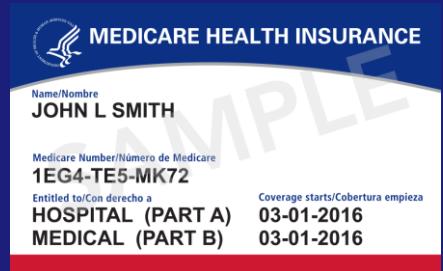


# How & When to sign up for Medicare



## You may be enrolled AUTOMATICALLY...

- If you are receiving Social Security benefits, you will automatically be enrolled in Medicare Parts A and B the same month that you turn 65 (or the previous month if your birthday is on the first day of the month).
- If you are disabled, you will receive coverage under Medicare Parts A and B starting the 25<sup>th</sup> month of receiving your disability entitlement (benefits payments) from Social Security provided that you have enough work credits to qualify for premium-free Part A of Medicare.

## You may have to enroll YOURSELF...

- If you ARE NOT collecting Social Security when you are Medicare eligible (at least three months before your 65<sup>th</sup> birthday) you have to sign up or "enroll" in Medicare. You can do this by clicking [here](#). You can also choose to make an appointment and sign up in person or call the Social Security office at 1-800-772-1213. Click [here](#) to find out when our coverage will start.
- If you have a Medicare card with Part A only because you signed up for Part A of Medicare and waived Part B (or delayed it). In this case, any point before your coverage ends or up to eight months afterwards you have a specific right to enroll in Medicare Part B. You should mail in [both forms](#) or better yet, [fax them](#), or complete online [here](#) (online is the quickest/best option).

## You may NOT need Medicare...

- If you or your spouse have health coverage through an employer and are still working, you may not need or want Medicare yet. If you are eligible for health coverage through your retirement benefits, you will need to sign up for Medicare. **We** will help you compare additional insurance coverage to go along with your Medicare plan.

Why navigate a complex field alone when you can work with a local professional at no cost? Let me ease the process of selecting the right Medicare plan for you or your loved one.

Call **865-264-0370** or email [heather@citins.com](mailto:heather@citins.com) and let me guide you through your Medicare options!





# What are the parts of Medicare?

Provided by: The Federal Government

## Part A (Hospital Insurance)

Helps cover:

- Inpatient care in hospitals
- **Skilled nursing facility care**
- Hospice care
- Home health care



- **Free for most people**
- **Listed on your RWB card**
- **All services have different cost sharing to YOU**

## Part B (Medical Insurance)

Helps cover:

- Services from doctors and other health care providers
- Outpatient care
- Emergency Room visits
- Durable medical equipment (like wheelchairs, walkers, hospital beds, and other equipment)
- Many **preventive services** (like screenings, shots or vaccines, and yearly "Wellness" visits)



- **Most people pay a monthly BASE Premium (\$185.00 in 2025)**
- **Listed on your RWB card**

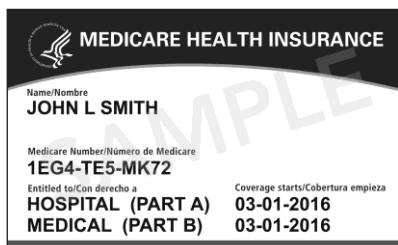
## Part D (Drug Coverage)

Helps cover the cost of prescription drugs (including many recommended shots or vaccines).



Plans that offer Medicare drug coverage (Part D) are run by private insurance companies that follow rules set by Medicare.

- **Private insurance that contracts with Medicare**
- **Required or penalized**



## Replace your Medicare card

If you need to replace your Medicare card because it's damaged or lost, log into (or create) your secure Medicare account at [Medicare.gov](https://www.medicare.gov) to print or order an official copy of your Medicare card. You can also call 1-800-MEDICARE (1-800-633-4227) and ask for a replacement card to be sent in the mail. TTY users can call 1-877-486-2048.



## AT A GLANCE

# Original Medicare vs. Medicare Advantage



## Doctor & hospital choice

Original Medicare	Medicare Advantage (Part C)
You can go to <b>any doctor or hospital that takes Medicare, anywhere in the U.S.</b>	In many cases, you'll need to only use <b>doctors and other providers who are in the plan's network</b> (for non-emergency care). Some plans offer non-emergency coverage out of network, but typically at a higher cost.
In most cases, you <b>don't need a referral</b> to see a specialist.	You <b>may need</b> to get a referral to see a specialist.



