



Employee Benefits Division

201 E. Baltimore Street, Suite 500, Baltimore, MD 21202

IMPORTANT MEDICARE INFORMATION

The City of Baltimore requires all its members including retirees, beneficiaries, spouses and children to enroll in Medicare Part B at the time you become eligible for Medicare Part A. Once enrolled in Medicare Part B, you must remain enrolled in order to continue receiving the maximum possible benefits.

As a Baltimore City or Baltimore City Public School System (BCPSS) retiree, you and your covered dependents must enroll in **BOTH MEDICARE PART A (HOSPITAL INSURANCE) & PART B (MEDICAL INSURANCE)** as soon as you or your dependents are eligible.

Who is eligible for Medicare?

- People age 65 or older
- Some people with disabilities under age 65 as determined by Social Security Administration (SSA)
- People with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant)

When and how do I enroll in Medicare Part A & Part B?

Attaining Age 65

If you are not already getting Social Security retirement benefit checks, you should visit your local Social Security office or call Social Security Administration (SSA) at 1-800-772-1213 to enroll in Medicare Part A & Part B when you become age 65 during your Initial Enrollment Period. Your Initial Enrollment Period begins three months before the month you turn 65 and ends three months after you turn 65. If you wait until the month you turn 65, your Medicare Part B start date will be delayed.

Disability Under Age 65

If you are already getting Social Security retirement checks due to a disability determined by SSA, you will be automatically enrolled in Medicare Parts A and B and a Medicare card will be mailed to you on the 25th month after your disability benefits began. When you receive your Medicare card, the Social Security Administration will give you the option of turning down your enrollment in Part B. ***Do not turn down your Medicare Part B. BALTIMORE CITY REQUIRES THAT YOU ENROLL IN BOTH MEDICARE PART A & PART B IN ORDER TO RECEIVE THE MAXIMUM POSSIBLE BENEFITS.***

Important Note: If you (or your spouse/child) do not enroll in Medicare Part B when you are first eligible, you will not be able to enroll until Social Security Administration's General Enrollment Period. This period runs January 1 through March 31 each year and will become effective July 1. The premium for Part B Medicare may increase by 10% for each full 12-month period that you could have had Part B, but did not enroll. If the premium for Part B increases, you will have to pay this extra amount as long as you have Part B. If you have any questions regarding how to enroll in Medicare Part A & Part B, contact Social Security Administration (SSA) at 1-800-772-1213.

What if I (or my spouse) am not eligible for Medicare Part A?

If you (or your spouse) are not eligible for premium-free Medicare Part A because you did not pay enough Medicare taxes while you worked and you are age 65 or older, you can purchase hospitalization coverage along with the supplemental coverage from the medical plan for which you are enrolled through Baltimore City. However, you must enroll in Medicare Part B through your local Social Security office. Mail a copy of your (or your spouse's) Medicare card to Employee Benefits to update your medical plan enrollment on Baltimore City's Health Benefits Enrollment System based on your Medicare status. You will receive a confirmation statement reflecting your coverage.

What do I do after I enroll in both Medicare Part A & Part B and receive my Medicare card?

Attaining Age 65

Once you (or your spouse) have enrolled in Medicare Part A & Part B due to attaining age 65 and have received your Medicare card from Social Security Administration, use your Medicare card to verify your Medicare claim number and Medicare Part A and Part B effective dates on your ***Retiree Benefit Confirmation Statement***. You will receive your ***Retiree Benefits Confirmation Statement*** from the City approximately three weeks prior to your 65th birthday. If the Medicare information printed on your Medicare card matches the Medicare information printed on your confirmation statement, no further action is required. If the Medicare information printed on your Medicare card does not match the Medicare information printed on your confirmation statement, please mail a copy of your Medicare card to DHR-Employee Benefits Division, 201 E. Baltimore Street, Suite 500, Baltimore, MD 21202 to correct your Medicare information in the City's Health Benefits Enrollment System. You will receive a new confirmation statement with the correct Medicare information in the mail.

