



# CARDINAL ADVISORS

## Medicare Tax on High Income - IRMAA 2024

Hans and Tom use the following documents to discuss “Medicare Tax on High Income-IRMAA for 2024” in the video with the same title.

**MEDICARE TAX ON HIGH INCOME-IRMAA 2024**

**HOW IT'S CALCULATED AND HOW TO APPEAL IT**

IRMAA = INCOME RELATED MONTHLY ADJUSTMENT AMOUNT  
 MAGI = MODIFIED ADJUSTED GROSS INCOME

STANDARD PART B \$174.70 PART D \$55.50

SINGLE	MARRIED FILING JOINTLY	PART B EXTRA	PART D EXTRA
\$103,000	\$206,000	Ø	Ø
\$129,000	\$258,000	\$69.90	\$12.90
\$161,000	\$322,000	\$174.70	\$33.30
\$193,000	\$386,000	\$279.50	\$53.80
\$500,000	\$750,000	\$384.30	\$74.20
\$500,000+	\$750,000+	\$419.30	\$81.00

• 2024 USES 2022 TAX  
 • 2025 USES 2023 TAX  
 • 2026 USES 2024 TAX

- APPEAL FORM SSA-44  
 - MARRIAGE, DIVORCE, DEATH OF SPOUSE, WORK STOPPAGE, WORK REDUCTION, LOSS INCOME PROPERTY, LOSS PENSION, EMPLOYER SETTLEMENT PAYOUT

**S.S.**   
**MED**   
**LTC**   
**401K/IRA**

**INCOME**   
**ESTATE**   
**TAXES**

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April 2024

# 2024 Medicare Income Planning

## Part B and D Charges

The Medicare health care system is largely government funded, but individuals pay premiums to participate in two portions of it.

Medicare charges premiums to participants in Medicare Part B, covering doctor visits, and Part D, the prescription drug benefit. In 2024 the basic premium for Part B is \$174.70 per month. The premium for Part D varies by plan.

The standard premiums for these are increased by surcharges imposed on upper-income individuals, those with **Modified Adjusted Gross Income (MAGI)** exceeding \$103,000 on an individual return or \$206,000 on a joint return.

In 2024 the largest premium surcharges apply to persons with MAGI of \$500,000 or over on a single return or \$750,000 or over filing jointly.

The extra amount that higher-income individuals must pay is called an **Income Related Monthly Adjustment Amount (IRMAA)**. The first five IRMAA tiers for Medicare premium surcharges are adjusted for inflation each year. This could result in reduced Medicare premiums for some. The IRMAA tier for individuals earning \$500,000 or more (or married couples with MAGI of \$750,000 or more) will not be adjusted until 2028.

## Combination Chart - Parts B and D

### 2024 IRMAA MONTHLY SURCHARGES FOR MEDICARE PART B AND PART D (Based on 2022 MAGI)

Filing Single	Married filing joint	IRMAA Surcharge Part B	Total Premium Part B	IRMAA Surcharge Part D	Total of surcharges Part B & D
\$103,000 or less	\$206,000 or less	\$0.00	\$174.70	\$0.00	\$0.00
Over \$103,000 to \$129,000	Over \$206,000 to \$258,000	\$69.90	\$244.60	\$12.90	\$82.80
Over \$129,000 to \$161,000	Over \$258,000 to \$322,000	\$174.70	\$349.40	\$33.30	\$208.00
Over \$161,000 to \$193,000	Over \$322,000 to \$386,000	\$279.50	\$454.20	\$53.80	\$333.30
Over \$193,000 to less than \$500,000	Over \$386,000 to less than \$750,000	\$384.30	\$559.00	\$74.20	\$458.50
\$500,000 and above	\$750,000 and above	\$419.30	\$594.00	\$81.00	\$500.30

IRMAA surcharges apply on a “cliff” basis. Reaching the first dollar of an IRMAA income level causes the full corresponding surcharge to apply to all premiums paid for the year.

#### Example:

If Bob has MAGI of as much as \$103,000 on his single return, he'll owe no surcharge. But if his income reaches \$103,001, then a monthly surcharge of \$69.90 for Part B plus \$12.90 for Part D, or \$82.80 total, will apply for all 12 months of the year. Bob's \$1 of additional income increases premium cost by \$993.60 for the year.

