

This factsheet provides general information for ESRD patients. Please review the options available below and advise the Social Security representative of which option(s) you want to pursue — you may be eligible for more than one.

Consolidated Omnibus Budget Reconciliation Act (COBRA) Coverage Extension Due to a Disability

If you want your COBRA coverage extended due to a disability, contact Social Security to make a disability determination. A request for a disability determination to extend COBRA coverage is not an application for disability benefits, but a determination made by Social Security for COBRA extended coverage only. If a third party is paying your group health plan (GHP) premium, and you want your COBRA determination sent to your payer, please provide written consent during your Social Security office visit.

To request information about the qualifying events for an extension of COBRA coverage or an extension determination you must visit your local Social Security office.

Medicare Coverage Due to ESRD

Eligible individuals who are undergoing a course of dialysis or a kidney transplant may contact Social Security to enroll in Medicare. Medicare is a federal health insurance program administered by the Centers for Medicare and Medicaid Services (CMS). If you get Medicare Part A (hospital insurance), you can also enroll in Medicare Part B (medical insurance). You will need both Part A and Part B to get the full benefits available under Medicare to cover certain dialysis and kidney transplant services.

In deciding whether to enroll in Medicare, there are certain factors to consider such as:

- Do you currently have medical coverage through a group health plan? and
- What are the disadvantages to postponing Medicare enrollment?

When an ESRD patient has existing GHP coverage, Medicare is the secondary payer of Medicare-covered services for a period of time known as the 30-month coordination period. The 30-month coordination period starts the first month you are eligible to get Medicare because of kidney failure (usually the fourth month of dialysis), **even if you have not signed up for Medicare yet**. At the end of the 30-month coordination period, Medicare will pay first for all Medicare-covered services. Check with your plan's benefits administrator to see how your employer plan works with Medicare.

ESRD patients covered by a group health plan (GHP) may wish to:

- File for Medicare Parts A and B when first eligible to have Medicare as the secondary health coverage until the end of the 30-month coordination period: or
- Defer filing for Medicare until the end of the 30-month coordination period. If your GHP coverage will pay for most or all of your healthcare costs, you may want to delay enrolling in Part A and Part B until the 30-month coordination period is over.

Remember! There are no special enrollment periods for individuals who have Medicare based on ESRD. If you enroll in Part A, but do not enroll in Part B when first eligible, you can enroll later only during the annual general enrollment period (GEP). The GEP occurs every January to March with coverage starting the following July 1st. Enrollment during the GEP may result in a gap in coverage and a late enrollment penalty for as long as you have Part B.

To file for Medicare based on ongoing dialysis or a kidney transplant, you must visit your local Social Security office. For more information on Medicare, visit **www.medicare.gov**.

Disability Monthly Payments Due to ESRD

If you are not working at levels that are above the substantial gainful activity (SGA) level, you may be eligible to receive disability cash benefits. Individuals automatically get Medicare Part A and Part B after 24 months of disability benefit entitlement.

To file an application for monthly disability benefits, you may file online or contact your local Social Security office.

For More Information

You can visit our website at *www.socialsecurity.gov*, or call us toll-free at **1-800-772-1213** (for deaf or hard of hearing, call TTY **1-800-325-0778**).



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