

570 Social Security and Medicare

571 General Information

571.1 Overview

This subchapter on Social Security and Medicare is designed to be illustrative and provide general guidance. Employees with specific questions concerning their Social Security or Medicare should address those questions to the nearest office of the Social Security Administration. Social Security information is also available on the Internet at <http://www.ssa.gov> or by phone at 1-800-772-1213 and TTY 1-800-325-0778.

571.2 Social Security

571.21 Objectives

Social Security (SS) is the federal government's basic method of providing a continuing income to workers and their families when their earnings are terminated or reduced because of retirement, disability, or death. Social Security insurance payments are not meant to replace all lost earnings; therefore, employees are encouraged to supplement Social Security payments with savings, private pensions, investments, or other insurance.

571.22 Programs

The Social Security Act and related laws have established a number of programs to accomplish the above objectives. Retirement, survivors, and disability insurance payments, commonly known as Social Security Benefits, are among the programs administered by the Social Security Administration (SSA).

571.3 Medicare

The Health Care Financing Administration (HCFA) is responsible for administering the federal health insurance program commonly known as *Medicare*. This program was established to provide comprehensive health insurance protection for people age 65 or older and certain disabled people. Medicare is composed of two parts — hospital insurance and medical insurance. In most instances, a person must file an application for benefits and must meet certain eligibility requirements to actually receive benefits under those programs.

572 Coverage**572.1 Employees Covered****572.11 Social Security**

Employees covered for Social Security include:

- a. Casual employees.
- b. Temporary employees.
- c. Substitute rural carriers.
- d. Auxiliary rural carriers.
- e. Rural carrier reliefs.
- f. Rural carrier associates.
- g. All employees newly hired on or after January 1, 1984, including employees with previous federal service (other than rehired annuitants) with a break in service 365 days or longer, and any other employees not covered by the Civil Service Retirement System (CSRS), the Federal Employees' Retirement System (FERS), or any other federal retirement system and not excluded by 572.2.

572.12 Medicare

Employees covered for Medicare include:

- a. All employees covered by 572.11.
- b. Individuals whose employment began under CSRS or any other federal retirement system prior to January 1, 1984.

572.2 Exclusions From Social Security and Medicare

Employees excluded from Social Security and Medicare include:

- a. Contractors such as mail messengers, star route contractors, clerks in charge of contract stations, and job cleaners.
- b. Special delivery messengers paid on a fee basis.
- c. Persons hired because of an emergency such as fire, flood, or earthquake.

572.3 FERS Employees

All Social Security and Medicare contributions, eligibilities, benefits, rights, and privileges are determined the same for FERS participants as for any other covered participant stated in 572.1.

573 Social Security and Medicare Contributions**573.1 Federal Insurance Contributions Act (FICA) Taxes****573.11 Employee/Employer Payments**

- a. The Postal Service and covered employees each pay equal amounts of FICA taxes to the U.S. Treasury Department through employee payroll deductions and matching Postal Service contributions.
- b. All employees listed in 572.11 contribute amounts for the full Social Security coverage (Social Security benefits and Medicare); while employees hired prior to January 1, 1984 and covered by the CSRS, contribute for Medicare coverage only.

573.12 Effective Percentage Rate**573.121 Full Coverage**

Beginning in 1989, the Postal Service, and all employees covered under Social Security as listed in 572.11 and CSRS employees who transferred to FERS each pay 7.51 percent of the employees' gross annual earnings (including cost-of-living adjustments and premium pay differentials). The total contribution rate for both Social Security and Medicare benefits, however, is scheduled to change to 7.65 percent beginning in 1990 and remaining constant through 1999.

573.122 Medicare Coverage Only

Employees covered for Medicare only contribute 1.45 percent of their gross wages with the Postal Service contributing a like amount. The Medicare rate is scheduled to remain the same through 1999.

573.13 Base Earnings

The maximum amount of annual earnings that can be used for Social Security purposes and on which contributions are based is \$65,400 in 1997. The earnings maximum may be adjusted annually according to the increase in earnings level.

573.14 FICA Inquiries

Direct inquiries on FICA payroll deductions to the Director, Eagan ASC.

