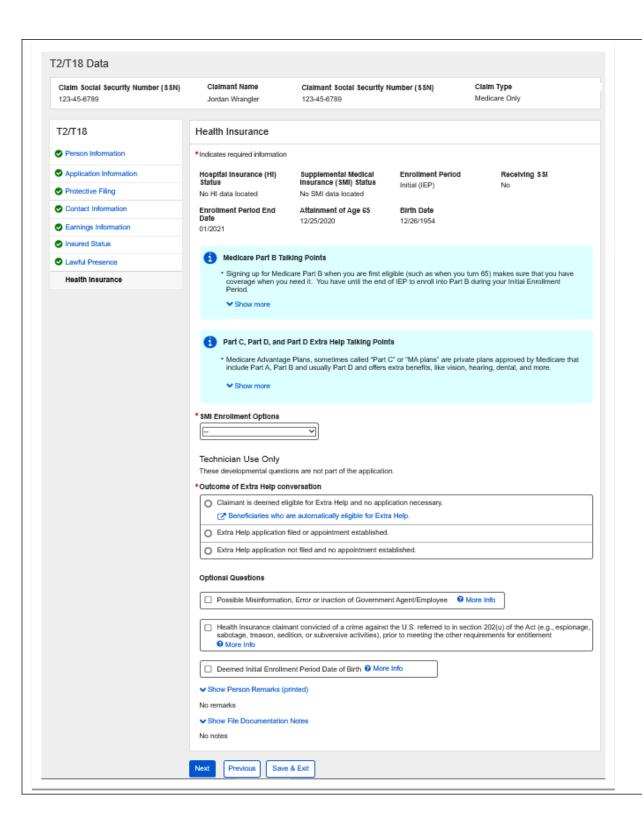
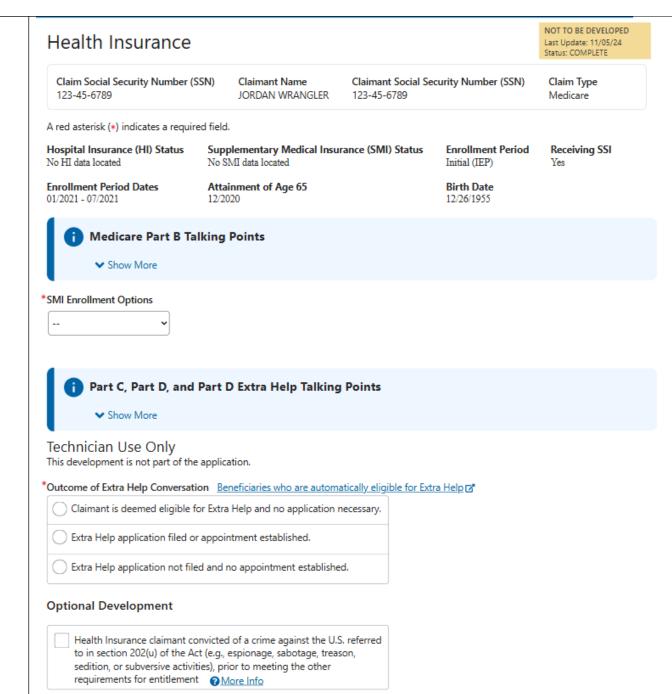


| *Agreed with the computational yearly earnings If the answer is no, please explain  O Yes O No  | *Worked under any other Social Security Number (SSN)  Yes No  *Worked last year or any time this year   | Moved earnings questions to technician use only (like for   |
|---|---|---|
| *Worked last year or any time this year • • More info   | If the answer is yes, at least one earnings year is required  RS 01404.005 Lag Period - and Lag Earnings   Yes No   | RIB), removed<br>multiple SSN<br>override (like<br>for RIB) |
| *Worked last year or any time this year ? More info If the answer is yes, at least one earnings year is required.  O Yes O No  Tack mission Llas Only | *Reviewed the earnings record and required earnings alert with the Claimant Earnings Queries System *Inaccuracies present/claimant disagrees with the earnings record  Yes No |   |
| Technician Use Only  Optional Pre-adjudicative Overrides  More Info Select all that apply   | Optional Pre-adjudicative Overrides   |   |
| Multiple Social Security Number (SSN)   | Item Correction   |   |
| ☐ Wrong Account Number ☐ Item Correction  | Railroad  |   |
| Railroad  | Include alleged earnings in pre-adjudicative results  |   |





