



**Member Turning 65/Spouse Turning 65 User Guide
(Retiree Members)**





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Introduction

This [GIC Members Turning 65 and Spouse Turning 65 Application user guide](#) is intended for assisting retiree members and their spouses, who are turning 65 and eligible for Medicare, with step-by-step instructions for starting the Members Turning 65 Application.

Members Turning 65 Application Steps

Scenario: Retiree members turning 65, and eligible for medicare with non-medicare dependents.

Important Message from the Group Insurance Commission (GIC)

Inbox x

My GIC Link mygiclinkcustomerservice@mass.gov
to sample1@example.com

Hi JOHN M SAMPLE,

You have an important message from the GIC regarding your GIC benefits. Please log into the [MyGICLink Member Benefits Portal](#) to view your message in the Notifications section of the member benefits portal. If have not registered yet, visit mass.gov/mygiclink-member-benefits-portal for more information registering for the member benefits portal.

Thank you for using MyGICLink,
Group Insurance Commission Team



Note: This is an automated email. Please do not reply or send documents to this email address.

Members turning 65 and eligible for Medicare will receive an email indicating that they have an important message in MyGICLink.

Members must:

- Log into MyGICLink



myGIC link

Home Benefits My Profile John S

Welcome to your Benefits Dashboard
John M Sample

ENROLLMENT STATUS
Enrolled

PLEASE NOTE
You can view your current benefits by clicking on the Benefits tab.

MY NOTIFICATIONS

- You are required to enroll in a GIC Medicare Plan or provide proof of Medicare ineligibility by mm/dd/yyyy

My Application(s)

You do not have any applications in progress at this time.

- Click on the link under **MY NOTIFICATIONS**



myGIC link Home Benefits My Profile John S

Member Turning 65 Application

- 1 Getting Started
- 2 Personal Information
- 3 Member Turning 65
- 4 Documents
- 5 Review and Submit

Getting Started

Our records indicate that you or your spouse are enrolled in a GIC health plan, turning age 65 and may be eligible for Medicare benefits. Members age 65 or older and Medicare eligible are required to enroll in Medicare Part A (for free) and Part B with the Social Security Administration and elect a GIC Medicare Plan in accordance with state law. Failure to enroll in a GIC Medicare Plan will result in termination of GIC medical, prescription drug and behavioral health coverage. Reinstatement of health coverage will only be allowed when Medicare Part A and Part B has been obtained by the member. After application submission, GIC will verify enrollment in Medicare Part A and B with the Centers for Medicare Services (CMS).

You do not need to enroll in a non-GIC Medicare Part D plan. You will be enrolled in GIC's Medicare Part D prescription drug plan when you enroll in one of GIC's Medicare Plans.

If you and/or your spouse are turning age 65 and NOT Medicare eligible, a non-Medicare plan can be selected but proof of ineligibility from the Social Security Administration is required. GIC must also be notified if eligibility for Medicare Part A (for free) changes.

Members can select a GIC Medicare Plan, and a GIC non-Medicare Plan for family members who are not eligible for Medicare when completing this application. Select "NEXT" at the bottom of this page to start your application.

Health

Members who are not eligible for Medicare Part A (for free) must select a non-Medicare health plan and provide proof of ineligibility of Medicare Part A (for free). To obtain this document, members must apply to the Social Security Administration for Medicare Part A (for free) and upload a copy of the Social Security Administration's denial notice before submitting their application. Please note that members must notify the GIC if eligibility for free Medicare Part A changes.

Members will be directed to the **Members Turning 65 Application.**

Members must complete five (5) sections to submit the application.

1. Getting Started
2. Personal Information
3. Member Turning 65
4. Documents
5. Review and Submit



Step 1: Getting Started

myGIClink Home Benefits My Profile John S

Member Turning 65 Application

- 1 Getting Started
- 2 Personal Information
- 3 Member Turning 65
- 4 Documents
- 5 Review and Submit

Health

Members who are not eligible for Medicare Part A (for free) must select a non-Medicare health plan and provide proof of ineligibility of Medicare Part A (for free). To obtain this document, members must apply to the Social Security Administration for Medicare Part A (for free) and upload a copy of the Social Security Administration's denial notice before submitting their application. Please note that members must notify the GIC if eligibility for free Medicare Part A changes.

Medicare

If you and/or your spouse are age 65 or older and Medicare eligible, a GIC Medicare plan must be selected to continue GIC health coverage. A Medicare Beneficiary Identifier (MBI) number is required to complete your application.

