



New Hire - Required Enrollment in Medicare Part A and Part B upon Eligibility

Congratulations on becoming a State of Delaware employee! As an active benefit eligible employee you will be offered the opportunity to enroll in health coverage through the State of Delaware Group Health Insurance Plan (GHIP). Currently, a number of benefit plans are available to you through Aetna and Highmark Delaware. Information on these plans as well as the [GHIP Eligibility and Enrollment Rules](#) can be found on SBO's website.

As a participant in benefit plans administered by the Group Health Insurance Plan, you must be aware of your responsibilities and obligations with regards to your benefit coverage. Specifically, this Letter of Understanding is intended to provide you with important information regarding required enrollment in Medicare Part A and Part B upon eligibility based upon age or disability.

- **Medicare Part A** usually has no premium and helps to cover inpatient care in a hospital or skilled nursing facility.
 - Active employees and their spouse are **required** to enroll when they reach age 65 and may continue to be enrolled in the GHIP.
- **Medicare Part B** has a monthly premium (an amount determined by the Social Security Administration) and helps cover doctors' services, some medical services and some supplies not covered by hospital insurance.

You are **required** to enroll in Medicare Part A upon eligibility due to age or disability; however, enrollment in Medicare Part B is optional as long as you are **1)** an active employee working in a benefit eligible position, or **2)** the spouse of an active employee working in a benefit eligible position.

If you enroll in Medicare Part A and Part B and choose Medicare as your primary insurer while you are eligible for coverage as an active employee or as a spouse of an active employee through the GHIP, **Medicare will be your primary payer and you will not be eligible to participate in any health plan offered by the State of Delaware.**

Additional information on Medicare can be obtained at your local Social Security Administration Office, on Medicare's website at www.medicare.gov or by contacting the State of Delaware, Department of Insurance's Delaware Medicare Assistance Bureau (DMAB) at 1-800-336-9500 or online at www.insurance.delaware.gov/divisions/dmab.

STATE OF DELAWARE STATEWIDE BENEFITS OFFICE

841 Silver Lake Boulevard, Suite 100, Dover, Delaware 19904 (D620E)
Phone: 1-800-489-8933 • Fax: (302) 739-8339 • Email: benefits@delaware.gov • Website: de.gov/statewidebenefits

The situations listed below represent examples of when enrollment Medicare Part A and/or Medicare Part B is required:

Example One:

- *Active employee, or active employee's spouse, enrolled in a State of Delaware GHIP plan turns 65.*
 - Enrollment in Medicare Part A is **required**,
 - Enrollment in Medicare Part B is not required until active employee retires or no longer has active employer health coverage.
- *Please remember that should you choose Medicare as your primary insurer now as an active employee, or as the spouse of an active employee, the GHIP **does not** offer or subsidize a health care plan to supplement Medicare benefits; therefore, you will **no longer be eligible** for health coverage through the State of Delaware.*

Example Two:

- *Pensioner, or pensioner's spouse, enrolled in a State of Delaware GHIP plan, not covered by another active employer's health plan, turns 65 or becomes disabled.*
 - Enrollment in Medicare Part A is **required**,
 - Enrollment in Medicare Part B is **required**,
 - Eligible to enroll in Medicare Supplement plan (Highmark Delaware Special Medicfill plan) with or without prescription coverage (SilverScript Medicare PDP plan).

Example Three:

- *Pensioner, or pensioner's spouse enrolled, in a State of Delaware GHIP plan and covered under another active employer's health plan (under the pensioner or spouse) turns 65 or becomes disabled.*
 - Enrollment in Medicare Part A is **required**,
 - Enrollment in Medicare Part B can be deferred until no longer covered under active employer's health plan,
 - Eligible to remain enrolled in a State of Delaware GHIP non-Medicare plan until no longer covered under active employer's health plan.
 - Active employer's health plan will provide primary coverage.
 - The State of Delaware GHIP non-Medicare plan would be secondary.

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Special enrollment rules apply to those diagnosed with End-Stage Renal Disease (kidney disease) or Amyotrophic Lateral Sclerosis (ALS), also known as Lou Gehrig’s disease. More information on Medicare enrollment is also located on [SBO’s website](#).

Failure to enroll and maintain enrollment in Medicare Part A and Part B upon eligibility may result in you, as the subscriber, being held financially responsible for the cost of claims incurred, including prescription costs, for you and your spouse.

You are responsible for providing your Medicare Identification Card for you and your spouse, if applicable, to your Benefit Representative, if an active employee, or the Office of Pensions, if a pensioner, upon enrollment. Pensioners enrolled in Medicare Part A and Part B must provide a copy of their Medicare Identification Card to the Office of Pensions to be enrolled in the GHIP’s Special Medicfill plan, a supplemental plan to Medicare.

PLEASE NOTE: If you cover a spouse under your Highmark Delaware or Aetna health plan, you are required to complete a Spousal Coordination of Benefits Form online in order to determine your spouse’s eligibility status. It is important to note that completion of the Form does not automatically guarantee coverage for your spouse. **Failure to complete a SCOB Form when required will result in a reduction of your spouse’s coverage.** Forms should be completed online at de.gov/statewidebenefits, “Select your Group” and then choose the **Spouse and Dependents** icon. The *Electronic Form* and a *Self-Service Guide* are located under the **FORMS** section on the “Spouse” tab.

By acknowledging or signing this letter, you confirm your understanding of enrollment in Medicare Part A and Part B, upon eligibility based on age or disability for yourself and your spouse, if applicable. Questions and concerns may be directed to the Statewide Benefits Office at 1-800-489-8933.

Employee’s Signature

Date

Employee’s Name

Original: Employee Personnel File
Copy: Employee

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