Deemed Initial Enrollment Period Date of Birth @ More Info

Removed

n, Error or

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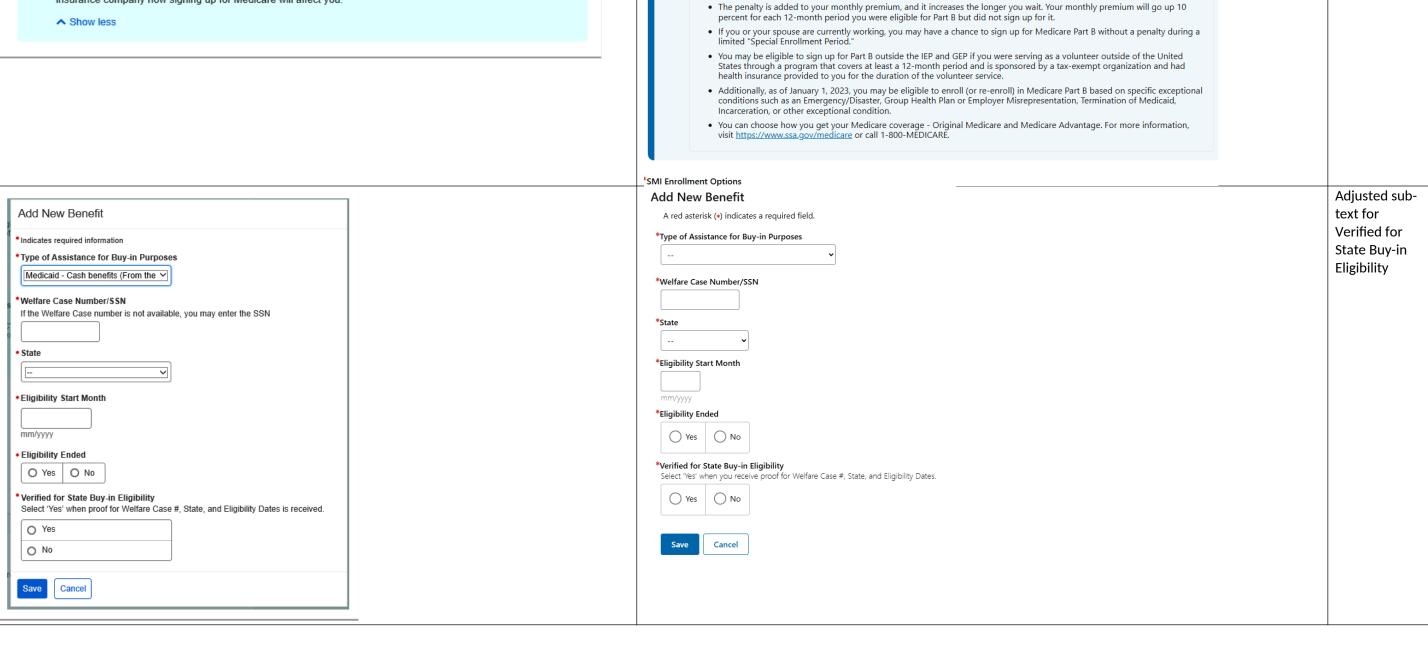
optional

question

Misinformatio

Possible

# Medicare Part B Talking Points Signing up for Medicare Part B when you are first eligible (such as when you turn 65) makes sure that you have coverage when you need it. You have until the end of IEP to enroll into Part B during your Initial Enrollment Period. Most people who do not sign up for Part B when first eligible can only enroll between January 1 and March 31 each year, with coverage starting on July 1. This may cause a gap in your coverage and you may have to pay a lifetime late enrollment penalty. The penalty is added to your monthly premium and it increases the longer you wait. Your monthly premium will go up 10 percent for each 12-month period you were eligible for Part B, but did not sign up for it. If you or your spouse are currently working, you may have a chance to sign up for Medicare Part B without a penalty during a limited "Special Enrollment Period." If you have health insurance based on current employment, you may want to ask your personnel office or insurance company how signing up for Medicare will affect you. A Show less



Hospital Insurance (HI) Status

**Enrollment Period End Date** 

▲ Show less

No HI data located

Supplementary Medical Insurance (SMI) Status

your coverage, and you may have to pay a lifetime late enrollment penalty.

No SMI data located

Attainment of Age 65

and you may have to pay a lifetime late enrollment penalty.

