



THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, DC 20301-1200

MAY 22 1996

**MEMORANDUM FOR:**

SURGEON GENERAL OF THE ARMY (M&RA)

SURGEON GENERAL OF THE NAVY (M&RA)

SURGEON GENERAL OF THE AIR FORCE (MRAI&E)

**SUBJECT:** Policy for Issuance of Equitable Relief Letters for Medicare Eligible Beneficiaries

There has been an increasing number of Military Health Services System (MHSS) beneficiaries contacting military treatment facilities (MTFs) and the Defense Enrollment Eligibility Reporting System (DEERS) Support Office (DSO) to request a waiver from the surcharge for late enrollment in Medicare Part B. This waiver is also known as Equitable Relief.

Equitable Relief is authorized by the Social Security Administration (SSA) in those cases when a beneficiary was misinformed about his or her health care benefits by an agent of the government. For MHSS beneficiaries, SSA relies on the recommendation of the DSO when granting waivers (Equitable Relief). Attached are background policy memoranda on Equitable Relief.

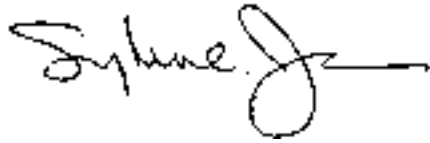
Only the recommendation letter issued by DSO is considered by the SSA as evidence of government error for Equitable Relief purposes. A majority of the requests submitted to the DSO are denied due to the lack of sufficient documentation. Letters written by the individual MTFs to the SSA are not acceptable and do not contain adequate documentation for the beneficiaries to receive a waiver. MTFs will discontinue issuing blanket Equitable Relief letters and direct the beneficiaries to the DSO at 1-800-334-4162 (California), 1-800-527-5602 (Alaska and Hawaii), 1-800-538-9552 (all other states) or the DEERS Support Office, DoD Center - Monterey Bay, 400 Gigling Road, Seaside, CA 93955-6771.

Acceptable supporting documentation submitted to the DSO by beneficiaries seeking "Equitable Relief" must include either specific written or verbal statements made by DoD personnel that caused the individual to elect not to enroll in Medicare Part B when the beneficiary retired, reached 65, or became eligible for the Temporary Disability Retired List (TDRL).

According to the SSA requirements for Equitable Relief, if an individual failed to enroll in Part B because they preferred a private plan which was later terminated, or preferred to use an MTF that has been affected by the Base Realignment and Closure (BRAC) process, the fact that they had reason for not enrolling earlier and may now need Part B does not justify Equitable Relief.

If a beneficiary believes he or she was misinformed by someone who worked for the SSA or another government agency, other than the DoD, they should contact the SSA directly to request a waiver from the surcharge for late enrollment in Medicare Part B.

The DSO has taken proactive steps to help alleviate this problem for beneficiaries who are approaching age 65. They have revised their "over age 65" letter sent to all beneficiaries three months prior to their sixty-fifth birthday. The letter explains the changes in health care benefits for beneficiaries who lose CHAMPUS entitlement when they become eligible for Medicare and the surcharge levied by the SSA on individuals who choose to enroll in Medicare after their initial eligibility period. The DSO is very specific in their letter as to the potential cost and health care implications resulting from not accepting Part B of Medicare when initially eligible.

A handwritten signature in black ink, appearing to read "Stephen C. Joseph", with a long horizontal flourish extending to the right.

Stephen C. Joseph, M.D., M.P.H.

Attachments:

1. DEERS "over-65" Letter
2. SSA Policy, Sep 91
3. HCFA Memo, Nov 93
4. DoD GC Memo
5. SSA/Medicare Manual on Equitable Relief

cc:

Surgeon General, U.S. Army  
Surgeon General, U.S. Navy  
Surgeon General, U.S. Air Force