Important: As part of the Medicare Plan enrollment, members are automatically enrolled in the GIC's Medicare Part D prescription drug plan. After the enrollment is processed by the GIC, the prescription drug plan will mail information about the plan and advise members about the choice to opt out of the prescription drug plan. The opt-out letter is required by Medicare, but we do not recommend that members do so because opting out of the GIC's prescription drug plan, automatically disenrolls members from GIC's medical, prescription drug and behavioral health coverage.

Please note that members remain in their current prescription drug plan until they have been approved for the GIC's Medicare Part D prescription drug plan.

If you would like to start your GIC Medicare Health plan application? Click Next below
If you would like to view your current benefits please navigate to "Benefits" page or [click here](#)

NEXT

To begin the application, members can:

- Review the information on the page
- Scroll down and click **NEXT** to proceed



Step 2: Personal Information

myGIC link Home Benefits My Profile John S

Member Turning 65 Application Cancel Application Save and Exit

Getting Started
2 Personal Information
3 Member Turning 65
4 Documents
5 Review and Submit

Personal Information
Please review the following information for accuracy.

Enrollee Information

FULL NAME John M Sample	DATE OF BIRTH 10/1/1957	GENDER Male
SOCIAL SECURITY NUMBER *****1234	REFERENCE ID 1A2B3C4D	

Contact Information

HOME ADDRESS 2 Portal Way Boston MA 02115 United States	MAILING ADDRESS
MOBILE PHONE 123-456-7890	EMAIL sample1@example.com

* Is the information listed above accurate?
 Yes No

Previous Save and Next

TS AVAILABLE AT THIS TIME

Members will be directed to the **Personal Information** section and can:

- Review and confirm their personal information

If the information is accurate, members must:

- Select **Yes** to the **Is the information listed above accurate?** question
- Click **Save and Next** to proceed



Step 3: Members Turning 65

myGIClink Home Benefits My Profile John S

Member Turning 65 Application Cancel Application Save and Exit

Getting Started
Personal Information
Member Turning 65
Documents
Review and Submit

Plan Selection
Health Insurance

PREMIUM TOTAL
\$0.00 [View details](#)

Health Insurance
Note: Where you live determines which health insurance plans you may enroll in.

Your Current Plan

CARRIER NAME	INDIVIDUAL	FAMILY
Unicare State Indemnity Plan/PLUS (Family) View Detail	\$161.79	\$372.04*

Medicare Eligibility Questions

*Are you eligible for Medicare Part A and Part B?
 Yes No

*Do you have a Medicare number?
 Yes No

Previous Calculate Health Premium Save and Next

Members will be directed to the **Member Turning 65** section. This page displays the members' current plan with individual and family premiums.

Members must:

- Select **Yes** to confirm eligibility for **Medicare Part A (for free) and Part B**



myGIC link Home Benefits My Profile John S

Member Turning 65 Application Cancel Application Save and Exit

Getting Started
Personal Information
Member Turning 65
Documents
Review and Submit

Plan Selection
Health Insurance

PREMIUM TOTAL
\$0.00 [View details](#)

Health Insurance
Note: Where you live determines which health insurance plans you may enroll in.

Your Current Plan

CARRIER NAME	INDIVIDUAL	FAMILY
Unicare State Indemnity Plan/PLUS (Family) View Detail	\$161.79	\$372.04*

Medicare Eligibility Questions

* Are you eligible for Medicare Part A and Part B?
 Yes No

* Do you have a Medicare number?
 Yes No

* Medicare Number (Do not include dashes)
[Sample Medicare card](#)

UNAVAILABLE

- Select **Yes**, to confirm member has a Medicare number
- Enter the **Medicare number** in the subsequent field

Note: If members have applied for Medicare and haven't received their Medicare number yet, they must select **Yes** and enter **UNAVAILABLE** in the Medicare number field.



myGIC link Home Benefits My Profile John S

Member Turning 65 Application Cancel Application Save and Exit

UNAVAILABLE

Getting Started
Personal Information
Member Turning 65
Documents
Review and Submit

Available Medicare Plans
Select a GIC Medicare Plan below.