## Cost

Original Medicare	Medicare Advantage (Part C)
<b>Unless you have a Medicare Supplement</b>	For Part B-covered services, <b>you usually pay 20% of the Medicare-approved amount</b> after you meet your <b>deductible</b> . This is called <b>coinsurance</b> .
You <b>pay a premium (monthly payment) for Part B</b> . If you choose to join a Medicare drug plan, you'll pay a separate premium for your Medicare drug coverage (Part D).	<b>Out-of-pocket costs vary</b> – plans may have different out-of-pocket costs for certain services.
There's <b>no yearly limit</b> on what you pay out of pocket, unless you have supplemental coverage – like Medicare supplement insurance ( <b>Medigap</b> ).	You pay the monthly <b>Part B premium</b> and may also have to <b>pay the plan's premium</b> . Plans may have a \$0 premium and may help pay all or part of your Part B premium. Most plans include Medicare drug coverage (Part D).
<b>Around \$150 or More EXTRA</b>	Plans <b>have a yearly limit</b> on what you pay out of pocket for services Medicare Part A and Part B covers. Once you reach your plan's limit, you'll pay nothing for services. Part A and Part B covers for the rest of the year.
You <b>can get Medigap to help pay</b> your remaining out-of-pocket costs (like your 20% coinsurance). <b>**People can be refused**</b>	<b>You can't buy and don't need</b> Medigap. <b>They restrict your doctors &amp; impose rules.</b>
<b>Health questions asked</b>	<b>Or, you can use coverage from a former employer or union, or Medicaid.</b>

Some people whose main objective is to save money, get extras (including restrictions)

Many are \$0 premium extra

MOOP (Maximum out of pocket) around \$8K

Is that ok with you?



## Coverage

Original Medicare	Medicare Advantage (Part C)
Original Medicare covers most <b>medically necessary</b> services and supplies in hospitals, doctors' offices, and other health care facilities. Original Medicare doesn't cover some benefits like eye exams, most dental care, and routine exams. See page 55.	Plans must cover all of the medically necessary services that Original Medicare covers. Most plans offer some <b>extra benefits that Original Medicare doesn't cover</b> – like some routine exams and vision, hearing, and dental services.
You can join a <b>separate Medicare drug plan</b> to get Medicare drug coverage (Part D).	<b>Medicare drug coverage (Part D) is included in most plans.</b> In most types of <b>Medicare Advantage Plans</b> , you can't join a separate Medicare drug plan.
<b>Around \$40 EXTRA per month</b>	
<b>&gt;&gt; IS THIS IMPORTANT TO YOU? &lt;&lt;</b>	
In most cases, you don't have to get a service or supply approved ahead of time for Original Medicare to cover it.	In some cases, you have to get a service or supply approved ahead of time for the plan to cover it.



## Foreign travel

Original Medicare	Medicare Advantage (Part C)
Original Medicare generally <b>doesn't cover care outside the U.S.</b> You may be able to buy a <b>MEDICARE SUPPLEMENT INSURANCE (MEDIGAP)</b> policy that <b>COVERS</b> emergency care outside the U.S.	Plans generally <b>don't cover care outside the U.S.</b> Some plans may <b>OFFER</b> a supplemental benefit that <b>COVERS</b> emergency and urgently needed services when traveling outside the U.S.



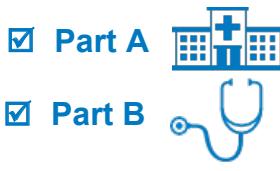
# Your Medicare Options

When you first enroll in Medicare during certain times of the year, you can choose how you get your Medicare coverage. There are 2 main ways to get Medicare:

You pay for A & B  
no matter which  
option you choose

## Original Medicare

- Original Medicare includes Medicare Part A (Hospital Insurance) and Part B (Medical Insurance).
- You can join a separate Medicare drug plan to get Medicare drug coverage (Part D).
- You can use any doctor or hospital that takes Medicare, anywhere in the U.S.
- To help pay your out-of-pocket costs in Original Medicare (like your 20% **coinsurance**), you can also shop for and buy supplemental coverage.