## Medicare Planning Points

Medicare premium surcharges are imposed on individuals with MAGI over \$103,000 on a single tax return or \$206,000 on a joint return.

#### 2-Year Lookback

For IRMAA purposes, MAGI is defined as Adjusted Gross Income (AGI) plus tax-exempt interest and untaxed foreign income. Medicare uses the MAGI reported on the federal tax return from two years ago. For example, to determine whether someone will pay higher premiums for 2024, Medicare uses **2022** MAGI.

Similarly, the tax return filed for **2024** will be used to calculate IRMAA surcharges for the year **2026**.

#### RMD Effect

Address required minimum distribution (RMD) requirements well in advance of the required beginning date, explaining how RMDs are included in income for Medicare Part B and Part D costs two years down the road. RMDs are not required from Roth IRAs during the Roth IRA owner's lifetime.

Don't forget that this includes older beneficiaries who are also subject to RMDs on IRAs they have inherited.

## Income Reduction Strategies

The key to reducing Medicare surcharges is to reduce MAGI. Items like itemized deductions won't do that. They only reduce **taxable** income.

Check the tax return during the year to see if reported MAGI is near one of the threshold amounts. If income is close enough, plan to realize income and deductions to keep MAGI below the nearest threshold.

### Roth Conversions

A Roth IRA conversion can be useful in minimizing future IRMAA surcharges as distributions from the Roth IRA can be tax free, reducing MAGI.

To avoid a current income spike from a Roth conversion, consider making a series of partial conversions over a number of years to avoid pushing income into higher tax brackets. This is a strategy that requires long-term advance planning.

For those in early retirement, consider the benefit of converting before the conversion income would impact Medicare costs.

Converting later may still be an effective strategy. A Roth conversion would negatively affect MAGI for Medicare purposes but only for one year. It may make sense to take the hit in one year in exchange for no RMD concerns in future years.

### HSAs (Health Savings Accounts)

Younger people may want to consider funding a Health Savings Account (HSA) rather than an IRA if they have a choice. They can make deductible HSA contributions in their working years, use other funds to pay medical expenses, and then they can access their HSA tax- and penalty-free to pay for qualified medical expenses in retirement. These distributions would not be included in MAGI for Medicare purposes the way RMDs and other traditional IRA distributions are.

### QCDs (Qualified Charitable Distributions)

As a result of the tax law's increased standard deduction amounts, many are no longer deducting charitable contributions. QCDs can help restore charitable tax benefits by having those QCDs excluded from income. The exclusion from income will help to avoid Medicare premium increases.

With a QCD, an IRA owner (or beneficiary) who is age 70½ or over can transfer up to \$105,000 (indexed for inflation) annually from their IRA to a charity tax-free.

A QCD can count towards the RMD and is not included in MAGI for determining Medicare costs. Keeping the RMD amount out of MAGI can result in big savings. This is not the case if an IRA owner takes their RMD and then donates to charity and claims a charitable deduction (if they can at all). With that approach, the RMD would still be included in MAGI.

For those taking RMDs, consider how a QCD could help to save on Medicare costs.

### Other strategies that can be used to manage MAGI to minimize Medicare surcharges include:

- Timing investment gains and other income by accelerating them onto a tax return for a year before IRMAA calculations occur or deferring them to a year when income is expected to be lower and there may be offsetting losses.
- Obtaining spending funds from tax-free sources. For instance, one may borrow against a life insurance policy rather than take a taxable distribution from a retirement plan or use tax-free proceeds from the sale of a principal residence (as much as \$250,000, or \$500,000 on a joint return).
- Using a home equity conversion mortgage (HECM - reverse mortgage line of credit) to provide a source of tax-free funds with no corresponding mortgage payment expense, to keep income below the Medicare surcharge threshold amounts.

## When Income Falls

If there has been a major life-changing event that results in a large reduction in MAGI, an individual may request to use their MAGI for a more recent year. If an individual disagrees with the decision about their Medicare costs, they have the right to appeal.

Do this by submitting Form SSA-44, "*Medicare Income-Related Monthly Adjustment Amount - Life-Changing Event*," to the Social Security Administration.

The end of employment is a qualifying "life-changing event" that should be considered for every client who retires at age 65 or later. If an IRMAA surcharge will result from high salary income reported on a return filed two years earlier, but that salary no longer exists, relief from the surcharge may be readily available.