SELECT	CARRIER NAME	MONTHLY PREMIUM
<input type="radio"/>	Harvard Pilgrim Medicare Enhance VIEW DETAIL	\$84.54
<input type="radio"/>	Health New England Medicare Supplement Plus VIEW DETAIL	\$85.80
<input checked="" type="radio"/>	Tufts Health Plan Medicare Complement VIEW DETAIL	\$80.96
<input type="radio"/>	Tufts Health Plan Medicare Preferred VIEW DETAIL	\$68.88
<input type="radio"/>	UniCare State Indemnity Plan/ Medicare Extension (OME) w/o CIC VIEW DETAIL	\$80.16
<input type="radio"/>	UniCare State Indemnity Plan/ Medicare Extension (OME) with CIC VIEW DETAIL	\$91.48

Effective Date
1/1/2023

! The effective date of your health insurance election is subject to review and approval by GIC.

FILE AT THIS TIME

Members will be prompted to review and select a Medicare health insurance plan. Members can:

- Click **View Detail** to review the plan details
- Select the box next to the desired health plan

Note: The effective date of the members' Medicare health insurance election is subject to review and approval by GIC.



myGIC link Home Benefits My Profile John S

Member Turning 65 Application Cancel Application Save and Exit

- Getting Started
- Personal Information
- 3 Member Turning 65**
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- 5 Review and Submit

Dependents

Available Health Insurance Plans
Select a GIC Health Plan below.

SELECT	CARRIER NAME	INDIVIDUAL	FAMILY
<input type="radio"/>	AllWays Health Partners Complete HMO VIEW DETAIL	\$168.39	\$441.00
<input type="radio"/>	Harvard Pilgrim Independence Plan VIEW DETAIL	\$206.59	\$505.41
<input type="radio"/>	Harvard Pilgrim Primary Choice Plan VIEW DETAIL	\$148.90	\$380.77
<input type="radio"/>	Tufts Health Plan Navigator VIEW DETAIL	\$177.70	\$435.32
<input checked="" type="radio"/>	Tufts Health Plan Spirit VIEW DETAIL	\$134.74	\$325.93
<input type="radio"/>	Unicare State Indemnity Plan/Basic with CIC VIEW DETAIL	\$294.27	\$656.33
<input type="radio"/>	Unicare State Indemnity Plan/Basic without CIC VIEW DETAIL	\$235.28	\$522.02
<input type="radio"/>	Unicare State Indemnity Plan/Community Choice VIEW DETAIL	\$124.39	\$309.75

AVAILABLE AT THIS TIME

Members will then need to scroll down to the **Dependents** section, where they will be prompted to review and select a non-Medicare health insurance plan for their dependent(s):

- Click **VIEW DETAIL** to review the plan details
- Select the box next to the desired Medicare health plan

Note: Dependents who are eligible for Medicare will be automatically enrolled in the same Medicare health insurance plan as the members.



The screenshot shows the 'Plan Selection' page for a 'Member Turning 65 Application'. At the top right, a callout box displays the 'PREMIUM TOTAL' as '\$296.66' with a 'View details' link. At the bottom, a callout box highlights the 'Calculate Health Premium' button among 'Previous', 'Calculate Health Premium', and 'Save and Next' options.

PREMIUM TOTAL
\$296.66 [View details](#)

SELECT	COVERAGE	MEMBER PREMIUM	SPONSOR PREMIUM
<input type="radio"/>	Harvard Pilgrim Medicare Enhanced VIEW DETAILS	\$88.54	
<input type="radio"/>	Health New England Medicare Supplement Plan VIEW DETAILS	\$85.00	
<input checked="" type="radio"/>	Tufts Health Plan Medicare Complement VIEW DETAILS	\$80.00	
<input type="radio"/>	Tufts Health Plan Medicare Preferred VIEW DETAILS	\$88.00	
<input type="radio"/>	United States Indemnity Plan Medicare Extension (EM) w/o OIG VIEW DETAILS	\$85.10	
<input type="radio"/>	United States Indemnity Plan Medicare Extension (EM) with OIG VIEW DETAILS	\$91.40	

SELECT	COVERAGE	MEMBER PREMIUM	SPONSOR PREMIUM
<input type="radio"/>	Ability Health Partners Complete HD VIEW DETAILS	\$348.38	\$413.00
<input type="radio"/>	Harvard Pilgrim Independence Plan VIEW DETAILS	\$204.59	\$518.41
<input type="radio"/>	Harvard Pilgrim Primary Choice Plan VIEW DETAILS	\$348.50	\$383.77
<input checked="" type="radio"/>	Tufts Health Plan Spirit VIEW DETAILS	\$334.74	\$339.93
<input type="radio"/>	United States Indemnity Plan/Basic with OIG VIEW DETAILS	\$294.27	\$558.33
<input type="radio"/>	United States Indemnity Plan/Basic without OIG VIEW DETAILS	\$298.38	\$513.03
<input type="radio"/>	United States Indemnity Plan/Community Choice VIEW DETAILS	\$324.38	\$388.76
<input type="radio"/>	United States Indemnity Plan/PLUS VIEW DETAILS	\$351.79	\$388.00