09/07/2022

Medicare Part B Talking Points

**Enrollment Period** 

General (GEP)

Birth Date

09/08/1957

• Signing up for Medicare Part B when you are first eligible (such as when you turn 65) makes sure that you have coverage when

Most people who do not sign up for Part B when first eligible can only enroll in the General Enrollment Period (GEP) between
January 1 and March 31 each year with coverage starting the month after you sign up. This may cause a gap in your coverage,

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Receiving SSI

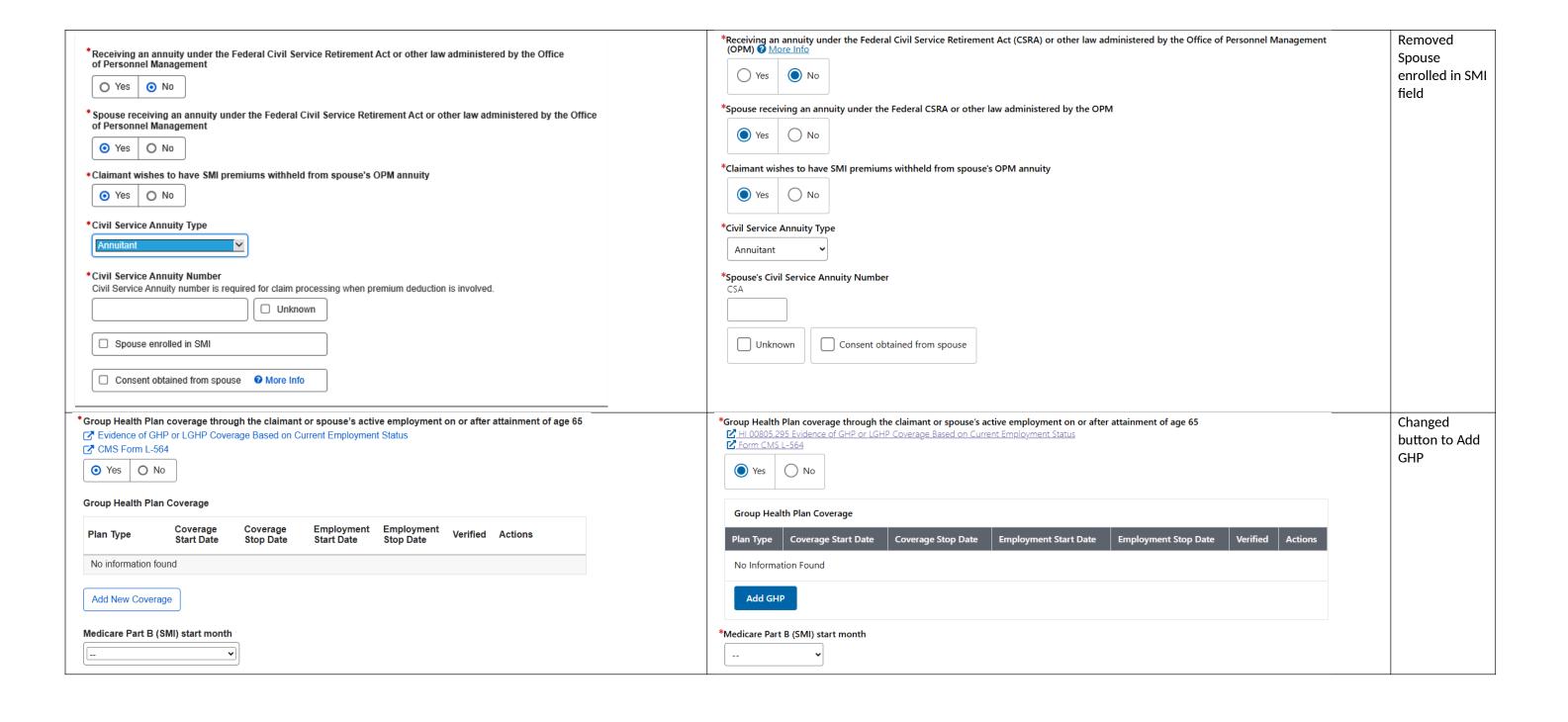
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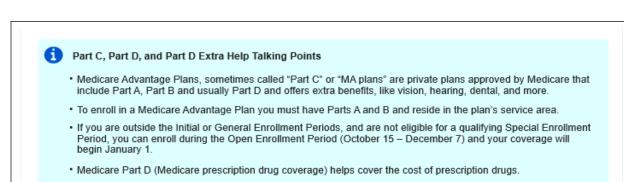
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talking points

