

# United Nations

Insurance and Disbursement Service, FF-300, 304 East 45<sup>th</sup> St. New York, NY 10017 – Tel: (212)963-5813 – EMAIL: [ashi@un.org](mailto:ashi@un.org)

## MEDICARE FAQs

### Section I: Eligibility & enrolment

**1. Q: *Am I eligible for Medicare?***

**A:** You are eligible for free Medicare Part A (hospitalization) if you contributed to Social Security for 40 quarters (ten years) and will be automatically enrolled in Medicare when you turn 65.

You are eligible for Medicare Part B (doctors visits from age 65), if you have lawfully resided in the United States for a minimum of 5 years, including periods under a G-4 visa.

- Example: You retire at age 62 after being on a G4 visa at UNHQ and apply for a permanent resident status (Green card). You are eligible to apply for Medicare three years later at age 65, although you would have only been a permanent resident for about 3 years. You do not need to receive US Social Security payments to be eligible for Medicare Part B.

Even though most individuals become eligible for Medicare Part B upon attainment of age 65, there is an exception to the age requirement if Social Security has declared you disabled. If you are currently enrolled in Medicare Part A due to a disability, you will be required to enrol in Medicare Part B effective 1 January 2011.

**2. Q: *How do I apply for Medicare Part B?***

**A:** If you are entitled to US Social Security payments, you will be automatically enrolled as you approach age 65 and should receive a card in the mail.

If you are not entitled to Social Security or if you declined to enrol when you reached age 65, but need to enrol in Medicare Part B, for your convenience we have included the enrolment form that you will need to complete and return to your local Social Security Administration office. You can locate your local office by going to the Social Security Administration website, [www.socialsecurity.gov](http://www.socialsecurity.gov).

**3. Q: *I have never paid into the US Social Security system. Do I have to enrol into the Medicare part A and/or B?***

**A:** If you did not contribute to Social Security, you do not need to enrol in Part A since it will be an additional cost to you. However, you need to enrol in Part B as the United Nations has made the enrolment in Part B a requirement for all eligible ASHI participants and their dependents as of 1 January 2011.

**4. Q: *I am a US citizen but did not work in the US long enough to qualify for social security. Am I eligible for Medicare and do I have to enrol?***

**A:** Yes you are eligible to enrol in Medicare Part B even though you did not contribute to Social Security. You do not need to enrol in Part A since it will be an additional cost to you. However, you need to enrol in Part B as the United Nations has made the enrolment in part B a requirement for all eligible ASHI participants and their dependents as of 1 January 2011.

**5. Q: *What will happen if I choose not to enrol in Medicare part B even though I am 65 and eligible for Medicare?***

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**A:** The UN will adjudicate your claims as if you had Medicare Part B. In other words, when Aetna, Blue Cross, or HIP receives a claim from one of your physicians, they will only pay the balance of the claim as if you had enrolled in Medicare part B.

**6. Q: I was previously enrolled in Medicare Part B but dropped the coverage. Do I need to reenrol in Medicare Part B? Will the UN pay any penalties associated with my reenrolment?**

**A:** If you are not yet 75 as of 1 January 2011, you will need to reenrol and the UN will pay any applicable penalties. If you are 75 or older as of 1 January 2011, please contact the UN via email, [ashi@un.org](mailto:ashi@un.org), or telephone, (212) 963-5813, to discuss the particulars of your situation.

**7. Q: I am 75 or older but I am already enrolled in Medicare Part B. What should I do?**

**A:** For those already enrolled in Medicare Part B, please remain in the plan. The UN will reimburse you for your Medicare Part B premiums.

**8. Q: Will I be required to pay a penalty if I have not joined Medicare B during the enrolment period? If so, how much?**

**A:** Yes. The penalty is of 10% for every year for which you were eligible for Medicare and did not apply. If you are 65 or over at 1 January 2011 and did not apply for Medicare prior to that date, the UN will pay the applicable penalty if you join during your Medicare enrolment eligibility period. If however you only become eligible for Medicare after 1 January 2011 and choose not to enrol, then you will be responsible to pay the penalty and the UN will only reimburse you the premium amount before any penalty is applied by the US Social Security Administration.

**9. Q: Do I need to apply for Medicare D (prescription drugs)?**

**A:** Since our US based insurance plans (Aetna, Blue Cross, and HIP) cover prescription drugs, there is no need to apply for Medicare D. Moreover, the United Nations receives a drug subsidy from the US Government for each UN retiree enrolled in Medicare Part A or Part B or both, and not enrolled in Part D. We therefore require our ASHI participants **not to** enrol in Medicare Part D.

