



如果您獲得 Medicare 處方藥計劃開支的「額外協助」，社會安全局 (Social Security) 可能會定期地與您聯繫以檢查您的現況。這項審核是為了確保您仍然符合「額外協助」的資格，並獲得所應領取的一切福利。

如果您沒有被選為審核對象，您所接受的「額外協助」金額將保持不變。

社會安全局何時進行這項審核？

這項審核通常在每年的 8 月底進行。

社會安全局如何與我聯繫？

我們將給寄一份稱為「社會安全局審核您獲得「額外協助」的資格」(Social Security Administration *Review of Your Eligibility for Extra Help*) (SSA-1026) 的表格給您填寫。您必須在 30 天內填完表格寄回。對於「額外協助」的任何必要調整會於次年 1 月生效。例如，如果我們在 2011 年 8 月給您寄一份審核表格，而且您在 30 天內寄回表格，那麼「額外協助」的任何必要調整將會於 2012 年 1 月生效。

在填寫表格時，如果我需要幫助怎麼辦？

您的家人、照顧者和第三方可以協助您填寫表格。社會安全局也會回答您可能遇到的問題。您只要打電話 1-800-772-1213 給我們即可。如果您失聰或重聽，請撥我們的 TTY 號碼 1-800-325-0778。您也可以前往您當地的社會安全辦公室尋求幫助。

我的「額外協助」會有什麼樣的調整？

有可能發生以下一種情況：

- 您獲得的「額外協助」金額沒有變化；
- 您獲得的「額外協助」金額會增加；
- 您獲得的「額外協助」金額會減少；
- 您的「額外協助」會終止。

如果我不交回審核表格會怎麼樣？

您的「額外協助」將於次年一月終止。

我如何知道社會安全局對審核做出什麼決定？

社會安全局會寄信向您說明做出的決定。如果您認為決定不正確，您有權提出上訴。這封信也會說明您的上訴權。

我如何獲得更多資訊？

有關於 Medicare 處方藥計劃開支的「額外協助」資訊或社會安全局的一般資訊，請瀏覽 www.socialsecurity.gov 或致電 **1-800-772-1213** (TTY **1-800-325-0778**)。如果您是因為對收到的信件有疑問而打電話，請將信件放在手邊，這樣有助於我們回答您的問題。

若想瞭解有關 Medicare 處方藥計劃以及特殊投保期的更多資訊，請瀏覽 www.medicare.gov 或致電 **1-800-MEDICARE (1-800-633-4227; TTY 1-877-486-2048)**。

Review Of Your Eligibility For Extra Help With Medicare Prescription Drug Plan Costs: Some Things You Should Know

2011



If you get Extra Help with your Medicare prescription drug plan costs, Social Security may contact you periodically to review your status. This review will ensure that you are still eligible for the Extra Help and receiving all the benefits you deserve.

If you are not selected for a review, there will be no change in the amount of Extra Help you receive.

When will Social Security do this review?

Reviews will be done each year usually at the end of August.

How will Social Security contact me?

We will send you a form to complete, called *Social Security Administration Review of Your Eligibility for Extra Help* (SSA-1026). You will have 30 days to complete and return this form. Any necessary adjustments to the Extra Help will be effective in January of the following year. For example, if we send you a review form in August 2011 and you return the review form within 30 days, any necessary adjustment to your Extra Help will be effective in January 2012.

What if I need help completing the form?

Family members, caregivers, and third parties can help you complete the form. Social Security also can help answer questions you may have. Just call us at **1-800-772-1213**. If you are deaf or hard of hearing, please call our TTY number at **1-800-325-0778**. You also may visit your local Social Security office for assistance.

What kind of adjustment will be made to my Extra Help?

One of the following will occur:

- No change in the amount of Extra Help you receive;
- An increase in the amount of Extra Help you receive;
- A decrease in the amount of Extra Help you receive; or
- Termination of your Extra Help.

What will happen if I do not return the review form?

Your Extra Help will be terminated in January of the following year.

How will I know what decision Social Security made on the review?

Social Security will send you a letter explaining the decision we made. If you believe the decision is incorrect, you will have the right to appeal it. The letter also will explain your appeal rights.

How can I get more information?

For more information about Extra Help with your Medicare prescription drug plan costs or general information about Social Security, visit www.socialsecurity.gov or call Social Security at **1-800-772-1213** (TTY **1-800-325-0778**). If you call because you have questions about a letter you received, please have the letter with you. It will help us answer your questions.

To learn more about Medicare prescription drug plans and special enrollment periods, visit www.medicare.gov or call **1-800-MEDICARE** (**1-800-633-4227**; TTY **1-877-486-2048**).