Disability Under Age 65

Once you (or your spouse or child) have enrolled in Medicare Part A & Part B due to a disability determined by Social Security Administration and have received your Medicare card, you must log onto www.baltimorecity.essbenefits.com to provide your Medicare claims number and Medicare Part A & Part B effective dates. You will need your social security number and your PIN to log on. Under the ***Main Menu***, click on ***Update Participant Medicare Status*** to update your Medicare status or click on ***Update Dependent Medicare Status*** to update your dependent's Medicare status and follow the prompts. If you do not have access to a computer or the Internet, you may bring or mail a copy of your (or your spouse or child's) Medicare card along with a detailed explanation to DHR-Employee Benefits Division, 201 E. Baltimore Street, Suite 500, Baltimore, MD 21202 to update your Medicare information.

What will happen to my Baltimore City medical plan coverage when I become eligible for Medicare?

Enrollees In CareFirst PPN High/Standard Option Plans

When you (or your spouse/child) become eligible for Medicare, the CareFirst PPN High/Standard Option coverage for the Medicare eligible member will convert to the CareFirst Medicare Supplemental plan. All other Non-Medicare members, if any, will remain under CareFirst PPN High/Standard Option coverage. The Medicare Part A & Part B coverage through SSA will become the primary coverage (all eligible claims are paid by Medicare first) and the CareFirst Medicare Supplemental plan through Baltimore City will become the secondary coverage. The Baltimore City supplemental medical plan, CareFirst Medicare Supplemental, will cover only that portion of your health claims not covered by Medicare up to the maximum Medicare Allowed Amount. ***Dental coverage is not offered to members converted to the CareFirst Medicare Supplemental plan.***

Enrollees In Kaiser Permanente HMO

As a member of Kaiser Permanente, you (or your spouse/child) are required to complete a **Kaiser Permanente Medicare Plus** enrollment form **if you are eligible for Medicare Part A and Part B**. You will receive a notice in the mail along with the Kaiser Permanente Medicare Plus enrollment form from Kaiser Permanente. The Medicare eligible member must complete the Kaiser Permanente Medicare Plus enrollment form and return directly to Kaiser Permanente. The Medicare Plus enrollment form is required in order for you and/or your spouse/child to continue to participate in the Kaiser Permanente Plus Medicare Plan. If Kaiser Permanente does not receive your completed form within 30 days from the date of notice, you and your dependents, if any, will be disenrolled from the Kaiser Permanente Plan and your coverage will be transferred to the City's CareFirst PPN Standard Option Plan and/or CareFirst Medicare Supplemental Plan at a greater cost to you.

As a member of Kaiser Permanente Medicare Plus, you will continue to pay Medicare Part B premiums through the Social Security Administration and receive all in-network care from Kaiser Permanente plan providers who practice at the 30 Kaiser Permanente medical centers plus affiliated community providers. You may also use your red, white, and blue Original Medicare card to visit any Medicare participating provider; however, Original Medicare deductibles and coinsurance will apply and will be your responsibility. All members will continue to receive dental coverage through Kaiser Permanente.

If I (or spouse/child) do not enroll in both the Medicare Part A & Part B when I am eligible, how will my medical claims be affected?

If you (or your spouse/child) do not enroll in both Medicare Parts A & B when you are eligible, your Baltimore City medical plan coverage will be converted to the supplemental medical plan coverage for the member who is Medicare eligible. **THE MEMBER WHO IS MEDICARE ELIGIBLE WILL THEN BE RESPONSIBLE FOR THE PORTION OF THE CLAIMS THAT BOTH MEDICARE PART A (HOSPITAL) & PART B (MEDICAL) WOULD COVER AS PRIMARY.** Your Baltimore City supplemental medical plan will cover only that portion of your health claims not covered by Medicare up to the maximum Medicare Allowed Amount.

What will happen to my Baltimore City prescription drug coverage when I (or spouse/child) become eligible for Medicare?

