

Annual Medicare Enrollment

Drive Wednesday,

February 3, 2016

Representatives from:

Social Security Administration

Kaiser Senior Advantage

CoreSource

PCCD Benefits Office

Usually attend the annual

Medicare enrollment drive

each February at the District.

GIFT OF PUBLIC FUNDS

Did you know that the California Education Code prohibits the gifting of public funds? The Benefits Office administers District benefits in accordance with applicable governmentances including, but not limited to:

1. Prevailing Collective Bargaining Agreements
2. Internal Revenue Service
3. Peralta Community College District Board Policy

Frequently Asked Questions

What is acceptable documentation of premiums paid?

Any one of the following documents is acceptable documentation:

1. Your annual social security statement; or
2. Medicare quarterly billing statement and proof of payment (bank statement, copy of check); or
3. Monthly STRS statement

Is there a form I should use and attach to the documentation?

- Yes, your documentation should be attached to the Medicare Reimbursement claim form: <http://web.peralta.edu/benefits/>.

How often is documentation required?

- Upon attainment of age 65 and once a year thereafter or within 30 days of premium adjustment.
(Generally, those who choose to pay premiums by check or credit card are billed quarterly by CMS, a Medicare Agent.)

Where do I send the documentation?

Send claim form and annual verification to:

Pension Dynamics
2300 Contra Costa Blvd., Suite 400
Pleasant Hill, CA 94523



Medicare Reimbursement Plan

Policy Statement

October 2015

**PLEASE READ
CAREFULLY**

Benefits Office
333 East 8th Street
Oakland, CA 94606
510-466-7229
benefits@peralta.edu

10/2015

What is Medicare Part B?



Medicare Part B helps to pay for doctor services and many other medical services and supplies that may not be covered by hospital insurance. During your employment life with Peralta, you may have contributed to the Medicare program through wages or earnings. Your contributions may meet the eligibility for government paid benefits in addition to what you receive from Peralta as a retiree enrolled in our group plan.

Do active Peralta employees pay into Medicare?
For many years, Peralta faculty did NOT contribute to Medicare AND WERE, THEREFORE, EXCLUDED FROM USING Medicare as a resource for medical coverage upon reaching age 65. In recent years, faculty have been extended the opportunity to pay into the Medicare program in anticipation of receiving a benefit once eligible and upon retirement from the District. Non-faculty have always paid into Medicare through their monthly payroll.

Why do we reimburse?
We reimburse as an incentive to coordinate your benefits with Medicare.

When care is coordinated with Medicare, the District saves on insurance and claim costs. It is from these savings that we are able to reimburse the retiree and their eligible dependents for the Medicare premiums they pay.

Where do I go for additional information?

For questions regarding:

1. Reimbursement eligibility criteria or a copy of the Peralta Medicare Summary Plan Description

Contact the Benefits Office 510.466-7229

2. Signing up for direct deposit of reimbursement checks

3. Accuracy of payments and receipt of documentation

Contact the Benefits Dynamics at
925.956.0514 or 925.956.0505

4. Medicare eligibility and benefits

Call 800.772.1213; or

Visit your local Social Security or Medicare office; or

Visit the website: www.medicare.gov

The publication, "Medicare & You" includes a summary of Medicare benefits, rights & protections, and answers to the most frequently asked questions about the Medicare programs. Obtain your personal copy of this document from Medicare.

Although we have had the program around for a few years now, we are required to ensure that the District is compliant in its administration of this benefit. To receive a reimbursement, the retiree and/or eligible dependent must:

1. Have retired; and
2. Maintained Peralta coverage as secondary to Medicare if age 65 or older; and
3. Provide verification of Medicare premiums paid at least annually and no later than 90 days after the end of the calendar year.

Special note:

If the retiree or dependent is on the District's Kaiser Plan, the enrollment in the Kaiser Senior Advantage plan is a prerequisite for reimbursement of Medicare premiums.

When do we reimburse?

We reimburse on a MONTHLY basis typically within 10 days after the end of each calendar month, subject to our receipt of your verification of premiums paid. More plan administration details can be found in the Summary Plan Description.

When did the district start reimbursing for Medicare D?

In October 2015, the PCCD Trustees approved the expansion of the Medicare Reimbursement Program to include Medicare Part D Income Related Monthly Adjustment Amounts (Part D-IRMAA).

⇒ If an individual retired on or before 4/30/13, Medicare Part D expenses incurred and paid on or after 9/1/15 are eligible for reimbursement; or

⇒ If an individual retired on or after 5/1/13 Medicare Part D expenses incurred and paid on or after 1/1/15 are eligible for reimbursement.

⇒ The retiree and/or eligible dependent is not concurrently enrolled in another privately held Medicare Part D program.

These special provisions do not apply to Medicare A or B reimbursements.

For information or clarification about the accuracy of the premiums you pay, contact Medicare directly.