You can add:



You can also add:

**Supplemental coverage**  
This includes Medicare Supplement Insurance (**Medigap**). See Section 5 (starting on page 75) to learn more about Medigap. Or, you can use coverage from a former employer or union, or Medicaid.

See Section 3 (starting on page 57) to learn more about Original Medicare.

## Medicare Advantage (also known as Part C)

**The options aren't just about cost**

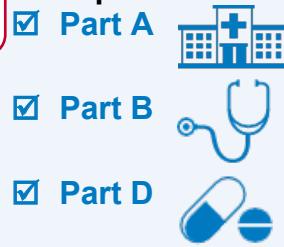
- Medicare Advantage is a Medicare-approved plan from a private company that offers an alternative to Original Medicare for your health and drug coverage. These "bundled" plans include Part A, Part B, and usually Part D.
- In most cases, you'll need to use doctors who are in the plan's network.
- In most cases, you'll need to use doctors who are in the plan's network.
- Plans may have lower out-of-pocket costs than Original Medicare.
- Plans may offer some extra benefits that Original Medicare doesn't cover—like vision, hearing, and dental services.

**Ask yourself:**  
Are they  
equal?



**Is this  
about  
money?**

**Most plans include:**



**Some extra benefits**

**Some plans include:**

**Lower out-of-pocket costs**

See Section 4 (starting on page 61) to learn more about Medicare Advantage.



# 2025 Medicare Costs

## Medicare Part A (Hospital Insurance) Costs

### Part A Monthly Premium

Most people don't pay a Part A premium because they paid Medicare taxes while working. If you don't get premium-free Part A, you pay up to \$518 each month.

### Hospital Stay

In 2025, you pay

- ✓ \$1,676 deductible per benefit period
- ✓ \$0 for the first 60 days of each benefit period
- ✓ \$419 per day for days 61-90 of each benefit period
- ✓ \$838 per "lifetime reserve day" after day 90 of each benefit period (up to a maximum of 60 days over your lifetime)

### Skilled Nursing Facility Stay

In 2025, you pay

- ✓ \$0 for the first 20 days of each benefit period
- ✓ \$209.50 per day for days 21-100 of each benefit period
- All costs for each day after day 100 of the benefit period

## Medicare Part B (Medical Insurance) Costs

### Part B Monthly Premium

The standard **base** Part B premium amount in 2025 is \$185.00 or higher depending on your income. Social Security will tell you the exact amount you'll pay for Part B in 2025.

You pay the standard premium amount (or higher) if:

- You enroll in Part B for the first time in 2025.
- You don't get Social Security benefits.
- You're directly billed for your Part B premiums.
- You have Medicare and Medicaid, and Medicaid pays your premiums. (Your state will pay the standard premium.)
- Your modified adjusted gross income as reported on your IRS tax return from 2 years ago is above a certain amount.



If you're in 1 of these 5 groups, here's what you'll pay:

If your yearly income in 2023 was			
File individual tax return	File joint tax return	IRMAA (Income related Medicare Adjustment Amount)	You pay (in 2025)
\$106,000 or less	\$212,000 or less	\$0	\$185.00
Above \$106,000 up to \$133,000	Above \$212,000 up to \$266,000	74.00	259.00
Above \$133,000 up to \$167,000	Above \$266,000 up to \$334,000	185.00	370.00
Above \$167,000 up to \$200,000	Above \$334,000 up to \$400,000	295.90	480.90
Above \$200,000 and less than \$500,000	Above \$400,000 and less than \$750,000	406.90	591.90
\$500,000 or above	\$750,000 and above	443.90	628.90

The information in this chart can be found at [Medicare.gov/your-medicare-costs/medicare-costs-at-a-glance](https://www.medicare.gov/your-medicare-costs/medicare-costs-at-a-glance). If you have questions about your Part B premium, call Social Security at 1-800-772-1213. TTY users can call 1-800-325-0778. If you pay a late enrollment penalty, these amounts may be higher.