## Medicare Income-Related Monthly Adjustment Amount - Life-Changing Event

If you had a major life-changing event and your income has gone down, you may use this form to request a reduction in your income-related monthly adjustment amount. See page 5 for detailed information and line-by-line instructions. If you prefer to schedule an interview with your local Social Security office, call 1-800-772-1213 (TTY 1-800-325-0778).

<b>Name</b>	<b>Social Security Number</b>
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You may use this form if you received a notice that your monthly Medicare Part B (medical insurance) or prescription drug coverage premiums include an income-related monthly adjustment amount (IRMAA) and you experienced a life-changing event that may reduce your IRMAA. To decide your IRMAA, we asked the Internal Revenue Service (IRS) about your adjusted gross income plus certain tax-exempt income which we call "modified adjusted gross income" or MAGI from the Federal income tax return you filed for tax year 2022. If that was not available, we asked for your tax return information for 2021. We took this information and used the table below to decide your income-related monthly adjustment amount.

The table below shows the income-related monthly adjustment amounts for Medicare premiums based on your tax filing status and income. If your MAGI was lower than \$103,000.01 (or lower than \$206,000.01 if you filed your taxes with the filing status of married, filing jointly) in your most recent filed tax return, you do not have to pay any income-related monthly adjustment amount. If you do not have to pay an income-related monthly adjustment amount, you should not fill out this form even if you experienced a life-changing event.

<i><b>If you filed your taxes as:</b></i>	<i><b>And your MAGI was:</b></i>	<i><b>Your Part B monthly adjustment is:</b></i>	<i><b>Your prescription drug coverage monthly adjustment is:</b></i>
-Single, -Head of household, -Qualifying widow(er) with dependent child, or -Married filing separately (and you did not live with your spouse in tax year)*	\$103,000.01 - \$129,000.00	\$ 69.90	\$ 12.90
	\$129,000.01 - \$161,000.00	\$174.70	\$ 33.30
	\$161,000.01 - \$193,000.00	\$279.50	\$ 53.80
	\$193,000.01 - \$499,999.99	\$384.30	\$ 74.20
	More than \$499,999.99	\$419.30	\$ 81.00
-Married, filing jointly	\$206,000.01 - \$258,000.00	\$ 69.90	\$ 12.90
	\$258,000.01 - \$322,000.00	\$174.70	\$ 33.30
	\$322,000.01 - \$386,000.00	\$279.50	\$ 53.80
	\$386,000.01 - \$749,999.99	\$384.30	\$ 74.20
	More than \$750,000.00	\$419.30	\$ 81.00
-Married, filing separately (and you lived with your spouse during part of that tax year)*	\$103,000.01 - \$396,999.99	\$384.30	\$ 74.20
	More than \$396,999.99	\$419.30	\$ 81.00

\* Let us know if your tax filing status for the tax year was Married, filing separately, but you lived apart from your spouse at all times during that tax year.

**STEP 1: Type of Life-Changing Event**

Check **ONE** life-changing event and fill in the date that the event occurred (mm/dd/yyyy). If you had more than one life-changing event, please call Social Security at 1-800-772-1213 (TTY 1-800-325-0778).

- |   |  |
|---|--|
| <input type="checkbox"/> Marriage             | <input type="checkbox"/> Work Reduction                    |
| <input type="checkbox"/> Divorce/Annulment    | <input type="checkbox"/> Loss of Income-Producing Property |
| <input type="checkbox"/> Death of Your Spouse | <input type="checkbox"/> Loss of Pension Income            |
| <input type="checkbox"/> Work Stoppage        | <input type="checkbox"/> Employer Settlement Payment       |

**Date of life-changing event:** \_\_\_\_\_  
mm/dd/yyyy

**STEP 2: Reduction in Income**

Fill in the tax year in which your income was reduced by the life-changing event (see instructions on page 6), the amount of your adjusted gross income (AGI, as used on line 11 of IRS form 1040) and tax-exempt interest income (as used on line 2a of IRS form 1040), and your tax filing status.

Tax Year	Adjusted Gross Income	Tax-Exempt Interest
20 ____	\$ _____ . ____	\$ _____ . ____

Tax Filing Status for this Tax Year (choose **ONE**):

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Single                  | <input type="checkbox"/> Head of Household          | <input type="checkbox"/> Qualifying Widow(er) with Dependent Child |
| <input type="checkbox"/> Married, Filing Jointly | <input type="checkbox"/> Married, Filing Separately |  |

**STEP 3: Modified Adjusted Gross Income**

Will your modified adjusted gross income be lower next year than the year in Step 2?