- Click the **Calculate Health Premium** button after reviewing plan selections to view the total premium at the top of the page.



myGIClink Home Benefits My Profile John S

Member Turning 65 Application Cancel Application Save and Exit

- Getting Started
- Personal Information
- Member Turning 65**
- Documents
- Review and Submit

<input checked="" type="checkbox"/>	Tufts Health Plan Spirit VIEW DETAIL	\$134.74	\$325.93	
<input type="checkbox"/>	Unicare State Indemnity Plan/Basic with CIC VIEW DETAIL	\$294.27	\$656.33	
<input type="checkbox"/>	Unicare State Indemnity Plan/Basic without CIC VIEW DETAIL	\$235.28	\$522.02	
<input type="checkbox"/>	Unicare State Indemnity Plan/Community Choice VIEW DETAIL	\$124.39	\$309.75	
<input type="checkbox"/>	Unicare State Indemnity Plan/PLUS VIEW DETAIL	\$161.79	\$386.59	

Health Insurance Dependents

NAME	INSURANCE PLAN	RELATIONSHIP	DATE OF BIRTH	ACTION
JANE SAMPLE	Tufts Health Plan Spirit	Spouse	1/1/65	View

Previous Calculate Health Premium Save and Next

- Members must scroll down and click **Save and Next** to proceed



Step 4: Documents

myGIC link Home Benefits My Profile John S

Member Turning 65 Application Cancel Application Save and Exit

Getting Started
Personal Information
Member Turning 65
4 Documents
5 Review and Submit

Documents
See the table below for documents you must provide along with your enrollment to add a spouse or dependent.

Member Turning 65 Documents

NAME OF THE DOCUMENT	ACTION	STATUS
No documents are required.		

Document requirements

RELATIONSHIP	DOCUMENT TYPE
Dependent under 19	Birth Certificate, Adoption, Court order, Guardianship Document, or Hospital Birth announcement (Newborn Only)
Dependent 19-26	Birth Certificate, Adoption, Court order, Guardianship Document
Full-Time Student	Birth Certificate, Adoption, Court order, Guardianship Document
Handicapped Dependent	Birth Certificate, Adoption, Court order, Guardianship Document, Handicapped Dependent application
Spouse	Marriage Certificate
Former Spouse	Divorce Decree ¹

TIME

Previous Save and Next

Members will be directed to the **Documents** section.

In this scenario, members have selected **Yes** to the **Medicare Part A (for free) and B** question, so they will not be prompted to upload any documents.

Members must:

- Click **Save and Next** to proceed

Note: If members have selected **No** to the **Medicare Part A (for free) and B** question, they will be prompted to upload the proof of ineligibility for Medicare documents on this page.



Step 5: Review and Submit

myGIClink Home Benefits My Profile John S

Member Turning 65 Application Cancel Application Save and Exit

Getting Started
Personal Information
Member Turning 65
Documents
Review and Submit

Personal Information

Enrollee Information

Full Name	Date of Birth	Gender	Social Security Number
John M Sample	10/1/1957	Male	XXX-XX-1234
Base Salary	Reference ID		
\$113,146.90	1A2B3C4D		

Contact Information

Home Address	Mailing Address
2 Portal Way, Boston, MA 02115, USA Boston MA 02115 United States	
Mobile Phone	Email
123-456-7890	sample1@example.com

Update Personal Information

Health Insurance

Medicare Insurance Plan

PLAN NAME	EFFECTIVE DATE
Tufts Health Plan Medicare Complement View Detail	10/1/2022

Health Insurance Plan

Members will be directed to the **Review and Submit** section:

The members must:

- Review all selections

Note: Members must click the arrow available on the accordion to expand and review each section of the application.



my GIC link Home Benefits My Profile John S

Member Turning 65 Application Cancel Application Save and Exit

- Getting Started
- Personal Information
- Member Turning 65
- Documents
- 5 Review and Submit**

Health Insurance >

Attestation

I authorize the GIC to update my benefits and direct my pension authority to deduct from my pension check the amount required for the coverage I have selected. I understand that my health insurance coverage elections are binding for the duration of the plan year and that I may only change my coverage elections during the plan year if I experience a qualifying status change (examples include marriage, adoption/birth of a child, death of a dependent). I understand that the GIC must receive any required documentation within 60 days of the event. All divorces and remarriages must be reported to the Group Insurance Commission, failure to notify the GIC of a legal separation, divorce, or remarriage can result in financial liability to you.