**Part B Deductible - \$257 per year**

## Medicare Advantage Plans (Part C) and Medicare Prescription Drug Plans (Part D) Premiums

Visit [Medicare.gov/find-a-plan](https://www.medicare.gov/find-a-plan) to get plan premiums. You can also call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048. You can also call the plan or your State Health Insurance Assistance Program (SHIP). To get the most up-to-date SHIP phone numbers, visit [shiptacenter.org](https://shiptacenter.org) or call 1-800-MEDICARE.



## Part D Monthly Premium

The chart below shows your estimated prescription drug plan monthly premium based on your income. If your income is above a certain limit, you will pay an income-related monthly adjustment amount in addition to your plan premium. The information in the chart above can be found at [Medicare.gov/your-medicare-costs/medicare-costs-at-a-glance](https://www.Medicare.gov/your-medicare-costs/medicare-costs-at-a-glance).

If your yearly income in 2023 was			
File individual tax return	File joint tax return	File married & separate tax return	You pay (in 2025)
\$106,000 or less	\$212,000 or less	\$106,000 or less	Your premium plan
Above \$106,000 up to \$133,000	Above \$212,000 up to \$266,000	Not Applicable	\$13.70 + your plan premium
Above \$133,000 up to \$167,000	Above \$266,000 up to \$334,000	Not Applicable	\$35.30 + your plan premium
Above \$167,000 up to \$200,000	Above \$334,000 up to \$400,000	Not Applicable	\$57.00 + your plan premium
Above \$200,000 and less than \$500,000	Above \$400,000 and less than \$750,000	\$200,000 and less than \$500,000	\$78.60 + your plan premium
\$500,000 or above	\$750,000 and above	\$500,000 and above	\$85.80 + your plan premium

### 2025 Part D National Base Beneficiary Premium - \$36.78

This figure is used to estimate the Part D late enrollment penalty and the above income-related monthly adjustment amounts listed in the table above. The national base beneficiary premium amount can change each year. See your Medicare & You handbook or visit [Medicare.gov](https://www.Medicare.gov) for more information.

For more information about Medicare costs, visit [Medicare.gov](https://www.Medicare.gov).



## Other Medicare Part A Costs & Coverages

### Home health care

\$0 for home health care services.

20% of the Medicare-approved amount for Durable medical equipment (DME).

### Hospice care

\$0 for hospice care.

You may need to pay a copayment of no more than \$5 for each prescription drug and other similar products for pain relief and symptom control while you're at home. In the rare case your drug isn't covered by the hospice benefit, your hospice provider should contact your Medicare drug plan to see if it's covered under Medicare prescription drug coverage (Part D).

You may need to pay 5% of the Medicare-approved amount for inpatient respite care. Medicare doesn't cover room and board when you get hospice care in your home or another facility where you live (like a nursing home).

## Important Term: Benefit Period

**A Benefit Period is defined as: Being home and out of the hospital and not receiving skilled care for 60 consecutive days.**

Note: Penalty for Part A

Late enrollment penalty:

If you don't buy it when you're first eligible, your monthly premium may go up to 10%. (You'll have to pay the higher premium for twice the number of years you could have had Part A, but didn't sign up.)

### Penalty for Part B

In most cases, if you don't sign up for Part B when you're first eligible, you'll have to pay a late enrollment penalty. You'll have to pay this penalty for as long as you have Part B. Your monthly premium for Part B may go up 10% of the standard premium for each full 12-month period that you could have had Part B, but didn't sign up for it. Also, you may have to wait until the General Enrollment Period (from January 1 to March 31) to enroll in Part B. Coverage will start July 1 of that year.



Just a few companies we represent...





