



## Life Insurance

# Medicare Made Simple A First Timers Guide to Enrollment

Parts A, B, C, and D explained in plain English, with the enrollment windows that matter most.

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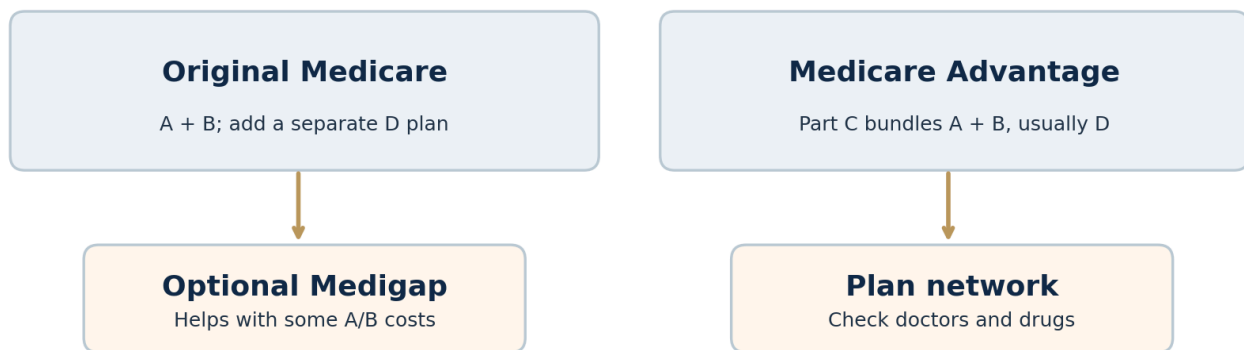
Start with two decisions: when to enroll in hospital and medical coverage, and how you want to receive your care. Your current insurance, doctors, prescriptions, and budget can change the best answer. This guide focuses on people first becoming eligible at 65; disability and other eligibility paths can follow different timing.

## The four parts at a glance

| Part        | What it does                                                                      | What to remember                                                                                                 |
|-------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| A Hospital  | Inpatient hospital care, skilled nursing facility care, hospice, some home health | Most people pay no monthly Part A premium. A deductible and other costs can still apply.                         |
| B Medical   | Doctor visits, outpatient care, medical equipment, many preventive services       | A monthly premium applies. The standard 2026 premium is \$202.90; higher incomes may pay more.                   |
| C Advantage | Private plan alternative for receiving A and B benefits; usually includes D       | You still need A and B and pay the Part B premium. Compare networks, referrals, and yearly out-of-pocket limits. |
| D Drugs     | Outpatient prescription drug coverage through a private plan                      | Add a stand-alone plan with Original Medicare or get it through many Advantage plans.                            |

Parts A and B together are called Original Medicare. Part C is another way to get those benefits. Part D covers prescription drugs; it is not a substitute for A or B.

## Choose your coverage route



With Original Medicare, you can generally use any U.S. provider who accepts Medicare. There is no annual out-of-pocket limit for A/B services unless other coverage helps; a Medigap policy can help pay some remaining costs. Medicare Advantage plans have an annual limit on covered Part A/B out-of-pocket costs but usually use provider networks and may require approvals. Medigap cannot be used with Medicare Advantage.

## Your first enrollment window

### Initial Enrollment Period • 7 months



Signing up in the first three months usually helps coverage begin when you turn 65.

Your Initial Enrollment Period usually starts three months before the month you turn 65, includes your birthday month, and ends three months after it. If your birthday is on the first of a month, Medicare may treat your eligibility month differently; confirm your personal dates at [Medicare.gov](https://www.medicare.gov).

Some people receiving Social Security or Railroad Retirement Board benefits are enrolled in A and B automatically. Otherwise, sign up through Social Security. Do not assume that turning 65 enrolls you automatically.

### Working at 65

If you or your spouse has group health coverage from current employment, you may be able to delay Part B and use a Special Enrollment Period. You can generally enroll while that coverage continues or during the eight months after employment or coverage ends, whichever happens first. Ask the employer benefits administrator whether Medicare should pay first, particularly if the employer has fewer than 20 employees.