By selecting a GIC Medicare Plan, I am authorizing Medicare's intermediaries to release all appropriate medical service, charge, and payment information to my health plan for the payment of Medicare Supplemental Plan benefits.

I understand that the GIC will determine the effective date of my plan selections.

I certify that I have read and acknowledge the above attestation

Full Name	Date
John M Sample	

***Enter Your Full Name**

John M Sample

Previous Submit

LEAVE AT THIS TIME

- Check the **attestation box**
- Enter their full name, as it appears on the screen, and
- Click **Submit**



Spouse Turning 65 Application Steps

Scenario: Spouse turning 65, and eligible for Medicare.

Important Message from the Group Insurance Commission (GIC)

Inbox x

My GIC Link mygiclinkcustomerservice@mass.gov
to sample1@example.com

Hi JOHN M SAMPLE,

You have an important message from the GIC regarding your GIC benefits. Please log into the [MyGICLink Member Benefits Portal](#) to view your message in the Notifications section of the member benefits portal. If have not registered yet, visit mass.gov/mygiclink-member-benefits-portal for more information registering for the member benefits portal.

Thank you for using MyGICLink,
Group Insurance Commission Team



Note: This is an automated email. Please do not reply or send documents to this email address.

Members will receive an email when their spouse is turning 65 indicating that they have an important message in MyGICLink.

Members must:

- Log into MyGICLink



myGIC link

Home Benefits My Profile John S

Welcome to your Benefits Dashboard
John M Sample

ENROLLMENT STATUS
Enrolled

PLEASE NOTE
You can view your current benefits by clicking on the Benefits tab.

MY NOTIFICATIONS

- Your spouse (JANE SAMPLE) is required to enroll in a GIC Medicare Plan or provide proof of Medicare ineligibility by mm/dd/yyyy

My Application(s)

You do not have any applications in progress at this time.

- Click on the link under **MY NOTIFICATIONS**



myGIC link Home Benefits My Profile John S

Spouse Turning 65 Application

- 1 Getting Started
- 2 Personal Information
- 3 Spouse Turning 65
- 4 Documents
- 5 Review and Submit

Getting Started

Our records indicate that you or your spouse are enrolled in a GIC health plan, turning age 65 and may be eligible for Medicare benefits. Members age 65 or older and Medicare eligible are required to enroll in Medicare Part A (for free) and Part B with the Social Security Administration and elect a GIC Medicare Plan in accordance with state law. Failure to enroll in a GIC Medicare Plan will result in termination of GIC medical, prescription drug and behavioral health coverage. Reinstatement of health coverage will only be allowed when Medicare Part A and Part B has been obtained by the member. After application submission, GIC will verify enrollment in Medicare Part A and B with the Centers for Medicare Services (CMS).

You do not need to enroll in a non-GIC Medicare Part D plan. You will be enrolled in GIC's Medicare Part D prescription drug plan when you enroll in one of GIC's Medicare Plans.

If you and/or your spouse are turning age 65 and NOT Medicare eligible, a non-Medicare plan can be selected but proof of ineligibility from the Social Security Administration is required. GIC must also be notified if eligibility for Medicare Part A (for free) changes.

Members can select a GIC Medicare Plan, and a GIC non-Medicare Plan for family members who are not eligible for Medicare when completing this application. Select "NEXT" at the bottom of this page to start your application.

Health

Members who are not eligible for Medicare Part A (for free) must select a non-Medicare health plan and provide proof of ineligibility of Medicare Part A (for free). To obtain this document, members must apply to the Social Security Administration for Medicare Part A (for free) and upload a copy of the Social Security Administration's denial notice before submitting their application. Please note that members must notify the GIC if eligibility for free Medicare Part A changes.

Members will be directed to the **Spouse Turning 65 Application**.

Members will need to complete five (5) sections to submit the application.

