

Annual Group Information Form for Medicare Eligible Products - Instructions

General

Unless otherwise specified in the instructions, complete all sections of this form with the number of members rather than the number of employees. Include an individual only one time in each section.

Do not complete this form if your company provides coverage to persons where Medicare is primary on a carved out basis. A carve out is where the non-Medicare (e.g. under 65 actively at work) and Medicare eligible (e.g. over 65 and retired) individuals have the same benefit except that the Medicare payment is subtracted before we pay the provider.

Medicare Eligible Classification

Please complete this section with any employee classifications for which your group provides coverage designed to be secondary to Medicare. For example, if your group only provides coverage to union employees after retirement, please specify "union retirees".

Total Employees for Medicare Secondary Payer (MSP) Rules

The purpose of this section is to determine which MSP rules apply to the persons enrolled through your group. You are responsible to provide accurate information to your insurer so that the insurer may properly administer MSP. If you need assistance with this section, please consult with your groups' legal or tax advisor.

When determining total employees for MSP purposes, please include all common law employees, regardless of the number of hours worked. Use the total number of worldwide employees (i.e., parent, subsidiaries, and siblings) for your company. Remember to include all of the following employees:

- Full-time employees
- Part-time employees
- Employees on disability subject to FICA taxes
- Leased employees if they are counted as employees under Internal Revenue Code § 414 (n)

A. Total Medicare eligible individuals and/or dependents (count each member individually)

For this section, include all individuals who are eligible for Medicare, regardless of whether they are eligible for or covered under the plan(s) offered by us.

A1 Total retirees/dependents who are 65 or older

- Enter the total number of retirees and/or dependents over age 65.
- If an employee and spouse are both over 65, please record "2" on this line. If an employee is over 65 and the spouse is under 65, record "1" on this line.

A2 Total Medicare eligible individuals < 65 eligible for Medicare primary due to disability

- Enter the total number of individuals under 65 who are eligible for Medicare due to a disability other than End State Renal Disease (ESRD).

A3 Total Medicare eligible individuals < 65, eligible for Medicare primary due to ESRD (End Stage Renal Disease)

- Enter the total number of individuals who are eligible for Medicare, specifically due to ESRD.

A4 Total Medicare eligible individuals ≥ 65, actively working and eligible for Medicare primary

- Enter the total number of individuals who are eligible for Medicare but still actively working.

A5 Other Medicare eligible individuals, not classified above

- Include any other persons who are eligible for Medicare primary status and not counted on lines A1 to A4 above.
- An example is an individual eligible for Medicare due to Amyotrophic Lateral Sclerosis (ALS).

A6 Subtotal A

- Add A1 through A5 to determine the number of individuals eligible for Medicare primary status.

B. Eligibility Credits (Employees or Dependents not Eligible for Medicare eligible Products):

B1 Individual's former employee class is not eligible for employer benefits

- Enter the total number of Medicare eligible individuals who are not eligible for group Medicare products because:
 - The individual was not eligible for health insurance benefits prior to retirement, or;
 - The individual's employment classification is not eligible for retiree benefits

B2 Individual does not have both Parts A and B of Medicare

- In order to enroll in the Medicare eligible products, an individual must have both Part A and B of Medicare.
- An individual may be ineligible for one part of Medicare due to:
 - Insufficient quarters of employment to qualify for (free) Medicare A and did not purchase Medicare Part A
 - Not qualifying as a dependent
- Enter the total number of Medicare eligible individuals who do not have both Parts A and B of Medicare.

B3 Individual lives outside of the service area 6 months or more per year

- Enter a number on this line only if your group offers a Medicare Advantage product. These individuals are not eligible for enrollment in a Medicare Advantage product.
- If your group offers a Medicare Supplemental type product, leave this line blank.

B4 Individual is not currently enrolled in a commercial product and is eligible for Medicare due to End Stage Renal Disease (ESRD)

- Enter a number on this line only if your group offers a Medicare Advantage product. Individuals who are eligible for Medicare solely due to ESRD may not enroll in Medicare Advantage
- If your group offers a Medicare Supplemental type product, leave this line blank.

B5 Actively working employees ≥ 65 who are eligible for and opted out of active coverage and elected Medicare as primary payer (group ≥ 20)

- An employee who is actively working for an employer with 20 or more employees has the right to opt out of employer coverage and elect Medicare as the primary payer. In this case, the employer may not provide coverage to supplement Medicare
- Enter the total number of employees, if any, as described above.

B6 Employee or Dependent not eligible for Medicare

- Enter the total number of individuals who are not otherwise eligible for Medicare due to reasons such as:
 - Not being a resident alien or is a resident alien who has lived in the United States less than five years
 - A US Citizen living overseas on a permanent basis
 - Person's age cannot be verified

B7 Total Eligibility Credits

- Add B1 through B6 to determine total eligibility credits.
- The number on this line should be less than or equal to line A6 above. If not, you may have double counted one or more individuals.

C. Net Medicare Eligible Individuals and/or Dependents

C1 Total individuals and dependents eligible for Medicare Eligible Products (Medicare Advantage, Medicare Supplemental)

- Subtract Total eligibility credits (B7) from total Medicare eligible individuals and/or dependents (A6) to determine the total number of individuals who are eligible for group Medicare products.

D. Univera Healthcare Coverage and Participation Percentage by Product

D1 & D2 Offerings

- Enter number of individuals enrolled in each of your Medicare Eligible Product offerings.
- Do not include anyone enrolled in carve-out or other retiree health plan products.

D3 Subtotal: Medicare Enrolled Individuals(D1+D2)

- Add D1 & D2 and enter this number. This is the total number of individuals you have enrolled in your Medicare Eligible Product offerings.

D4 Total Participation Percent (D3 divided by C1)

- Divide total individuals enrolled in your Medicare Eligible Product offerings (D3) by you total eligible individuals (C1) and enter in this percent. This is the participation percentage for you Medicare Eligible Product offerings.

E. Other Coverage

E1-E3

- Enter number of Medicare eligible individuals declining coverage in each of the applicable areas.