

Medicare annual open enrollment is October 15th thru December 7th. During this time, you can enroll, change plans, or drop coverage.

Special Enrollment Periods (SEP)

You may qualify for a Medicare SEP when certain events occur but rules regarding allowable changes may be different for each SEP. Examples include terminating employment under your group health plan, losing COBRA coverage, and moving out of service areas. Please check with Medicare directly to confirm if you or a covered spouse is eligible for a SEP.

Medicare and Disability

You may be eligible for Medicare if you become disabled. Medicare generally begins 24 months after you begin receiving Social Security benefits. If you are currently on COBRA, COBRA may end when you sign up for Medicare disability. Be sure you understand which plans you may need and include a prescription drug plan. If you cover a spouse on your group health plan, and they become or are disabled, be sure you understand how your benefits coordinate with spouse's coverage and what plans they may or may not need.

COBRA and Medicare

COBRA is a temporary extension of the health insurance you had while working. Because COBRA does not count as insurance from active employment, you will not be protected from delayed coverage and late penalties if you wait to enroll in Medicare later than you should.

If your Medicare benefits (Part A or Part B) become effective on or before the day you elect COBRA coverage, you can continue COBRA coverage as well as having Medicare. This is true even if your Part A benefits begin before you elect COBRA, but you chose not to sign up for Part B until later.

If you become entitled to Medicare after you've signed up for COBRA, your COBRA benefits may end. (If COBRA covers your spouse and/or dependent children, their coverage may be extended for up to 36 months even though you qualified for Medicare.)

IMPORTANT: *Should you choose to terminate group insurance coverage solely because of your Medicare entitlement, covered dependent(s) will not be eligible for an extension of group insurance coverage through COBRA.*

Medicare and Health Savings Accounts (HSA)

An HSA is an interest-bearing account where funds may be used to help pay employee and/or family deductible, coinsurance and any qualified health care expenses not covered by their group health plan.

- If you are enrolled in Medicare, you are NOT eligible to contribute funds into an HSA. In addition, the IRS prohibits employers from contributing HSA funds.
- If you are NOT enrolled in Medicare, then you are eligible to enroll and contribute into an HSA up to the maximum contribution amounts.
- If you are an ACTIVE employee NOT on Medicare but covering a spouse that is enrolled in Medicare, you are eligible to enroll and contribute into an HSA up to the maximum contribution amounts. These funds can be utilized for the active employee and spouse expenses.
- If you are an ACTIVE employee ON Medicare and covering a spouse NOT enrolled in Medicare, you may not contribute or receive any HSA funding. Any remaining balance in an HSA account can be utilized until there are no funds remaining.

Questions?

- Talk to your HR/Benefits Staff about your group health plan and how it coordinates with Medicare
- Visit Medicare.gov or speak to a Medicare representative 1-800-MEDICARE (1-800-633-4227)
- SHINE (Serving Health Insurance Needs of Elders) Floridashine.org or 1-800-963-5337