1. Getting Started
2. Personal Information
3. Spouse Turning 65
4. Documents
5. Review and Submit



Step 1: Getting Started

myGIC link Home Benefits My Profile John S

Spouse Turning 65 Application

- Getting Started
- Personal Information
- Spouse Turning 65
- Documents
- Review and Submit

Health

Members who are not eligible for Medicare Part A (for free) must select a non-Medicare health plan and provide proof of ineligibility of Medicare Part A (for free). To obtain this document, members must apply to the Social Security Administration for Medicare Part A (for free) and upload a copy of the Social Security Administration's denial notice before submitting their application. Please note that members must notify the GIC if eligibility for free Medicare Part A changes.

Medicare

If you and/or your spouse are age 65 or older and Medicare eligible, a GIC Medicare plan must be selected to continue GIC health coverage. A Medicare Beneficiary Identifier (MBI) number is required to complete your application.

Important: As part of the Medicare Plan enrollment, members are automatically enrolled in the GIC's Medicare Part D prescription drug plan. After the enrollment is processed by the GIC, the prescription drug plan will mail information about the plan and advise members about the choice to opt out of the prescription drug plan. The opt-out letter is required by Medicare, but we do not recommend that members do so because opting out of the GIC's prescription drug plan, automatically disenrolls members from GIC's medical, prescription drug and behavioral health coverage.

Please note that members remain in their current prescription drug plan until they have been approved for the GIC's Medicare Part D prescription drug plan.

If you would like to start your GIC Medicare Health plan application? Click Next below
If you would like to view your current benefits please navigate to "Benefits" page or [click here](#)

LEAVE AT THIS TIME

NEXT

Members will be directed to the **Getting Started** section and can:

- Review the information on the page
- Scroll down and click **NEXT** to proceed



Step 2: Personal Information

myGIClink Home Benefits My Profile John S

Spouse Turning 65 Application Cancel Application Save and Exit

Getting Started
2 Personal Information
3 Spouse Turning 65
4 Documents
5 Review and Submit

Personal Information
Please review the following information for accuracy.

Enrollee Information

FULL NAME	DATE OF BIRTH	GENDER
John M Sample	1/1/1965	Male
SOCIAL SECURITY NUMBER	REFERENCE ID	
*****1234	1A2B3C4D	

Contact Information

HOME ADDRESS	MAILING ADDRESS
2 Portal Way Boston MA 02115 United States	
MOBILE PHONE	EMAIL
123-456-7890	sample1@example.com

* Is the information listed above accurate?
 Yes No

Previous Save and Next

Members will be directed to the **Personal Information** section and can:

- Review and confirm their personal information

If the information is accurate, members must:

- Select **Yes** to the **Is the information listed above accurate?** question
- Click **Save and Next** to proceed



Step 3: Spouse Turning 65

myGIC link Home Benefits My Profile John S

Spouse Turning 65 Application Cancel Application Save and Exit

Getting Started
Personal Information
Spouse Turning 65
Documents
Review and Submit

Plan Selection
Health Insurance

PREMIUM TOTAL
\$0.00 [View details](#)

Health Insurance
Note: Where you live determines which health insurance plans you may enroll in.

Your Current Plan

CARRIER NAME	INDIVIDUAL
UniCare State Indemnity Plan/ Medicare Extension (OME) with CIC View Detail	\$71.04*

Spouse Medicare Eligibility Questions

* Is your spouse eligible for Medicare Part A and Part B?
 Yes No

* Do you have a Medicare claim number for your spouse?
 Yes No

AT THIS TIME Previous Calculate Health Premium Save and Next

Members will be directed to the **Spouse Turning 65** section. This page displays the members' current plan, as well as spouse Medicare eligibility questions.

Members must:

- Select **Yes** to confirm spouse eligibility for **Medicare Part A (for free) and Part B**



myGIC link Home Benefits My Profile John S

Spouse Turning 65 Application Cancel Application Save and Exit

Getting Started
Personal Information
3 Spouse Turning 65
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Plan Selection
Health Insurance

PREMIUM TOTAL
\$0.00 [View details](#)

Health Insurance
Note: Where you live determines which health insurance plans you may enroll in.

