

New Medicare Part B premium rates effective 1 January 2023

Dear Friends,

This message is primarily for retirees who are US citizens or residents and are eligible and enrolled in Medicare Part B.

As you are aware, immediately upon attaining 65 years of age, enrollment in Medicare Part B is mandatory for all eligible retirees and their dependants who participate in the United Nations US-based After Service Health Insurance (ASHI) plan. (For requirements see “Understanding Medicare Part B for US-based plan participants at: www.un.org/insurance/content/retirees.)

Both the standard Medicare Part B premium and the “income-related monthly adjustment amount” (IRMAA), if applicable, are reimbursed by the UN on a monthly basis.

Any revisions to the Medicare Part B standard premium and Income-Related Monthly Adjustment (IRMAA) amounts are announced by the Social Security Administration every year, with the most recent change in rates taking effect 1 January 2023. In this context, the United Nations Health and Life Insurance Section (HLIS) provided the information noted below. The reduction in the standard premium from last year’s rate of \$170.10 to the 2023 rate of \$164.90 will be reflected in the reimbursement that the UN will deposit in your bank account towards the end of January 2023.

The Social Security Administration (SSA) sent out letters advising retirees of their new Income-Related Monthly Adjustment Amount in November 2022. If you are subject to an Income-Related Monthly Adjustment Amount (IRMAA), please note the IRMAA will **not** be reflected in your monthly reimbursement **unless and until** you submit the Medicare Part B **annual** premium reimbursement request form and the necessary supporting document from the Social Security Administration (SSA) to the HLIS for processing.

Reimbursement requests must be submitted to the HLIS by the middle of a month to be reflected in that month's Medicare Part B reimbursement. Your January reimbursement will, therefore, have been reduced to the standard amount of \$164.90 if you were not able to submit your reimbursement request form and supporting SSA letter to the HLIS by the mid-January cut-off.

Adjustments for IRMAA can be processed retroactively so if you have not as yet submitted your annual premium request form and document from the SSA indicating the IRMAA amount to the HLIS, do so as soon as possible to have your reimbursement appropriately adjusted.

Message from the Health and Life Insurance Section (HLIS) at the United Nations

"The Health and Life Insurance Section (HLIS) wishes to inform all Medicare B participants that effective 1 January 2023 the monthly Medicare Part B Standard Premium is \$164.90.

If your Medicare Part B Premium is the Standard Rate, please be advised that no action is required by you as HLIS will adjust your reimbursement to the new Standard Rate.

If your Medicare Part B Premium is higher than the Standard Rate and you have not already notified HLIS, kindly submit a completed Medicare Part B Premium Reimbursement Request form with the supporting documents.

The Medicare Part B Premium Reimbursement Request form and Checklist are available on HLIS website, www.un.org/insurance, and appended below for ease of reference:

- [Medicare Part B Annual Reimbursement Request FormPDF](#)
- [Medicare Part B Reimbursement ChecklistPDF](#)

Additional information related to Medicare Part B premiums and reimbursements and responses to frequently asked questions are provided in the attached Annex.

Thank you very much.

Wishing you and your families all the best wishes for a very Happy, Peaceful and most of all a very Healthy New Year.

Kind regards,

Jay Karia, Co-Chair Health Insurance Committee AFICS/NY

Dr. Sudershan Narula, Co-Chair Health Insurance Committee
AFICS/NY

Deborah Landey, President AFICS/NY

ANNEX

Related information on Medicare Part B based on some frequently asked questions:

Why is there a reduction in the standard Medicare Part B premium?

Each year the standard Medicare Part B premium is determined by the Social Security Administration which, inter-alia, considers reserve balances in the Part B account of the Supplementary Medical Insurance (SMI) Trust Fund. The premium for 2022 included a contingency margin to cover projected Part B spending for a new drug, Aduhelm, which had been approved by the FDA in 2021 for treatment of Alzheimer's disease. Spending on both Aduhelm and other Part B items and services were, however, lower-than-projected resulting in excess SMI reserves. The \$5.20 reduction in the standard Medicare Part B premium for 2023 resulted from the recommendation by the Centers for Medicare & Medicaid Services to pass along this excess to people with Medicare Part B coverage.