# The Medicare Donut Hole



\*Your out of pocket cost is calculated by adding everything you have paid (except premiums) PLUS discounted amounts you didn't pay in the gap)

# Cost sharing with the 2024 Medicare Prescription Plans

## Accumulated Drug Costs

### Initial Coverage

Tier 1 Preferred Generic Drugs

Tier 2 Nonpreferred Generic Drugs

Tier 3 Preferred Brand-Name Drugs

Tier 4 Nonpreferred Brand-Name Drugs

Tier 5 Specialty-Tier Drugs

Tier 6 Injectable Part D Vaccines

Copay

Copay

Copay

Copay

Co-insurance

No Charge

### Coverage Gap

Tier 1 Preferred Generic Drugs

Tier 2 Nonpreferred Generic Drugs

Tier 3 Preferred Brand-Name Drugs

Tier 4 Nonpreferred Brand-Name Drugs

Tier 5 Specialty-Tier Drugs

Tier 6 Injectable Part D Vaccines

Copay

Copay

Brand Discount Payment

Brand Discount Payment

Brand Discount Payment

No Charge

**Total Drug Cost \$5,030**

### Catastrophic Coverage

Tier 1, 2 Generic Drugs

Tier 3,4,5 Brand Name and Specialty-Tier Drugs

Tier 6 Injectable Part D Vaccines

Copay

Copay

No Charge

**\$8,000**

**TrOOP:  
Enrollee Out  
Of Pocket  
Expenses**

# THE 2024 COVERAGE GAP BRAND DISCOUNT PROGRAM

With the Medicare Coverage Gap Discount Program, the beneficiary pays a discounted price for brand name drugs. The rest of the cost is paid by the drug manufacturer and the health plan. Review the example below to see the liability categories and how the overall cost is divided, assuming a cost of \$100.

**DRUG COST**  
\$100

**DISPENSING FEE \$17**

**REMAINING FEE \$83**

**COST SHARING**

**BENEFICIARY**

**HEALTH PLAN**

**BENEFICIARY**

**HEALTH PLAN**

**DRUG MANUFACTURER**

**LIABILITY**

## **BENEFICIARY LIABILITY:**

**25% OF DISPENSING FEE.....\$4.25**

**25% OF DRUG COST.....\$20.75**

**TOTAL LIABILITY.....\$25.00**

## **HEALTH PLAN LIABILITY:**

**75% OF DISPENSING FEE.....\$12.75**

**5% OF DRUG COST.....\$4.15**

**TOTAL LIABILITY.....\$16.90**

## **DRUG MANUFACTURER LIABILITY:**

**NONE OF DISPENSING FEE.....0**

**70% OF DRUG COST.....\$58.10**

**TOTAL LIABILITY.....\$58.10.**

For TrOOP accumulation, both the manufacturer's and the beneficiary's cost sharing are included. Cost Sharing by the health plan is not covered.

**DRUG COST**  
\$100

**DISPENSING FEE \$17**

**REMAINING FEE \$83**

**COST SHARING**

**BENEFICIARY \$4.25**  
**HEALTH PLAN \$0**

**BENEFICIARY \$20.75**  
**HEALTH PLAN N/A**  
**DRUG MANUFACTURER \$58.10**

**TROOP ACCUMULATION**

**\$83.10**



**Citizens**  
INSURANCE SOLUTIONS  
More than Medicare

Heather Majka 865-640-1614



# Citizens

INSURANCE SOLUTIONS  
www.citizensinsurancesolutions.com 865-640-1614



## Doctors & Hospitals

# Medicare Supplement

# Medicare Advantage



## Changes

**Set It & Forget It**  
Plans Stay the Same  
(Except Premium Increases)

**EVERY YEAR**

(IF Renewed, YOU Must Review Impact)



## Enrollment

**ANYTIME**

(IF NOT Locked INTO Advantage Plan & Health Qualifies)

**ONLY October  
15 - December 7**



## Access to Care

**100% Access**  
You & Your Doctor Decide Care

Must Get Approval & Follow Plan Rules



## Costs

**Pay Now Save Later**

**Save Now Pay Later**



## Prescriptions

**Must Get Separate Part D Coverage**

**Usually Included in Most Medicare Advantage Plans**

## Outline of Coverage

# Overview of Available Plans

Medicare Supplement Plans A, B, C, F, G, K, L, N and Medicare Select Plans G and N are currently being offered by UnitedHealthcare Insurance Company.

♦ Medicare Select Plans G and N contain the same benefits as standardized Medicare Supplement Plans G and N, except for restrictions on your use of hospitals.

