

# Frequently Asked Questions (FAQs) About Medicare and VCU Health Benefits

Classified staff and 9/10/12-month non-adjunct faculty are eligible to participate in health plans under the Commonwealth of Virginia (COVA) Health Benefits Program (including COVA Care, COVA HealthAware, the COVA High Deductible Health Plan and Kaiser Permanente). These FAQs address how Medicare eligibility affects this coverage.

### 1. What happens to my coverage when I turn 65 and become eligible for Medicare?

You may remain enrolled in your health plan as long as you continue working in an eligible position. Becoming eligible for Medicare does not change your eligibility or participation. If your covered dependent(s) becomes eligible while still covered by your health plan, he/she may stay in your health plan and delay enrolling in Medicare.

### 2. What happens to coverage if my covered dependent(s) turns 65 and enrolls in Medicare?

While you are actively employed, if you or any of your dependents become covered by Medicare while also participating in the health plan, the coverage provided by the health plan is primary unless Medicare eligibility is due to End Stage Renal Disease.

- If Medicare eligibility is due to End Stage Renal Disease, coverage provided by the health plan
  is primary during the 30-month coordination period. After the 30-month period, Medicare
  becomes primary and the health plan becomes secondary. When this happens, the affected
  participant must enroll in Medicare Part B if this coverage was waived during the coordination
  period.
- Active covered employees or their covered dependents can be reimbursed for Medicare Part B
  premiums when Medicare becomes primary after the 30-month period. Contact VCU Benefits
  for details (see Question 8).

#### 3. When should I enroll in Medicare?

Most people age 65 or older who are citizens or permanent residents of the United States are eligible for free Medicare hospital insurance (Medicare Part A). You should sign up for Medicare Part A *three months* before your 65<sup>th</sup> birthday. This hospital insurance will be secondary to your health plan if you continue to participate in the health plan, but it will also be free.

Anyone who is eligible for free Medicare Part A can enroll in Medicare medical insurance (Part B) by paying a monthly premium. This medical insurance will be secondary to your health plan if you continue to participate in the health plan (unless the exception for End Stage Renal Disease in Question 2 above applies). Because you must pay a premium for Medicare Part B coverage, you may wish to delay your enrollment until you are no longer covered under the health plan (for instance, when you leave employment from VCU or you retire).

## 4. If I don't sign up for Medicare Part B when I first become eligible, will there be a penalty or waiting period for enrolling late? What about when my dependents become eligible for Medicare?

If you are age 65 or older and are covered under a group health plan, either from your own or your spouse's current employment, you have a "special enrollment period" in which to sign up for Medicare



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Part B when you lose your employer-sponsored coverage. This means you may delay enrolling in

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Medicare Part B without waiting for a general enrollment period (January 1 – March 31 each year) and paying the 10% premium surcharge for late enrollment.

People who receive Social Security disability benefits and are covered under a group health plan from either their own or a family member's current employment also have a special enrollment period and premium rights that are similar to those for workers age 65 or over.

#### 5. How do I enroll in Medicare?

Medicare enrollment is done directly with the Social Security Administration (SSA). VCU cannot enroll you or any of your dependents in Medicare coverage. Contact your local Social Security office or visit <a href="https://www.ssa.gov">www.ssa.gov</a> for details.

If you enroll in Medicare Part B during the "special enrollment period" described above, the SSA may require a form from VCU to verify that you have been participating in the health plan. This form will be provided to you by the SSA when you request Medicare enrollment. Please bring the form with you for completion when you meet with a VCU Benefits staff member about your retirement or send it by campus mail to VCU Benefits at P. O. Box 842511. We will return it to you once completed so that you may provide it to the SSA with your other Medicare enrollment materials.

## 6. Can I make changes to my coverage when I or any of my dependents become eligible for Medicare?

You are always permitted to make changes to your coverage, or waive coverage, for any reason during the annual Open Enrollment period. Gaining eligibility under Medicare is also considered a qualifying mid-year event that permits you to make certain changes outside of Open Enrollment.

For example, when you, your spouse or your child enroll under Medicare, you may:

- change your health plan;
- remove family members enrolling in Medicare; or
- increase, reduce or cancel the election amount in your Medical Flexible Reimbursement Account to cover a change in eligible medical expenses.

Changes made due to this mid-year qualifying event must be requested **within 60 days** of the first day of coverage under Medicare. Remember: If you decide to waive your own coverage under the health plan when you become eligible for Medicare, coverage for your dependents is canceled also. Please click here for details.

#### 7. Where can I find more information about Medicare?

Review the Social Security Administration's <u>Medicare Booklet</u> or the <u>Medicare & You</u> guide published by the Centers for Medicare & Medicaid Services.

#### 8. What if I have more questions?

Contact your local Social Security office or call Medicare at 1-800-MEDICARE (1-800-633-4227).

If you have questions about your health plan through VCU, contact VCU Benefits at <a href="mailto:benefits@vcu.edu">benefits@vcu.edu</a> or (804) 827-1723.

This document is intended to provide guidance, and does not constitute legal advice. Actual Medicare provisions and State Health Benefits Program provisions in force always apply.



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- For more information about Medicare provisions, visit <a href="www.medicare.gov">www.medicare.gov</a> or contact the <a href="Social Security">Social Security</a> Administration.
- For more information about your health plan provisions, consult your Member Handbook or visit the Commonwealth of Virginia's Department of Human Resource Management (DHRM) at <a href="https://www.dhrm.virginia.gov">www.dhrm.virginia.gov</a>.