

MEDICARE GUIDEBOOK

An Employee's Guide to ezICHRA and Medicare

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Medicare Guidebook

Medicare – 65 and Older

Employees and spouses who are eligible for Medicare are encouraged to enroll in Medicare Parts A and B. You are not required to do so, but we feel it is in your best interest to avoid penalties. If you do not enroll in Medicare now, you could face a penalty when you enroll later. This penalty will apply to both Medicare Part B and Part D premiums you pay in the future. The penalty applies because Individual health insurance coverage is not considered to be "credible" by Medicare. The great news is that you can use your ICHRA funds to pay for Medicare Part B premiums, Medicare Advantage Plan premiums, and Medicare Supplement plans (with or without a separate drug plan). In most cases, the ICHRA benefit is sufficient to cover all of the premiums associated with Medicare policies.

Getting set up for Medicare

- This process can take a month or more with Social Security, so we encourage you to begin working on setting up Medicare two months before you need Medicare to be effective.
- You will automatically begin receiving emails and calls from our office beginning 150 days from you turning 65.
- Our agents are here to help you through the Medicare process and with the selection of your supplemental plans.

ezICHRA and Medicare

You will pay your Medicare premiums upfront you and be reimbursed by your employer.

Turning 65

- If you are not currently enrolled in a policy with your employer's ICHRA, you will need to access the ezICHRA website about two months prior to turning 65. Your employer will need to add your Qualifying Event to your ezICHRA portal. Once you access the website, if you have not done so already, you will need to complete the personal information and begin the Medicare tab.
- If you work with one of our agents, they will cancel or transition your current individual policy to your spouse as policyholder to be effective for the day Medicare takes effect. Our office will also be responsible for any payments on your individual plan that is continued on by your spouse.
- You are not required to get your Medicare plans through our office; however,
 - we will call you to inform you that in order to be reimbursed for your
 Medicare expenses we will need copies of the Part B invoice or Social
 Security letter only if you have an IRMAA applied to the base Medicare rate



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- and a copy of one invoice per carrier for Medicare expenses each year to provide to your employer for verification of the reported expenses to be reimbursed.
- If you have an ACA plan, we will need to get permission to cancel or transition your policy to your spouse as policyholder to be effective for the day Medicare takes effect. Our office will also handle the changes in Echo for the monthly premium payments. This communication is vital to occur <u>prior</u> to the Medicare effect date.

Documentation for Reimbursement

Employees who enroll in Medicare by an agent outside our office will need to provide documentation for reporting to be reimbursed correctly.

- Documentation will need to be given to HR personnel for verification and substantiation.
 Any changes to the portal will need to have a Qualifying Event added and the individual's portal updated.
- Documentation includes:
 - Part B invoice or Social Security letter showing the Part B premium and any IRMAA charges; REQUIRED for ALL Medicare reimbursements beyond the current year's base rate.
 - REQUIRED for all individuals who used an outside broker. If the individual has an MAPD; they will only have one invoice/bank statement that is going to be sent. If the individual chose a Medicare Supplement plan, they will send invoice/bank statement for both the Medicare Supplement and the PDP.
 - Medicare Supplement invoice or bank statement showing the name of the carrier as proof of the expense
 - Prescription Plan (PDP) invoice or bank statement showing the name of the carrier as proof of the expense
 - Medicare Advantage Plan (MAPD) invoice or bank statement showing the name of the carrier as proof of the expense

Retirement/Leaving Employment

Any employee of Medicare age who is leaving the company or retiring, should be reported to the ezICHRA team. This will allow us to maintain our records and remove them from your company's listing. They will still continue to work with us regarding their Medicare if one of our agents is the broker of record; however, they will be responsible for their Medicare expenses without reimbursement from the company.



Whether you are getting ready to turn 65 or are new to ICHRA and need to transition to Medicare the process will be the same. Our Medicare Specialists are here to help you transition from where you are with Medicare through enrollment into your supplemental plans.

