

February 2019

TO: Medicare Retirees
FROM: Division of Pensions and Benefits
SUBJECT: REIMBURSEMENT OF 2018 MEDICARE PART D PREMIUMS FOR RETIREES WHOSE MEDICARE PART B REIMBURSEMENT IS CAPPED AT \$46.10

This notice is for eligible retirees whose reimbursement for the cost of Medicare Part B coverage is capped by law or by bargaining agreement at \$46.10 but may have paid an income related monthly adjustment premium for Medicare Part D coverage during 2018.

If you did not pay an additional premium to Medicare for Part D coverage, you are not owed any additional reimbursement and should disregard this letter.

The cost of coverage under Medicare Part D is based on an eligible individual's or couple's modified adjusted gross income. Some people may have paid a higher Medicare Part D premium based on their modified adjusted gross income.

Social Security used the income reported two years ago on your federal income tax return to determine your Medicare Part D premiums (if unavailable, SSA used income from three years ago.) For example, the income reported on your 2016 tax return was used to determine your monthly Part D premiums in 2018.

Your 2018 Part D Monthly Premium	If you file an individual tax return with Income of:	If you file a joint tax return with income of:	If you are married and file a separate tax return from your spouse with income of:
\$ 0.00	\$85,000 or less	\$170,000 or less	\$85,000 or less
\$13.00	Greater than \$85,000 and less than or equal to \$107,000	Greater than \$170,000 and less than or equal to \$214,000	N/A
\$33.60	Greater than \$107,000 and less than or equal to \$133,500	Greater than \$214,000 and less than or equal to \$267,000	N/A
\$54.20	Greater than \$133,500 and less than or equal to \$160,000	Greater than \$267,000 and less than or equal to \$320,000	N/A
\$74.80	Greater than \$160,000	Greater than \$320,000	Greater than \$85,000

If you or your eligible spouse/partner paid an additional premium for Part D coverage you must provide verification for the extra amount you paid in 2018. To do so, forward the following two (2) documents to the Division of Pensions and Benefits no later than April 1, 2019.

- 1) A copy of the cost-of-living adjustment letter(s) you received from Social Security in November of 2017 notifying you of your 2018 Medicare Part D premium increases and the income-related premiums. If you do not have a copy of this letter please forward a copy of the first 2 pages of your 2016 federal tax return; **AND**
- 2) A copy of your 2018 Social Security *Form SSA-1099 (or Form RRB-1099 if in the Railroad Retirement system)*. If you do not receive a *Form SSA-1099* you must submit other proof of Medicare Part D premium payments for 2018. Proof of payment may be shown by forwarding copies of quarterly billing statements, credit card statements indicating payments or cancelled checks. **PLEASE DO NOT STAPLE.**

Send all required documentation to the following address **no later than April 1, 2019:**

Division of Pensions and Benefits
ATTN: Health Benefits Financial Section
PO Box 295
Trenton, NJ 08625-0295

If you wish to utilize a delivery service other than the USPS, please send all required documentation to:
Division of Pensions and Benefits
ATTN: Health Benefits Financial Section
50 W State ST
Trenton, NJ 08608-1220

If you are eligible for reimbursement of Medicare Part D premiums, you will receive a check representing the unreimbursed balance you paid in 2018. Reimbursement checks will be issued beginning **April 30, 2019.**

You must forward the requested information by April 1, 2019 in order to receive a reimbursement check. **No 2018 reimbursements will be issued if requested after the April 1, 2019 filing deadline.**

If you or your eligible spouse/partner did not pay any additional premiums for Medicare Part D coverage you are not eligible for any additional reimbursements.

In addition, if you pay a higher Medicare Part D premium due to a late enrollment penalty, you will not be reimbursed for the penalty.

Due to high mail volume, please allow a minimum of 8 weeks to process your reimbursement from the time you mail it to our office.

If you have any questions about the Medicare Part D reimbursement, please contact the Division of Pensions and Benefits, Office of Client Services at (609)292-7524.

For more information about Medicare Part D premiums based on income, visit the Social Security Administration's Web site at <http://www.socialsecurity.gov/> or call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778.

PNMDDR (02/05/2019)

State of New Jersey
Department of the Treasury
Division of Pensions and Benefits
PO BOX 295
Trenton, NJ 08625-0295

ADDRESS SERVICE REQUESTED

REIMBURSEMENT OF MEDICARE PART B PREMIUMS

FIRST CLASS MAIL
U.S. POSTAGE PAID
TRENTON, N.J.
PERMIT NO. 21