

Congress Must Streamline and Simplify Medicare Enrollment

The BENES 2.0 Act (S.1687) Offers Commonsense, Bipartisan Solutions

While most people are automatically enrolled in Medicare Part B because they are collecting Social Security benefits when they become Medicare-eligible at age 65, a growing number are not. Many are working later in life and deferring retirement; in 2016, only 60% of 65-year-olds were taking Social Security, <u>compared</u> to 92% in 2002.

This growing cohort must make active Medicare enrollment choices, taking into consideration specific timelines, complex Medicare rules, and existing coverage. Missteps are common and carry severe consequences, including lifetime financial penalties, higher out-of-pocket health care costs, and gaps in coverage.

On Medicare Rights National Consumer Helpline, we frequently hear from people who inadvertently failed to enroll in Medicare on time and are experiencing the harmful fallout. These errors are often due to confusion or unawareness about the enrollment process and Medicare requirements. The rules are so complicated that even Human Resources experts can struggle to follow them, and many employers' benefits departments lack the Medicare expertise to effectively guide their employees and retirees. Clear and simple advice from Medicare's federal agencies—the Social Security Administration (SSA) and the Centers for Medicare & Medicaid Services (CMS)—to those approaching eligibility would help, but today no such notice is required.

The bipartisan **Beneficiary Enrollment Notification and Eligibility Simplification (BENES) 2.0 Act** (<u>S. 1687</u>) championed by Senators Bob Casey (D-PA) and Todd Young (R-IN) would address these challenges.

Enrollment Errors Affect Tens of Thousands of Americans in Every State

The Medicare Rights Center answers nearly three million questions each year through our National Consumer Helpline and educational programs. In 2022, over one in four Helpline calls concerned Medicare enrollment, a similar share as in previous years. The most common questions were about whether, how, and when to enroll. Often, callers were confused about the timelines, where to find clear information, and the consequences of delaying enrollment. In 2021, thousands of beneficiaries in every state—about 779,400 people—were paying a Part B Late Enrollment Penalty (LEP). The average amount increased their monthly premium by nearly 30%.

The BENES 2.0 Act Would:

Increase Beneficiary Awareness through Notification and Education. The BENES 2.0 Act would direct the federal government to provide advance notice to individuals approaching Medicare eligibility about basic Medicare enrollment rules, filling a long-standing gap in education for older adults and people with disabilities.

Help Older Adults and People with Disabilities. The notification would be sent to individuals at ages 60 to 65 as part of their annual Social Security statement and to people with disabilities nearing the end of the 24-month Medicare waiting period. It would also be prominently posted on the SSA and Medicare.gov websites.

Clearly Explain Critical Medicare Enrollment Information. The notification would include information on Medicare eligibility; the potential effects of delayed Part B enrollment, including a late enrollment penalty and avenues for relief; and the need for coordination of Medicare benefits with other sources of insurance.

Ensure Stakeholder Engagement. The notice would be developed by CMS and SSA after a request for information and in consultation with key stakeholders, such as older adults, people with disabilities, low-income individuals, veterans, State Health Insurance Assistance Programs (SHIPs), HR professionals, private health plans, states, employers, and others.

Empower Medicare Decision-Making. Under the BENES 2.0 Act, for the first time in Medicare's history everyone approaching eligibility would receive trusted, actionable information from the federal government about their Medicare enrollment.