Your Current Plan

CARRIER NAME	INDIVIDUAL
UniCare State Indemnity Plan/ Medicare Extension (OME) with CIC View Detail	\$71.04*

Spouse Medicare Eligibility Questions

* Is your spouse eligible for Medicare Part A and Part B?
 Yes No

* Do you have a Medicare claim number for your spouse?
 Yes No

* Medicare Number (Do not include dashes) ⓘ
[Sample Medicare card](#)

UNAVAILABLE

Available Medicare Plans

Previous Calculate Health Premium Save and Next

BLE AT THIS TIME

- Select **Yes**, to confirm that members have their spouses' Medicare number
- Enter the **Medicare number** in the subsequent field

Note: If member's spouse has applied for Medicare and hasn't received the Medicare number yet, select **Yes** and enter **UNAVAILABLE** in the Medicare number field.



myGIClink Home Benefits My Profile John S

Spouse Turning 65 Application Cancel Application Save and Exit

- Getting Started
- Personal Information
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- 4 Documents
- 5 Review and Submit

Available Medicare Plans
Select a GIC Medicare Plan below.

SELECT	CARRIER NAME	MONTHLY PREMIUM
<input type="radio"/>	Harvard Pilgrim Medicare Enhance VIEW DETAIL	\$63.41
<input type="radio"/>	Health New England Medicare Supplement Plus VIEW DETAIL	\$64.35
<input checked="" type="radio"/>	Tufts Health Plan Medicare Complement VIEW DETAIL	\$60.72
<input type="radio"/>	Tufts Health Plan Medicare Preferred VIEW DETAIL	\$51.66
<input type="radio"/>	UniCare State Indemnity Plan/ Medicare Extension (OME) w/o CIC VIEW DETAIL	\$60.12
<input type="radio"/>	UniCare State Indemnity Plan/ Medicare Extension (OME) with CIC VIEW DETAIL	\$71.44

Effective Date
11/1/2022

! The effective date of your health insurance election is subject to review and approval by GIC.

Previous Calculate Health Premium Save and Next

Members will be prompted to review and select a Medicare plan for their spouse.

Members can:

- Click **VIEW DETAIL** to review the plan details
- Select the box next to the desired health plan

Note: The effective date of the spouses' Medicare health insurance election is subject to review and approval by GIC.

Note: Members who are eligible for Medicare and already enrolled in a Medicare plan will be automatically enrolled in the same Medicare health insurance plan as the spouse.



myGIC Link Home Benefits My Profile John S

Spouse Turning 65 Application Cancel Application Save and Exit

Plan Selection
Health Insurance

PREMIUM TOTAL
\$121.44 [View details](#)

Health Insurance
Note: Where you live determines which health insurance plans you may enroll in.

Your Current Plan

CURRENT PLAN	INDIVIDUAL
UniCare State Indemnity Plan/ Medicare Extension (OME) with CIC View Details	\$71.04*

Spouse Medicare Eligibility Questions

*Is your spouse eligible for Medicare Part A and Part B?
 Yes No

*Do you have a Medicare claim number for your spouse?
 Yes No

*Medicare Number (Do not include dashes)

Available Medicare Plans
Select a GIC Medicare Plan below.

SELECT	CARRIER NAME	MONTHLY PREMIUM
<input type="radio"/>	Harvard Pilgrim Medicare Enhance VIEW DETAILS	\$53.41
<input type="radio"/>	Health New England Medicare Supplement Plus VIEW DETAILS	\$64.35
<input checked="" type="radio"/>	Tufts Health Plan Medicare Complement VIEW DETAILS	\$60.72
<input type="radio"/>	Tufts Health Plan Medicare Preferred VIEW DETAILS	\$51.66
<input type="radio"/>	UniCare State Indemnity Plan/ Medicare Extension (OME) w/o CIC VIEW DETAILS	\$60.12
<input type="radio"/>	UniCare State Indemnity Plan/ Medicare Extension (OME) with CIC VIEW DETAILS	\$71.44

Effective Date
11/1/2022

The effective date of your health insurance election is subject to review and approval by GIC.

Dependents

Medicare Dependents

NAME	INSURANCE PLAN	RELATIONSHIP	DATE OF BIRTH	ACTION
JANE SAMPLE	Tufts Health Plan Medicare Complement	Spouse	10/1/57	View

Previous **Calculate Health Premium** Save and Next

Previous **Calculate Health Premium** Save and Next

PREMIUM TOTAL
\$121.44 [View details](#)

- Click the **Calculate Health Premium** button after reviewing plan selections to view the total premium at the top of the page.



myGIC link Home Benefits My Profile John S

Spouse Turning 65 Application Cancel Application Save and Exit

- Getting Started
- Personal Information
- Spouse Turning 65**
- Documents
- Review and Submit

Plan Selection

Health Insurance

PREMIUM TOTAL
\$121.44 [View details](#)

Health Insurance

Note: Where you live determines which health insurance plans you may enroll in.

