

People with Medicare and retiree or other health care coverage

If client has this benefit:	Make sure they know:
<p>Boeing retiree benefit</p> <p>Contact: 1-877-768-3011</p>	<ul style="list-style-type: none"> • Offers employee advocacy for Boeing retirees who need help with Social Security or Medicare-related information and questions. <p>Boeing Retirement Resource Guide: See also the section on Retiree health insurance (page 4) www.boeing.com/assets/pdf/companyoffices/empinfo/benefits/pension/Resources.pdf</p>
<p>COBRA</p> <p>Contact: COBRA plan administrator or benefits department, or US Department of Labor EBSA: 1-866-444-3272</p>	<ul style="list-style-type: none"> • COBRA is not active employer group health coverage. • People on COBRA get no Special Enrollment Period (SEP) to join Medicare when COBRA ends! They may join Medicare during the Initial Enrollment Period (IEP) or General Enrollment Period (GEP). • If they join Medicare, their COBRA will likely end. If COBRA covers family members, they may want to ask the plan administrator or benefits department what happens to family coverage if clients join Medicare. • Employee’s Guide to COBRA: www.dol.gov/sites/dolgov/files/legacy-files/ebsa/about-ebsa/our-activities/resource-center/publications/an-employees-guide-to-health-benefits-under-cobra.pdf
<p>Current job with health insurance (client or client’s spouse)</p> <p>Contact: Job-based plan administrator or benefits department</p>	<ul style="list-style-type: none"> • They may join Medicare during the IEP or defer it with no penalty (refer to Social Security Administration or SSA). <ul style="list-style-type: none"> ▪ Beware! Some smaller employers require workers to join Medicare when first eligible. ▪ Many people will join Part A if it’s free for them. ▪ After the job/insurance ends, they have an 8-month SEP to join Part B. ▪ If their plan’s drug coverage is creditable to (as good as) Part D, they may defer Part D with no penalty. • The plan administrator/benefits department can let clients know: <ul style="list-style-type: none"> ▪ Whether their drug coverage is creditable to (as good as) Part D. ▪ If they must join Medicare and any cost changes in the job insurance. • Impacts to family coverage; which plan pays first and which pays second.

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<p>Classic Medicaid</p> <p>Contact: 1-800-562-3022 1-877-501-2233 or local Community Services Office</p>	<ul style="list-style-type: none"> • Medicare Savings Program (MSP): Clients on Classic Medicaid (fully dual eligible) may also qualify for MSP, such as QMB, SLMB, QI-1. • Low Income Subsidy (LIS): SSA will “deem” client with Medicaid to get LIS automatically. They may change Part D plans quarterly. • Medicare Advantage (MA): Depending on the clients’ situation, they may not need extra coverage, and may still have out-of-pocket costs. The Dept. of Social and Health Services can provide details and determine eligibility. If clients have issues finding providers who see patients with Medicare and Medicaid, they might want to join an MA plan, especially one with a network. If they join an MA, they may change MA plans quarterly that include Part D. • They may also have other insurance, such as a retiree or employer plan or an MA. <p>You may verify a clients’ Medicaid coverage by telephone: www.insurance.wa.gov/media/1720</p>
<p>Federal Employee Health Benefit Plan (FEHBP)</p> <p>Contact: 1-888-767-6738</p>	<ul style="list-style-type: none"> • Not all federal retirees are required to enroll in Medicare Parts A and B. The decision is in the hands of the federal retiree (aka federal annuitant). • Federal Benefits Fast Facts: www.opm.gov/healthcare-insurance/fastfacts/fehbmedicare.pdf