- No - Skip to STEP 4  
 Yes - Complete the blocks below for next year

Tax Year	Estimated Adjusted Gross Income	Estimated Tax-Exempt Interest
20 ____	\$ _____ . ____	\$ _____ . ____

Expected Tax Filing Status for this Tax Year (choose **ONE**):

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Single                  | <input type="checkbox"/> Head of Household          | <input type="checkbox"/> Qualifying Widow(er) with Dependent Child |
| <input type="checkbox"/> Married, Filing Jointly | <input type="checkbox"/> Married, Filing Separately |  |

**STEP 4: Documentation**

Provide evidence of your modified adjusted gross income (MAGI) and your life-changing event. You can either:

1. Attach the required evidence and we will mail your original documents or certified copies back to you;

**OR**

2. Show your original documents or certified copies of evidence of your life-changing event and modified adjusted gross income to an SSA employee.

**Note:** You must sign in Step 5 and attach all required evidence. Make sure that you provide your current address and a phone number so that we can contact you if we have any questions about your request.

**STEP 5: Signature**

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY BEFORE SIGNING THIS FORM.

**I understand that the Social Security Administration (SSA) will check my statements with records from the Internal Revenue Service to make sure the determination is correct.**

**I declare under penalty of perjury that I have examined the information on this form and it is true and correct to the best of my knowledge.**

**I understand that signing this form does not constitute a request for SSA to use more recent tax year information unless it is accompanied by:**

- Evidence that I have had the life-changing event indicated on this form;
- A copy of my Federal tax return; or
- Other evidence of the more recent tax year's modified adjusted gross income.

<b>Signature</b>	<b>Phone Number</b>	
<b>Mailing Address</b>	<b>Apartment Number</b>	
<b>City</b>	<b>State</b>	<b>ZIP Code</b>



## THE PRIVACY ACT

We are required by sections 1839(i) and 1860D-13 of the Social Security Act to ask you to give us the information on this form. This information is needed to determine if you qualify for a reduction in your monthly Medicare Part B and/or prescription drug coverage income-related monthly adjustment amount (IRMAA). In order for us to determine if you qualify, we need to evaluate information that you provide to us about your modified adjusted gross income. Although the responses are voluntary, if you do not provide the requested information we will not be able to consider a reduction in your IRMAA.

We rarely use the information you supply for any purpose other than for determining a potential reduction in IRMAA. However, the law sometimes requires us to give out the facts on this form without your consent. We may release this information to another Federal, State, or local government agency to assist us in determining your eligibility for a reduction in your IRMAA, if Federal law requires that we do so, or to do the research and audits needed to administer or improve our efforts for the Medicare program.

We may also use the information you provide in computer matching programs. Matching programs compare our records with records kept by other Federal, state or local government agencies. We will also compare the information you give us to your tax return records maintained by the IRS. The law allows us to do this even if you do not agree to it. Information from these matching programs can be used to establish or verify a person's eligibility for Federally funded or administered benefit programs and for repayment of payments or delinquent debts under these programs.

Explanations about these and other reasons why information you provide us may be used or given out are available in Systems of Records Notice 60-0321 (Medicare Database File). The Notice, additional information about this form, and any other information regarding our systems and programs, are available on-line at [www.socialsecurity.gov](http://www.socialsecurity.gov) or at your local Social Security office.

**Paperwork Reduction Act Statement** - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 45 minutes to read the instructions, gather the facts, and answer the questions. **SEND OR BRING THE COMPLETED FORM TO YOUR LOCAL SOCIAL SECURITY OFFICE. The office is listed under U. S. Government agencies in your telephone directory or you may call Social Security at 1-800-772-1213 (TTY 1-800-325-0778).** *You may send comments on our time estimate above to: SSA, 6401 Security Blvd, Baltimore, MD 21235-6401. Send only comments relating to our time estimate to this address, not the completed form.*

**INSTRUCTIONS FOR COMPLETING FORM SSA-44**  
**Medicare Income-Related Monthly Adjustment Amount**  
**Life-Changing Event--Request for Use of More Recent Tax Year Information**

You do not have to complete this form in order to ask that we use your information about your modified adjusted gross income for a more recent tax year. If you prefer, you may call 1-800-772-1213 and speak to a representative from 7 a.m. until 7 p.m. on business days to request an appointment at one of our field offices. If you are hearing-impaired, you may call our TTY number, 1-800-325-0778.

