

About Medicare:

Medicare is our nation's federal health insurance program for individuals who are 65 years of age or older or have certain disabling health conditions. The program has four parts:

- **Medicare Part A** pays for institutional health care, such as care in a hospital, skilled nursing facility, or a religious nonmedical health care institution (RNHCI) (the category under which Christian Science nursing facilities fit under the Medicare law). Most people do not have to pay a premium for Part A
- **Medicare Part B** pays for noninstitutional health care services, such as ambulance services, durable medical equipment (e.g. wheelchairs, canes), laboratory tests, and doctor visits. Everyone must pay a monthly [premium](#) for Part B. The premium changes annually. You may opt out of Part B. However, it is required for Medigap insurance.
- **Medicare Part C (Medicare Advantage) is an alternative** to Medicare Parts A and B. People enrolled in these plans are required to receive all of their health care through private managed care plans that contract with the federal government. These plans require monthly premiums that vary by plan.
- **Medicare Part D** provides prescription drug coverage through private health plans. Many, but not all, of these plans require monthly premiums.

Medicare Enrollment: There is a seven-month period that starts three months prior to your 65th birthday to sign up (enroll) in Medicare. People who are still working when they turn 65 may have more time to enroll. You are not legally required to enroll in all of the parts of Medicare. However, if you do not do so during this initial enrollment period but later decide you want benefits, you will need to pay [financial penalties](#) that increase the longer you wait to enroll. If you have certain types of other health care coverage, such as TRICARE {for military dependents}, a Medigap (Medicare Supplement) plan, or retiree health coverage, you may be required to enroll in Medicare to keep your other coverage.

Most people who are receiving Social Security benefits when they turn 65 will receive [a card through the mail](#) letting them know they have been automatically enrolled in Parts A and B. If you are still working when you turn 65, you need to [enroll in Medicare](#) when you stop working. To check your enrollment or sign up for Medicare, [click here](#), call 1-800-772-1213, or visit your local Social Security office. Once you enroll in Medicare, you will have the chance to change your coverage annually. Always make sure that information about your current Medicare coverage is in a safe place and easy to find.

Medicare and RNHCI Care:

Medicare covers services provided in a [RNHC that is a certified Medicare provider](#):

- If you sign a form stating that you are electing to have care in a RNHCI based on your religious beliefs (a "RNHCI election");
- If personnel at the RNHCI determine that you have a health condition that would otherwise require admission to a hospital or a skilled nursing facility (a "Medicare-covered level of care")

- If you require a Medicare-covered level of care when admitted. (Medicare coverage may end if you cease to need a Medicare-covered level of care.)
- If you need Medicare-covered care within the [number of days allowed under the RNHCI benefit](#).

Medicare does not cover all of the costs of a stay in a RNHCI, and does not cover the following costs at all:

- Medicare [deductibles and coinsurance](#);
- Religious aspects of care, such as the fees of a Christian Science practitioner;
- Convenience items, such as a television or telephone in your room or a visit by a hairdresser;
- Custodial care (this is the level of care that most people receive in a residential care facility).

The Medicare law restricts access to the RNHCI benefit if you sign an election form but later voluntarily use medical care. Medical care is defined as any care delivered under the supervision of a physician:

- Voluntarily receiving medical care **once** after signing one RNHCI election will not limit access to the benefit.
- If you sign a **second election** form and then voluntarily use medical care, you will lose access to the RNHCI benefit for one year.
- If you sign a **third election** and again voluntarily use medical care, you will lose access to the benefit for five years.

The **involuntary** use of medical care (e.g., being taken to the hospital unconscious in an ambulance) never limits your access to the RNHCI benefit.

Medicare Part C (Medicare Advantage) plans may have premium, deductible, and coinsurance amounts that are different from Medicare A and B, and they may cover services that those parts of Medicare do not cover. **Preauthorization from the plan is always required for a stay in a RNHCI**, and this has historically been very difficult to obtain because these plans are typically medically oriented. Before enrolling in a Medicare Advantage plan, you should request a copy of the plan, read it carefully, and ask plan representatives any questions you have. It may also be helpful to speak with the Christian Science nursing facility in your area about its experience with Medicare Advantage plans.

Medigap (Medicare Supplement) Plans:

Medigap plans are private health insurance plans that cover gaps in coverage under Parts A and B, such as deductibles (the amount the you must pay for services before Medicare pays) and coinsurance (your share of Medicare costs). These plans are usually less expensive if you buy them during your Medicare initial enrollment period. You may not have a Medigap plan and Medicare Part C (Medicare Advantage) coverage at the same time. The federal government offers a helpful [guide to comparing and buying Medigap plans](#). Medigap plans do not pay for costs associated with services that would not otherwise be covered by Medicare.