**ALERT:** Medicare’s annual, three month, “General Enrollment Period” begins on January 1, for individuals who did not sign up for Medicare when first eligible; it’s also an opportunity for “Conditional Applications” by some.

Most seniors enroll *(i.e., sign up)* for Medicare around the time they reach age 65. You have a seven-month period in which to enroll, which begins three months before the month of your 65th birthday. If you are already receiving Social Security benefits when you turn 65, you will be automatically enrolled; otherwise you must apply, with the Social Security Administration.

Unless an exception applies, if you fail to enroll during that seven-month period the next time you can do so is during January, February, or March of a subsequent year. This three-month period is called the “General Enrollment Period” *(GEP)*. If you enroll during a GEP you will be ‘penalized’ in two ways: your monthly premiums will be increased by a fixed percentage, and your coverage will not start until July.

Basically the only exception to the penalties for delayed enrollment is for individuals who had employer sponsored group health coverage based on their --- or their spouse’s --- *current employment*. Such individuals have a period of up to 8 months after that coverage ends to enroll in Medicare without penalty. Also, if you can convince the Medicare agency that your delayed enrollment was caused by the error, misrepresentation, action or inaction of a federal employee or agent, you can have the penalties waived and/or your enrollment date adjusted.

For most people eligible for Medicare, there are no monthly premiums for Part A. All Medicare beneficiaries must pay monthly premiums for Part B *(and in some cases for Part D prescription drug coverage)*,* which is why delayed enrollments often involve just Part B *(and/or Part D)*.

There are many seniors who don’t qualify for premium-free Part A because they lack enough years of Social Security-covered work. They commonly have very low incomes, making the cost of purchasing Medicare prohibitive. If they qualify for certain Medicaid coverages, Medicaid will pay their premiums. There is a “Conditional Application” process that enables them to apply for Medicare during the GEP, conditioned on their getting the Medicaid coverage. SCLO’s Fact Sheet entitled “*Conditional Applications For Medicare*” discusses this process.

* For a general description of how Medicare coverage works, see the SCLO Flyer “*Medicare: A Basic Introduction*.”