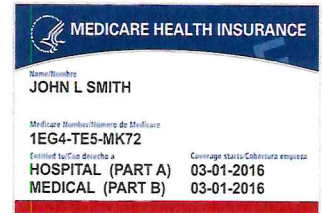


# Medicare for People Under 65

## Who qualifies for Medicare?

- People age 65 or older.
- People under age 65 with blindness or a disability, that affects their ability to work for a year or more, or will result in death, and enough work history, may be eligible. Generally, a person must have worked for at least 5 of the last 10 years to qualify for disability.
- Individuals with End Stage Renal Disease (ESRD).
- Individuals with Amyotrophic Lateral Sclerosis (ALS or Lou Gehrig's Disease).



## When does Medicare begin?

Generally, individuals receiving Social Security disability are automatically enrolled into Medicare Part A and Part B two years (24-months) after the date they became entitled to disability and will receive a welcome package with their Medicare card in the mail three months before their coverage begins.

If a person has ESRD, they can get Medicare:

- The month they begin at-home dialysis treatments.
- The month they get a kidney transplant.
- 3 months after they start outpatient dialysis treatments.

If a person has ALS, they can get Medicare as soon as they become entitled to disability benefits.

## Are Medicare benefits required?

People receiving Social Security benefits must enroll into Medicare Part A when they become eligible.

If a person under age 65, or their spouse, are working and can get insurance from the employer, (with more than 100 employees), they may be able to delay enrollment into the other parts of Medicare, like Part B, Part D, or Medicare Advantage.

It is important to compare Medicare and the employer insurance to determine which is a better fit.

## Is there a penalty for not enrolling in Part B or Part D?

If a person chooses not to enroll in Part B, and does not have coverage from a current employer, a penalty may apply if enrollment is done later. Enrollment in insurance that is not from a current employer will not prevent Part B penalties. Common non-employer coverage includes Marketplace coverage, COBRA, VA benefits, and retiree coverage.

If a person chooses to not enroll in Part D, and does not have creditable drug coverage from another source, a penalty may apply if enrollment is done later. Part D is flexible and does consider other types of insurance for drugs as creditable for Part D, e.g., VA benefits or a retiree plan. These plan are required to send a letter stating whether their coverage is creditable for Part D.

When a person turns 65, any penalties they may have for Part B or Part D will end.

**For more information about Medicare coverage, see our Medicare Basics brochure or call 1-800-234-7119.**

# Medicare for People Under 65

## What if I have employer coverage?

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If you, or your spouse, are currently working and you get your health insurance from that employer, you may be able to continue this coverage if the employer has 100 or more employees.

If you have a Health Savings Account (HSA) through your employer, speak with your benefits department to find out how Medicare enrollment will impact this savings account.

## What if I have COBRA?

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COBRA coverage is an extension of an employer group plan, offered to individuals who experience certain qualifying events, such as loss of employment. Qualifying individuals may be required to pay the entire premium for coverage, up to 102% of the cost to the plan.

COBRA coverage will generally end when a person becomes eligible for Medicare. If a person is enrolled in Medicare before becoming eligible for COBRA, the COBRA coverage may be kept and would pay secondary to Medicare.

## Can I keep my Marketplace plan if I have Medicare?

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Yes, but you'll pay full-price for it. And your insurance company might end your Marketplace coverage. Once you're eligible for Medicare Part A, you no longer qualify for savings on your Marketplace plan premiums or out-of-pockets costs.

You will need to end your Marketplace coverage when your Medicare coverage starts. Your premium tax credit or extra savings won't stop automatically once you're eligible for Medicare.

## Can I get a Medicare Supplement?

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Federal law does not require insurance companies to sell Medicare supplement policies to people under 65. Some states do require insurers to offer at least one Medicare supplement policy to people under 65.

In Nebraska, beginning January 1, 2025, state law provides people who qualify for Medicare due to disability access to a Medicare Supplement, but insurance companies may not offer every Plan option.

People with ESRD in Nebraska are not eligible for a Medicare supplement plan.



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