



PROTECT YOURSELF

Understand your Medicare rights and prevent balance billing

MEDICARE ENROLLMENT IS IMPORTANT FINANCIAL PROTECTION FOR THOSE WHO HAVE END-STAGE RENAL DISEASE.

DO I LOSE EMPLOYER HEALTH BENEFITS IF I SIGN UP FOR MEDICARE?

ESRD must be treated by dialysis or transplant. For this reason, Congress decided that those with ESRD have the right to Medicare coverage. You won't lose your existing health benefits if you enroll in Medicare.

WHO IS RESPONSIBLE FOR MY BILLS?

If you are covered by an employer group health plan, your plan will pay first on your health care bills, and Medicare will pay second. At the end of your 30-33 month* coordination period, if you haven't signed up for Medicare, your employer plan will be secondary. You will have no primary coverage. You will get billed for the dialysis claims, and the plan would only pay a minimal amount of the claim total.

WHEN DOES MY COVERAGE BEGIN? IN-CENTER HEMODIALYSIS

Medicare secondary coverage is effective the first day of the fourth month of dialysis for in-center treatments. This results in a 33-month coordination period before Medicare becomes primary.

PERITONEAL DIALYSIS/HOME DIALYSIS

Medicare secondary coverage is effective the day you begin dialysis. This results in a 30-month coordination period before Medicare becomes primary.

SIGN UP FOR MEDICARE

- ✓ It is your right to enroll in Medicare.
- ✓ Can continue employer health benefits.
- ✓ Protection from balance billing.
- ✓ Medicare Part A and Part B.
- ✗ Premiums cost approximately \$150 per month.

DON'T SIGN UP FOR MEDICARE

- ✗ Uncertain Primary Care Coverage after end of existing Plan coverage in 30-33 months*.
- ✗ Subject to balance billing for dialysis claims up to \$60,000-\$100,000 per month or more.

* For patients receiving dialysis at home, the coordination period is 30 months. For patients receiving dialysis treatments in-center, the coordination period is 33 months.

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IN-CENTER DIALYSIS CAN COST \$60,000-\$100,000 PER MONTH OR MORE.

IT HAPPENS. BUT, DON'T LET IT HAPPEN TO YOU.

A member was diagnosed with ESRD, and began home dialysis. However, the member did not sign up for Medicare enrollment. At the end of her 30-month coordination period, she began receiving bills from her providers. Calculations revealed that by 2017, the member was going to be responsible for paying providers up to \$2,500,000. If the member had signed up for Medicare enrollment and paid the monthly premiums, the bill would have been approximately \$3,500 for the same time period.

PROTECT YOURSELF FROM BALANCE BILLING. SIGN UP!



WHAT IS 'BALANCE BILLING'?

Balance billing is a provider's ability to bill you for the remaining balance of services rendered after your insurance pays its share. This means medical bills for tens of thousands of dollars or more could be sent to you. By signing up for Medicare, you can be protected against balance-billing.

BUT, I'M NOT OVER 65. WHY DO I NEED TO SIGN UP FOR MEDICARE?

Anyone who has end-stage renal disease (ESRD) and needs dialysis is eligible for Medicare. You will need to sign up for both Medicare Parts A and B. Medicare Part B pays as secondary for your dialysis claims.

Protection from balance billing begins upon enrollment for Medicare, which is why it's important to sign up as soon as you can. Medicare is secondary to your employer's health plan for at least 30-33 months* from the date you are eligible for Medicare.

HOW DO I SIGN UP FOR MEDICARE?

To complete an Application for Enrollment in Medicare Part A and Part B, you can apply online at www.socialsecurity.gov/medicareonly/

Or visit your local Social Security office or call Social Security at 800.772.1213. TTY users should call 800.325.0778

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