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In addition, eligible beneficiaries would not be subject to a late enrollment penalty for the period between the original enrollment period and the enrollment during this extension of the enrollment period. Beneficiaries are eligible for equitable relief due to the COVID-19 pandemic-related national emergency if they were unable to make their Part A or Part B enrollment choice in a timely manner due to delays and problems with access to the Social Security Administration (SSA) to file an application or enrollment election, as a result of the unexpected closure of field offices due to COVID-19.**   See COVID-19 FAQ’s: [https://www.cms.gov/files/document/enrollment-issues-covid-ab-faqs.pdf](http://www.msgapp.com/jc.aspx?d=GWG4W3UDGAKEJ77FVZIXSO4BKVESFWSCSBNEDIDBM4XA4NPBMFQUE2FL7R5332LMZZWM5TBPED4FXSZEIQB3ZAPPCHF5VKG2QNX2XKCGYF3SZQ63PANIZYEDAENDBRLGLR5DUXOZFSVWTPFSBHU4JJDAZBU4PZJMPGC47PC2T5YOZFJASUICRTX7APVATQV6V64BSBFFSF6LT2YRW4XXECMEFDBYYDDZ3V4CFIMHFDXD456IQY3MZ54JXYQHH3CCB6RLH66GB7TGKSRZ2XZXWYNV6LLLK2I6RHRY7KCTNZSG54YRT7XCCKN7JWBLX43KDMTWPRS2XYT7D4F2MYQSXVQSDZ7Q%3D%3D%3D%3D)    CMS is granting equitable relief in the form of additional time to use an Initial Enrollment Period (IEP), General Enrollment Period (GEP), or a Special Enrollment Period (SEP)--such as the SEP for when a beneficiary’s enrollment in employer coverage based on current employment ends--in order to file an application for Part B or premium-Part A or refuse Part B. **This equitable relief will last from March 17, 2020 through June 17, 2020. Beneficiaries are eligible for this equitable relief if:**   * **The beneficiary had an enrollment period during the period from March 17, 2020, through June 17, 2020, that was an IEP, GEP, SEP; and The beneficiary did not apply for Part B (or premium-Part A) or refuse Part B during that IEP, GEP, or SEP.**      * Eligible beneficiaries who wish to take advantage of the equitable relief must file their enrollment request by June 17, 2020.   Individuals who are eligible and have a valid election period between March 17, 2020, and June 17, 2020, and are not already enrolled in Medicare Part A should apply for Part A online at [https://www.ssa.gov/benefits/medicare/](http://www.msgapp.com/jc.aspx?d=CWG4DDUCGAKEL77FNUSSHVAZUBGURHGZCAZMJVEYEAWEX3MQQJGYOFQRGX7LXT53HF3XH3T5QACJNERIRYBZAF3AGQTCJQLKQBWTBWAEWBHRFUUEAZQICQIEAEUGIZ3HEPOKAJW7HI5SQJ4FKP7F6SJNZ3NE6XVXOKV5XZKDLKBYER7BDM4SDQ7XAA7MC3K565GZSU6NVPGX23CS3WL3YWWP6VBL5RHKYDBV3TM3LP2HGVFD4F73DO64XNRVCH2MW7MP45YYZP43VD3UUEVO5JUE4347TJEKWBELWLED44FQ%3D%3D%3D%3D).   Individuals who already have Medicare Part A and wish to sign up for Medicare Part B cannot sign up online. Individuals interested in using the relief to enroll in Medicare Part B coverage who are eligible to apply under the IEP or GEP should complete form [CMS-40B](http://www.msgapp.com/jc.aspx?d=CWG42UUDGAMELX7F3PBDQEBA7SWKIVG3LJV2OBKUSYQQ2JOQDBGKBNHD7DXMNOZZO5Z657IBBJEYIXEMNWQBGJBRIYUDIVKA4KMZQRRA6GIRHB5RBUJBEQDAAMZTZS5LECVGPI5OSXWJTISEGE6TBSWJQXVVD442H3ZPV5SAUUYIENSCNI4BUOX7APTATGVIHMZ755OULGPVOC7HTNF4PLNKZABP3JVIT7FG54ONISXE53SMS3Z23HC2QFEFANCEFQ3O34UU5XY6ZTLL7Y5GYG7NXCVBAH7P3MTD26ADP7M2344SIRJRLXK325NZKNG3DX3744Y7K5QYQD32RKBOUPQVFMFX57YA) and mail the request to their local SSA field office.   