DELAY IN BUY-IN ENROLLMENT

pennsylvania
DEPARTMENT OF PUBLIC WELFARE
www.dpw.state.pa.us

CASE IDENTIFICATION				
CO	RECORD NUMBER	CAT	CTR DIG	DIST

Date: _____

Dear _____,

☐ We are working on paying your Medicare premiums, but we need more information. We are giving you an envelope so you can send the information to us _____
_____
_____
_____.

☐ We do not need any more information from you at this time. We are working toward getting you enrolled for payment of your premiums. You should be enrolled by _____.

☐ Other: _____
_____
_____
_____.

If Medicare premiums are being taken out of your Social Security, you will get a refund for the months starting when you applied (and you may also get a refund for the 3 months before you applied).

If you have any questions, call your caseworker at _____.

If you need legal help or you have questions, you can also call your local legal services office.

Sincerely,

IMCW Signature