stakeholder

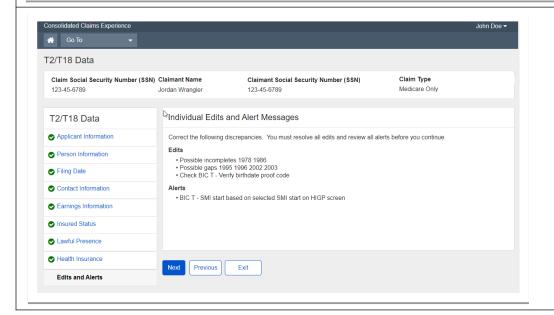
changes

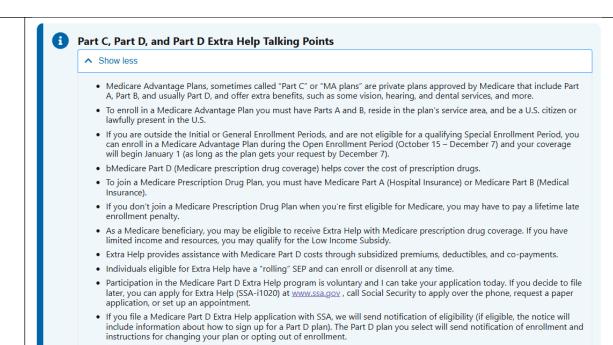


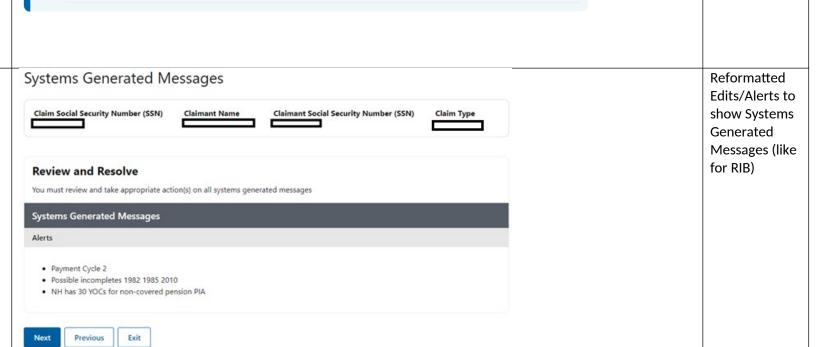


- To join a Medicare Prescription Drug Plan, you must have Medicare Part A (Hospital Insurance) or Medicare Part B (Medical Insurance).
- If you don't join a Medicare drug plan when you're first eligible for Medicare, you may have to pay a lifetime late enrollment penalty if you join later.
- As a Medicare beneficiary, you may be eligible to receive Extra Help with Medicare prescription drug coverage. If you have limited income and resources, you may qualify for the Low Income Subsidy.
- Extra Help provides assistance with Medicare Part C and Medicare Part D costs through subsidized premiums, deductibles, and co-payments.
- CMS sends notification of eligibility, notification of the Part D plan selected, and instructions for changing your plan or opting out of enrollment.
- Participation is voluntary and I can take your application today. If you decide to file later, you can apply for Extra Help (SSA-i1020) at www.ssa.gov, call Social Security to apply over the phone, request a paper application, or set up an appointment.

Show less







Adjusted

per

talking points

stakeholder

changes

# Pre-adjudicative Results

Beneficiary Identification Code (BIC) Ledger Account File (LAF) Insured Medicare Only Claim (T) Active Insured Status (U)

**Enrollment Period** Initial (IEP)

Filing Date 04/04/2020

Servicing Office Code 100

Program Service Center (PSC) Full Retirement Age (FRA)

03/08/2021

# **Person Information**

| Category              | Value  |
|-----------------------|--|
| Name                  | Jordan Wrangler                                  |
| Gender                | Male   |
| Birth Date            | 01/08/1955                                       |
| Birth Date Proof Type | Hospital Birth Record                            |
| Death Date            |  |
| Mailing Address       | 123 Sesame Street,<br>Baltimore, Maryland, 21208 |
| Residence Address     | 123 Sesame Street,<br>Baltimore, Maryland, 21208 |
| State and County Code | XXX  |
| Phone Number          | (410) 111-2000                                   |





### Insured Status

| Periods of Insured Status |                    |                   |  |  |  |
|---------------------------|--------------------|-------------------|--|--|--|
| Туре                      | Date First Insured | Date Last Insured |  |  |  |
| Retirement                | 07/2022            |                   |  |  |  |

