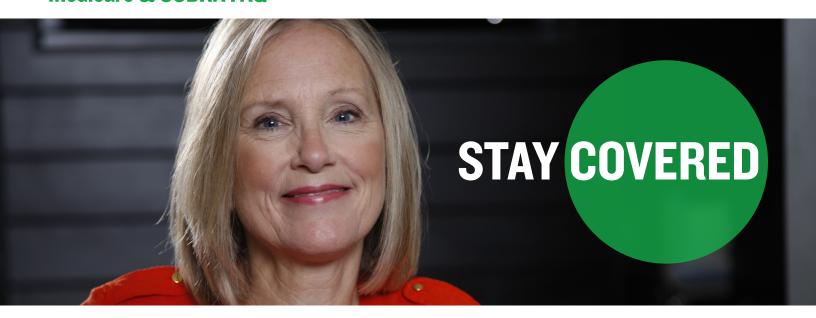
Medicare & COBRA FAQ



What is the difference between Medicare eligibility and Medicare entitlement?

To be <u>eligible</u> for Medicare, a person only needs to meet the requirements. To be <u>entitled</u>, he or she must also take the necessary steps to become enrolled in Medicare and start receiving benefits. Medicare eligibility doesn't affect COBRA, but Medicare entitlement might. You are eligible for Medicare if you are at least 65 and have worked for at least 10 years (or 40 quarters) in Medicare-covered employment.

Can I be enrolled in both COBRA and Medicare?

That depends on what happens first — COBRA election or Medicare entitlement (Part A and/or Part B). Participants can be enrolled in both as long as they are entitled to Medicare before they elect COBRA. If, however, they become entitled to Medicare after electing COBRA, then their medical coverage through COBRA must be terminated.

What coverage options do I have if I am not yet eligible for Medicare?

If you have experienced a loss of coverage, you will be offered to continue your group's health plans through COBRA. Aptia will mail a Specific Rights Notice (SRN) that will contain COBRA election paperwork to your mailing address once we are notified that you have experienced a qualifying event (loss of coverage).

Coverage in COBRA is not automatic, so it is important you carefully read your SRN and mail your election form back to Aptia within 60 days of the date on the letter or the first day of COBRA — whichever is later.

How long can I continue coverage under my employer's group health plans through COBRA?

This depends on what caused your loss of benefits. If you have experienced a termination of employment (voluntary or involuntary) or a reduction in hours, then you are eligible to continue your plans through COBRA for I8 months. If you become entitled to Medicare at any point after you have elected COBRA, then you will lose your COBRA benefits.

You and your dependent(s) may qualify for an extension of your COBRA continuation period under certain circumstances. The SRN you will receive from Aptia contains more information regarding the circumstances that must be met to be eligible for an extension of your COBRA benefits.

How can I drop COBRA coverage after becoming enrolled?

You can drop COBRA coverage either by submitting a Benefits Termination Form to Aptia or by simply not paying your monthly premium within the payment grace period.



Medicare & COBRA FAQ, continued

I am already enrolled in Medicare. Do I need COBRA?

This depends on your needs and financial situation. When you are enrolled in both Medicare and COBRA, COBRA becomes supplementary coverage and pays after Medicare, so it may cover costs that Medicare does not. However, COBRA can be expensive because beneficiaries pay IO2% of the applicable premium cost. You may also need to continue your dental and/or vision benefits through COBRA if you are only enrolled in Medicare A and B, as these benefits are not covered under these parts of Medicare.

Can I elect COBRA for my dependent(s) only and waive coverage for myself?

As long as your dependents were covered under your health plan when you experienced a loss of coverage (termination, reduction in hours, etc), then you can waive coverage for yourself and elect COBRA coverage for your dependents.

It's also important to note that you may elect benefits separately through COBRA. For example, if you are offered medical, dental and vision through COBRA, you can elect any of these benefits independently.

However, once you waive a benefit for a beneficiary, the beneficiary loses the rights to continue that plan through COBRA.

What if my employer has agreed to pay a portion of my COBRA premiums?

If this is the case, you may not need to pay for COBRA coverage to become enrolled during the duration in which your employer has agreed to pay your premiums. Even if your premiums are being paid by your employer, you must still make your elections to become enrolled in COBRA.