COBRA, retiree coverage, VA coverage, and Marketplace coverage do not by themselves give you the same Part B delay protection as coverage based on current employment. Verify your case before delaying. If you contribute to a health savings account, ask about the Part A timing and tax effects before enrolling; retroactive Part A can affect HSA contributions.

## If you missed the first window

The General Enrollment Period for Part A and/or B runs January 1 through March 31. Coverage generally begins the month after enrollment. A Part B late penalty may apply: generally 10% of the standard premium for each full 12-month period you could have had Part B but did not, paid for as long as you have Part B. Special enrollment rules can prevent a gap or penalty in qualifying situations.

## Add a drug plan and review Medigap early

Part D is optional, but going 63 consecutive days or more after your initial period without Part D or other creditable prescription coverage can cause a late penalty if you join later. "Creditable" means your other drug coverage is expected to pay at least as much as standard Medicare drug coverage. Keep the annual notice from your employer or other plan.

If you want a Medigap policy with Original Medicare, the federal six-month Medigap Open Enrollment Period begins the first month you are 65 or older and have Part B. During that period, insurers generally cannot deny a policy because of health problems. Later access and pricing may differ; state rules can add protections.

## The calendar after you enroll

**Jan 1-Mar 31**

General Enrollment for A/B if missed; Medicare Advantage changes if already enrolled

Annual Open Enrollment: change Medicare Advantage or Part D; changes start Jan 1

**Oct 15-Dec 7**

October 15 to December 7 is Medicare Open Enrollment for switching or dropping Medicare Advantage and Part D plans, with changes usually effective January 1. January 1 to March 31 is also a Medicare Advantage Open Enrollment Period: people already in an Advantage plan can make one change or return to Original Medicare and add Part D. It is not a general first-time signup window for every plan.

## A practical five step checklist

- 1 Confirm your dates.** Check your 65th birthday enrollment window and whether you will be automatically enrolled.
- 2 Check your existing insurance.** Ask the benefits administrator whether coverage comes from current employment, who pays first, and whether drug coverage is creditable.
- 3 Compare total cost.** List premiums, deductibles, copays, drug costs, and the worst-case annual out-of-pocket exposure. Do not choose on premium alone.
- 4 Check access.** Verify doctors, hospitals, pharmacies, medicines, plan networks, and any approvals with the provider and plan.
- 5 Apply and keep records.** Enroll through Social Security for A/B and Medicare.gov or the plan for C/D. Save confirmation numbers and coverage start dates.

## Questions to ask before choosing a plan

Can I keep my primary doctor and specialists? What will my prescriptions cost at my pharmacy? If I travel or live in another state part of the year, where can I receive routine care? What is the annual maximum I might pay for covered medical services? If I choose Original Medicare, when does my Medigap buying window end?

## Where to get unbiased help

Medicare.gov/plan-compare lets you enter your medicines and compare plans in your ZIP code. Medicare: 1-800-MEDICARE (1-800-633-4227). Social Security enrollment: ssa.gov/medicare. A local State Health Insurance Assistance Program offers free counseling: shiphelp.org. Ask about Medicare Savings Programs and Extra Help if costs are difficult to afford.

## Official sources and scope

Medicare, Welcome to Medicare (January 2026): [medicare.gov/media/12020-Welcome-to-Medicare.pdf](https://www.medicare.gov/media/12020-Welcome-to-Medicare.pdf)

Medicare, When can I sign up:

[medicare.gov/basics/get-started-with-medicare/sign-up/when-can-i-sign-up-for-medicare](https://www.medicare.gov/basics/get-started-with-medicare/sign-up/when-can-i-sign-up-for-medicare)

Medicare, Joining a plan: [medicare.gov/basics/get-started-with-medicare/get-more-coverage/joining-a-plan](https://www.medicare.gov/basics/get-started-with-medicare/get-more-coverage/joining-a-plan)

Medicare, Medigap enrollment: [medicare.gov/health-drug-plans/medigap/ready-to-buy](https://www.medicare.gov/health-drug-plans/medigap/ready-to-buy)

Educational information only. Rules, premiums, benefits, and plan availability can change. Confirm personal enrollment dates and coverage with Medicare, Social Security, and the relevant plan before acting. True North Financial Group is not affiliated with or endorsed by the U.S. government or Medicare.