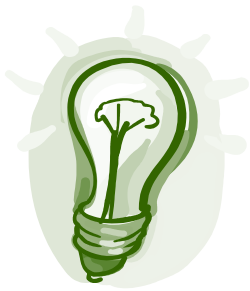


COR-BEN CONSULTANTS, INC.



**COR-BEN's
Menu of products
includes:**

Group and Individual
Medical
Life
Disability
Dental

Voluntary Benefits
AFLAC
Colonial

Partial & Fully
Self-Insured Programs

Cafeteria Plan
(Section 125)

COBRA
Compliance Plans

Pension & 401K

Personal, Fast and
Attentive Service

GROUP HEALTH PLAN OR MEDICARE WHO PAYS FIRST?

Often, one of the more difficult tasks for employers is keeping up with the Medicare laws and the impact they impose on group health plans. Medicare laws change frequently and the updates affect how benefits are handled between a Medicare entitled employee and the company's group medical coverage.

When a company has twenty or more employees in a calendar year for more than twenty weeks (it does not have to be consecutive) the group health plan is the primary claims payer and Medicare is secondary. At any time in the calendar year the company falls below twenty employees, the group health plan will remain the primary payer for the remainder of the calendar year *and* the following calendar year.

Another factor to consider is cost. If the group health plan is primary, monthly premiums are the same as any other employee. When the group is determined to be a small employer, rates are dramatically reduced, as Medicare is now the primary payer.

Employers are often asked to verify the number of employees for a given time period and it is imperative the accurate count be provided. Therefore, it is recommended to contact your Cor-Ben agent for assistance in supplying the requested information to your health insurance carrier or to The Centers For Medicare and Medicaid Services.

For additional information on please contact your Cor-Ben sales agent or view the Headline News tab on our website at:

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