

Retirement Daily

Social Security/Medicare



Ask Bob: Signing up for Medicare

By Robert Powell | Oct 22, 2019 7:40 AM EDT

Question: I am going to be 65 this year. How do I go about signing up for Medicare properly and get the most medical and drug coverage for my premiums? Which Medicare coverage companies are the most reliable and trustworthy? How long do I have to sign up for Medicare? I currently have health insurance through my employer. Do I have to quit my employer's health insurance? If I do have to quit my employer's health insurance, am I to keep my wife on the employer's insurance as my wife is going to be 60 years old this year?

Mike Kelley, a certified financial planner and owner of [Kelley Financial Planning](#) answers your questions. Let's take these questions individually.

How do I go about signing up for Medicare properly and get the most medical & drug coverage for my premiums?

You can enroll in Medicare Part A & B one of three ways:

- Visiting the Social Security website at [SocialSecurity.gov](https://www.SocialSecurity.gov)
- Calling the Social Security office at 1-800-772-1213
- Making a trip to your local Social Security office

Once you've determined that you need more than just Medicare Part A and B, Kelley says the best resource for comparing Advantage Plans (Medicare Part C) is Medicare's online [Plan Finder](#). You can input your zip code, prescriptions you take, and pharmacies you prefer. The Plan Finder will then help you breakdown the coverage, premiums, estimated annual costs, out of pocket maximums, and that provider's quality rating. Once you narrow down your choice you can simply click "Enroll" right from the Plan Finder. If you need help deciding between the plans, you can call your state's [Senior Health Insurance Program](#) (SHIP).

Which Medicare coverage companies are the most reliable and trustworthy?

Medicare uses an overall star rating to help consumers understand the plan's quality and performance, says Kelley. Ratings are on a scale of 1 to 5 with a 5-star rating being the highest rating a plan can receive.

For health plans, he says, the rating is based on these five areas: Staying healthy, managing chronic conditions, member experience/rating, member complaints, and the health plan customer service.

For prescription drug plans, the rating is based on these four areas: Customer service, member complaints, member experience/rating, and drug safety/accuracy.

More information regarding the plan rating criteria can be found [here](#).

How long do I have to sign up for Medicare? And, currently I have health insurance through my employer, do I have to quit my employer's health insurance?

Eligibility for Medicare coverage begins the first day of the month in which you attain age 65, explains Kelley. If you plan to continue working past age 65 and you work for a company that has 20 or more employees, you do not *have* to do anything. You can simply continue using your employer's health insurance and ignore the Medicare brochures until you're ready for retirement.

You can, however, choose to enroll in Medicare Part A, which is usually free if you have 40+ "working credits," but please make sure you delay filing for Part B coverage until you decide to retire, because Part B carries a standard monthly cost of \$135.50. According to Kelley, the reason people choose to just enroll in Part A or delay enrolling altogether is that when you're dually covered by an employer's plan *and* Medicare, Medicare becomes the secondary payer and, because Medicare is only basic health insurance, it may pay little or nothing after your employer's plan pays the initial part.

Should you decide to enroll in Part A you can do that at any time while still an active employee or within eight months after the month in which your employment is terminated.

Just please, says Kelley, be careful and make sure you delay Part B until you retire because you may end up exhausting the six-month guaranteed enrollment period that you have to find a Medicare Supplement (Medigap) policy.

Kelley also notes that if you work for a company that has fewer than 20 employees, the company can either choose to exclude you from the group coverage, forcing you to enroll in Medicare, or they can let you keep the group coverage as secondary and require you to enroll in Medicare Part A.

If I do have to quit my employer's health insurance, am I to keep my wife on the employer's insurance as my wife is going to be 60 years old this year?

Again, assuming that you work for a company with 20 or more employees, Kelley says, you will be able to remain on the employer's health insurance plan and your spouse will still be covered as well.

Got questions about the new tax law, Social Security, Medicare, retirement, investments, or money in general? Want to be considered for a Money Makeover?

Email Robert.Powell@TheStreet.com. Kim McSheridan assisted with this report.

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