Information partners can use on:

The Part D Late Enrollment Penalty

What’s the Part D late enrollment penalty?
The late enrollment penalty (also called the “LEP” or “penalty”) is an amount that may be added to a person’s monthly premium for Medicare drug coverage (Part D). A person enrolled in a Medicare plan may owe a late enrollment penalty if they go without Part D or other creditable prescription drug coverage for any continuous period of 63 days or more after the end of their Initial Enrollment Period for Part D coverage.

Generally, the late enrollment penalty is added to the person’s monthly Part D premium for as long as they have Medicare drug coverage, even if the person changes their Medicare plan. The late enrollment penalty amount changes each year. The cost of the late enrollment penalty depends on how long the person went without Part D or other creditable prescription drug coverage.

What’s creditable prescription drug coverage?
Creditable prescription drug coverage (also called “creditable coverage”) is coverage that’s expected to pay, on average, at least as much as Medicare’s standard prescription drug coverage. Most plans that offer prescription drug coverage, like plans from employers or unions, must send their Part D eligible members a yearly notice explaining how their drug coverage compares to Medicare drug coverage and if it’s creditable coverage. If a person with Medicare doesn’t get a separate written notice, the person’s plan may provide this information in its benefits handbook. If the person doesn’t know if the drug coverage they have is creditable, they should contact the plan.
How’s the late enrollment penalty calculated?

Medicare, not the plan, calculates the late enrollment penalty when a person subject to the penalty first gets Medicare drug coverage (Part D). The late enrollment penalty amount typically is 1% of the “national base beneficiary premium” (also called the base beneficiary premium) for each full, uncovered month that the person didn’t have Medicare drug coverage or other creditable coverage. The national base beneficiary premium for 2022 will be $33.37. The monthly penalty is rounded to the nearest $0.10 and added to the monthly Part D premium.

Example 1

Mr. Ray joined a Medicare plan before the end of his Part D Initial Enrollment Period in February 2019. However, he disenrolled from that Medicare plan effective December 31, 2019. If he later joins another Medicare plan in Fall 2021 during the Open Enrollment Period, his coverage with his new plan will be effective January 1, 2022. Between leaving his last Medicare plan and joining the new Medicare plan, there will be a period of 24 full months in which he didn’t have creditable coverage (January 1, 2020–December 31, 2021). So, starting January 1, 2022, he has to pay 24% (1% for each full, uncovered month that he was without creditable prescription drug coverage since leaving his first Medicare plan and joining his current plan) of the base beneficiary premium for 2022 ($33.37). Mr. Ray’s penalty amount is $8.01 each month. Since the monthly penalty is always rounded to the nearest $0.10, he’ll pay $8.00 each month in addition to his plan’s monthly premium in 2022.

Here’s the math:

\[
0.24 \times \text{2022 base beneficiary premium} = 8.01 \\
8.01 \text{ rounded to the nearest $0.10} = 8.00 \\
8.00 = \text{Mr. Ray’s monthly late enrollment penalty}
\]

The base beneficiary premium changes each year. Medicare uses the current coverage year’s amount to calculate a person’s new penalty amount. In 2021, the base beneficiary premium is $33.06. In 2022, the base beneficiary premium will be $33.37.

Example 2

Mrs. Martinez is currently eligible for Medicare, and her Initial Enrollment Period ended on July 31, 2018. She doesn’t have prescription drug coverage from any other source. She didn’t join by July 31, 2018, and instead joined during the Open Enrollment Period that ended December 7, 2020. Her drug coverage was effective January 1, 2021.
Example 2 (continued)

2021

Since Mrs. Martinez was without creditable prescription drug coverage from August 2018–December 2020, her penalty in 2021 was 29% (1% for each of the 29 months) of $33.06 (the national base beneficiary premium for 2021) or $9.59. Since the monthly penalty is always rounded to the nearest $0.10, she paid $9.60 each month in addition to her plan’s monthly premium.

Here’s the math:

\[
.29 \times 33.06 = 9.59
\]

$9.59 rounded to the nearest $0.10 = $9.60

$9.60 = Mrs. Martinez’s monthly late enrollment penalty for 2021

2022

In 2022, Medicare will recalculate Mrs. Martinez’s penalty using the 2022 base beneficiary premium ($33.37). So, Mrs. Martinez’s new monthly penalty in 2022 will be 29% of $33.37 or $9.68 each month. Since the monthly penalty is always rounded to the nearest $0.10, she will pay $9.70 each month in addition to her plan’s monthly premium.

Here’s the math:

\[
.29 \times 33.37 = 9.68
\]

$9.68 rounded to the nearest $0.10 = $9.70

$9.70 = Mrs. Martinez’s monthly late enrollment penalty for 2022

Generally, once Medicare determines a person’s penalty amount, the person will continue to owe a penalty for as long as they’re enrolled in Medicare drug coverage. This means that even if the person decides to join another Medicare plan, they will still have to pay the penalty once enrolled in a new plan. This also means that if a person joins a plan that has a $0 monthly premium, they will still owe a penalty.
If Medicare’s systems show that a person has a break in creditable coverage, will the person have a chance to tell the plan about their prior drug coverage?

When a person joins a Medicare plan, the plan will review Medicare’s systems to see if the person had a potential break in creditable coverage for 63 days or more in a row. If so, the plan will send the person a notice asking for information about prior prescription drug coverage. **It’s very important that the person complete this form and return it by the date on the form, because this is the person’s chance to let the plan know about prior coverage that might not be in Medicare’s systems.** Also, the person can, but isn’t required to, send any proof of their prior coverage, like a copy of the notice of creditable prescription drug coverage from an employer or union health plan. If the plan allows the person to provide this information over the phone instead, they must do so by the date on the form.