- 1. Enrolling in Part A and Part B. Our Medicare Specialists can walk you through the process; however, you will need to complete the enrollment yourself as we are not permitted to do so. The Medicare Specialist will advise you to go to https://www.ssa.gov/medicare/sign-up or make an appointment with your local Social Security office for an in-person visit to enroll. It can take up to 45 days to get your Medicare in place. Please be sure to complete this process as soon as possible to allow time for Medicare to process your enrollment.
- 2. Selecting Appropriate Supplemental Plans. While you are waiting for your Medicare card (or Part B if Part A was already in place), you should work with your Medicare Specialist to identify which supplemental plans would best suit your needs. To assist your Medicare Specialist, update your ezICHRA portal with any pertinent information or complete a Medicare Data Form. This information will be used in conjunction with discussions with you as to what would work best for you medically and financially.
- 3. Once you have received your Medicare Card (or notification that Part B is effective), please reach out to your Medicare Specialist and they will enroll you in the supplemental plan(s) you chose.

ICHRA Reimbursement Information (if reimbursement is applicable)

- Medicare premiums are **paid by you each month** directly to Medicare (either via Social Security deductions or a quarterly invoice) and the carriers for the chosen supplemental plans.
- Your premium information must be entered in your ezICHRA portal for your employer to reimburse you, if applicable. If you used a Medicare Specialist outside of UROne Benefits, you must provide your HR Person with copies of your invoices to substantiate the costs of your Medicare premiums entered in your ezICHRA portal. If a UROne Benefits representative assisted you, he/she will substantiate the costs on your behalf.
- Your employer may request a copy of an invoice for your supplemental plans to ensure your plan is active for reimbursement purposes as well.

Updated: 8/14/25





WHAT IS MEDICARE?

Medicare is the health insurance program run by the Federal Government. It is available to those 65 and older, those under 65 with certain disabilities, and those with end-stage renal disease.

ASSEMBLING THE RIGHT COVERAGE

Assemble different types of coverage

Original Medicare



Combine the parts into one plan **Medicare Advantage Plans**









Drug Coverage

Optional coverage by approved private companies.



Medicare Supplemental Insurance

Optional coverage from private insurance companies that fill gaps in Original Medicare Coverage.



PART C

(HMOs and PPOs)

Combines Part A (Hospital) and Part B (Medical) and in some cases, Part D (Prescription Drugs)

It's not supplemental coverage. A variety of plans are offered by private insurance companies approved by Medicare.

WHEN TO ENROLL IN MEDICARE?

You can enroll in Original Medicare Part A and B during your Initial Enrollment Period (IEP).

- Starting three months before your 65th birthday
- The entire month of your 65th birthday
- Ending three months after your 65th birthday

HOW TO ENROLL IN MEDICARE?

- Call 1-800-722-7331
- Sign up at your local Social Security office
- Online at www.ssa.gov

CHOOSING THE RIGHT MEDICARE COVERAGE

Choosing the right Medicare Coverage is an important decision. It's not a "one size fits all" situation because everyone has different needs and budgets.

To assist you, we have designed a Personal Information Sheet for you to complete. This information, coupled with the answers to your questions, will help determine the right type of Medicare Coverage, benefits, out-of-pocket expense and cost to meet your personal health care needs and budget.

MEMBER INFORMATION

NAME				DA	I E OI	- RIK I H				
PHONE				EM	AIL					
MEDICARE CLAIM	#									
PART A EFFECTIVE	EFFECTIVE DATE PART B EFFECTIVE DATE									
HOME ADDRESS										
CITY				STA	ATE					
ZIP CODE COUNTY										
				MY R	x LIS	ST				
MEDICATION NAME			DOSAGE		QUANTITY		DAY SUPPLY		MAIL ORDER/RETAIL	
									E	
							+			
M	Y DOCTOR	RLIST					MY F	105	SPITAL LIS	ST
DOCTOR NAME	ZIP CODE	PHONE	E	SPECIAL	_TY	НС	SPITAL		ZIP CODE	PHONE

Once you have reviewed the "Pieces to the Puzzle" call **1-800-722-7331** for one-on-one help from our Medicare Enrollment Specialists.

ADDITIONAL Rx

ADDITIONAL IX											
MEDICATION NAME	DOSAGE	QUANTITY	DAY SUPPLY	MAIL ORDER/RETAIL							
		1									