

Notice To Medicare Recipients With Medicare Supplement Policies

Federal law requires insurance companies that sell Medicare supplemental insurance to allow Medicare recipients to suspend their Medicare supplemental policy for up to two years if they are approved for Medicaid.

With Medicare and Medicaid benefits, you may not need to continue your Medicare supplement policy, because your Medicare and Medicaid benefits will usually cover all your medical expenses if you use providers (doctors, hospitals, etc) who accept Medicare and Medicaid.

However, if you are approved for Medicaid benefits as a Qualified Medicare Beneficiary (QMB), your Medicaid card will not cover prescription medicine, because Medicare does not cover prescription medicine. If your Medicare supplement **does** cover prescription medicine, you may not wish to drop the supplemental coverage.

If you are approved for Medicaid, decide to drop your Medicare supplement policy, but want to reserve the right to reinstate your Medicare supplement policy, then you must:

- Contact the insurance company that carries your supplemental policy within 90 days of the date you are informed of your Medicaid eligibility and request the company to suspend your supplement policy benefits and premiums.
- If you lose Medicaid benefits within 2 years from the time you were approved for Medicaid and contact the insurance company within 90 days from the time of Medicaid loss, the insurance company will reinstate your Medicare supplement policy.
- If you lose Medicaid benefits after 2 years have passed since you were first approved for Medicaid, the Medicare supplement policy will no longer be in suspense status and you will have to reapply with the insurance company if you want to resume the supplemental benefits.

If you have any questions regarding the above procedures, contact the insurance company which carries your insurance.