(RHCs), Federally qualified health centers (FQHCS), ambulatory surgical centers (ASCs), and comprehensive outpatient rehabilitation facilities (CORFs), and other medical and other health services.

[57 FR 24980, June 12, 1992]

### § 407.4 Basic requirements for entitlement.

- (a) An individual must meet the following requirements to be entitled to SMI:
- (1) *Eligibility*. The individual must meet the eligibility requirements specified in §407.10(a).
- (2) Enrollment. The individual must enroll for SMI, or must be enrolled by a State under a buy-in agreement as specified in § 407.40.
- (b) SMI pays only for covered expenses incurred during an individual's period of entitlement.

# Subpart B—Individual Enrollment and Entitlement for SMI

### § 407.10 Eligibility to enroll.

- (a) Basic rule. Except as specified in paragraph (b) of this section, an individual is eligible to enroll for SMI if he or she—
- (1) Is entitled to hospital insurance under any of the rules set forth in §§ 406.10 through 406.15 of this chapter; or
- (2) Meets the following requirements: (i) Has attained age 65. (An individual
- (1) Has attained age 65. (An individual is considered to have attained age 65 on the day before the 65th anniversary of his or her birth.)
- (ii) Is a resident of the United States.
- (iii) Is a citizen of the United States, or an alien lawfully admitted for permanent residence who has resided continuously in the United States during the 5 years preceding the month in which he or she applies for enrollment.
- (b) Exception. An individual is not eligible to enroll for SMI if he or she has been convicted of—
- (1) Spying, sabotage, treason, or subversive activities under chapter 37, 105, or 115 of title 18 of the United States Code: or
- (2) Conspiracy to establish dictatorship under section 4 of the Internal Security Act of 1950.

#### § 407.11 Forms used to apply for enrollment under Medicare Part B.

The following forms, available free of charge by mail from CMS, or at any Social Security branch or district office, are used to apply for enrollment under the supplementary medical insurance program.

- CMS-4040—Application for Enrollment in the Supplementary Medical Insurance Program. (This form is used for enrollment by individuals who are not eligible for monthly benefits or for hospital insurance.)
- CMS-40-B—Application for Medical Insurance. (For general use by the SSA District Office in requesting medical insurance protection during the general enrollment period or during the initial enrollment period if the enrollee is not subject to automatic enrollment is SMI.)
- CMS-40-D—Application for Enrollment in the Supplementary Medical Insurance Program. (This form is mailed to individuals who do not have current supplementary medical insurance because of prior refusals, voluntary withdrawal, or premium default from prior coverage. It is used during the annual general enrollment period.)
- CMS-40-F—Application for Medical Insurance. (For use by beneficiaries residing outside the United States.)
- CMS-18-F-5—Application for Hospital Insurance Entitlement. (For use by individuals who are not eligible for retirement benefits under Title II of the Social Security Act or under the Railroad Retirement Act. This form may also be used for enrollment in the supplementary medical insurance program.)

As an alternative, the individual may request enrollment by answering the Part B enrollment questions on an application for monthly Social Security benefits, or by signing a simple statement of request, if he or she is eligible to enroll at that time.

## § 407.12 General enrollment provisions.

(a) Opportunity to enroll. (1) An individual who is eligible to enroll for SMI may do so during an initial enrollment period or a general enrollment period as specified in §§407.14, and 407.15. An individual who meets the conditions specified in §407.20 may enroll during a special enrollment period, as provided in that section.

#### §407.14

- (2) An individual who fails to enroll during his or her initial enrollment period or whose enrollment has been terminated may enroll or reenroll during a general enrollment period, or, if he or she meets the specified conditions, during a special enrollment period.
- (b) Enrollment periods ending on a non-workday. (1) If an enrollment period ends on a Federal nonworkday, that period is automatically extended to the next succeeding workday.
- (2) A Federal nonworkday is any Saturday, Sunday, or Federal legal holiday or a day that is declared by statute or executive order to be a day on which Federal employees are not required to work

#### § 407.14 Initial enrollment period.

- (a) Duration. (1) The initial enrollment period is the 7-month period that begins 3 months before the month an individual first meets the eligibility requirements of §407.10 and ends 3 months after that first month of eligibility.
- (2) In determining the initial enrollment period of an individual who is age 65 or over and eligible for enrollment solely because of entitlement to hospital insurance, the individual is considered as first meeting the eligibility requirements for SMI n the first day he or she becomes entitled to hospital insurance or would have been entitled if he or she filed an application for that program.
- (b) Deemed initial enrollment period. (1) SSA or CMS will establish a deemed initial enrollment period for an individual who fails to enroll during the initial enrollment period because of a belief, based on erroneous documentary evidence, that he or she had not yet attained age 65. The period will be established as though the individual had attained age 65 on the date indicated by the incorrect information.
- (2) A deemed initial enrollment period established under paragraph (b)(1) of this section is used to determine the individual's premium and right to enroll in a general enrollment period if that is advantageous to the individual.

### § 407.15 General enrollment period.

(a) Except as specified in paragraph (b) of this section, the general enroll-

ment period is January through March of each calendar year.

(b) An unlimited general enrollment period existed between April 1 and September 30, 1981. Any eligible individual whose initial enrollment period had ended, or whose previous period of entitlement had terminated, could have enrolled or reenrolled during any month of that 6-month period.

#### § 407.17 Automatic enrollment.

- (a) Who is automatically enrolled. An individual is automatically enrolled for SMI if he or she:
- (1) Resides in the United States, except in Puerto Rico;
- (2) Becomes entitled to hospital insurance under any of the provisions set forth in §§ 406.10 through 406.15 of this chapter; and
- (3) Does not decline SMI enrollment.
- (b) Opportunity to decline automatic enrollment. (1) SSA will notify an individual that he or she is automatically enrolled under paragraph (a) of this section and grant the individual a specified period (at least 2 months after the month the notice is mailed) to decline enrollment.
- (2) The individual may decline enrollment by submitting to SSA or CMS a signed statement that he or she does not wish SMI.
- (3) The statement must be submitted before entitlement begins, or if later, within the time limits set in the notice of enrollment.

# § 407.18 Determining month of automatic enrollment.

- (a) An individual who is automatically enrolled in SMI under §407.17 will have the month of enrollment determined in accordance with paragraphs (b) through (f) of this section. The month of enrollment determines the month of entitlement.
- (b) An individual is automatically enrolled in the third month of the initial enrollment period if he or she—
- (1) Is entitled to social security benefits under section 202 of the Act on the first day of the initial enrollment period:
- (2) Is entitled to hospital insurance based on end-stage renal disease; on entitlement to disability benefits as a social security or railroad retirement