**Identifying Information**

Print your full name and your own Social Security Number as they appear on your Social Security card. Your Social Security Number may be different from the number on your Medicare card.

**STEP 1**

You should choose only one life-changing event on the list. If you experienced more than one life-changing event, please call your local Social Security office at 1-800-772-1213 (TTY 1-800-325-0778). Fill in the date that the life-changing event occurred. The life-changing event date must be in the same year or an earlier year than the tax year you ask us to use to decide your income-related premium adjustment. For example, if we used your 2020 tax information to determine your income-related monthly adjustment amount for 2022, you can request that we use your 2021 tax information instead if you experienced a reduction in your income in 2020 due to a life-changing event that occurred in 2021 or an earlier year.

Life-Changing Event	Use this category if...
Marriage	You entered into a legal marriage.
Divorce/Annulment	Your legal marriage ended, and you will not file a joint return with your spouse for the year.
Death of Your Spouse	Your spouse died.
Work Stoppage or Reduction	You or your spouse stopped working or reduced the hours that you work.
Loss of Income-Producing Property	You or your spouse experienced a loss of income-producing property that was not at your direction (e.g., not due to the sale or transfer of the property). This includes loss of real property in a Presidentially or Gubernatorially-declared disaster area, destruction of livestock or crops due to natural disaster or disease, or loss of property due to arson, or loss of investment property due to fraud or theft.
Loss of Pension Income	You or your spouse experienced a scheduled cessation, termination, or reorganization of an employer's pension plan.
Employer Settlement Payment	You or your spouse receive a settlement from an employer or former employer because of the employer's bankruptcy or reorganization.



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**INSTRUCTIONS FOR COMPLETING FORM SSA-44**

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**STEP 2**

Supply information about the more recent year's modified adjusted gross income (MAGI). Note that this year must reflect a reduction in your income due to the life-changing event you listed in Step 1. A change in your tax filing status due to the life-changing event might also reduce your income-related monthly adjustment amount. Your MAGI is your adjusted gross income as used on line 11 of IRS form 1040 plus your tax-exempt interest income as used on line 2a of IRS form 1040. We used your MAGI and your tax filing status to determine your income-related monthly adjustment amount.

**Tax Year**

- Fill in both empty spaces in the box that says "20\_\_". The year you choose must be more recent than the year of the tax return information we used. The letter that we sent you tells you what tax year we used.
  - Choose this year (the "premium year") - if your modified adjusted gross income is lower this year than last year. For example, if you request that we adjust your income-related premium for 2023, use your estimate of your 2022 MAGI if:
    1. Your income was not reduced until 2023; or
    2. Your income was reduced in 2023, but will be lower in 2024.
  - Choose last year (the year before the "premium year," which is the year for which you want us to adjust your IRMAA) - if your MAGI is not lower this year than last year. For example, if you request that we adjust your 2024 income-related monthly adjustment amounts and your income was reduced in 2022 by a life-changing event AND will be no lower in 2024, use your tax information for 2023.
  - Exception: If we used IRS information about your MAGI 3 years before the premium year, you may ask us to use information from 2 years before the premium year. For example, if we used your income tax return for 2021 to decide your 2024 IRMAA, you can ask us to use your 2021 information.
- If you have any questions about what year you should use, you should call SSA.

**Adjusted Gross Income**

- Fill in your actual or estimated adjusted gross income for the year you wrote in the "tax year" box. Adjusted gross income is the amount on line 11 of IRS form 1040. If you are providing an estimate, your estimate should be what you expect to enter on your tax return for that year.

**Tax-exempt Interest Income**

- Fill in your actual or estimated tax-exempt interest income for the tax year you wrote in the "tax year" box. Tax-exempt interest income is the amount reported on line 2a of IRS form 1040. If you are providing an estimate, your estimate should be what you expect to enter on your tax return for that year.

**Filing Status**

- Check the box in front of your actual or expected tax filing status for the year you wrote in the "tax year" box.
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**INSTRUCTIONS FOR COMPLETING FORM SSA-44**

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**STEP 3**

Complete this step only if you expect that your MAGI for next year will be even lower and will reduce your IRMAA below what you told us in Step 2 using the table on page 1. We will record this information and use it next year to determine your Medicare income-related monthly adjustment amounts. If you do not complete Step 3, we will use the information from Step 2 next year to determine your income-related monthly adjustment amounts, unless one of the conditions described in "Important Facts" on page 8 occurs.

