



# Navigating your **Dialysis** treatment

The following information is designed to help you navigate your way through dialysis treatment, including Medicare enrollment, costs and coverage, and ending coverage if you no longer need dialysis.

## Medicare Basics



When AmeriBen is notified of your preapproval, an AmeriBen Case Manager will contact you and your dialysis provider to explain the program and provide support. Once enrolled in Medicare, there is a 3-month waiting period where your employer plan will be the primary payer. On the first day of the fourth month, you will start your “coordination period”. The QR code to the left will take you to Medicare Interactive to help you find out more.

**Contact the Social Security Administration (SSA) at 800-772-1213 to learn if you have enough work history to qualify for ESRD Medicare.**

## Costs & Coverage



During the next 30 months, or the “coordination” period, your AmeriBen Case Manager will provide support. Your employer-sponsored plan will pay for your treatment first, and Medicare pays all deductibles, copays, and balances. You should not have to pay additional charges. Scan the QR code to find out more.

**Important:** You will receive a separate Dialysis ID card (different from your Health benefits ID card) that will give you the information to send your claims directly to AmeriBen and not to the network.

## Ending Coverage



After a total of 33 months, Medicare will become the primary payer. If your condition improves, and you no longer need dialysis, scan the QR code to the left to find out about ending coverage. If you had a transplant, you can find out more about immunosuppressant drugs and vitamins through your Medicare coverage.

For more information, contact your AmeriBen Case Manager at: 8XX-XXX-XXXX