ELIGIBILITY

Find out what's required for retiree health coverage

You're Eligible If...

- ☐ You have the required years of service and
- You'll be receiving a pension check in retirement effrement

Or

You're a member of a pension system not maintained by the City, but covered under special agreement, such as CUNY employees

Please Note:

Even if you're choosing to waive health coverage, you must still complete the enrollment process and select "waive coverage" on your application.



If You're Not Eligible:

- You can purchase Health Coverage through COBRA
- Purchase coverage directly through an insurance company
- Purchase coverage made available by the Affordable Care Act

OPTIONS

What you are able to change upon retirement

Covered Dependents

You can add or drop dependents

Eligible dependents include:

- Legally married spouse or registered domestic partner
- Children under the age of 26
- Disabled dependents covered prior to retirement

Optional Rider

Depending on your union/welfare fund, you may be required to purchase an optional rider to cover expenses not included in your basic plan, such as:

- Prescription Drugs
 - Or, if you're not eligible for Medicare:
- Private duty nursing and appliances
- Enhanced reimbursement schedule

Changing Plans:

Must continue your current plan unless



You're retiring during a transfer period, or



You're moving outside your current plan's service area, or



You or a covered dependent are eligible for Medicare.

MEDICARE

Available to retirees and dependents age 65 or older or disabled

Parts A & B

Medicare Part A: Hospital Insurance

- Medicare Part A is available at no cost
- It's best to sign up 3 months prior to turning age 65 regardless of whether you're still working or retired

Medicare Part B: Medical Insurance

Medicare Part B has monthly premiums that are based on income. Enroll prior to your retirement date. Delaying can lead to lifelong penalties.

If you're collecting Social Security, your Part B premiums are deducted directly from your Social Security payments. If you're not collecting Social Security, you'll receive a monthly bill.

Some individuals with higher incomes may pay higher Part B premiums. This is known as your *Income Related Monthly Adjusted Amount (IRMAA).*

Medicare Reimbursement

The City reimburses Medicare Part B premiums provided that:

- The Individual is enrolled in a City health plan with "Medicare Status" and
- A Copy of the individual's Medicare card has been received by the Health Benefits Program

Medicare Part B reimbursement is made once a year, generally in the summer, for premiums paid during the prior calender year. Note that any Part B penalties you incur will not be reimbursed.

IRMAA reimbursement is separate from the standard reimbursement. You must re-enroll every year if you qualify, and your IRMAA reimbursement will be paid after your standard reimbursement.

ENROLLMENT

Submitting your application & Medicare documentation

Application Certification

Bring your Health Benefits Application

to your agency benefits representative for certification.



If you're Medicare Eligible

- You must also submit a copy of your Medicare
 Card or Medicare Award Letter
- You or your agency benefits
 representative must submit the completed
 application along with your Medicare
 documentation (if applicable) to the Health
 Benefits Program.



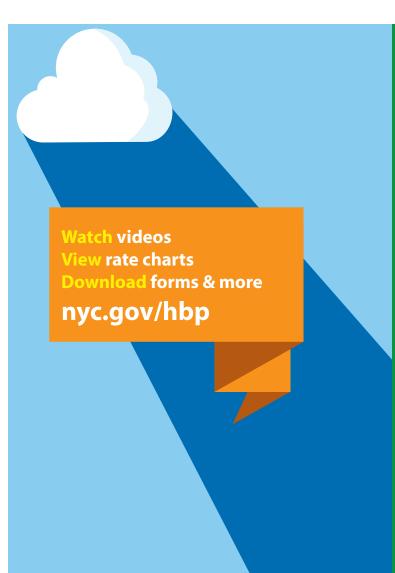
Medicare HMO Enrollees

If you're enrolled in a Medicare HMO Plan, you must obtain a Special Enrollment Application directly from the health plan and also submit a copy to the Health Benefits Program.









22 Cortlandt Street, 12th Floor New York, NY 10007 Phone: (212) 513-0470 Fax: (212) 306-7756 TTY: Hearing impaired: (212) 306-7753

- dependents

tificate number, date(s) of service, and claim number(s), if applicable. Some plans also allow inquiries through their websites.

Medicare

To enroll in Medicare, call 1-800-Medicare, visit socialsecurity.gov/ medicare, or go to your local Social Security Office.

Notes FAQs Who Do I Contact After Retirement? Retirees can contact the Health Benefits Program: • For questions concerning eligibility, enrollment and health benefits • For questions regarding deductions for health benefits taken from your pension check For Transfer Period information • To obtain applications to make changes to your coverage, such as adding/dropping dependents, adding/dropping the optional rider, waiving health coverage and to change plans (excluding Medicare HMOs, which require a special application from the health plan). • For notification of enrollment in Medicare • For questions regarding Medicare Part B premium reimbursements • To obtain information and an application for COBRA benefits • To change your address • If health coverage has been terminated for you and/or your When Should I Contact My Health Plan? Retirees should write or call the health plan directly: • For questions regarding covered services • To obtain written information about covered services • For information about the status of pending claims or claim • For claim allowances (How much will a plan pay towards a claim?) • For health plan service areas When writing to a health plan, include your name and address, cer-Refer to your health plan ID card or Plan booklet for telephone When to Contact My Union/Welfare Fund Retirees should write or call their Welfare Fund/Union directly for information about: - Prescription drug coverage Vision benefits Dental benefits Life Insurance

PROGRAM Transition to Retirement Seminar Begin the application process at least **To Your Retirement**

Four Weeks Prior

Visit your doctor & refill prescriptions at least 2-3 weeks before retiring