573.2 Allowances Not Subject to FICA Taxes

Allowances not subject to FICA taxes include:

- a. Clothing allowances.
- b. Territorial cost-of-living allowances paid to employees in Puerto Rico, Virgin Islands, Hawaii, Alaska, and Guam.
- c. Equipment maintenance allowances.
- d. Lock pouch allowance.

574 Quarters of Coverage

574.1 Social Security Quarter of Coverage

Quarters of coverage to qualify for Social Security benefits and Medicare are earned when employees have performed a certain quantity of work at a job covered by Social Security. A Social Security quarter of coverage (SSQC) is any calendar quarter (a 3-month period beginning the first day of January, April, July, and October) in which employees, prior to 1978, were paid at least \$50 in wages for work that was covered by Social Security. From 1978, employees have been credited with one quarter of coverage (up to a maximum of 4 annually) for a specified amount of earnings. Each year, under a formula in the Social Security Act, the Secretary of Health and Human Services determines the amount of earnings that will equal a quarter of coverage. The amounts needed to earn a quarter of coverage will be determined by November 1 of each preceding year and are published in the Federal Register. This figure is based on increases in the average total wages of all workers.

574.2 Federal Quarter of Coverage (Medicare)

574.21 CSRS Employees

Section 278 of Public Law 97-248, the Tax Equity and Fiscal Responsibility Act of 1982, extended Medicare coverage to federal/postal employees covered by the CSRS and required them to pay the Hospital Insurance portion of the FICA tax beginning January 1, 1983.

574.22 Earned Federal Quarters of Coverage

Through payment of the tax, those employees earn *actual* federal quarters of coverage (FQCs) for periods of service after January 1983 in the same manner that Social Security quarters of coverage are earned.

574.23 Deemed (Credited) FQCs

Deemed FQCs are quarters of coverage deemed to have occurred before January 1, 1983. Any person employed by the federal government/Postal Service before January 1, 1983 who also worked at any time during January 1983 may receive *deemed* FQCs for each quarter of federal/postal service performed before January 1, 1983, provided the quarter:

- a. Was not covered under the regular Social Security System and
- b. Would have qualified as a Social Security quarter of coverage had the employee's federal/postal employment been covered by the Social Security Act.

574.24 Combining Earned and Deemed FQCs

Total FQCs (deemed and actual) may be used alone, or in combination with regular Social Security quarters of coverage (SSQCs), in order to meet the number of quarters required for Medicare coverage.

574.25 **Establishing Deemed FQCs**574.251 **Using Form 1528**

If an employee would not be insured using only FQCs earned after January 1983 or in combination with SSQCs, evidence must be provided to the SSA in order to establish deemed FQCs. The most viable method of establishing this evidence is by use of the Office of Personnel Management (OPM) Form 1528, *Notification of Earnings for Medicare Eligibility*, which provides a listing of gross earnings, as shown on postal records, for a maximum of 10 calendar years prior to 1983.

The Eagan ASC will complete and certify, in triplicate, Form 1528 for all career employees who were active on the rolls in January 1983, but have subsequently separated, or are still employed and are old enough to qualify for Medicare (age 65 or older). The original will be given to the employee, and two copies will be permanently retained in the employee's Official Personnel Folder (OPF). Form 1528 may be presented to HCFA in order to receive credit for deemed FQCs.

574.252 **Using Other Evidence**

In addition to OPM Form 1528, the following constitute acceptable proof of pre-1983 earnings:

- a. W-2 forms.
- b. Pay slips.
- c. A signed statement from the employing agency certifying to the amount of wages paid each year as shown on the agency's records.

574.253 **By Special Request**

If none of the above proofs can be obtained, or where less than 10 years of earnings history is available, the HCFA may request pre-1983 earnings information from:

CIVILIAN PERSONNEL RECORDS
NATIONAL PERSONNEL RECORDS CENTER
NATL ARCHIVES AND RECORDS ADMINISTRATION
111 WINNEBAGO ST
ST LOUIS MO 63118-4126

574.3 **Insured Status**

A person must be insured under the Social Security Program before retirement, survivors, or disability insurance benefits can be paid to the person or the the person's family. Different sets of requirements must be met for each type of benefit. Insured status is determined by the number of quarters of coverage credited to a person's Social Security record as follows:

- a. *Fully Insured.* At least one quarter of coverage for each calendar year elapsing after 1950 or after age 21, whichever is later, and up to the earliest of age 62, death, or disability. The requirements range from a minimum of six to a maximum of forty quarters of coverage and are dependent upon the worker's year of birth, or year or age of death, or disability. A fully insured status is only one requirement for determining whether a particular type of benefit will be paid or provided. It does not

mean that all types of benefits can be obtained on the person's Social Security record, nor does it affect the amount of benefits that can be paid.