The information provided helps the plan tell Medicare if there was a gap in creditable coverage of 63 days or more in a row. If the person doesn’t provide this information to the plan by the date on the form, the plan will determine how many full, uncovered months the person was eligible to join Medicare drug coverage and didn’t, based on the information in Medicare’s systems. Then Medicare (not the plan), will determine the late enrollment penalty amount using the calculation method described on pages 2 and 3.

Is there a late enrollment penalty if a person waits one month after they were first eligible to enroll in Medicare drug coverage?

No. A person must be without creditable coverage 63 days or more in a row any time after they were first eligible to enroll to be charged a late enrollment penalty. Since the person had only one month without Part D or other creditable coverage, they wouldn’t have to pay a penalty.

Is there a late enrollment penalty if a person gets Extra Help and had a break in coverage?

No. People who qualify for Extra Help under Part D won’t be charged a late enrollment penalty when they enroll in a Medicare drug plan. If a person disenrolls from their Medicare drug plan and goes 63 days or more in a row without other creditable coverage, Medicare may charge a late enrollment penalty if they join a Medicare plan later and are no longer eligible for Extra Help. However, when Medicare determines the person’s late enrollment penalty, Medicare won’t count any uncovered months from before the person became eligible for Extra Help.
Is there a late enrollment penalty if a person gets Extra Help and had a break in coverage? (continued)

Example 3
Mrs. Kim didn’t sign up for Medicare drug coverage before her Initial Enrollment Period ended in July 2019. In October 2019, she enrolled in a Medicare drug plan (effective January 1, 2020). She qualified for Extra Help, so she wasn’t charged a late enrollment penalty for the uncovered months in 2019. However, Mrs. Kim disenrolled from her Medicare drug plan effective June 30, 2020. She later joins another Medicare drug plan in October 2021 during the Open Enrollment Period, and her coverage with the new plan will be effective January 1, 2022. She doesn’t qualify for Extra Help when she enrolls in October 2021.

Since leaving her first Medicare drug plan in June 2020 and joining the new Medicare drug plan in October 2021, she hasn’t had other creditable coverage. However, she was still deemed eligible for Extra Help through December 2020. When Medicare determines her late enrollment penalty, Medicare doesn’t count:

- The uncovered months from 2019, before Mrs. Kim became eligible for Extra Help
- The uncovered months in 2020 that Mrs. Kim didn’t have creditable coverage because she was still deemed eligible for Extra Help through December 2020

For 12 full months (January–December 2021), Mrs. Kim doesn’t have creditable coverage and isn’t deemed eligible for Extra Help. So, effective January 1, 2022, she’ll pay 12% of the base beneficiary premium for 2022 (1% for each full, uncovered month that she was without creditable coverage and wasn’t deemed eligible for Extra Help). The base beneficiary premium for 2022 is $33.37, so Mrs. Kim’s penalty amount will be $4.00 each month. Since the monthly penalty is always rounded to the nearest $0.10, she’ll pay $4.00 each month in addition to her plan’s monthly premium in 2022.

Here’s the math:

\[ \begin{align*}
.12 \times 33.37 \text{ (2022 base beneficiary premium)} & = 4.00 \\
4.00 \text{ rounded to the nearest } 0.10 & = 4.00 \\
4.00 & = \text{Mrs. Kim’s monthly late enrollment penalty for 2022}
\end{align*} \]
What if a person doesn’t agree with the late enrollment penalty?

If a person doesn’t agree with the late enrollment penalty, they may be able to ask Medicare to review its decision. This is called a “reconsideration.” The person’s Medicare plan will send information about how to request a reconsideration. The form lists the reasons a person can ask for and get a review of their case.

If the person wants a review of their case, they should complete the form and return it to the address or fax number listed on the form, and a Medicare contractor will review the case. The person must mail or fax the form within 60 days from the date on the letter stating that the person had to pay a late enrollment penalty. The person should also send any proof that supports their case, like information about previous creditable coverage. For example, if the person had drug coverage from an employer or union plan, they may provide a copy of the notice of creditable prescription drug coverage from the employer or union plan.

Can a person who doesn’t agree with the late enrollment penalty pay only the premium and ignore the penalty?

No. According to Medicare law, the late enrollment penalty is part of the premium, so a person who has a late enrollment penalty must pay it with the premium. A person with a late enrollment penalty must also pay the penalty even if they asked Medicare’s contractor to review its decision, and the person hasn’t yet gotten a decision. Medicare plans can disenroll members who don’t pay their premiums, including the late enrollment penalty portion of the premium.

How soon will a person get a reconsideration decision?

Generally, Medicare’s contractor makes reconsideration decisions within 90 days. The contractor will try to make a decision as quickly as possible. However, a person may request an extension, or Medicare’s contractor can, for good cause, take an additional 14 days to resolve a person’s case.
What happens if the late enrollment penalty reconsideration decides the penalty is wrong?

If Medicare's contractor reviews a case and decides that all or part of the late enrollment penalty is wrong, the Medicare contractor will send the person and their Medicare plan a letter explaining its decision. The plan will remove or reduce the late enrollment penalty and will send the person a letter that shows the correct premium amount and explains if there will be a refund.

What happens if the late enrollment penalty reconsideration decides the penalty is correct?

If Medicare's contractor reviews a case and decides that the late enrollment penalty is correct, the Medicare contractor will send a letter explaining the decision, and the person must pay the late enrollment penalty.
You have the right to get Medicare information in an accessible format, like large print, Braille, or audio. You also have the right to file a complaint if you feel you’ve been discriminated against. Visit Medicare.gov/about-us/accessibility-nondiscrimination-notice, or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

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