IMPORTANT REMINDER
Required Medicare Enrollment and the Retiree Medical Plan (RMIP)

Please review the following information and take action as necessary.

Under the rules of the RMIP, retirees (and their covered spouse or domestic partner) are required to enroll in the National Health Plan (NHP) of the resident country registered with Pension if they are eligible on the same basis as a national of that country. In the United States, the NHP is Medicare and enrollment in Medicare is required for all eligible retirees and their spouse or partners in the RMIP.

Most World Bank retirees who are now U.S. citizens or permanent residents aged 65 or older are eligible for at least Medicare Part B. Failure to enroll in Medicare Part B when eligible can result in a Medicare premium penalty if you enroll at a later date and can reduce your RMIP claim reimbursements for U.S. medical services.

We hope the following FAQ will assist you in understanding this requirement and how to begin enrollment.

U.S. Medicare has three parts: Medicare Part A for Hospital Room and Board, Medicare Part B for Medical Expenses (inpatient and outpatient), and Medicare Part D for Prescription Drugs.

**Part A:** Coverage is generally provided with a Social Security pension, or you may be eligible through marriage to an eligible spouse. If you are not eligible to receive Part A premium-free, neither Medicare nor the RMIP require you to purchase it.

**Part B:** Coverage for medical expenses is available to anyone who is age 65 and a U.S citizen or lawfully admitted Permanent Resident with five years of residency in the US (even if part of those five years was in G4 status). If you are eligible for Part B, you are required by the RMIP to enroll and report your enrollment to HR Operations.

**Part D:** Effective January 1, 2016 the World Bank Group is sponsoring a Medicare Part D plan combined with additional coverage to mirror the current WBG prescription drug plan and keep retirees whole. The plan, **SilverScript Employer PDP sponsored by World Bank Group (SilverScript),** will provide prescription drug coverage for Medicare-eligible retirees and covered Medicare-eligible spouses and/or Medicare-eligible children that is better than the standard Medicare Part D plan. **You should not enroll in Medicare Part D:** the World Bank Group will automatically enroll you if you are eligible. Medicare requires that you be given the choice to opt out of the plan. However, if you are eligible for Part D and you choose to opt out, you will lose your prescription drug coverage under the RMIP.

1) **Am I required to enroll in Medicare? I was a G4 and did not contribute to US Social Security.**

Contribution to U.S. Social Security is not required for Medicare Part B eligibility. If you are 65, or about to be, are now a U.S. Citizen or Permanent Resident, (green card holder), and have been living in the United States for the past five years, (even if part of those years were in G4 status), you are eligible for Medicare Part B.

If you are a citizen or permanent resident, the on-time enrollment window for Medicare Part B is three months before your 65th birthday and up to three months after. Enrollment after this time period may result in a late enrollment penalty imposed by Medicare and failure to enroll when eligible may reduce your RMIP benefits.
**Note:** There may be a special later enrollment allowed if you are still covered by an Active Staff or Employer Group Health Plan, please see item 8.

*Being an STC for the World Bank after you retire does not qualify the RMIP as an Employer plan.*

If you are 65, but not yet a U.S. citizen or permanent resident, you cannot apply for Medicare at this time. Apply as soon as your status changes.

2) **If I have to pay a premium for Medicare Part A, am I required to enroll, and will I be reimbursed for the premium?**

If you are required to pay a premium for Medicare Part A, you are not required by the RMIP to enroll. Generally, Medicare Part A premiums are paid by U.S. citizens over their working career and no premium is due after retirement. Staff Rule 6.12, Participation in the Medical Insurance Plan, provides that retirees who must pay a premium for Medicare Part A are not required to enroll. However, hospitalization claims should still be filed by the hospital to Medicare Part B to ensure any Part B medical services received during the inpatient stay are processed by Medicare before Aetna receives them.

3) **But Medicare Part B will cost me another premium, will the RMIP reimburse me?**

Yes, effective July 1, 2012, the RMIP provides full reimbursement of the Medicare Part B premium for you and your spouse or registered domestic partner, including the Income-Related Monthly Adjustment Amount (IRMAA), if applicable.

When you provide a copy of your Medicare card, HR Operations will process the base reimbursement as of the later of:

1) The effective date on the card, or
2) The first of the month the card is received by HR Operations.

Please send a copy of your Medicare card/s together with the enclosed transmittal form F200021 to: hroperations@worldbank.org, or fax a copy to: 202-522-2150. Please use only one submission method.

If you are subject to IRMAA, you must also submit a copy of the annual letter from Social Security or the invoice from Medicare to HR Operations to receive reimbursement.

4) **What happens if I do not enroll in Medicare when eligible?**

This could be very costly to you. The RMIP has the right to instruct Aetna to reduce your medical claims reimbursement as if you had Medicare as your primary coverage. This can result in reduced RMIP medical benefits. Medicare will also penalize you a permanent 10% additional premium per year for every year you could have enrolled in Part B but did not.

Additionally, if you are not enrolled in Medicare Part A and/or Part B, you cannot be enrolled in Medicare Part D by the World Bank Group. If you cannot be enrolled in Medicare Part D, you will lose your prescription drug coverage under the RMIP.