**Tax Year**

- Fill in both empty spaces in the box that says "20 \_\_" with the year following the year you wrote in Step 2. For example, if you wrote "2024" in Step 2, then write "2025" in Step 3.

**Adjusted Gross Income**

- Fill in your estimated adjusted gross income for the year you wrote in the "tax year" box. Adjusted gross income is the amount you expect to enter on line 11 of IRS form 1040 when you file your tax return for that year.

**Tax-exempt Interest Income**

- Fill in your estimated tax-exempt interest income for the tax year you wrote in the "tax year" box. Tax-exempt interest income is the amount you expect to report on line 2a of IRS form 1040.

**Filing Status**

- Check the box in front of your expected tax filing status for the year you wrote in the "tax year" box.

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**STEP 4**

Provide your required evidence of your MAGI and your life-changing event.

**Modified Adjusted Gross Income Evidence**

If you have filed your Federal income tax return for the year you wrote in Step 2, then you must provide us with your signed copy of your tax return or a transcript from IRS. If you provided an estimate in Step 2, you must show us a signed copy of your tax return when you file your Federal income tax return for that year.

**Life-Changing Event Evidence**

We must see original documents or certified copies of evidence that the life-changing event occurred. Required evidence is described on the next page. In some cases, we may be able to accept another type of evidence if you do not have a preferred document listed on the next page. Ask a Social Security representative to explain what documents can be accepted.

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Life-Changing Event	Evidence
Marriage	An original marriage certificate; or a certified copy of a public record of marriage.
Divorce/Annulment	A certified copy of the decree of divorce or annulment.
Death of Your Spouse	A certified copy of a death certificate, certified copy of the public record of death, or a certified copy of a coroner's certificate.
Work Stoppage or Reduction	An original signed statement from your employer; copies of pay stubs; original or certified documents that show a transfer of your business. <b>Note:</b> In the absence of such proof, we will accept your signed statement, under penalty of perjury, on this form, that you partially or fully stopped working or accepted a job with reduced compensation.
Loss of Income-Producing Property	An original copy of an insurance company adjuster's statement of loss or a letter from a State or Federal government about the uncompensated loss. If the loss was due to investment fraud (theft), we also require proof of conviction for the theft, such as a court document citing theft or fraud relating to you or your spouse's loss.
Loss of Pension Income	A letter or statement from your pension fund administrator that explains the reduction or termination of your benefits.
Employer Settlement Payment	A letter from the employer stating the settlement terms of the bankruptcy court and how it affects you or your spouse.

## STEP 5

Read the information above the signature line, and sign the form. Fill in your phone number and current mailing address. It is very important that we have this information so that we can contact you if we have any questions about your request.

### Important Facts

- When we use your estimated MAGI information to make a decision about your income-related monthly adjustment amount, we will later check with the IRS to verify your report.
- If you provide an estimate of your MAGI rather than a copy of your Federal tax return, we will ask you to provide a copy of your tax return when you file your taxes.
- If your estimate of your MAGI changes, or you amend your tax return for that reason, you will need to contact us to update our records. If you do not contact us, we may have to make corrections later including retroactive assessments or refunds.
- We will use your estimate provided in Step 2 to make a decision about the amount of your income-related monthly adjustment amounts the following year until:
  - IRS sends us your tax return information for the year used in Step 2; or
  - You provide a signed copy of your filed Federal income tax return or amended Federal income tax return with a different amount; or
  - You provide an updated estimate.
- If we used information from IRS about a tax year when your filing status was Married filing separately, but you lived apart from your spouse at all times during that year, you should contact us at 1-800-772-1213 (TTY 1-800-325-0778) to explain that you lived apart from your spouse. Do not use this form to report this change.

# Social Security Administration

## Important Information

Date: November 22, 2023  
BNC#: [REDACTED]



0230210 00230210 1 AB 0.537 1117M1MIA16P T770 P18



The Social Security Act requires some people to pay higher premiums for their Medicare Part B (Medical Insurance) and Part D (Prescription Drug Plan) based on their income. We use information the Internal Revenue Service (IRS) provides us to decide if you will need to pay these higher premiums. Based on your income, you are required to pay these higher premiums for 2024, which are called the Income-Related Monthly Adjustment Amounts (IRMAA). The IRMAA information in this letter is for one year only.

