
Medicare Eligibility and the Marketplace

The federal Health Insurance Marketplace, a key part of the Affordable Care Act, is a way for individuals, families, and employees of small businesses to get health coverage — either through private insurance companies or the Oregon Health Plan. If you have Medicare, you do not need the Marketplace to get health coverage. Below are frequently asked questions about Medicare and the Marketplace.

If I have Medicare, do I need to do anything?

No. Medicare is not part of the Marketplace. If you have Medicare, you are covered and do not need to do anything about the Marketplace. The Marketplace will not affect your Medicare choices or benefits.

Does Medicare coverage meet the Affordable Care Act's requirement that all Americans have health insurance?

If you have Medicare Part A (hospital insurance), you are covered and do not need to get a plan through the Marketplace. Having Medicare Part B (medical insurance) alone does not meet this requirement.

Can I get a Marketplace plan in addition to Medicare?

No. It is against the law for someone who knows that you have Medicare to sell you a health plan through the Marketplace or an insurance company. This is true even if you have only Part A or only Part B. If you want coverage to supplement Medicare, contact the Oregon Insurance Division sponsored Senior Health Insurance Benefit Assistance (SHIBA) program at 800-722-4134 (toll-free) to learn more about Medigap policies. You can also learn more about other Medicare options, such as Medicare Advantage plans, by calling SHIBA or visiting Medicare.gov.

Can I choose Marketplace coverage instead of Medicare?

Generally, no. However, there are a few exceptions:

- You can choose a plan through the Marketplace if you are eligible for Medicare but have not enrolled because you would have to pay a premium for Part A, or because you are not collecting Social Security benefits.
- If you are paying a premium for Part A, you can drop your Part A and Part B coverage and get a plan through the Marketplace.
- If you do not have five years documented legal resident status to qualify for Medicare or Medicaid, you may be able to get a Marketplace plan.

Your household income will determine whether you qualify for financial help to pay for the plan through the Marketplace.

Before making a choice, there are two points to consider:

1. If you enroll in Medicare after your initial enrollment period ends, you may have to pay a late enrollment penalty for as long as you have Medicare.
2. Generally, you can enroll in Medicare only during the Medicare general enrollment period (from Jan. 1 to March 31). Your coverage won't begin until July of that year.



Senior Health Insurance Benefits Assistance Program (SHIBA)

Phone: 888-722-4134 (toll-free)

www.shiba.oregon.gov

www.insurance.oregon.gov



What if I become eligible for Medicare after I join a Marketplace plan?

You can get a health insurance plan through the Marketplace before your Medicare begins. You can then cancel your health insurance plan when your Medicare coverage starts.

Once you are eligible for Medicare, you will have an initial enrollment period to sign up. For most people, the initial enrollment period for Medicare starts three months before their 65th birthday and ends three months after their 65th birthday.

In most cases, it is to your advantage to sign up when you are first eligible because:

- Once you are eligible for Medicare, you will not be able to get lower costs for a the Marketplace plan based on your income.
- If you enroll in Medicare after your initial enrollment period ends, you will have to pay a late enrollment penalty for as long as you have Medicare.

Note: You can keep your the Marketplace plan after your Medicare coverage starts. However, once your Part A coverage starts, any premium tax credits and reduced cost-sharing you get through the Marketplace will stop.

Can I get a stand-alone dental plan through the Marketplace?

No. However, you can purchase a dental plan directly from a health insurance company. Contact your agent to learn more about dental plan options.

More Information

Help paying for my Medicare costs

- If you need help with your Part A and B costs, you can apply for a Medicare Savings Program. To apply, contact your local state Aging and People with Disabilities office by calling 800-282-8096 (toll-free). TTY users should call 800-282-8096 (toll-free). You can also locate local office information at www.oregon.gov/dhs/spwpd/pages/offices.aspx.
- If you need help paying for Medicare prescription drug costs, visit socialsecurity.gov/i1020, or call Social Security at 800-772-1213 (toll-free) to learn about the Extra Help program. TTY users should call 800-325-0778 (toll-free). Oregon SHIBA's state certified counselors can also help you complete and submit an Extra Help application.

Questions?

- SHIBA is part of the Oregon Insurance Division within the Department of Consumer and Business Services. SHIBA receives a grant from the Centers for Medicare and Medicaid Services to provide local help with Medicare. For more information or to learn more about Medicare enrollment, coverage and plan choices, contact SHIBA at 800-722-4134 (toll-free) or visit www.shiba.oregon.gov, Medicare.gov, or call 800-MEDICARE (toll-free).

Note: Although this fact sheet focuses on the Marketplace, much of this information applies if you are considering buying a plan outside of the Marketplace. Contact SHIBA for more information.



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