- b. *Currently Insured.* Six quarters of coverage during the thirteen-quarter period ending the quarter in which the worker either dies or becomes entitled to disability benefits, whichever is earlier. Currently insured status is sufficient for payment of a limited number of benefits.
- c. *Disability Insured.* Fully insured and at least twenty quarters of coverage in the last forty quarters through the quarter in which disability occurs. A special insured status is needed to qualify for disability insurance benefits or to establish a period of disability. A person disabled because of blindness need only acquire fully insured status. Workers disabled before age 31 must meet less stringent requirements.

574.4 Coverage Requirements for Benefits

Quarters of coverage required in order to be fully insured for Social Security retirement and Medicare benefits:

Year of Birth	Quarters of Coverage
1913	24
1914	25
1915	26
1916	27
1917	28
1918	29
1919	30
1920	31
1921	32
1922	33
1923	34
1924	35
1925	36
1926	37
1927	38
1928	39
After 1928	40

575 Benefits**575.1 Social Security****575.11 Application Required**

Social Security benefits are not paid automatically. Claimants must file an application for benefits with the nearest Social Security Office.

575.12 Retirement Benefits

A fully insured employee is eligible to receive monthly retirement benefits as early as age 62, but at a reduced rate. Employees receive the full benefits rate if they wait until age 65 before filing for benefits. Under the Social Security Amendments of 1983, the retirement age gradually rises to age 66 by the year 2005 and age 67 by the year 2027. The law does not affect the availability of reduced benefits at age 62. If workers meet the eligibility requirements, Social Security retirement payments are also made to their dependents. Contact SSA for an explanation of which dependents are eligible for benefits.

575.13 Disability Benefits**575.131 Worker Receiving Benefits**

To receive disability benefits under the Social Security Program, an individual must provide proof from a doctor, hospital, or clinic providing treatment, attesting to the worker's inability "to engage in any substantial gainful activity by reason of a medically determinable physical or mental impairment that has lasted or is expected to last 12 months or to result in death." Additionally, the impairment must preclude an individual's ability to engage "in any kind of substantial gainful activity which exists in the national economy, regardless of whether such work exists" in the immediate area of residence.

After a 5-month waiting period, a worker who becomes disabled is eligible to receive disability payments provided that the individual is both fully and disability insured. In addition to being "fully insured," workers disabled at age 31 or older must have had 5 years (twenty quarters) of coverage in the last 10 years prior to becoming disabled. A delay of over 12 months in making application for disability benefits may result in losing benefits; however, there are special conditions which warrant an extension.

575.132 Dependents Receiving Benefits

Disability payments are also made to disabled worker's dependents. The disabled worker may contact the SSA for an explanation of necessary eligibility requirements for disability benefits.

575.14 Survivor's Benefits

Benefits are payable to the family upon a covered worker's death at any age provided that the worker is fully or currently insured. Eligible survivors of a fully insured worker will be determined by SSA.

575.2 Medicare (Hospital and Medical)**575.21 Coverage**

Medicare consists of two health insurance programs:

- a. Hospital insurance (Part A) is a basic plan which provides payments for inpatient hospital care, posthospital extended care service, posthospital home health-care services, outpatient hospital diagnostic services, and hospice care. Federal and postal employees contribute FICA taxes through payroll deductions for Part A coverage.
- b. Medical insurance (Part B) is a voluntary supplementary plan which provides payments for medically necessary doctor's services, outpatient hospital services, medical services and supplies, home health services, outpatient physical therapy, and other home health-care services. Part B is financed through monthly premiums paid by the enrollee with the federal government paying a like amount.

