



## Medicare Part B-ID Lifelong Immunosuppressive Drug Coverage for Kidney Transplant

### **Who can enroll:**

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Individuals who were once enrolled in Medicare through the ESRD benefit, whose eligibility has terminated or will soon terminate now that they are >36 months post-transplant, and who do not have other healthcare coverage such as a group or individual health plan, TRICARE for Life or Veterans Affairs benefits, or a State health plan.

### **How to enroll:**

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The preferred way to enroll is to call Social Security at 877-465-0355, and request to enroll in the Medicare Part B-ID benefit. The applicant will need to complete a verbal attestation confirming eligibility to enroll in the benefit.

Alternately, the applicant may download and submit the CMS 10798 enrollment form, then drop it off at a Social Security Field office or mail it to Social Security Administration; Office of Central Operations; P.O. Box 32914; Baltimore, MD 21298-2703.

Determinations will be made within 30 days, and patients are notified by mail.

### **When coverage will start:**

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If enrollment is *prior* to the termination of ESRD-based Medicare, the Part B-ID benefit will begin the month after termination.

If enrollment is *after* termination of ESRD-based Medicare, the Part B-ID benefit will begin the month following enrollment.

For those who enroll between 10/01/2022 and 12/31/2022, coverage will start on 01/01/2023.

### **What it covers:**

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80% of immunosuppressive drug costs

Important note: this benefit does *not* cover other medical expenses such as doctor visits, laboratory tests, or imaging. It only covers medications that prevent or treat rejection; it does not cover any other medication. It does not cover compounding or IV administration fees for any medication, including for immunosuppressant medications.

### **What it costs:**

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In 2023, enrollees will be charged a monthly premium of \$97.10 to carry the Medicare Part B-ID benefit.

In 2023, enrollees have a deductible of \$226 and a copay of 20%.

### **Terminating coverage:**

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If an enrollee gains alternate health insurance at any point, the enrollee must terminate enrollment in Medicare Part B-ID within 60 days. This can be done by calling Social Security at 877-465-0355, visiting a Social Security Field office, or by completing and submitting a CMS 1763 termination form.