



## **Medicare Reimbursement Program**

### **Frequently Asked Questions**

#### **1. Which department is responsible for this program?**

The LTBB Health Department will be administering this program nationwide to all eligible Medicare recipients through the use of third-party revenue funds generated by the LTBB Health Department and LTBB Pharmacy.

#### **2. How do I get the SSA letter for my Medicare Part B Reimbursement?**

Three ways:

1. Call local Social Security office and get one sent to you
2. Go to local Social Security office to get one printed
3. Create an SSA.gov account and print your benefit letter

(All of these options are zero cost to you)

#### **3. What does the term “Medicare expense” mean?**

Medicare expense means the premiums paid for your Medicare Part B and Part D plans.

#### **4. What are accepted proofs of Medicare Part B expense?**

1. SSA Benefit Letter showing Medicare Part B deductions
2. Bank or credit card statement showing Medicare Part B premium payment
3. 1099 statement showing your annual premium deduction

#### **5. What are accepted proofs of Medicare Part D expense?**

1. Bank statement showing premium payment deduction to the Part D plan
2. Call Part D plan and request a premium statement showing your payments
3. If you get your Part D premiums automatically deducted from your social security check, a Social Security Benefit Letter will provide that information
4. 1099 statement showing your annual premium deduction



**6. If I am currently on SSI Disability and am paying Medicare premiums, do I qualify for this program?**

Yes! If you require an application for this program, they can be found on the LTBB Website or we can mail one to you, if needed.

**7. What do I need to send in to get my Medicare premium reimbursement?**

You should have 4 things in your application submission:

- ✓ Completed and Signed Application (Page 2 of the packet)
- ✓ Proof of premium payment
- ✓ Tribal ID card
- ✓ Copy of Medicare card

**7. Where do I mail my application?**

Mail your application and supporting documentation to:

LTBB Health Department  
1260 Ajijaak Ave  
Petoskey, MI 49770

**Any further questions should be directed to:**

**Valorie Glazier**

**LTBB Patient Benefits Specialist**

**(231) 242-1748**

**Email: [vglazier@ltbbodawa-nsn.gov](mailto:vglazier@ltbbodawa-nsn.gov)**