If you currently do not have Medicare Part B or Part D and enroll in 2024, those premiums will also increase based on your income.

If you have Medicare Part B, the total 2024 premium includes:

- \$174.70 for the standard Medicare premium, plus
- any surcharges you may owe for late enrollment, plus
- \$279.50 for the Medicare Part B IRMAA based on your 2022 income tax return

Your Medicare Part D IRMAA based on your 2022 income tax return is: \$53.80

### How We Figured Your IRMAA

IRMAA are based on your 2022 income tax return. The IRS told us that for tax year 2022 you filed your taxes as married, filing jointly. You had an adjusted gross income of \$333,055.00 plus \$0.00 in tax-exempt interest income. We added these amounts together to get your Modified Adjusted Gross Income (MAGI) of \$333,055.00.

We used the following table to decide IRMAA for the Medicare Part B and Part D premiums:



<b>If you filed as:</b>	<b>With MAGI of:</b>	<b>Part B IRMAA is:</b>	<b>Part D IRMAA is:</b>
Single, Head of Household or Qualifying Surviving Spouse	\$103,000.01 - \$129,000.00	\$69.90	\$12.90
	\$129,000.01 - \$161,000.00	\$174.70	\$33.30
	\$161,000.01 - \$193,000.00	\$279.50	\$53.80
	\$193,000.01 - \$499,999.99	\$384.30	\$74.20
	More than \$499,999.99	\$419.30	\$81.00
Married, Filing Jointly	\$206,000.01 - \$258,000.00	\$69.90	\$12.90
	\$258,000.01 - \$322,000.00	\$174.70	\$33.30
	\$322,000.01 - \$386,000.00	\$279.50	\$53.80
	\$386,000.01 - \$749,999.99	\$384.30	\$74.20
	More than \$749,999.99	\$419.30	\$81.00
Married, Filing Separately (If you lived apart throughout 2022, see below about Some Special Situations)	\$103,000.01 - \$396,999.99	\$384.30	\$74.20
	More than \$396,999.99	\$419.30	\$81.00

These IRMAA are effective for 2024 only. Next year when we receive updated information from the IRS, we will make a new decision about any IRMAA owed.

### **Some Special Situations That May Apply To You**

If your tax filing status was married, filing separately, and you lived apart from your spouse throughout the tax year, please call us about your living arrangement. It could lower your IRMAA. Please contact your Social Security office if you have any questions. You will need to bring a copy of the most recent income tax return you filed with IRS.

## If Your Income Has Gone Down

In some situations, we can make a new decision about your IRMAA. Contact us to request a new decision if your MAGI has gone down at least one range in the table above or has gone below the lowest amounts in the table since the 2022 tax year, AND the decrease in MAGI was caused by any of the following life-changing events:

- You married.
- You divorced or your marriage was annulled.
- You became a surviving spouse.
- You or your spouse stopped working or reduced work hours.
- You or your spouse lost income from income-producing property due to a disaster or other event beyond your control.
- You or your spouse experienced a scheduled cessation, termination, or reorganization of an employer's pension plan.
- You or your spouse received a settlement from an employer or former employer because of the employer's closure, bankruptcy, or reorganization.

We will use the new lower MAGI to see if we can make a new decision about your IRMAA. We cannot make a new decision if your income has changed for a reason other than those listed above, such as receiving one-time income from capital gains.

You will need to submit proof of the event listed above that caused your income to go down (such as a death certificate, a letter from your pension fund administrator, or a letter from your employer about your retirement). If you filed an amended or corrected tax return for the year you want changed, you will also need to submit a copy of the tax return with proof the IRS has received it.

If your MAGI goes down at any time during January through September, you will need to tell us before the end of that year so we can correct your IRMAA in that year. However, if the event that makes your MAGI go down does not occur until October 1 or later in that year, we can correct your IRMAA for that year if you tell us before the end of March of the following year.

## If You Disagree With Our Decision

If you disagree with our decision about your IRMAA, you have the right to:

- Request a new decision if your income goes down due to any of the life-changing events listed above, or
- Request a new decision using more recent tax information if you have amended or corrected tax information for 2022, or if we used tax information for 2021.