### Benefit Chart of Medicare Supplement Plans Sold on or after January 1, 2020

This chart shows the benefits included in each of the standard Medicare supplement plans. Every company must make Plan "A" available. Some plans may not be available. Only applicants' first eligible for Medicare before 2020 may purchase Plans C, F, and high deductible F.

Note: A ✓ means 100% of this benefit is paid.

Benefits	Plans Available to All Applicants								Medicare first eligible before 2020 only
	A	B	D	G <sup>1♦</sup>	K	L	M	N <sup>♦</sup>	
C	F <sup>1</sup>								
Medicare Part A coinsurance and hospital coverage (up to an additional 365 days after Medicare benefits are used up)	✓	✓	✓	✓	✓	✓	✓	✓	
Medicare Part B coinsurance or Copayment	✓	✓	✓	✓	50%	75%	✓	✓ copays apply <sup>3</sup>	
Blood (first three pints)	✓	✓	✓	✓	50%	75%	✓	✓	
Part A hospice care coinsurance or copayment	✓	✓	✓	✓	50%	75%	✓	✓	
Skilled nursing facility coinsurance			✓	✓	50%	75%	✓	✓	
Medicare Part A deductible		✓	✓	✓	50%	75%	50%	✓	
Medicare Part B deductible									
Medicare Part B excess charges				✓					
Foreign travel emergency (up to plan limits)			✓	✓			✓	✓	
Out-of-pocket limit in 2021 <sup>2</sup>					\$7060	\$3,530			

<sup>1</sup>Plans F and G also have a high deductible option which require first paying a plan deductible of \$2700 before the plan begins to pay. Once the plan deductible is met, the plan pays 100% of covered services for the rest of the calendar year. High deductible plan G does not cover the Medicare Part B deductible. However, high deductible plans F and G count your payment of the Medicare Part B deductible toward meeting the plan deductible.

<sup>2</sup>Plans K and L pay 100% of covered services for the rest of the calendar year once you meet the out-of-pocket yearly limit.

<sup>3</sup>Plan N pays 100% of the Part B coinsurance, except for a co-payment of up to \$20 for some office visits and up to a \$50 co-payment for emergency room visits that do not result in an inpatient admission.

# my Social Security

## How To Create An Online Account



### Step 1

Visit [www.socialsecurity.gov/myaccount](http://www.socialsecurity.gov/myaccount) and select:



Social Security  
The Official Website of the U.S. Social Security Administration

Sign In or Create an Account

New Users  
You must be able to verify some information about yourself and:  
• Have a valid E-mail address,  
• Have a Social Security number,  
• Have a U.S. mailing address, and  
• Be at least 18 years of age.  
You can create an account only to gain access to your own personal information. You cannot use this online service to access the records of a person:  
• With whom you have a business relationship;  
• For whom you are a representative payee; or  
• For whom you are an appointed representative.  
Unauthorized use of this service may subject you to criminal or civil penalties, or both.  
[Create An Account](#) [Learn More](#)

Existing Users  
Username: [Forgot Username](#)  
Password: [Forgot Password](#)  
[Sign In](#)

### Step 2

Select "Create An Account."

To create a **my Social Security** account, you must be at least 18 years old and have:

- A valid E-mail address;
- A Social Security number; and
- A U.S. mailing address.

### Step 3

Provide some personal information to verify your identity.

Social Security  
The Official Website of the U.S. Social Security Administration

Create an Account

1 Verify your Identity 2 Secure your Identity 3 Create your Account

Please tell us who you are

Your Name:  
As shown on your Social Security card.

First  M.I.  Last  Suffix

Social Security  
The Official Website of the U.S. Social Security Administration

Create an Account

1 Verify your Identity 2 Secure your Identity 3 Create your Account

Please create your account details

Username:

### Step 4

Choose a username and password to create your account.

(over)

After you create a **my Social Security** account, you can access your *Social Security Statement* to check your earnings and get your benefit estimates.