575.22 Eligibility**575.221 Age Sixty-Five or Older**

The following provisions apply:

- a. *General.* Practically everyone 65 or older is eligible for Medicare. Employees are not required to retire in order to attain Part A hospital insurance protection at age 65.
- b. *Automatic Enrollment.* Persons entitled to Social Security retirement or disability benefits will automatically be enrolled at age 65 in both the basic hospitalization plan (Part A) and the voluntary supplementary medical insurance plan (Part B). Those eligible for automatic enrollment must be given an opportunity to decline the Part B coverage.
- c. *Enrollment by Application.* Federal and postal employees who are eligible for Medicare, Part A, on the basis of federal/postal employment and who are not otherwise entitled to Social Security retirement and disability must apply for hospital insurance in order for it to begin at 65. Employees who continue to work after age 65 also must file an application for Part A Medicare coverage to begin at age 65. Those eligible should file an application for Part A coverage about 3 months before their 65th birthday.
 - (1) Anyone eligible for Part A who is not automatically enrolled in Part B may apply for the Part B medical insurance coverage. No Social Security or federal/postal work credits are needed to become enrolled in Part B, but a monthly premium is required.
 - (2) The initial Part B enrollment period for each person is the 7-month period beginning with the first day of the third month before the month in which age 65 is attained or, for the disabled, the first month of eligibility for Part A coverage.
 - (3) The employee may also sign up for Part A any time after the initial enrollment period, but if the employee does not sign up for Part B during the initial enrollment period, the premiums increase.

575.222 Under Age Sixty-Five

The following people under 65 are eligible:

- a. Disabled people who have been receiving (or who are entitled to) Social Security disability benefits for 2 consecutive years or more.
- b. People insured under Social Security (and their spouses and children) who need dialysis treatment or kidney transplants because of chronic kidney disease.

575.23 If an Employee Works After Age Sixty-Five**575.231 Same Health Benefits Offered**

An employer must offer workers age 65 or older the same health benefits under the same terms and conditions as those offered to workers under 65. An employee who continues to work after 65 has the option to accept or reject coverage under the Federal Employees' Health Benefits Program (FEHBP).

575.232 Written Explanation

Employees and their spouses age 65 or older must be provided with a written explanation of all available health plans and of their options under these plans. Specifically, this written explanation must include information about the consequences of electing coverage under FEHBP and the effects of such a choice on Medicare coverage.

575.233 Election in Writing

Employees must also be given an opportunity to make an election in writing. If the employee accepts the FEHBP coverage, Medicare will become the secondary health insurance payer. But, if the FEHBP is rejected, Medicare will remain the primary health insurance payer. As indicated in 575.221 (c) any employee who will continue to work after age 65 must file an application for Part A in order for Medicare protection to begin at age 65.

575.3 Events That Can Affect Benefits**575.31 Social Security**

Benefit payments will be affected if a retiree under age 70 returns to work and earnings exceed the annual exempt amount. A total annual exempt amount is determined each year for people 65 or over, and another for people under 65. In future years, the annual exempt amounts will increase automatically according to the rise in the level of average wages. If earnings exceed the annual exempt amount, \$1 is withheld in benefits for each \$2 of earnings above the limit. Starting in 1990, \$1 in benefits will be withheld for each \$3 in earnings above the limit for people in the 65 to 69 age group. Beginning in 2000, the age at which this withholding rate applies will increase as the retirement age increases.

575.32 Medicare

If an employee has Medicare hospital insurance because of entitlement to Social Security benefits on a spouse's work record, the protection will end if entitlement to benefits ends. If hospital insurance is obtained as the spouse

of a federal employee, the protection will end if the employee and spouse divorce before the marriage has lasted 10 years. If hospital insurance is based on the employee's own Social Security work record or own federal/postal employment, the protection will continue for life.

575.4 **Elimination of Retirement Windfall Benefits**

575.41 **Purpose**

The 1983 amendments to the Social Security law provide for a modified benefit formula (MBF) designed to eliminate windfall Social Security benefits. The Social Security benefit computation formula has always been weighted to replace a higher portion of preretirement earnings for workers with low earnings than for workers with substantial earnings under Social Security. Although this weighted formula is intended to benefit workers with a history of low earnings, it also works to the advantage of persons who had substantial income from jobs not covered by Social Security. The MBF eliminates the excess benefit provided to such persons by using a less heavily weighted benefit formula to calculate benefits. Also, the provisions of the MBF guarantee that the reduction in the Social Security benefit cannot exceed one-half of that part of the pension based on noncovered employment after 1956.