Individuals who are receiving Social Security benefits before their 65 birthday are considered to be in their IEP and are automatically enrolled in Part A and Part B. Those who do not want to be automatically enrolled in Part B must refuse the coverage within 60 days of receiving their IEP package. Instructions on how to refuse the coverage are included in the IEP package. Individuals may also contact the Social Security Administration at 1‑800-772-1213 (TTY users should call 1-800-325-0778) for more information on how to refuse the coverage.   Individuals interested in enrolling in Medicare Part B coverage who are eligible to apply under the SEP, should complete forms [CMS-40B](http://www.msgapp.com/jc.aspx?d=CWG4W3UDGAKEJ77FN2BYF3ME46VCQAKVCQUYLBQSWIZQMWQHFQJUZEG3VL7V45ZWM43GPZQHDCCD5QNONMAXWQAYXCCHRJQKBB3SNJSRBD3QIBK6MCAYIEDWMBAWP6BBK5A6PIK3KQZ4XIM3DGOTWNLVRTJZDK2F6GDD34KGN6MRIRSQI2EAYF2D6Q7WBHVAS3BM5KO3W7HQ5TRW4VGZK2O2D6LZOVLYQ6CTJAZ6PNJ62HEEVTJMFDZSTLCIRWLDLUJ7JWM76DKOX623C2HWOXEORG4JBIX5YZ537WSU5XE5L6UGKRAYVVYWXVPXCHW3L6V3ZL7ZYQF2ZR4HP5AXLYSEI74P2AY%3D) and h[ttps://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/CMS-L564E.pdf](http://www.msgapp.com/jc.aspx?d=CWG42UUDGAMELX7F3PFCQTMABKV6FX2YU5IFVKGU5SJDJRIQMIOAFFFJ4O5RX37G3TG3T5YHHASPO2ARIUPPAEMSHBBGR2NKQYCLXOCGEEEZAHZPMMHQYJAQQAD4FMJRSOTL2EUDMW6VDIXHWQL7MW3QJE5WSBZLDFPUSNW7OKRZ2YE5SA5A5DX676AHWAS4FZRGE3HQ2KHHL63UCGCLHNVJZZ36KR5KBL5JRR6RTQKQU22MYINSXWVJ27M7NNAOWMZVHHKOR5CZHU55F7Z2GGPQMG74K275L2R4WRRDKX5ACHTX2PBXKDC3JOVFI5GV6P6ETSCQG6K547F5WJV7KVUPE74P2AY%3D) ; both forms are available in English and Spanish versions. The CMS-40B application is completed entirely by the individual enrolling in Part B. For the CMS-L564 enrollment form:    **Section A:**   * Must be completed by individuals enrolling in Part B   **Section B:**   * Can be completed by the employer; OR * If it isn’t feasible for your employer to complete the form, leave Section B (the rest of the form) blank and provide at least one of the items listed below. Acceptable proof of employment, Group Health Coverage Plan (GHP), or Large Group Health Plan (LGHP) include but are not limited to: * income tax returns that show health insurance premiums paid; * W-2s reflecting pre-tax medical contributions; * pay stubs that reflect health insurance premium deductions; * health insurance cards with a policy effective date; * explanations of benefits paid by the GHP or LGHP; and * statements or receipt that reflect payment of health insurance premiums   Individuals can fax their completed enrollment forms to SSA toll-free at 1-833-914-2016, or mail the request to their local SSA field office. Although SSA offices are closed for in-person service, requests received by mail are still being processed. Individuals can find the address and phone number for their local field office using the [SSA Office Locator](http://www.msgapp.com/jc.aspx?d=CWGU234CIAKEL76L3NFAYX4CJRRNFDUNU3CAQLTKFG56CZM4CLAZCGIEVLY37632G7TW5TV5B5AGAS67RMRAP4AGFSEXYP5G3IBAWKGUASYNA54THBYUAA4DAU4CBCKKB6WTAZ6Z3PFORMZUFCGLIV4JWVUGVW63XLBLPOU242UFWERMBHX4JHXI7YH5AE745K6LWX56SPIFZ5Y6FJJ7A3FQLER4N5N5HN6CQO5FT46D3DVJO6FDOLX73KL3RW7FLZIGYZ5BNTFBHTZ2GP6DISUKX6E3WF54CWLIXJK2VXQPSAQ%3D) [https://secure.ssa.gov/ICON/main.jsp](http://www.msgapp.com/jc.aspx?d=CWG4SDUCGAKEL77FNUQQ5CFNGQYZDQKZ4MIDK4IJWXIYVJKKRNR7Y547O5Z65ZW47MAQ5LHDGUEXDAKXYABOE6IUVMBNNQTAJOA7SXRDUCAQWGQYCBYECIEP7KXNEMQX2ZSKLTSFZHJVFGFL4AZL2SDDRXGHQT3GZ4NNOCQFQNBIRNGIYZ7QBH6AT7WE45NH6PROPRG7HOKCIS3CQR4VBK5D26RC3X3ZGVIKHYVRR6PCMVBWHYKPDOV6JLHG2MJPAYFZF5CHFPWVIN3HLRENCHGOMS4N3UHL6TMO3QXXA4%3D%3D%3D%3D%3D%3D).   **This assistance is available retroactive to March 17, 2020, and will continue for a period of 3 months ending June 17, 2020. Beneficiaries need to have qualified for and missed an enrollment opportunity during this period. Eligible beneficiaries must submit their delayed enrollment request** **before June 17, 2020.**   You may contact the Broker Medicare Resource Center with any questions regarding this brief by contacting 1-888-234-3313 Monday through Friday between the hours of 8:30 a.m. and 8:00 p.m., or by emailing us at [IBXMedicareBroker@ibx.com](mailto:IBXMedicareBroker@ibx.com). Beneficiaries can contact 1-800-MEDICARE (1-800-633-4227) anytime, 24 hours a day, 7 days a week with any questions. TTY users should call 1-877-486-2048. Members can contact Independence Blue Cross by calling the number on the back of their member ID card.   **Important Links-** [https://www.cms.gov/files/document/enrollment-issues-covid-ab-faqs.pdf](http://www.msgapp.com/jc.aspx?d=CWG4W3UDGAKEJ77FN2BQVOHBMFLALAMC7JEGSGTB2QORQBYMXBINWNFIKX7L33TMZZWM5TBPKCEEFZH2XYCXJBII7MEALJQKRDXE2TFLEHNCGBYH3CBBSIQIYEBGNWGN36RJMI6TVKI7HSBEVUSVGC5DXSPLRUUKG72ICN63DWOYKEMUCFREG3PI7QHZQJ6YF26EUJZSG7PKFQTSJWVMCHKZFTLWF3PYKTSTWERGS7WURWTXTZTVHF337VZJRMD7EX5LSO37HKVCQECG3YTE44Q443YPDRI6LSA7W3BZF5W3YIY76YY5S262P3U2XCC7J5M4ASV3H7QPJ2MHVR6YTUVXTLBO2DY%3D) [https://www.ssa.gov/](http://www.msgapp.com/jc.aspx?d=CWG4WDUCGAKEJ77FV2EWANIFXLJLQUDR4EVQMYOXSZDBXKBVFUXTL7V327MZZWM4TEHUQYAJTFJBVAHMQCSZJEAYVMATNQ3A4PAOMJCK4M2AACYMKIEEAILPWY35ZVNK6XBNSWRZZGO7ETZFGVX3I355CZZKDRJYSHLKBYCRLARFWZHUD7ACPWGV4YWGQE5KMM3GYES6THLK3YVR5TETWLZLDUEUX6N2PDOYXDS6SJQ3JTNVE344DDUPNUJ7NWLJZ7Q7WAY%3D) [https://www.ssa.gov/disabilityresearch/wi/medicare.htm](http://www.msgapp.com/jc.aspx?d=DWGVCT4DGAKIL76LPWK3QQVRVRGUZJUOGDO5RBU3BHNVXOJULITWSQ5BMLGP5O4N47SXYL67HG7YAIHGJHGFQBBYQLQCYSNSQAOQQGQSJCBEQE6CGMPICAIBGGAQQVEAO7RTXWK72TQJVXS4KSH3EV6OFLKPES53YHUQMF52TFXNC5CBOBAXQCB5QT7B6CCX6DZJZPIWXG3VXZ7L2NU3YK3IMF3TSWOHWXNDTZRTFMW43U7JOOKPLU5WV7NOLJWVM7DD4PHH2X5PRM6CDHMW6SRE4VPLO33FOPHNZQKMOM6FFJ5QLKHHFFOO4TRXOWO4KC6IP2Y7) [https://www.medicare.gov/Publications/](http://www.msgapp.com/jc.aspx?d=CWG4W3WCGAKEJ77FN2EUU3FICNNUE2SKCNC3ZGVQECSTXR3SLMVVQRVRQEAOVP3TTHGZZTMZXGBQFEKSYJMAJ2QEQIZUUE2EBNRIEQMSECTDJZQJR7AICACCEABI34HLZZLPNHIOX3WV3J33EV563D22DF4TAPTY2OVDPUYOF7FFSFB4BIMXNQEOT4BXQBLZWEEYKSOLOCUWVOY73HE3LOFI4F6VINXHYXVXMRONO6ZBTZ2ZYXFN3EFEL2ZI4X3D3X6FJGT7YVV5TTB7R44ZT7ZN3BW62PXWNRS2OS4S2WZRT7B7AA%3D%3D%3D%3D%3D%3D) [https://www.medicare.gov/eligibilitypremiumcalc/#TabTop](http://www.msgapp.com/jc.aspx?d=CWG4W3WCGAKEJ77FN2EQQGCIMJFZKIFCIKIXRJAIBBSWOGZXTASDF4RDWVJPLX7LZZTM5ZWM7QAAPEVBNGJEJQA5CCOCBFAG5SAMYQQCKEQHGNGBFGHEAAMBFGBAQREALL2R3VMNWCDGTVIIZWURNZRFXCSK2NGWJDDJPEXZGFLV2ECMCBLKC3PIZH7UBOECWI5NZT5NTBR4SBSXTBWKLXDCOD6CI3PWLT5QDL3NXKZYLPUOMSU7NVJJU33UGUS74P5NMX7SYLGY44TT2OHS4NPPI4X344XX3R7IY7D72HTMYEGKTNVLPD6LQX77YFTNTG64D3Y7)    Independence Blue Cross offers products through its subsidiaries Independence Hospital Indemnity Plan, Keystone Health Plan East and QCC Insurance Company — independent licensees of the Blue Cross and Blue Shield Association. | | | | | | |