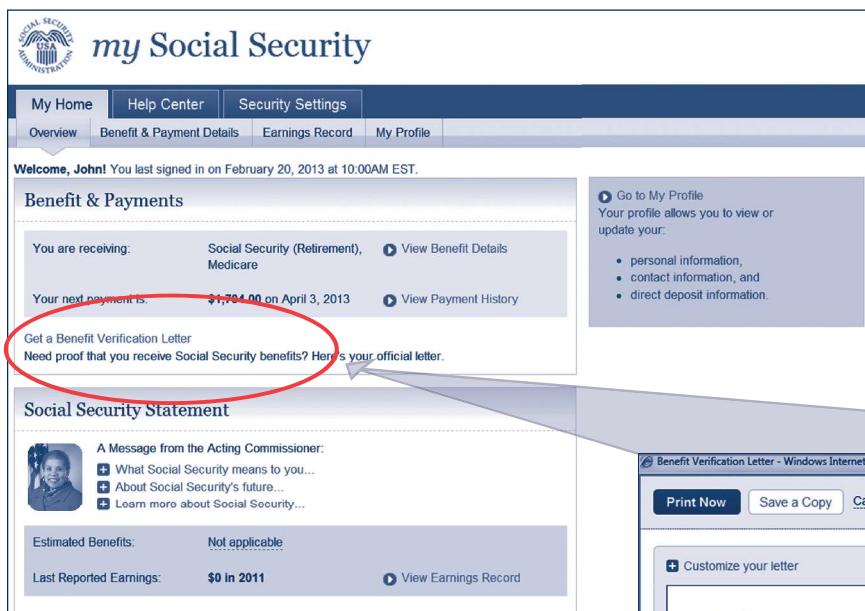
If you receive benefits, you also can:

- Change your address and phone number;
- Start or change your direct deposit; and
- Get your benefit verification letter.

## How To Get Your Benefit Verification Letter

You can use your benefit verification letter as proof of your:

- Income when you apply for a loan or mortgage, assisted housing or other state or local benefits;
- Current Medicare health insurance coverage;
- Retirement or disability status; and
- Age.



my Social Security

My Home Help Center Security Settings

Overview Benefit & Payment Details Earnings Record My Profile

Welcome, John! You last signed in on February 20, 2013 at 10:00AM EST.

**Benefit & Payments**

You are receiving: Social Security (Retirement), Medicare [View Benefit Details](#)

Your next payment is: \$1,704.00 on April 3, 2013 [View Payment History](#)

[Get a Benefit Verification Letter](#)

Need proof that you receive Social Security benefits? Here's your official letter.

**Social Security Statement**

A Message from the Acting Commissioner:

- What Social Security means to you...
- About Social Security's future...
- Learn more about Social Security...

Estimated Benefits: Not applicable

Last Reported Earnings: \$0 in 2011 [View Earnings Record](#)

To get your benefit verification letter:

- Sign into your account; and
- Select “Get a Benefit Verification Letter.”

Your letter will be displayed and you may print it or save it for later use.



Benefit Verification Letter - Windows Internet Explorer

Print Now Save a Copy Can't print or save this letter?

Customize your letter

SOCIAL SECURITY  
ADMINISTRATION

Social Security Administration

Date: March 1, 2013  
Claim Number: XXXX-XX-1234

Drew Jenkins  
1234 Sample Street  
Sample City, MO 12345

You asked us for information from your record. The information that you requested is shown below. If you want anyone else to have this information, you may send them this letter.

Information About Current Social Security Benefits  
Beginning December 2010, the full monthly Social Security benefit before any deductions is \$1,300.00.



**Social Security Administration**  
SSA Publication No. 05-10540  
ICN 459261  
Unit of Issue - HD (one hundred)  
March 2013 (Recycle prior editions)

 Printed on recycled paper



# How to Apply Online for Medicare Only

**It's so easy! Just go to [www.socialsecurity.gov](http://www.socialsecurity.gov)**

The page title is "Social Security" and the sub-title is "The Official Website of the U.S. Social Security Administration". The main heading is "Apply for Benefits". A sub-section titled "Apply Online for Retirement/Medicare Benefits" contains the following sections: "Getting Ready" (with a tip to review a few items), "Apply & Complete" (with a tip about time and saving the application), and "Follow Up" (with a tip about updates). A "Video Introduction" box is present, along with "More Information" links for "When to Start Receiving Retirement Benefits", "Other Ways To Apply for Benefits", and "Your Right to Representation". A "Your privacy is important." section links to the Privacy Act Statement. A "Start a New Application" button and a "Return to Saved Application Process" button are at the bottom. The OMB No. 0960-0618 and Paperwork Reduction Act information is in the top right corner.