If you qualify for a new decision on your IRMAA, we will make a new decision using your tax information. If we make a new decision, you will be able to file an appeal on the new decision. If you experienced a life-changing event, you can request a new decision by going to [www.ssa.gov/forms/ssa-44.pdf](http://www.ssa.gov/forms/ssa-44.pdf) to complete an SSA-44.





## If You Want To Appeal This Decision

If you disagree with this decision about your IRMAA, you have the right to appeal. We will review the decision we made to verify that it is correct. A person who did not make the first decision will decide your case.

If you do appeal, we may start withholding your increased premiums before we make our decision on your appeal. If we change our decision about your IRMAA, we will correct the amounts and refund any incorrectly withheld premiums.

We based the IRMAA for your Medicare Part B and Part D premiums on information we received from the IRS. If you request an appeal because you believe that the IRS information is incorrect, we will give you information on how you can contact the IRS to obtain evidence to support your request for a new decision. If you request an appeal because we included amounts for your Part D premium and you do not have Medicare Part D coverage, you need to contact the Centers for Medicare & Medicaid Services (CMS) at **1-800-MEDICARE (1-800-633-4227; TTY 1-877-486-2048)**. CMS is the only agency that can correct the information about your Part D coverage.

- You have 60 days to file for an appeal.
- The 60 days start the day after you get this letter. We will assume you got this letter 5 days after the date of the letter, unless you show us that you did not get it within the 5-day period.
- You must have good reason for waiting more than 60 days to file an appeal.
- You must file your appeal in writing. You can go to [www.ssa.gov/non-medical/appeal](http://www.ssa.gov/non-medical/appeal) to complete and submit the "Request for Reconsideration" form, SSA-561-U2 online. You may also contact us by phone to request the form or go to our website at [www.ssa.gov/forms](http://www.ssa.gov/forms) to locate the form. If you need help with the form, please call us.

## If You Want Help With Your Appeal

You may choose to have a representative help you. We will work with this person just as we would work with you. If you decide to have a representative, you should find one quickly so that person can start preparing your case.

Many representatives charge a fee only if you receive benefits. Others may represent you for free. Usually, your representative may not charge a fee unless we approve it. Your local Social Security office can give you a list of groups that can help you find a representative.

If you get a representative, you or that person must notify us in writing. You may use our Form SSA-1696 "Appointment of Representative". Any local Social Security office can give you this form.

## Information About Your Medicare Coverage

You can choose how you get your Medicare coverage Original Medicare and Medicare Advantage. Visit [www.medicare.gov](http://www.medicare.gov) for more information.

## ***my Social Security Online Services***

Your personal *my Social Security* account gives you immediate access to important information and tools, putting you in control of your time. If you have an account, you can check your benefits, change your address or telephone number, start or change direct deposit, get a replacement Medicare card, and get a benefit verification letter. You can also choose to opt out of mailed notices for those available online. Please visit [www.ssa.gov/myaccount](http://www.ssa.gov/myaccount) to sign in or create your account.

## **Suspect Social Security Fraud?**

If you suspect Social Security fraud, please visit <https://oig.ssa.gov/report> or call the Inspector General's Fraud Hotline at 1-800-269-0271 (TTY 1-866-501-2101).

## **Help Prevent Identity Theft**

Be aware of scams through the mail, internet, telephone, or in person. You should be careful when someone asks for personal information, like your Social Security number. Please visit [www.usa.gov/identity-theft](http://www.usa.gov/identity-theft) to find out more.

## **Other Help For Older Adults and People with Disabilities**

The Administration for Community Living offers older adults and people with disabilities a way to connect to a variety of community services and resources.

**For Older Adults:** Eldercare Locator at 1-800-677-1116 or [www.eldercare.acl.gov](http://www.eldercare.acl.gov)

**For People with Disabilities:** Disability Information and Access Line (DIAL) at 1-888-677-1199 or [www.acl.gov/DIAL](http://www.acl.gov/DIAL)

## **If You Have Questions**

For general information about Social Security, please contact us. If you have questions about your Medicare Part B premium, please contact Medicare.

For information about Medicare, visit [www.medicare.gov](http://www.medicare.gov) or call toll-free 1-800-MEDICARE(1-800-633-4227). If you are deaf or hard of hearing, you can call the Medicare TTY number toll-free at 1-877-486-2048.

*Social Security Administration*