When you (or your spouse/child) become eligible for Medicare and your Medicare information has been updated in the City's Health Benefits Enrollment system known as BOSS, you will receive an Opt Out letter in the mail from Express Scripts to enroll in the Baltimore City Medicare Rx plan with Express Scripts. No action is required if you decide to enroll in this plan. Upon Express Scripts' approval from the Centers for Medicare & Medicaid Services (CMS), you will automatically be enrolled in the Baltimore City Medicare Rx plan with Express Scripts **unless you notify Employee Benefits - Baltimore City Medicare Rx at 410-396-1780 within 21 days from the date of the letter that you do not want to enroll in the City's Medicare Rx plan.** Your Medicare Rx plan will be effective the first day of the following month after CMS approves your enrollment. Once you have automatically been enrolled in the Baltimore City Medicare Rx plan, you will receive a *Welcome Packet* from Express Scripts with your new membership ID card, summary of benefits, formulary list and claim forms.

What will happen if I (or spouse/child) don't enroll or remain enrolled in the Baltimore City Medicare Part D Rx Plan when eligible?

Important: If you (or spouse/child) decide not to be enrolled in the Baltimore City Medicare Rx Plan, please keep in mind that you will no longer have prescription drug coverage through the City of Baltimore. The City of Baltimore will not offer any other prescription drug plan to Medicare eligible retirees and/or to your eligible dependents. If you or your dependents dis-enroll from the City's Medicare Rx plan after being enrolled and don't have or get other Medicare prescription drug coverage or creditable coverage (as good as Medicare's), you (and/or spouse/child) will be required to pay a late enrollment penalty (LEP) if you go 63 days or more without Medicare Part D coverage or other creditable prescription drug coverage for as long as you have Medicare Part D coverage.

What happens if I have a late enrollment penalty (LEP) as a member of the City's Medicare Rx Plan?

Express Scripts will send you notification if Medicare (the Center for Medicare & Medicaid Services or CMS) has identified you as having to pay an LEP. If you are subject to an LEP while covered under the Baltimore City Medicare Rx Plan, you will be billed for this penalty. If you do not pay your LEP, you could be disenrolled from your Baltimore City Medicare Rx Plan.

What should I do if I am still actively working when I turn age 65?

If you are still employed and enrolled in health benefits with the City of Baltimore (COB) as an active full-time employee when you (or your spouse) turn age 65, you should contact Social Security Administration (SSA) three months before you (or your spouse) turn age 65 to enroll in Medicare Part A and Part B. However, if you decide to remain employed as an active full-time employee with the COB beyond age 65 and you (and your spouse) remain enrolled in COB group health benefits, you (or your spouse) may consider delaying your enrollment in Medicare Part B through SSA without a late-enrollment penalty. **Your (and spouse's) health plan coverage will remain primary until your employment or coverage ends, whichever occurs first.**

When your current employment or health plan coverage ends, whichever occurs first, you must visit your local Social Security office to enroll in your Medicare Part B during the Special Enrollment Period, which runs 3 months prior and 8 months after your employment or health plan coverage ends. During the Special Enrollment Period, you should obtain a **Request For Employment Information** form from SSA to be completed by the Employee Benefits Division. If you are an employee of BCPSS, this form must be completed by the BCPSS - Office of Benefits Management. This form verifies your employment and health benefits status with the Baltimore City or BCPSS at the time your employment ends. Return the completed form to your Social Security office in order to waive the late-enrollment penalty for late enrollment in Medicare Part B. **Note: If you wait until after you retire (*within the 8-month special enrollment period*) to enroll in Part B, your Medicare Part B start date will be delayed causing a lapse in coverage and out of pocket expenses.**

Who do I contact if I have any questions?

If you have any questions regarding your Baltimore City medical plan coverage, please contact the Employee Benefits office at 410-396-5830/TTY 711 (Maryland). Baltimore City retirees should select option 2 and BCPSS retirees should select option 3, and then choose option 1 to speak to a customer service representative. If you have any questions regarding the Baltimore City Medicare Part D Rx Plan, please call 410-396-1780. If you have any questions regarding Medicare enrollment in Part A and Part B, please contact the Social Security Administration at 1-800-772-1213. If you have any questions regarding Medicare benefits, please call 1-800-633-4227.