5) **I won’t be eligible for a Social Security pension until I’m 66. Do I still need to apply for Medicare at 65?**

Yes. The age for a Social Security pension is increasing, but Medicare currently maintains age 65 for on time application.
6) Where do I apply for Medicare?

Visit your local Social Security office. Be prepared to show birth certificate, proof of citizenship or green card, driver’s license, and a recent utility bill. Other documents may be requested at their discretion. You can schedule an appointment by calling 1-800-772-1213. Wait times are usually less in the middle of the month, middle of the week.

7) I went to the local Social Security office (SSA) and they told me I was not eligible for Medicare Part B because I had not earned ‘forty quarters’, OR they told me I was not eligible because I had not been a Permanent Resident for five years, OR they told me I had to buy the Part A benefit to buy Part B.

All of these are incorrect. The local SSA offices are very familiar with US citizens and standard enrollment but you may encounter staff who are unfamiliar with all of the Part B eligibility rules. For Part B, a person must be 65, a citizen or permanent resident with five years continuous US residency immediately prior to enrollment, (but one need not have been a Permanent Resident or Citizen for five years). You need not have earned 40 quarters toward Social Security benefits for Part B, nor do you need to buy Part A in order to enroll in Part B.

8) I am still working and have employee healthcare through that employer OR my spouse is still working, and I am a dependent under that active coverage. Do I need to apply for Part B?

Under current Medicare rules, an eligible person may delay enrollment in Part B until their active employee coverage ends because Medicare is always secondary to an active employee plan (including dependent coverage under that plan). When the employee coverage ends, you have a special enrollment window to apply for Medicare Part B coverage. Currently, this special enrollment window is up to 8 months after coverage ends.

9) How do I submit claims to Medicare?

You must show your Medicare card at the time of medical services to your healthcare provider. A doctor or facility that accepts Medicare is obliged to submit claims to Medicare on your behalf. To make coordination between Medicare and the RMIP easier, we recommend that you enroll in Medicare Direct with Aetna. This free service allows Aetna to contact Medicare to send your processed claims directly to Aetna for secondary review, reducing time and paperwork. To enroll in Medicare Direct, call or email Aetna as soon as you receive your Medicare card. (Call 1-800-723-8897 anytime or write to mclaims@aetna.com)

Note: If you choose not to use Medicare Direct, once you have your Medicare explanation of benefits, you may submit it to Aetna for secondary review using the MIP medical claim form, #892.

For Medicare Part D, all you have to do is use your SilverScript ID card when you use a network pharmacy. If you use an out-of-network pharmacy in the United States and its territories, you will need to pay the full cost and submit a claim form and an itemized receipt for reimbursement of the plan’s share of the cost. If you fill a prescription outside the United States and its territories, you will need to file a claim with Aetna.

10) My doctor/s are in the Aetna network. Can I still see them?

Yes. If your network doctor accepts Medicare patients, it is easier to coordinate the claims if the network doctor does not collect the Aetna network office visit co-pay and simply files directly to Medicare. However, if a co-pay is collected, Aetna will consider this when they process the secondary portion of your claim after Medicare.
11) *My current doctor does not accept Medicare patients.*

You are still required to enroll in Part B. To find doctors who participate in Medicare, go to [www.medicare.gov](http://www.medicare.gov), then under Search Tools select Find a Doctor or Other Healthcare Professional. If your provider does not participate in Medicare, you can ask him or her to provide you with a Private Contract stating that they do not participate in Medicare. By sending this Private Contract to Aetna, you can have claims from this provider covered by the RMIP as the primary payer. Claims from a Private Contract cannot be submitted to Medicare by you or the physician. The RMIP will process these claims, but a copy of the contract must be provided to Aetna when you submit them.

12) *Where can I find more information?*

- Requirement to enroll: Section 15 of the MIP Summary Plan Description
- Social Security Administration: 1-800-772-1213 website: [www.ssa.gov](http://www.ssa.gov)
- Medicare and You: General information on Medicare coverage available as a pdf on [www.medicare.gov](http://www.medicare.gov) or call 1-800-633-4227 to request a printed copy.
- The Medicare enrollment information provided in this flyer is available publicly on the Medicare and SSA websites.

**REMEMBER:**

Call the Aetna Medicare team if you have questions about the information in this flyer: 1-866-622-1035

Hours of operation, 8am to 5pm, EST.

Apply through Social Security for Medicare Part B, (*only take Part A if you will not have to pay for it*).

When you or your spouse or partner receives your Medicare, card take these next steps:

1) Complete transmittal form F200021 and fax this plus a copy of your Medicare card to 202-522-2150. Or scan the form and card copy to send to: hroperations@worldbank.org

2) Contact the Aetna Medicare team to enroll in the free Medicare Direct service for claim coordination. 1-800-723-8897 anytime

3) Contact SilverScript Customer Care if you have any questions about SilverScript or Medicare Part D, the drugs covered by the plan or network pharmacies near your home or where you are traveling. Call 1-866-785-5709, 24 hours a day, 7 days a week. TTY users should call 711.