**10. Q: Being a UN retiree, does my Medicare-eligible spouse have to apply for Medicare B if I am not eligible? If so, will my spouse be reimbursed the amount of the Medicare B premium and how will the payment be made?**

**A:** Your spouse does need to apply as soon as he/she is eligible. The premium will be reimbursed by the UN by **reducing** the monthly ASHI contribution. Any amounts in excess will be accumulated and paid out in lump sums to the ASHI participant. Please note that the ASHI Unit will need to receive a duly filled Medicare Part B Reimbursement Request Form and the required attachments before refunding premiums.

**11. Q: What are Medicare Advantage Plan (part C) and MediGap? Do I need to enrol in those plans?**

**A:** Medicare Advantage Plan and MediGap are supplemental coverages that are offered to eligible members at an additional cost. You do not need to enrol in these supplemental insurances since our US based insurance plans will reimburse what Medicare A and B do not cover under what is determined to be reasonable and customary, and covered under UN plans.

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**12. Q: I live in Puerto Rico, am I eligible for Medicare?**

**A:** People who live in US Territories such as Puerto Rico are eligible.

**13. Q: I just signed up for Medicare. What are the next steps?**

**A:** Please submit a copy of your Medicare card to ensure that we coordinate your benefits with the insurance carriers.

**14. Q: I am covered under Vanbreda and eligible for Medicare Part B. Am I required to enrol?**

**A:** You are not required to enrol at the moment and the United Nations will therefore not reimburse the Medicare premium if you do decide to enrol. Please contact us to discuss the particulars of your situation upon your return to the US.

## Section II: Benefits

**1. Q: How do I find a Medicare doctor?**

**A:** Please visit [www.medicare.gov](http://www.medicare.gov). This is the most accurate resource in determining whether a Doctor is in Medicare. **Please note that there are three categories of doctors in relation to Medicare:**

- *Participating doctors* are those who accept the set Medicare assignment (maximum amount a doctor can charge for a specific service).
- *Non-participating doctors* are allowed to go above the Medicare assignment, up to a federal maximum of an additional 15% (for NY, the maximum is 5%)
- *Opt-out doctors* are those doctors who have fully opted out of Medicare. This means that if you go to such a doctor, Medicare will not cover your claim and you are advised to follow your normal claim process. . Please note that opt-out doctors may still be within your medical insurance plan's network.

Additionally, please note that being enrolled in Medicare Part B does not restrict your choice of doctors under a UN plan and you will still be reimbursed as before if the doctor has “opted-out” of Medicare.

**2. Q: Does Medicare cover dental services?**

**A:** No it does not. If you are enrolled under the UN Cigna dental plan, the Medicare Part B enrolment/eligibility has **no** impact on your Cigna coverage.

## Section III: Coordination of Benefits (COB) & claims

**1. Q: Will Medicare be primary or the UN Insurance?**

**A:** The date your Medicare Part B coverage becomes effective will be the first day when your UN insurance becomes secondary when you visit a doctor who has not “opted-out of Medicare”.

**2. Q: My spouse (not a s/m) has Medicare, what is his or her primary plan?**

**A:** If you are a retired staff member, Medicare is primary for your spouse and the UN insurance (Aetna, Blue Cross, and HIP) is secondary. However, the UN insurance remains primary for you as a subscriber. If you are an active staff member, the UN insurance is always primary and Medicare secondary, even if you or your spouse have Medicare Part B.

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**3. Q: Does a doctor who does not accept new Medicare patients have the right not to admit me? If yes, can I be admitted based on my secondary coverage?**

**A:** Yes, any doctor has the right not to accept a new patient.

**4. Q: If my Aetna or Blue Cross physician is not a Medicare provider, will my UN insurance be primary or will I need to find another physician?**

**A:** If your physician is not a Medicare provider, you can still remain with this doctor.

Your physician's billing procedures will not change. In other words, if:

- the doctor is an in-network doctor, you will only have to pay your co-pay of either \$15.00 or \$20.00;
- the doctor is an out-of-network doctor; you will be responsible for the applicable deductibles and co-insurance.