575.42 **When the Modified Benefit Formula Applies**

The modified formula applies when a worker is first eligible, after December 31, 1985, for both a Social Security retirement or disability benefit (excluding Railroad Retirement) *and* a pension from employment not covered by Social Security. However, the formula will not apply to workers who have 30 years of Social Security coverage, and it will have a lesser effect on workers with 26 to 29 years of coverage under Social Security. Also, employees hired on or after January 1, 1984 who became mandatorily covered by Social Security are not subject to the modified computation provisions.

575.5 **Computation of Benefits**

575.51 **Step 1 — General Computation of Average Indexed Monthly Earnings**

Retirement benefits are generally computed using a worker's yearly earnings beginning with 1951 (or with attainment of age 22, if later) up to the year the employee reaches age 62. Only earnings up to the maximum creditable under Social Security for each year may be used. The yearly amounts are indexed to account for increases in coverage earnings in the economy since the time they were earned. By adding the indexed earnings and dividing by the total months in the years used, excluding up to 5 years of low or no earnings, the Average Indexed Monthly Earnings (AIME) is determined. In disability cases, the AIME is computed using earnings up to the year the disability begins. With both retirement and disability claims, up to 5 years of low or no earnings may be dropped from consideration in computing the AIME.

575.52 Step 2 — General Computation of Primary Insurance Amount**575.521 Without Modified Benefit Formula**

A Social Security benefit is weighted by dividing the AIME into three tiers or levels (see 575.53). The dividing points change each year for newly eligible workers as average earnings levels change. The monthly benefit is computed by taking 90 percent of first-tier earnings, 32 percent of second-tier earnings, and 15 percent of third-tier earnings. Thus, workers with low average earnings receive a higher percentage of their earnings. The results are added to obtain the basic benefit rate which is the Primary Insurance Amount (PIA). This amount is then rounded to the next lower multiple of \$.10 if it is not already a multiple of \$.10. The benefit is actuarially reduced if retirement benefits are paid before age 65.

575.522 With Modified Benefit Formula

Under the MBF, the weighting will be phased out by reducing the percentage in the first tier by 10 percent per year from 1986 to 1990. The MBF will be fully effective for workers who attain age 62 or become disabled in 1990 or later. The second- and third-tier percentages will remain unchanged.

575.53 Transitional Provisions

Effective for persons first eligible for *both* (1) a pension based on noncovered employment *and* (2) a Social Security Retirement or Disability Benefit in:

Year of Eligibility	Percentage of First Tier Earnings to Be Used in Benefit Computation
1986	80
1987	70
1988	60
1989	50
1990 & later	40

Percentages of the 2nd and 3rd band of earnings will remain the same.

Years of Substantial Earnings	Percentage of First Tier Earnings to Be Used in Benefit Computation
29	No less than 80
28	No less than 70
27	No less than 60
26	No less than 50

Percentages of the 2nd and 3rd band of earnings will remain the same.

575.54 Examples of Social Security Benefits Computations — Primary Insurance Amount (PIA)**575.541 General Formula**

The general formula for computing PIA is as follows. The dollar amount limits for each tier in the formula are as stated in Social Security Publication No. 05-10070, dated March 1997, and are subject to change.

First Tier	90% of AIME through \$455
Second Tier	32% of AIME from \$456 through \$2,741
Third Tier	15% of AIME over \$2,741

575.542 Computation Example Using General Formula — Employee Without Noncovered Pension Benefit

Computation for a worker with an AIME of \$1,200 and *no noncovered (CSRS) pension benefit* is shown below.

First Tier	90% of \$455	=	\$409.50
Second Tier	32% of \$745 (\$1,200 minus first \$455)	=	238.40
Third Tier	15% of \$0	=	0.00
		PIA	= \$647.90

575.543 Computation Examples Using Modified Benefit Formula — Employees With Noncovered Pension Benefits

Computations for workers with AIMEs of \$1,200 and *noncovered (CSRS) pension benefits*, becoming eligible for benefits after January 1, 1990, are shown below.

The Modified Benefit Formula provisions provide a guarantee that the reduction in Social Security benefit cannot exceed one-half of that part of the pension based on noncovered employment. To determine if the guarantee applies, a comparison of the first tier computations at 90 percent and at 40 percent is necessary.

