



# MEDICARE PART B REIMBURSEMENT PLAN (MBRP) APPLICATION

ALAMEDA COUNTY EMPLOYEES' RETIREMENT ASSOCIATION  
475 14<sup>th</sup> Street, Suite 1000 QIC 22901  
Oakland, CA 94612-1900 510.628.3000 / 800.838.1932, Press 1  
www.ACERA.org FAX 510.268.9574

The Medicare Part B Reimbursement Plan (MBRP) provides a reimbursement toward Medicare Part B premium, which is deducted from Social Security checks. Through ACERA, spouse and/or dependent costs for Medicare Part B are **not** eligible for reimbursement. If I drop my Part B at any time, I understand I must notify ACERA immediately and understand all medical coverage through ACERA will be cancelled.

**To qualify for MBRP, a retiree must:**

- Have at least 10 years of ACERA service;
- Provide proof of enrollment in Medicare Part B (a copy of Medicare Part B card) and **remain enrolled**; and,
- Complete and submit the MBRP Application.

**(Please Print or Type)**

Name: \_\_\_\_\_ Social Security No: XXX-XX-\_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone Number: ( ) \_\_\_\_\_ Cell Phone Number: ( ) \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Email Address: \_\_\_\_\_

*Check one:*

I have attached a photocopy of my Medicare Part B card.

I am currently in an ACERA sponsored Medicare Supplement Health Plan:

- Name of Plan:  Kaiser Senior Advantage  
 Medicare Complete Retiree Plan Medicare Advantage  
 Secure Horizons Senior Supplement Plans

I certify that I am enrolled in Medicare Part B. I understand the MBRP is not a vested benefit and there is no retroactive payment of this benefit. This benefit could be modified or deleted by the Board of Retirement at any time.

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Or**

Power of Attorney Signature\*: \_\_\_\_\_ Date: \_\_\_\_\_

**RETURN THIS FORM AND DOCUMENTATION TO ACERA**

**\*Must have Power of Attorney Documentation in member's file or submission with this form.**

ACERA USE ONLY	
Input By:	Date:
Verified By:	Date:
Out of Area: <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, forward to RS III	

## **MEDICARE PART B REIMBURSEMENT PLAN (MBRP)**

The Board of Retirement adopted a resolution authorizing ACERA to reimburse retired members for the Medicare Part B premium deducted from their Social Security checks.

### **Who is eligible?**

All retired members of ACERA who have at least 10 years of service with ACERA and are currently enrolled in Medicare Part B are eligible for the reimbursement.

### **Is my spouse or dependent eligible?**

No, only retired members are eligible for this benefit.

### **How do I prove enrollment in Medicare Part B?**

You can prove enrollment in Medicare Part B by sending ACERA a photocopy of your Medicare card showing eligibility for Medicare Part A & B.

### **Is this a guaranteed benefit?**

This is not a vested benefit and there is no retroactive payment of this benefit. This benefit could be modified or deleted by the Board of Retirement at anytime if determined it is not financially feasible to continue payment.

### **How do I apply?**

Complete the MBRP Application and return it to ACERA at 475 14<sup>th</sup> Street Suite 1000, Oakland, CA 94612. You may also download this form online [www.acera.org](http://www.acera.org).

### **When can I apply?**

ACERA has a continuous Open Enrollment for the Medicare Part B Reimbursement Plan (i.e. enrollment is allowed throughout the year). You can enroll as soon as you receive notification from Social Security your eligibility is effective for Medicare Part B.

### **When will payment begin?**

Payment will begin at the end of the first month after ACERA receives all required documentation, but not earlier than the effective date on your Medicare card. There will be no retroactive payment. Applications must be **received before** the end of the second week of the month.

### **How will payment be made?**

Payment will be made by an adjustment to the deductions on your retirement check and will show-up as an increase in your monthly retirement take-home pay.

NOTE: Certain applicants to Medicare Part B may be billed by Social Security on a quarterly basis. However, ACERA MBRP adjustments are only paid monthly. Applicants being billed quarterly will be reimbursed by ACERA monthly according to the date documentation is received but not earlier than the effective date on their Medicare card.

### **How much is the payment?**

Payment is set each year by the Board of Retirement. The current amount is \$96.40 per month.

(Rev. 02/08)

**Questions??? Call 510.628.3000, or 800.838.1932, Press 1 for Assistance**