



Medicare Insurance Fact Sheet

To ensure benefits are coordinated appropriately, and to prevent financial liabilities with health care claims, participants must submit documentation to the Central Management Services (CMS) Medicare Coordination of Benefits Unit (MCOB) when becoming eligible for Medicare.

TRAIL - Total Retiree Advantage Illinois Medicare Advantage Program

Initial Enrollment: which is offered to all Medicare-eligible retirees and their Medicare-eligible dependents within 60 days of the 65th birthday (of the youngest enrollee).

Open Enrollment: an annual enrollment held in the fall of each year. This period is open to change elections or enroll. Changes are effective January 1st.

If you have questions about Medicare or how it coordinates with Group Insurance, please contact:

CMS MCOB
PO Box 19208
Springfield, IL 62794-9208
217-782-7007 OR
1-800-442-1300 ext. 7007
CMS.Ben.MedicareCOB@illinois.gov

Medicare Hotline 1-800-Medicare

Medicare is a federal health insurance program for individuals 65 and older, individuals under age 65 with certain disabilities, and individuals at any age with End Stage Renal Disease.

The State of Illinois Group Insurance Program requires retirees and their insured dependents as well as survivors and disabled benefit recipients who become eligible for premium free Medicare Part A (hospitalization) to enroll in Medicare Part B (outpatient services including office visits, labs, x-rays, and some medical supplies).

If you are unsure if you qualify for premium free Medicare Part A, contact your local Social Security Administration (SSA) Office. If a retiring or disabled plan participant fails to purchase Medicare Part B once they become eligible for premium free Medicare Part A, the State will reduce its benefits and the member will pay the portion Medicare would have paid. This reduction results in higher out-of-pocket expenses.

If a member and/or member's dependent are not eligible for premium free Medicare Part A, the State will pay your health insurance claims at the normal benefit level with no reduction. A letter from the SSA must be provided to the Medicare Coordination of Benefits Unit (MCOB) of CMS to verify ineligibility for premium free Medicare Part A.

State health insurance premiums are lower for Medicare Primary (enrolled in both Medicare Part A and Medicare Part B) dependents.

CMS will mail a letter to the member 90 days prior to turning age 65 that provides important information on both the requirement to enroll in Medicare and the transition to the TRAIL Medicare Advantage Prescription Drug Program (MAPD).

If you and/or your dependents receive or have Medicare cards from SSA, please send a photocopy of the card(s) to JRS or MCOB to ensure your insurance is administered correctly to avoid claim and/or premium errors.

TRAIL – Total Retiree Advantage Illinois Program

The State of Illinois offers retirees, annuitants and their covered dependents comprehensive medical and prescription drug coverage through State-sponsored Medicare Advantage Prescription Drug (MAPD) plans. Medicare Advantage Prescription Drug (MAPD) plans are part of Medicare and combine all the benefits of Medicare A (hospital coverage), Medicare Part B (doctor and outpatient care) and Medicare Part D (prescription drug) into one convenient plan. Retirees, survivors and all Medicare-eligible dependents should begin the enrollment process in Medicare Parts A and B **three months prior to turning age 65 or retiring**, whichever is later. For more information regarding the TRAIL Medicare Advantage Program, go to cms. illinois.gov/thetrail.

Retirees, annuitants and survivors who are **eligible** to enroll in Medicare Parts A and B **are required** to enroll in the TRAIL MAPD Plan if they do not insure dependents or they cover a dependent also enrolled in Medicare Parts A and B. If you meet these requirements, you will have 60 days to complete your enrollment in the TRAIL MAPD. If you are deemed eligible, failure to elect a TRAIL MAPD plan by end of the enrollment opportunity WILL result in loss of your State insurance coverage (health, prescription and vision coverage) and you will only have coverage through Medicare Parts A and B.

You will have two opportunities to enroll: the initial enrollment and the annual open enrollment. If you are retired, the Initial MAPD Enrollment is offered to all Medicare-eligible retirees and their Medicare-eligible dependents within 60 days of the 65th birth month of the youngest enrollee. If you are retiring and you and your covered dependents are already Medicare-eligible, the Medicare Eligible Retirement Enrollment is offered, and you will be required to enroll within 60 days of the date you receive your enrollment notification. Initial MAPD and the Medicare Eligible Retirement Enrollment are one-time offerings. You will also be able to enroll during the annual open enrollment period held in the Fall each year. This enrollment period is open for Medicare-eligible retirees, survivors and their dependents to change their elections, or for anyone who previously waived or cancelled coverage to re-enroll.

If you meet eligibility criteria, you will receive information from the MyBenefits Service Center and/or the Group Insurance Division of the Department of Central Management Services (CMS). You will need to review this information and make an enrollment election during the 60-day enrollment period. To avoid a loss of coverage, make this election prior to your Medicare effective date.

You may elect a TRAIL MAPD plan by visiting the website at MyBenefits.Illinois.gov or by contacting MyBenefits Service Center at (844) 251-1777. Failure to make this change during your enrollment period will result in a termination of your health/prescription and vision coverage for you and any insured dependent.