First Tier @ 90% of \$455	=	\$409.50
First Tier @ 40% of \$455	=	182.00
Difference between 90% and 40% factors above (reduction in benefits due to MBF computation)	=	\$227.50

Example 1 — Noncovered Pension Benefit of \$550

50% of \$550 (noncovered pension benefit)	=	\$275.00
Thus: \$227.50 (MBF reduction) NOT > \$275.00 (50% of noncovered benefit)		

As the reduction in benefits when using the MBF computation (\$227.50) is not greater than 50% of the noncovered pension (\$275.00), the guarantee does not apply and the 40% factor is used to compute the PIA.

First Tier	40% of \$455	=	\$182.00
Second Tier	32% of \$745 (\$1,200 minus first \$455)	=	238.40
Third Tier	15% of \$0	=	<u>0.00</u>
		PIA	= \$420.40

Example 2 — Noncovered Pension Benefit of \$250

50% of \$250 (noncovered pension benefit)	=	\$125.00
Thus: \$227.50 (MBF reduction) > \$125.00 (50% of noncovered benefit)		

As the reduction in benefits when using the MBF computation (\$227.50) is greater than 50% of the noncovered pension (\$125.00), the guarantee does apply and the PIA is computed as below.

First Tier	50% of \$250 (noncovered pension)	=	\$125.00
Second Tier	32% of \$745 (\$1,200 minus first \$455)	=	238.40
Third Tier	15% of \$0	=	<u>0.00</u>
		PIA	= \$363.40

575.6 Government Pension Offset

575.61 Purpose

The purpose of the government pension offset is to eliminate windfall payments to retired government workers who have their own pensions and who also would receive Social Security benefits as a spouse or surviving spouse. The government pension offset applies *only* to Social Security benefits for a spouse or surviving spouse. It does not apply to Social Security retirement or disability benefits based on a person's own work covered by the program even if the person also receives a government pension. Social Security benefits paid to spouses and surviving spouses are offset by the amount of any public (federal, state, local) retirement benefits payable to the spouse on the spouse's own work in noncovered public employment.

575.62 Exceptions

The following provisions apply:

- a. Employees may be exempt from the pension offset if both of these requirements are met:
 - (1) They began to receive, or were eligible to receive, a federal, state, or local government pension *before December 1982*. This means that the age and length-of-service requirements for the pension must have been met before December 1982 even though application for the pension was not made before then.

- (2) They satisfy all the requirements for the spouse's or surviving spouse's Social Security benefits in effect in January 1977. At that time, a divorced woman's marriage must have lasted at least 20 years rather than 10 years as required today, and a husband or widower must have received at least one-half of his support from his wife.
- b. Even if employees do not met these criteria, they still may be exempt from the offset beginning with Social Security benefits payable December 1982 if *both* of these requirements are met:
 - (1) They were receiving, or were eligible to receive, a federal, state, or local government pension before July 1, 1983.
 - (2) They were receiving at least one-half of their support from their spouse. This provision applies to men and women.
- c. In addition to the exceptions mentioned earlier, the offset will not apply if *any one* of these requirements is met:
 - (1) The government service which the pension is based on is covered by Social Security on the last day of employment; or (b) The employee is entitled to Social Security benefits as a spouse, or surviving spouse, based on an application filed before December 1977.
 - (2) The government pension that the spouse is receiving is not based on the spouse's own earnings.
 - (3) The employee elected to transfer into FERS on or before December 31, 1987. The government offset applies only to Social Security benefits for a spouse or surviving spouse. It does not apply to Social Security retirement or disability benefits based on a person's own work covered by the program even if the person also receives a government pension.

575.63 **Amount of Offset**

If the employee is not exempt from the offset, the amount of the government pension that will be used for calculating the offset against the spouse's or surviving spouse's Social Security benefits will depend on when the spouse first became eligible for the pension (not when the spouse actually applies for it):

- a. Before July 1983 — All of the pension will be used for any benefits payable for months before December 1984. Effective with December 1984, the offset amount is two-thirds of the pension.
- b. July 1983 or later — Two-thirds of the pension will be used.

The offset works much the same way that benefits are offset when a person is entitled to more than one type of Social Security benefit. For example, the Social Security check paid to a spouse or surviving spouse (widow, or widower) is reduced by the amount of any Social Security benefit that person earned in his or her own right.