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If client has this benefit:	Make sure they know:
<p>Health Care Authority, PEBB & SEBB Customer Service Line</p> <p>Contact: 1-800-200-1004</p>	<p>The Washington state Health Care Authority buys and coordinates health insurance benefits for eligible public employees and retirees. Different plans are available based upon where the enrollee lives.</p> <p>People may be eligible to enroll in PEBB plans if they are a retiring employee of a:</p> <ul style="list-style-type: none"> • PEBB-participating employer group • State agency • State higher education institution • Washington state school district or educational service district <p>People may also be eligible to enroll in PEBB retiree insurance if they are an elected or full-time appointed state official of the legislative or executive branch of state government and has left public office.</p> <p>PEBB medical plans available by county: www.hca.wa.gov/public-employee-benefits/retirees/medical-plans-available-county</p> <p>Retiree Enrollment Guide (rates are on pp. 6-9): www.hca.wa.gov/assets/pebb/51-205-retiree-enrollment-guide-2020.pdf</p>
<p>Indian Health Services (IHS) or local</p> <p>Tribal contact:</p> <p>Portland Area IHS (503) 414-5555 or (301) 443-3593 www.ihs.gov or the local tribe</p>	<ul style="list-style-type: none"> • This is not insurance or employer group health coverage. IHS or tribal health care is considered a health care delivery system. Care may be limited to only services the tribe/IHS clinics offer, and only in certain areas. The tribe/clinic can give more information specific to the tribal area. <ul style="list-style-type: none"> ▪ American Indian (AI) and Alaska Native (AN) clients do not get a SEP for Medicare. They may join Medicare in the IEP or GEP. ▪ IHS or tribal prescription drug coverage may be creditable to (as good as) Part D. To avoid a late enrollment penalty for Part D, each client should check whether or not their prescription coverage is creditable. • If AI/AN client needs care not offered by the tribe/IHS or via care outside the area, they may consider Medigaps, Part D, MA, Medicaid or MSP.

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If client has this benefit:	Make sure they know:
<p>No-fault insurance</p> <p>Contact BCRC: 1-855-798-2627</p>	<ul style="list-style-type: none"> • Includes automobile insurance, homeowners' insurance, and commercial insurance plans • Pays regardless of who is at fault • Medicare is secondary payer • Medicare may make conditional payment if no-fault insurance doesn't pay within 120 days – must be repaid when claim is resolved by the primary payer <p>Benefits Coordination and Recovery Center (BCRC) to report other insurance/or questions</p>
<p>PEBB/state employees</p>	<ul style="list-style-type: none"> • See Health Care Authority section on page 3.
<p>Retiree health insurance</p> <p>Contact: Retiree plan administrator or benefits department</p>	<ul style="list-style-type: none"> • Most retiree plans require Medicare to pay as primary once the retiree turns age 65 and no longer actively works. • Retirees are responsible to know: What their employer or former employer requires, the terms of their retiree coverage, the costs associated with coverage and who administers their retiree health benefits if offered. • For all retiree coverage, if enrollee drops it, they probably can never get it back again.
<p>TRICARE or TRICARE for LIFE</p> <p>Contact: 1-800-538-9552</p>	<ul style="list-style-type: none"> • When 20-year military veterans and spouses with TRICARE join Medicare, they get TRICARE for Life (TFL). This fills most gaps in Original Medicare and includes drug coverage creditable to (as good as) Part D, so they may defer Part D with no penalty. They must have both Medicare Parts A and B. Dental coverage may be available for an additional cost. • Coverage is quite comprehensive. Enrollees may see any provider who accepts Medicare and TFL. Clients can join MA or Part D plans, but, we suggest they talk with TRICARE first. • TRICARE and Medicare: https://tricare.mil/LifeEvents/Medicare.aspx

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If client has this benefit:	Make sure they know:
<p>Dept. of Veterans Affairs (VA)</p> <p>Contact: 1-800-827-1000 or 1-877-222-VETS (8387)</p>	<ul style="list-style-type: none"> • This is NOT insurance. VA is a health care delivery system. Care may be limited to certain conditions, in certain facilities. The VA can give further details. If clients need other care, they may want to think about Medigap, Part D, MA, Medicaid or MSP (they may have these and keep VA). • Veterans get NO SEP for Medicare. They may join Medicare in the IEP or GEP. • VA drug coverage is creditable to (as good as) Part D. If clients' have VA drug coverage, they may defer Part D with no penalty. <p>Apply for VA health care benefits: www.va.gov/health-care/how-to-apply/ Veterans Health Benefits Handbook: www.va.gov/healthbenefits/vhbh/</p>

Reference: *Medicare & Other Health Benefits: Your Guide to Who Pays First. CMS Product No. 02179, Revised December 2018,* www.medicare.gov/Pubs/pdf/02179-medicare-coordination-benefits-payer.pdf