# Insured Status

| Insured Status              | Insured | Total QCs<br>Required | Total QCs<br>Earned | Additional QCs<br>Needed | MQGE QCs Used |
|-----------------------------|---------|-----------------------|---------------------|--------------------------|---------------|
| Fully Insured Non-Exclusion | Yes     | 40                    | 40                  | 0                        | 0             |
| Fully Insured Exclusion     | No      | 40                    | 40                  | 0                        | 0             |

# Total Quarters of Coverage

| Туре            | Total Number of QCs |
|-----------------|---------------------|
| Maximum QCs     | 0                   |
| Simplified QCs  | 0                   |
| Wage After 1946 | 166                 |
| Wage After 1950 | 166                 |
| Self Employed   | 0                   |
| Agricultural    | 0                   |

### Totalization

| Category                                  | Value |
|---|-------|
| Totalization Involved                     |       |
| Total Quarters of Coverage Earned         |       |
| Periods for Which Coverage Exist Based on |       |

### Multiple SSN File

Multiple SSN No Information Found

Next Tab

Next Previous Exit

Reformatted Pre-Adjudicative Results and Adjudicative Results

# **Entitlement Dates**

| Insurance                            | Start Date | Termination/<br>Stop Date | Basis  | Non-Covered<br>Reason | Delay Reason |
|--------------------------------------|------------|---------------------------|--------|-----------------------|--------------|
| Hospital Insurance (HI)              | 01/01/2020 |                           | Age 65 |                       |              |
| Supplemental Medical Insurance (SMI) | 07/01/2021 |                           | Age 65 |                       |              |
| Third Party                          |            |                           |        |                       |              |

# Group Health Plan

|  | Plan Type         | Coverage<br>Start Date | Coverage<br>Stop Date | Employment<br>Start Date | Employment<br>Stop Date |
|--|-------------------|------------------------|-----------------------|--------------------------|-------------------------|
|  | Group Health Plan | 09/2019                | Continuing            | 09/2019                  | Continuing              |

# Premium Information

| Insurance | Premium Amount | Surcharge Percentage | Surcharge Amount | Payment Method    |
|-----------|----------------|----------------------|------------------|-------------------|
| HI        | Free           | 0                    | 0                |                   |
| SMI       | \$100          | 0                    | 0                | Direct Remittance |

# Medicare Eligibility

| Category                | Results                    |  |
|-------------------------|----------------------------|--|
| Determination Status    | Disallowance (Reason/Code) |  |
| Attainment Age          | 01/07/2020                 |  |
| Civil Service Annuitant | No                         |  |
| Medicaid Eligibility    | No                         |  |
| Criminal/Non-Criminal   | No                         |  |

 ● Insured Status
 Earnings
 Eligibility
 ● Medicare

# Medicare

# Entitlement Date

| Insurance                               | Start<br>Date | Termination/<br>Stop Date | Basis | Non-Covered<br>Reason | Delayed Reason        |
|---|---------------|---------------------------|-------|-----------------------|-----------------------|
| Hospital Insurance<br>(HI)              | 07/2024       |                           | Age   |                       | Late Filing           |
| Supplemental Medical<br>Insurance (SMI) | 01/2025       |                           | Age   |                       | Client Request/Choice |
| Third Party                             |               |                           |       |                       |                       |

# Group Health Plan

| Plan Type         | Coverage<br>Start Date | Coverage Stop<br>Date | Employment<br>Start<br>Date | Employment Stop<br>Date |
|-------------------|------------------------|-----------------------|-----------------------------|-------------------------|
| Group Health Plan | 01/2000                | Continuing            | 12/1999                     | Continuing              |

### Premium Information

| Insurance | Premium Amount (\$) | Surcharge<br>Percentage | Surcharge Amount (\$) | Payment<br>Method    |
|-----------|---------------------|-------------------------|-----------------------|----------------------|
| Н         | Free                | 0                       | 0.00                  |                      |
| SMI       | 185.00              | 0                       | 0.00                  | Direct<br>Remittance |

# Medicare Enrollment Periods

| Enrollment Period | Туре | Start Date | End Date |
|-------------------|------|------------|----------|
| Initial           |      |            |          |
| General           |      |            |          |
| Special           |      | 01/2025    |          |

# Civil Service Information

| Category                | Applicable |
|-------------------------|------------|
| Civil Service Annuitant |            |
| Civil Service Spouse    |            |
| Civil Service Survivor  |            |

Displaying Enrollment Periods and Civil Service Information