Your Current Plan

CARRIER NAME	INDIVIDUAL
UniCare State Indemnity Plan/ Medicare Extension (OME) with CIC View Detail	\$71.04*

Spouse Medicare Eligibility Questions

*Is your spouse eligible for Medicare Part A and Part B?
 Yes No

*Do you have a Medicare claim number for your spouse?
 Yes No

*Medicare Number (Do not include dashes) ⓘ
[Sample Medicare card](#)

UNAVAILABLE

Available Medicare Plans

Select a GIC Medicare Plan below.

SELECT	CARRIER NAME	MONTHLY PREMIUM
<input type="radio"/>	Harvard Pilgrim Medicare Enhance	\$63.41

Previous Calculate Health Premium Save and Next

- Members must scroll down and click **Save and Next** to proceed



Step 4: Documents

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Documents
See the table below for documents you must provide along with your enrollment to add a spouse or dependent.

Spouse Turning 65 Documents

NAME OF THE DOCUMENT	ACTION	STATUS
No documents are required.		

Document requirements

RELATIONSHIP	DOCUMENT TYPE
Dependent under 19	Birth Certificate, Adoption, Court order, Guardianship Document, or Hospital Birth announcement (Newborn Only)
Dependent 19-26	Birth Certificate, Adoption, Court order, Guardianship Document
Full-Time Student	Birth Certificate, Adoption, Court order, Guardianship Document
Handicapped Dependent	Birth Certificate, Adoption, Court order, Guardianship Document, Handicapped Dependent application
Spouse	Marriage Certificate
Former Spouse	Divorce Decree

Previous Save and Next

Members will be directed to the **Documents** section.

In this scenario, members have selected **Yes** to the **Spouse Medicare Part A (for free) and B** question, so they will not be prompted to upload any documents.

Members must:

- Click **Save and Next** to proceed

Note: If the members have selected **No** to the **Spouse Medicare Part A (for free) and B** question, they will be prompted to upload the proof of ineligibility for Medicare documents on this page.



Step 5: Review and Submit

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Spouse Turning 65 Application Cancel Application Save and Exit

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Review and Submit
Please review the information that you have entered for accuracy. If you would like to make any changes to a section, click the update button. Premium Total \$121.44 [View details](#)

Personal Information [dropdown arrow]

Enrollee Information

Full Name	Date of Birth	Gender	Social Security Number
John M Sample	1/1/1965	Male	XXX-XX-1234
Base Salary	Reference ID		
\$0.00	1A2B3C4D		

Contact Information

Home Address	Mailing Address
2 Portal Way, Boston, MA 02115, USA Boston MA 02115 United States	
Mobile Phone	Email
123-456-7890	sample1@example.com

[Update Personal Information](#)

Health Insurance [dropdown arrow]

[Previous](#) [Submit](#)

Members will be directed to the **Review and Submit** section.

The members must:

- Review all selections

Note: Members must click the arrow available on the accordion to expand and review each section of the application.



myGIClink Home Benefits My Profile John S

Spouse Turning 65 Application Cancel Application Save and Exit

Update Health Insurance

- Getting Started
- Personal Information
- Spouse Turning 65
- Documents
- 5 Review and Submit**

Attestation

I authorize the GIC to update my benefits and direct my pension authority to deduct from my pension check the amount required for the coverage I have selected. I understand that my health insurance coverage elections are binding for the duration of the plan year and that I may only change my coverage elections during the plan year if I experience a qualifying status change (examples include marriage, adoption/birth of a child, death of a dependent). I understand that the GIC must receive any required documentation within 60 days of the event. All divorces and remarriages must be reported to the Group Insurance Commission, failure to notify the GIC of a legal separation, divorce, or remarriage can result in financial liability to you.

By selecting a GIC Medicare Plan, I am authorizing Medicare's intermediaries to release all appropriate medical service, charge, and payment information to my health plan for the payment of Medicare Supplemental Plan benefits.

I understand that the GIC will determine the effective date of my plan selections.

I certify that I have read and acknowledge the above attestation

Full Name	Date
John M Sample	

LE AT THIS TIME Previous Submit

- Check the **attestation box**
- Enter their Full Name, as it appears on the screen, and
- Click **Submit**