

2026 Medicare Frequently Asked Questions

FAQs

If you have a specific question, see if it's here in the list below and click on the link to be taken directly to the answer you're looking for. Otherwise, feel free to browse and scan the FAQs at your own pace.

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Medicare Frequently Asked Questions

1. What is Medicare?

Medicare is a U.S. government health insurance program for people age 65 and older, and some people under 65 with certain disabilities or conditions.

2. What is the difference between Original Medicare Part A and Part B?

Original Medicare is made up of two parts:

- Part A is hospital insurance. It covers inpatient hospital care, skilled nursing facilities, hospice, lab tests, surgery, and home health care.
- Part B is medical insurance. It covers doctor visits, preventive care, ambulance services, durable medical equipment, mental health services, and more.

If you're already receiving Social Security benefits, you should be automatically enrolled in Original Medicare when you turn 65. If you're not receiving Social Security benefits, you need to sign up when you are eligible to be enrolled in Original Medicare Parts A and B.

3. How does Medicare work with my company coverage?

If you're still working and covered by your employer's health plan when you turn 65, you can typically enroll in **Medicare Part A** (hospital coverage) without affecting your employer coverage. However, you may choose to **delay enrolling in Part B** (medical coverage) until you retire or lose employer coverage. It's important to note that you must enroll in **Part B within eight months** of losing employer coverage to avoid late penalties and gaps in coverage.

If you're still working, your company's health plan will be your primary medical coverage, and if you choose to enroll in Medicare, Medicare will be your secondary coverage. Please note: Once you are enrolled in any part of Medicare (Parts A or B), you can no longer make contributions to a Health Savings Account (HSA), even if you are also covered by an HSA-eligible medical plan.

4. How does Medicare work with COBRA?

If you're already on Medicare when COBRA becomes available, you can keep both. Medicare will be your primary coverage, and COBRA can help cover additional costs like deductibles or coinsurance. You'll need to pay premiums for both.

However, if you enroll in Medicare after electing COBRA, your COBRA medical coverage will usually end at the end of that month. Be sure to notify your benefits administrator when you enroll in Medicare to avoid any issues.

You have eight months after your employment ends to sign up for Medicare Part B without a penalty. Waiting until COBRA ends could result in a coverage gap and late fees. Also, Medicare-eligible individuals typically aren't eligible for COBRA subsidies.

5. How do I enroll in Medicare for the first time?

To enroll in Medicare, you can visit your local Social Security office, apply online at ssa.gov, or call 1-800-772-1213 (TTY 1-800-325-0778) between 8:00 a.m. and 7:00 p.m., Monday through Friday.



6. Isn't Original Medicare (Parts A & B) enough without additional health or prescription drug coverage?

Original Medicare covers many essential services, but it doesn't cover everything. You'll still be responsible for deductibles, coinsurance, and copays, and there's no out-of-pocket maximum, which means your costs could add up quickly if you need extensive care.

Additionally, Original Medicare does not include prescription drug coverage, dental, vision, or hearing services. To fill these gaps, many retirees choose to enroll in:

- Medicare Advantage (Part C): Combines Parts A & B and often includes prescription drug coverage.
- Medigap (Medicare Supplement Insurance): Helps pay for out-of-pocket costs not covered by Original Medicare.
- Prescription drug plans (Part D): Covers medications you pick up at the pharmacy.

7. How are my premiums billed? How do I pay for my coverage?

When you first enroll in Original Medicare (Parts A & B) you'll receive an invoice directly from the Center for Medicare and Medicaid Services (CMS), the agency that administers Medicare. If you purchase additional coverage such as a Medicare Advantage, Medigap, or prescription drug plan, you'll receive invoices from the insurance company that issues those plans. If you choose a Medigap plan, you'll continue to receive billing for Original Medicare from CMS and separate billing for your Medigap plan from the insurance company.

Initially, you can pay your Medicare Part B premiums by check, with "Medicare Easy Pay" (automatic debit), or with a credit or debit card. If you enroll in additional insurance, you pay your premiums directly to your insurance company. If you have an HRA through your employer, you can often use the funds in your HRA account to get reimbursed for the cost of your premiums.

8. What's the difference between Original Medicare and individual Medicare insurance?

Original Medicare is the government-run program that includes Part A (hospital insurance) and Part B (medical insurance). An individual Medicare plan can help pay for costs not covered by Original Medicare. There are three main categories of individual plan coverage:

Medicare Advantage (Part C)

Offered by private insurers, these plans combine Part A and Part B and often include:

- Part D prescription drug coverage
- A network of providers, which may limit where you can get care
- An annual out-of-pocket maximum, offering financial protection

Medigap (Medicare Supplement Insurance)

These plans help pay for costs not covered by Original Medicare, such as:

- Deductibles, copays, and coinsurance
- Some plans cover foreign travel emergencies
- Does not include drug coverage, so you may need a separate Part D plan

Prescription drug plans (Part D)

Standalone plans that cover medications. These can be added to Original Medicare or Medigap but are usually included in Medicare Advantage plans.



9. When is the Medicare annual enrollment period?

The Medicare annual enrollment period for Medicare is October 15 to December 7.

10. What if I plan to retire in the middle of the upcoming year?

If you're planning to retire mid-year, you'll qualify for a special enrollment period (SEP) when your employer coverage ends. This SEP allows you to enroll in Medicare Part B and additional coverage (like Medigap or Medicare Advantage) without penalty, even if it's outside the standard annual enrollment period (October 15–December 7).

You'll have eight months from the end of your employment or employer coverage—whichever comes first—to enroll in Medicare Part B. It's important not to wait until COBRA ends, as that could result in late penalties or a gap in coverage. During your SEP, you can also shop for supplemental insurance plans that may fit your health needs and budget.

11. Do I have to enroll in Medicare and optional additional insurance?

If you're enrolled in group coverage and not planning to retire soon, there's no need to change your coverage. However, in some cases Medicare can be a preferable option and may be worth evaluating as an alternative to your current group coverage.

12. Where can I learn more about Medicare?

- Log on to Your Benefits Resources to download a copy of Medicare: What you need to know and do.
- Visit the "Medicare Basics" section on the Make It Yours site.
- Visit the "Social Security website" or call 1.800.772.1213 (TTY 1.800.325.0778) between 8:00 a.m. and 7:00 p.m. Monday through Friday.
- Review the "Medicare & You" handbook from the Centers for Medicare & Medicaid Services.

Medicare has neither reviewed nor endorsed this information.

We do not offer every plan available in your area. Currently we represent 68 organizations nationally which offer 3932 products nationally. Please contact Medicare.gov, 1-800-MEDICARE, or your local State Health Insurance Program (SHIP) to get information on all of your options.

The number of organizations and products available will vary by ZIP Code area and may be updated periodically. Any information we provide is limited to those plans we do offer in your area.

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