

The Board of Pensions administers the Benefits Plan of the Presbyterian Church (U.S.A.), offering retirement, healthcare, death, and disability benefits to qualifying members. The Board also provides financial and vocational grants through the Assistance Program.

## Summary

When you retire, your employer-provided coverage under the Medical Plan ends. If you are eligible for Medicare and are about to retire, please contact the Board of Pensions to discuss your eligibility for Medicare Supplement. If you are not yet eligible for Medicare but want to enroll in Medicare Supplement when you are, you must either continue coverage under medical continuation or preserve your right to enroll at a later date by filing a waiver.

To either enroll in this coverage upon retirement or file a waiver, you'll need to complete the Medicare Supplement Subscription, Waiver, or Withdrawal form, available at [pensions.org](http://pensions.org) or by calling the Board of Pensions at 800-773-7752 (800-PRESPLAN) and speaking to a service representative.

## Purpose

Medicare Supplement coverage supplements Medicare, specifically Parts A and B; it is secondary coverage offered to eligible, enrolled members at retirement. It covers a wide range of medical services and supplies (after Medicare, as the primary insurer, pays its share). Medicare Supplement also includes a Part D prescription drug benefit. If you are eligible, you may enroll in Medicare Supplement coverage when terminating coverage under the Medical Plan.

## Eligibility

As a retiring member of the Benefits Plan, you may enroll in Medicare Supplement if you

- are Medicare-eligible (generally age 65 or older);
- meet the Rule of 70; and
- are enrolled in Medicare Parts A and B.

You also must meet the **continuous coverage requirement** to enroll (see Important).

If you qualify for Medicare Supplement coverage but currently have other qualified health plan coverage, you may postpone enrollment in Medicare Supplement by filing a waiver. If you do not waive coverage, you will not be eligible to enroll later.

## Eligible family members

These family members also may enroll in Medicare Supplement coverage, regardless of whether you choose to enroll when you are eligible:

- your spouse or eligible child who has maintained continuous coverage and is enrolled in Medicare Parts A and B
- your surviving or former spouse who has maintained continuous coverage and is enrolled in Medicare Parts A and B

## Coverage overview

Medicare Supplement covers a wide range of medically necessary services and supplies beyond Parts A and B coverage. Generally, Medicare Supplement covers the following:

- prolonged hospitalization, skilled nursing facility care, and inpatient and outpatient psychiatric treatment
- medical supplies and services
- ambulance services
- your Medicare Parts A and B deductibles
- routine vision exams
- outpatient prescription drugs
- medically necessary medical care when traveling outside the United States

Medicare Supplement **does not** cover the following:

- routine dental or hearing care
- custodial care
- services for you if you reside outside the United States

## Important

You must meet a **continuous coverage requirement** in order to enroll. Generally, you must be covered continuously by a qualified health plan, such as medical continuation, until eligible for Medicare Supplement. *If you do not enroll when you terminate service to the Presbyterian Church (U.S.A.), you will not be eligible to enroll at a future date unless you waive coverage — that is, formally postpone it.*

## 70 The rule of 70

- You must be age 55 or older when you terminate service to the Presbyterian Church (U.S.A.).
- You must have at least five years of Medical Plan participation.
- The sum of your age and years of Medical Plan participation at termination must equal 70 or more.

After Medicare pays its portion of medical charges, Medicare Supplement pays your healthcare providers based on Medicare's allowance for the remaining balance. For most services, the plan pays 80 percent of the remaining balance after Medicare considers the claim and your deductible is met.

## Enrollment

You pay a subscription rate, or premium, for each eligible person up to two. To get current subscription rate information, visit [pensions.org](https://pensions.org) or contact the Board of Pensions.

To enroll in Medicare Supplement coverage, complete the personal information, subscription, and authorization portions of the Medicare Supplement Subscription, Waiver, or Withdrawal form. Return the completed, signed form to the Board of Pensions 30 days before your last day of coverage as an active member of the Medical Plan.

## Continuous coverage waiver

If you or your spouse is choosing other qualified health plan coverage at retirement and wishes to preserve the right to enroll in Medicare Supplement when the other coverage ends, you must officially waive coverage.

To do this, complete the personal information, waiver, and authorization portions of the Medicare Supplement Subscription, Waiver, or Withdrawal form. Submit the form to the Board of Pensions 30 days before your last day of coverage as an active member of the Medical Plan.

If you are retiring before age 65 and wish to waive coverage, refer to *Guide to Medicare Supplement for Retired Members* for eligibility and procedural information.

**Note:** You may not enroll in Medicare Supplement at a later date unless you have a waiver on file.

### Important

You can choose to withdraw from and re-enroll in Medicare Supplement only once. To apply for re-enrollment in Medicare Supplement coverage, you must provide the Board with certain information, if not in advance, then within 30 days of disenrollment from or termination of your previous plan.

## Re-enrollment

After you have withdrawn from Medicare Supplement in order to join a Medicare Advantage plan (a Part C plan under Medicare), you may be eligible to re-enroll in Medicare Supplement

- during the first 12 months of your participation in a Medicare Advantage plan;
- if you make a permanent move out of the Medicare Advantage plan service area; or
- if your Medicare Advantage plan significantly modifies premiums or benefits or discontinues its coverage to Medicare-eligible participants.

For details, refer to *Guide to Medicare Supplement for Retired Members*.

## Resources

For an overview of the coverage options you should consider before deciding how to supplement your basic Medicare benefits, read the Board's publication *Choosing Healthcare Coverage at Retirement*. For a more detailed look at the Board's Medicare Supplement coverage, refer to *Guide to Medicare Supplement for Retired Members*.

Both publications are available at [pensions.org](https://pensions.org) or by request from the Board of Pensions.

See the following also:

- [medicare.gov](https://www.medicare.gov)
- [socialsecurity.gov](https://www.socialsecurity.gov)
- [healthcare.gov](https://www.healthcare.gov)
- [ncoa.org](https://www.ncoa.org)
- [pensions.org](https://pensions.org)

*This is not a full description of benefits and limitations of the plan. If there is any difference between the information presented here and the provisions of the Benefits Plan of the Presbyterian Church (U.S.A.), the plan terms will govern. Visit [pensions.org](https://pensions.org) or call the Board at 800-773-7752 (800-PRESPLAN) for a copy of the plan document.*

