secondary insurance not a supplement. In other words, the State health plan will pay up to what the Plan would have paid had the Plan been primary. This includes continuing to cover services that Medicare does not, such as annual physicals, shingles vaccination, acupuncture.

Medicare consists of 4 parts:

- Part A: Pays inpatient hospital bills and skilled nursing facility bills. It is normally provided at no charge to those eligible for Medicare.
- Part B: Pays outpatient hospital, doctor and other professional bills and requires a monthly payment from the person eligible for Medicare.
- Part C: Medicare plan – combines Parts A, B & D which is offered by Medicare and does not coordinate with the State Health Plan.
- Part D – Voluntary prescription plan – this is an option if enrolled in the State health plan.

When you become eligible for Medicare, it is recommended that you enroll in Medicare Part B if you are no longer actively working. **If you do not enroll, your health plan will reduce your claim by the benefit that would have been available to you under Medicare Part B, and then pay the remaining claim amount under the terms of your health plan. As a result, you will be responsible for the amount that would have been paid by Medicare Part B.**

For more details, please refer to your *Benefits Guide*.