My Medicare Part B reimbursements last year included the additional IRMAA charge, but my January 2023 reimbursement was only for the standard amount of \$164.90. Since I was receiving reimbursement for IRMMA last year why was this not automatically provided this year?

Each year the Social Security Administration (SSA) develops the income threshold and brackets for each filing status and the related amount of IRMAA payable based on the income reported in tax returns of two years ago. For example, for 2023 the SSA looks at the income data you filed on your 2021 tax return. As the income brackets and related IRMAA surcharges are revised each year, and adjusted gross income typically differs from year to year, the IRMAA will also typically differ from one year to the next. In some cases, individuals may have to pay the adjustment one year, but not the next if their income falls below the threshold. As such, Medicare Part B reimbursements are automatically reduced to the standard amount until a request for the IRMAA component is received. Once the annual request for reimbursement reflecting the IRMAA amount with the supporting copy of the SSA letter is received and processed by HLIS the Medicare Part B reimbursements will be adjusted accordingly retroactive to 1 January 2023.

I have been paying for Medicare Part B but I am not getting Medicare reimbursements from the UN. What should I do?

It is important to file for the reimbursement of Medicare Part B premium as soon as you enroll in Medicare. The submission to HLIS of a Medicare Part B Reimbursement Request form along with the requested supporting Medicare documents is required to initiate premium reimbursements. If you are having Medicare B premiums deducted from your Social Security payments or paying the premiums directly to Social Security Administration, you should apply for reimbursement following the below checklist and

reimbursement request form. Retroactive premium reimbursements are possible but only for up to 2 years from the date of submission.

- Medicare Part B Annual Reimbursement Request FormPDF
- Medicare Part B Reimbursement ChecklistPDF

I am enrolled in Medicare Part B but my doctor has opted out of Medicare. What is needed to ensure appropriate coverage when submitting claims to Aetna or Blue Cross?

Claims are adjudicated by Aetna and Empire Blue Cross based on eligible Medicare participants having primary coverage under Medicare. Retirees are encouraged to utilize doctors that accept Medicare and are in the network of Aetna or Empire Blue Cross, as relevant. However, should your doctor have opted out of Medicare he or she will need to give you a letter attesting to this and specifying the opt-out period. A copy of this opt-out letter will need to be submitted to Aetna or Empire Blue Cross every time you submit a claim for medical services provided by this doctor in order for the plan to properly process your claims.

I am covered under the US-based health insurance plans and am over age 65 but am not eligible for Medicare. How do I ensure that my medical claims are adjudicated properly by Aetna or Empire Blue Cross?

Aetna and Empire Blue Cross routinely adjudicate medical claims for ASHI participants over the age of 65 based on the assumption that participants have enrolled in Medicare B. If you are not eligible for Medicare, you will need to obtain a letter from the Social

Security Administration that specifically states that you are not eligible for Medicare Part B. This letter needs to be submitted to the Health and Life Insurance Section of the UN for their appropriate recording in the Aetna or Empire Blue Cross database to ensure that your claims will be properly adjudicated without considering Medicare.

I get phone calls or mailings to enroll in Medicare Advantage Plans, should I enroll?

You should **not** enroll in a Medicare Advantage plan. The UN's US-based health insurance plans available to ASHI participants provide comprehensive health insurance coverage and flexibility in choosing health care providers. The UN's plans supplement coverage provided under Medicare A and Medicare B. They are **not** compatible with Medicare Advantage Plans or other Medicare Supplement plans.

Should I enroll in Medicare D for prescription drug coverage?

You should **not** enroll in Medicare D. The UN's Aetna, Empire Blue Cross, and HIP plans each include comparative prescription drug coverage. A review is done annually to ensure that this coverage is at least equal to or better than coverage under Medicare D.