**5. Q: I have Medicare Part B: who is responsible for submitting the claims to Medicare and then to UN insurance (Aetna, Blue Cross or HIP)?**

**A:** For UN members that have Medicare and go to providers that accept Medicare, claims are automatically processed by Medicare and UN insurance (Aetna, Blue Cross, or HIP) as it is the provider's responsibility to submit claims to Medicare.

Once you enrol in Medicare Part B and you provide your Medicare details to the UN via the Medicare Part B Premium Reimbursement form, we will update our system with your information and pass it to the applicable insurance (Aetna, Blue Cross, or HIP) for future processing.

For UN members that elect to go to providers that do not accept Medicare, it is the member's responsibility to adhere to the standard claims processes currently in place.

**6. Q: What if the medical service I am planning to get is not covered by Medicare? How will it be paid?**

**A:** If the medical service that you are planning to receive is not covered by Medicare, your secondary insurance plan (hence the UN plan) will pay for it, as long as the service is included into the secondary plan's reimbursable items.

**7. Q: If my doctor opted out of Medicare, but is in the UN plan network, whose responsibility is it to file a claim? How will a doctor make the UN plan administrator know that s/he opted out of the Medicare and should be reimbursed by the UN plan as a primary coverage?**

**A:** Doctors who opt out of Medicare are provided with a Medicare Opt-Out Letter. Most providers who opt out of Medicare are updated in Aetna and Blue Cross's Provider Databases already. However, if the insurance carrier does not have record that the provider opted out of Medicare, the provider could include that information with the claims that are submitted. (i.e. copy of the Medicare Opt-Out Letter)

**8. Q: How do I file my claims for the doctors who are out of the UN plans' network and opted out of Medicare?**

**A:** The itemized bill or claim can be submitted directly to Aetna or Blue Cross. Providers who have opted out of Medicare should include that information with the claim. If neither

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Aetna nor Blue Cross has a record that the provider has opted out of Medicare, the claim may be pending for a Medicare EOB/Copy of Medicare Opt-Out Letter.

**9. Q: Will I be reimbursed for the 20% that Medicare does not pay for?**

**A:** The UN insurance plan (Aetna, Blue Cross, or HIP) will pay up to the remaining 20% as applicable and if the services are covered.

**10. Q: Do I have to pay the \$155 annual Medicare deductible?**

**A:** The UN insurance plans (Aetna, Blue Cross, or HIP) will cover the \$155 yearly Medicare deductibles each year.

## Section IV: UN Subsidy /Reimbursement

**1. Q: How will I be reimbursed for the Medicare Part B premium by the UN?**

**A:** The reimbursement will be made by reducing your monthly ASHI contribution. For most retirees, the ASHI contribution is automatically deducted from their pension with the United Nations Joint Staff Pension Fund (UNJSPF). Therefore, you will see a lower ASHI deduction from your net UNJSPF monthly pension. If the reimbursement amount is higher than your monthly ASHI contribution, the UN will first reduce your ASHI deduction down to zero. Then the UN will pay you a lump sum for the difference on a quarterly or yearly basis.

- For example, if your monthly ASHI contribution is \$200.00, and:
  - your monthly Medicare premium is \$110.00, the UN will only deduct \$90.00 from your pension;
  - your monthly Medicare premium is \$320.00, the UN will not deduct anything from your pension and you will accumulate \$120.00 monthly that will be paid to you on a quarterly basis.

Please note that the ASHI team will need to receive a duly filled Medicare Part B Reimbursement form and the required attachments before refunding any premiums.

**2. Q: How do I provide proof of payment if I do not receive monthly or quarterly premium statements from Social Security?**

**A:** You may contact Social Security and request a “Social Security Benefit Verification” document. You may request this document online at [www.socialsecurity.gov](http://www.socialsecurity.gov), by calling 800-772-1213, or by visiting your local Social Security office

## Section V: Miscellaneous

**1. Q: How do I pay my Medicare premiums if I don't receive a Social Security check?**

**A:** If you do not receive a social security check, you will be billed by Medicare for Medicare Part B premiums once every quarter. However, if you sign up for the direct payments, the premium will be deducted from your account monthly.

**2. Q: Will I be experiencing lower quality medical service from providers and hospitals, now that I have Medicare?**

**A:** You maintain your full right to choose the doctor of your choice. The quality of medical service from doctors rather depends on each individual provider and quality of his/her skills. Evaluating your medical providers should always take place regardless of the type of insurance you have. There is also a large variation in quality of hospitals.