



LITTLE TRAVERSE BAY BANDS OF ODAWA INDIANS MEDICARE REIMBURSEMENT PROGRAM



ATTN: LTBB Sponsorship Specialist
1260 Ajijaak Avenue Petoskey, MI 49770
P: 231-242-1748
F: 231-242-1617
E: vglazier@ltbbodawa-nsn.gov

I, _____, have reviewed the following:
PLEASE PRINT YOUR FULL NAME

- The Medicare Reimbursement Program is available to all LTBB Citizens nationwide.
- To be eligible applicants must submit a copy of their LTBB Tribal ID, a copy of their Medicare card, and proof of Medicare plan expenses.
 - For proof of Medicare **Part B**: you must submit a copy of your social security benefits letter showing the Medicare Part B deduction or bank account/credit card statements showing you paid for your plan.
 - For proof of Medicare **Part D**: you must submit a copy of your prescription insurance card, along with proof of payment for your plan. This can be either bank statements or a statement from your insurance plan showing you paid for your plan.

PLEASE NOTE: Incomplete applications will not be processed unless the applicant submits all required documentation before the deadline.

- Maximum Payment for **Part B**: Current CMS published rate for Medicare Part B **standard monthly premiums** (this does not include adjusted rates due to income or penalty).
- Maximum Payment for **Part D**: \$75 per month.
- There are two payments issued each calendar year (in the order they were received):
 - January 1st is when the program opens for application processing (not payments) for the first payment.
 - This payment covers expenses from **July 1st - December 31st of the prior year**. The deadline is **February 14th**. Late submissions are denied.
 - July 1st is when the program opens for application processing (not payments) for the second payment.
 - This payment covers expenses from **January 1st - June 1st of the current year**. The deadline is **August 14th**. Late submissions are denied.

I UNDERSTAND THAT FAILURE TO FOLLOW THESE INSTRUCTIONS WILL RESULT IN MY APPLICATION BEING DENIED. I ALSO UNDERSTAND THAT IF I PROVIDE FALSE INFORMATION, IT CAN RESULT IN A REFERRAL TO THE PROSECUTING ATTORNEY FOR FRAUD AND/OR RECOVERY OF FUNDS PAID ON MY BEHALF.

I HAVE MEDICARE PART B

I HAVE MEDICARE PART D

SIGNATURE

DATE

PRINTED NAME

DATE OF BIRTH

ADDRESS

ENROLLMENT #

CITY/STATE/ZIP

PHONE #



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CHECKLIST FOR REQUIRED DOCUMENTS

For Medicare Reimbursement Applicant Eligibility:

A copy of LTBB Tribal ID?

If you do not have one, you may fill out a Release of Information for LTBB's Enrollment Office for our LTBB Sponsorship Specialist to confirm your citizenship. A form is attached to this application.

A copy of Medicare card?

If you do not have one, you may request a new one through the Social Security Administration, either by phone at 1-800-MEDICARE (1-800-633-4227 | TTY 1-877-486-2048) or through their website at: <https://www.ssa.gov/myaccount/>.

A completed LTBB Medicare Reimbursement Application?

For Medicare Part B Reimbursement (along with eligibility):

A copy of Social Security letter showing Part B deduction?

If you do not have one, you may request a new one through the Social Security Administration through their website: <https://www.ssa.gov/myaccount/>. If you have lost your letter, please get in touch with your local Social Security office or call 1-800-772-1213 | TTY 1-800-325-0778.

For Medicare Part D Reimbursement (along with eligibility):

*For January Processing: Proof of payments between July 1st - December 31st **of the prior year.***

*For July Processing: Proof of payments between January 1st - June 30th **of the current year.***

Bank statements showing proof of payment for the reimbursement period?
-OR- Statement(s) from the insurance company showing proof of payment for the reimbursement period?

A copy of your prescription insurance card?

What happens next?

#1 The applications are submitted to the LTBB Sponsorship Specialist for review.

Address:

LTBB Health Department
ATTN: LTBB Sponsorship Specialist
1260 Ajijaak Avenue
Petoskey, MI 49770

Fax: 231-242-1617

Email: vglazier@ltbbodawa-nsn.gov

#2 The LTBB Sponsorship Specialist will verify all required documents have been submitted.

#3 If the application is **not** complete, the LTBB Sponsorship Specialist will notify the applicant to submit missing documents.

#4 The LTBB Sponsorship Specialist will submit to their supervisor for Approval or Denial.

If **approved**, the application will be sent to LTBB's Accounting Department to issue a check. Processing times vary due to staff and work volume.

If **denied**, the LTBB Sponsorship Specialist will notify the applicant of their denial and the reasoning. The applicant may reapply for the next payment from the program.

Questions? Need Assistance?

Call the LTBB Sponsorship Specialist at 231-242-1748.