Medicare & the Health Insurance Marketplace

The 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.

If I have Medicare, do I need to do anything?
No. Medicare isn’t part of the Marketplace. If you have Medicare, you’re covered and don’t need to do anything about the Marketplace.

The Marketplace doesn’t affect your Medicare choices or benefits. No matter how you get Medicare, whether through Original Medicare or a Medicare Advantage Plan (like an HMO or PPO), you don’t have to make any changes.

Note: The Marketplace doesn’t offer Medicare Supplement Insurance (Medigap) policies or Medicare drug plans (Part D).

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’re considered covered and won’t need a Marketplace plan. Having Medicare Part B (Medical Insurance) alone doesn’t meet this requirement.

Can I get a Marketplace plan in addition to Medicare?
No. It’s against the law for someone who knows that you have Medicare to sell you a Marketplace plan. This is true even if you have only Part A or only Part B.

If you want coverage designed to supplement Medicare, visit Medicare.gov to learn more about Medigap policies. You can also visit Medicare.gov to learn more about other Medicare options, like Medicare Advantage Plans.

Can I choose Marketplace coverage instead of Medicare?
Generally, no. As noted above, it’s against the law for someone who knows you have Medicare to sell you a Marketplace plan. However, there are some situations where you can choose Marketplace coverage instead of Medicare:

- You can choose Marketplace coverage if you’re eligible for Medicare but haven’t enrolled in it (because you would have to pay a premium, or because you’re not collecting Social Security benefits).
- If you’re paying a premium for Part A, you can drop your Part A and Part B coverage and get a Marketplace plan.
Note: If you get premium-free Part A, you can’t drop Medicare without also dropping your retiree or disability benefits (Social Security or Railroad Retirement Board). You’ll also have to pay back all retirement or disability benefits you’ve received and all costs paid by Medicare for your health care claims.

Before making either of these choices, there are two important points to consider:

• 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.
• Generally, you can enroll in Medicare only during the Medicare General Enrollment Period (from January 1– March 31). Your coverage won’t begin until July of that year.

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

You can get a Marketplace plan to cover you before your Medicare begins. You can then cancel the Marketplace plan once your Medicare coverage starts.

Once you’re eligible for Medicare, you’ll have an Initial Enrollment Period to sign up. For most people, the Initial Enrollment Period for Medicare starts 3 months before their 65th birthday and ends 3 months after their 65th birthday.

In most cases, it’s to your advantage to sign up when you’re first eligible because:

• Once you’re eligible for Medicare, you won’t be able to get lower costs for a Marketplace plan based on your income.
• 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.

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

If I have Medicare, can I get health coverage from an employer through the SHOP Marketplace?

Yes. Coverage from an employer through the SHOP Marketplace is treated the same as coverage from an employer group health plan. If you’re getting health coverage from an employer through the SHOP Marketplace based on you or your spouse’s current employment, Medicare Secondary Payer rules apply. Visit Medicare.gov to learn more about how Medicare works with other insurance.

If I’m getting health coverage from an employer through the SHOP Marketplace, can I delay enrollment in Part B without a penalty?

Yes. You can delay enrollment if you’re getting health coverage from an employer through the SHOP Marketplace based on you or your spouse’s current employment. You have a Special Enrollment Period to sign up for Part B without penalty:

• Any time you’re still covered by the group health plan based on you or your spouse’s current employment.
• During the 8-month period that begins the month after the employment ends or the coverage ends, whichever happens first.

If you don’t sign up during this Special Enrollment Period:

• You may have to pay a late enrollment penalty.
• You can only enroll during the General Enrollment Period which occurs each year from January – March with coverage beginning July 1.
I have End-Stage Renal Disease (ESRD), but I haven’t signed up for Medicare. Can I get a Marketplace plan?

Yes. People with ESRD aren’t required to sign up for Medicare. If you have ESRD and don’t have either Medicare Part A or Part B, you can get a Marketplace plan. You may also be eligible for tax credits and reduced cost-sharing through the Marketplace.

I have Medicare coverage due to ESRD. Can I drop my Medicare coverage and choose a Marketplace plan?

Generally, no. Once you apply for Medicare, your Medicare coverage will end one year after you stop getting regular dialysis or 36 months after a successful kidney transplant. However, you may withdraw your original Medicare application. You would have to repay all costs covered by Medicare, pay any outstanding balances, and refund any benefits you got from Social Security or the Railroad Retirement Board. Once you’ve made all of the repayments, the withdrawal will be processed as though you never had Medicare at all.

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

In most cases, no. If the Marketplace in your state is run by the federal government, you won’t be able buy a stand-alone dental plan. If your state is running its own Marketplace, you may be able to purchase a stand-alone dental plan, if one’s available.

Is prescription drug coverage through the Marketplace considered creditable prescription drug coverage for Medicare Part D?

While prescription drug coverage is an essential health benefit, prescription drug coverage in a Marketplace or SHOP plan isn’t required to be at least as good as Medicare Part D coverage (creditable). However, all private insurers offering prescription drug coverage, including Marketplace and SHOP plans, are required to determine if their prescription drug coverage is creditable each year and let you know in writing. Visit Medicare.gov for more information about creditable coverage.

How can I get 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. Call your state Medical Assistance (Medicaid) office. To get their phone number, visit Medicare.gov/contacts, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
- If you need Extra Help to pay for Medicare prescription drug costs, visit socialsecurity.gov/i1020, or call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778.

Where can I get more information?

- To learn more about Medicare enrollment, coverage, and plan choices, visit Medicare.gov, or call 1-800-MEDICARE.
- If you have family and friends who don’t have health coverage, or if they want to explore health plan options, tell them to visit HealthCare.gov.