## Welcome to the Social Security Benefit Application

- **Apply for benefits by selecting “Start a New Application;” or**
- **“Return to Saved Application Process.”**

The page title is "Social Security" and the sub-title is "The Official Website of the U.S. Social Security Administration". The main heading is "Apply for Benefits". A sub-section titled "Information About Applicant" contains fields for "Applicant's Name" (First, Middle, Last, Suffix), "Social Security Number (SSN)", "Date of Birth" (Month, Day, Year), and "Gender" (Male, Female). The "Information About Applicant" section is highlighted with a blue border.

The page title is "Social Security" and the sub-title is "The Official Website of the U.S. Social Security Administration". The main heading is "Apply for Benefits". A sub-section titled "Re-entry Number" contains a note that you must print the page or write down the re-entry number (82895887) and a note that if something causes you to exit or you choose to save and return at a later time, you must use this number to continue your saved application process. A "Print this page" button is at the bottom. A sidebar on the right lists "In this section..." with "Re-entry Number" checked.

## Re-entry Number

When you have successfully started your application, you will get a re-entry number that you can use to:

- Continue your application later if you need a break; and
- Check the status of your completed application.

 **Social Security**  
The Official Website of the U.S. Social Security Administration

Apply for Benefits

Identification    General    Other Benefits    Remarks    Review & Sign

Medicare Information for Joan Public

Do you wish to apply for Medicare ONLY, but not for monthly retirement cash benefits at this time?  Things to Consider  
 Yes    No

## Questions About Your Health Benefits

- Other health insurance coverage;
- Group health plan information;
- Employment information; and
- Dates of coverage information.

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Apply for Benefits

Identification    General    Other Benefits    Remarks    Review & Sign

Electronic Signature Agreement

Congratulations, you're just about ready to complete your application for Medicare insurance.

Please read and accept the following statement to finish the application. If you are helping someone apply, then the person filing for benefits must read and accept this agreement by checking the box themselves.

I apply for all insurance benefits for which I may be eligible under Part A (and Part B, if applicable) of Title XVIII (Health Insurance for the Aged and Disabled) of the Social Security Act as presently amended.

I understand and agree that my application will be signed electronically when I select the check box below. I also understand that my electronic signature means that I intend to file for Medicare insurance and have provided the Social Security Administration with accurate information.

I understand that I must apply separately to get monthly Social Security benefits.

I declare under penalty of perjury that I have examined all the information on this application and it is true and correct to the best of my knowledge. I understand that anyone who knowingly gives a false or misleading statement about a material fact in this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

I agree with the Electronic Signature Agreement above.

 You will no longer be able to change this information once you continue.  
When you select "Submit Now" below, you will be sending this completed information electronically to the Social Security Administration. Please make sure that everything is correct.

## Medicare-only Decision

Choose to sign up for Medicare only and not receive retirement benefits at this time.

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Apply for Benefits

Identification    General    Other Benefits    Remarks    Review & Sign

In this section...  
 Applicant Identification  
 Contact Information  
 Birth and Citizenship  
 Medicare Information  
 Re-entry Number  
 Other SSNs and Names

Group Health Plan Information for Joan Public

Is Joan Public covered under a Group Health Plan?  More Info  
 Yes    No

Is Joan Public covered under a Group Health Plan through your own current employment?  
 Yes    No

Employment Information  
The questions below apply to the employment that provides group health plan insurance.

What date did employment start?  More Info  
    
Month Day Year

What date did employment end?  More Info  
    
Month Day Year

Employment has not ended

Health Insurance Information

What date did health insurance start?  More Info  
   
Month Year

What date did health insurance end?  More Info  
   
Month Year

Health insurance has not ended

## Finishing Your Application

- Go over a summary of your application for accuracy;
- Accept the agreement and sign your application by selecting the "Submit Now" button;
- Get a receipt for your application; and
- Get information on what to do next.



Securing today  
and tomorrow



**Notes:**

**Questions:**

**Next Steps:**