

MEDICARE REFERENCE TABLE


IF EMPLOYEE IS STILL WORKING

	NY44 Trust requires enrollment in Medicare Part A	NY44 Trust requires enrollment in Medicare Part B
Active employee (enrollee) is 65 or older	No (But <i>Recommended</i>)	No
If your covered spouse is 65 or older	No	No
If your covered spouse is 64 or younger	Not applicable	Not applicable

Please be aware that pursuant to the NY44 Summary Plan Description (“SPD”), if an active employee is considering retirement, both they (if age 65 or older) AND their spouse, if age 65 or older, must have both Parts and A & B.

IF EMPLOYEE IS RETIRED


	NY44 Trust requires enrollment in Medicare Part A	NY44 Trust requires enrollment in Medicare Part B
Retired employee (enrollee) is 64 or younger and not Medicare-disabled	Not applicable	Not applicable
Retired employee (enrollee) is 65 or older	Yes	Yes
If your covered spouse is 64 or younger	Not applicable	Not applicable
If your covered spouse is 64 or younger <u>and</u> Medicare-disabled	Yes	Yes
If your covered spouse is 65 or older and retired	Yes	Yes
If your covered spouse is 65 or older, working, and enrolled in their own employer’s health plan	Yes	Yes

 **Failure to enroll in Medicare Part A and Part B within six (6) months of an enrollee’s first date of eligibility will result in the loss of medical coverage through the NY44 Trust effective six (6) months from the date of first eligibility, and enrollees will not be eligible for COBRA continuation.**

IF YOU HAVE A DOMESTIC PARTNER

(REGARDLESS OF THE ENROLLEE (EMPLOYEE’S) EMPLOYMENT STATUS)

** REGARDLESS OF THE ENROLLEE (EMPLOYEE’S) EMPLOYMENT STATUS**	NY44 Trust requires enrollment in Medicare Part A	NY44 Trust requires enrollment in Medicare Part B
If your covered domestic partner is 64 or younger <u>and</u> Medicare-disabled	Yes	Yes
If your covered domestic partner is 65 or older	Yes	Yes

 **Every employee and/or spouse, should be receiving communication from their school the month prior to their turning age 65 outlining their responsibilities under the SPD relative to Medicare Parts A & B enrollment. This communication should include a letter and a Medicare Fact Sheet. If you do not receive these documents, please contact your school’s benefit administrator directly.**