

What are my options when turning age 65?



RESOURCE ROADMAP | FOR COVERED MEMBERS OF THE MCUL TRUST

YOU BECOME ELIGIBLE FOR MEDICARE

You can sign up for Medicare during the seven-month period that begins three months before the month you turn 65 (including the month you turn 65), and ends three months after the month you turn 65.

You and your dependents eligibility with the Trust coverage does not change when you become eligible for Medicare, if you are an active employee working the credit union's required hours on a weekly basis.

DUAL COVERAGE WITH THE TRUST AND MEDICARE

You can elect both the Trust coverage and Medicare. However, be aware that this sometimes causes confusion for the providers when billing for services. You will be responsible for both deductibles in order to get payments made on your behalf by the plan.



Once you are enrolled in Medicare, you are **no longer eligible** to contribute to your health savings account.

COORDINATING COVERAGE



CREDIT UNION SIZE = Under 20 Employees

If a Medicare payor exception form is signed by the credit union and approved by CMS, Medicare can be your primary coverage. Otherwise the Trust plan will be the primary.

IMPORTANT NOTE: Although only a Part A election is required for the Medicare exception, it is strongly recommended to enroll in B, C, and D as these services would be paid by the Trust as secondary, regardless of your election.



The Trust will send the form for signature to the credit union. Once the form is completed, EBMS will send it to CMS for approval. Once approved, a reduced Trust premium will be given.

IMPORTANT NOTE: You may still elect dual coverage during this approval process timeframe.

CREDIT UNION SIZE = Over 20 Employees

The Trust coverage is primary, Medicare coverage is secondary. The Trust **will not** offer a reduced premium.

What is covered by Medicare?

Part A - Considered the "automatic" or "free" benefit to individuals that have paid into the government over the years—the individual would presumably be notified by Medicare whether eligible or not. Covers inpatient hospital care, skilled nursing facility, hospice, lab tests, surgery, home health care

Part B - Doctor's services and tests, outpatient care, home health, durable medical equipment

Part C - Hospital, medical, prescriptions, dental, vision, hearing

Part D - Prescription drugs





DELAYING MEDICARE

At age 65 and still actively working, if you choose to remain on the Trust benefits and delay enrolling in Medicare, there will not be a penalty when you enroll at a later date.

All Trust prescription plans are considered creditable (meaning the coverage is equal to or better than Part D coverage). This means if you choose to delay Part D coverage until you are no longer employed, you will not be penalized by Medicare for late enrollment in Medicare Part D coverage.



WAIVING TRUST COVERAGE CONSIDERATIONS

You can elect to sign up for Medicare A, B, D + Medicare supplemental coverage C and waive your Trust coverages. However, if you currently cover dependents, waiving Trust coverage means that your dependents will no longer have Trust coverage.

- **If your credit union is subject to COBRA your dependents will be offered COBRA at 102% of the active member's cost.**
- **If your credit union is not subject to COBRA your dependents do not have this option.**



RESOURCES AVAILABLE TO YOU

Based on the different scenarios each employee will face (your health status, prescription costs, dependent coverage, etc.), the Trust offers Medicare and individual certified experts to assist you with your specific situation.

Contact Dara Anderson to initiate a meeting for you with a Leavitt Medicare expert, and assist in the communication with the Trust if coordination of benefits is required.



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**MONTANA'S
CREDIT UNIONS**