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HEALTH PLANS

# Medicare Advantage giveback plans

# Understanding Part B giveback plans

**What is a Part B giveback?** A Part B giveback is a feature offered by some Medicare Advantage (MA/MAPD) plans in which the plan pays a portion of the beneficiary's Medicare Part B premium. This is sometimes called a "Medicare Part B premium reduction".This can result in a reduction in the amount deducted from their Social Security check or their Medicare premium bill. The giveback can range from a few cents to up to $185 per month, depending on the plan and location.

**How the giveback works**

- If the beneficiary receives Social Security benefits: The giveback is reflected as a higher monthly Social Security payment.
- If the beneficiary does not receive Social Security: The giveback appears as a reduced Medicare Part B premium bill.
- The reduction may take 1–3 months to be reflected, but the savings are retroactive to the enrollment start date. (Timing is not controlled by the carrier.)
    - *Example: A beneficiary enrolls in a Medicare Advantage plan with a **$185 Part B giveback**, effective **January 1**.*
        - ***January:** The full Part B premium is still deducted from the member's Social Security check.*
        - ***February:** The deduction continues — no giveback has been applied yet.*
        - ***March:** The giveback is applied. The member's check reflects a **$555 increase** — this includes the **$185/month reimbursement** for **January, February, and March**.*
        - ***April and onward:** The member's Social Security check is **$185 higher each month**, as the Part B premium is no longer being withheld.*

**Who qualifies for a giveback plan?** To qualify, the individual must:

- Be enrolled in both Medicare Part A and Part B.
- Live in a service area where a giveback plan is available.
- **Pay their own Part B premium out of pocket (i.e., not have it paid by Medicaid or other assistance programs).**
- Enroll in a Medicare Advantage plan offering a giveback.

**Important consideration: Medicaid and state/federal assistance**

If a beneficiary receives assistance paying their Part B premium through Medicaid or other state/federal programs (e.g., QI1, SLMB, QMB, or full Medicaid), they will **NOT** receive the giveback. The plan will not send the money elsewhere or reallocate the benefit — it simply will not be applied.

- Givebacks are gaining popularity and also driving complaints; make sure you understand the right situation to introduce the giveback to your client.

**Why giveback plans are popular**

- 37% of Medicare Advantage enrollees switch to save money (Deft Research, 2025).
- Giveback plans are growing in popularity and awareness, yet only 23% of agents regularly discuss them.
- These plans are appealing for cost-conscious seniors, veterans with VA/TRICARE/CHAMPVA, and those aging into Medicare who want to minimize monthly expenses.

| Ideal candidates for giveback plans | When giveback plans may not be the right fit |
|---|---|
| • Medicare enrollees not receiving premium assistance<br>• Veterans using VA benefits (MA Only giveback)<br>• Seniors looking to offset rising Part D drug costs (e.g., hitting $2,000 MOOP)<br>• Individuals who value premium savings over extra supplemental benefits | • Dual-eligible individuals (Medicare + Medicaid)<br>• Beneficiaries enrolled in state/federal premium payment programs<br>• Those needing extensive supplemental benefits, which may be reduced in these plans |

**Key takeaways for brokers**

- ☐ Always confirm how the member pays their Part B premium.
- ☐ Check for Medicaid, LIS, or other subsidy eligibility before recommending a giveback plan.
- ☐ Use the NEADS framework (Now, Enjoy, Adjust, Decision-maker, Solution) to uncover needs and educate prospects.
- ☐ Ensure that expectations are set around the timing and mechanics of the giveback.