



Medicare Part B Reimbursement Checklist

Required Documents for Initial Submission

- **Medicare Part B Reimbursement Form**
 - Please include bank account details
 - Spouse's reimbursement is made to the primary subscriber's account
 - Please include a void cheque for reimbursement into a checking account
- **Social Security Administration (SSA) or Medicare documents indicating the Medicare Part B premium amount**
 - CMS 500 **OR**
 - 1099/Social Security Statement **OR**
 - Official letter from the Social Security Administration
- **Copy of Medicare Card**

Options for Document Submission

Preferred:

Other:

Email: ashi@un.org

Fax: 917-367-1670

Mail: Health and Life Insurance Section (HLIS)
304 East 45th St., NY 10017

Requirements for Subsequent Years

- **Submit Social Security Administration Documentation**
(if the amount requested is different from the applicable standard amount)
- **Submit Medicare Part B Reimbursement Form** *(if banking details have changed)*
- **Submission is only required once a year**

**Please Note: Medicare Part B reimbursement will only be processed when the HLIS has received all required documents. Medicare Part B payments are only reimbursed retroactive up to 2 years from the date of submission.*

