

Know Your Medicare Options





Senior Advisors
Independent Medicare Planning Specialists

Personalized Medicare Planning



Name/Nombre
Client

Medicare Number/Número de Medicare
1EG4-TE5-MK72

Entitled to/Con derecho a
HOSPITAL (PART A)
MEDICAL (PART B)

Coverage starts/Cobertura empieza
01-01-2022
01-01-2022

*** Initial Enrollment Period ***

If Medicare coverage should begin January 1, 2022 the month you turn 65

If you enroll October 2021	If you enroll November 2021	If you enroll December 2021	If you enroll January 2022	If you enroll February 2022	If you enroll March 2022	If you enroll April 2022
3 months before the month you turn 65	2 months before the month you turn 65	1 month before the month you turn 65	The month you turn 65	1 month after the month you turn 65	2 months after the month you turn 65	3 months after the month you turn 65
Coverage will begin	Coverage will begin	Coverage will begin	Coverage will begin	Coverage will begin	Coverage will begin	Coverage will begin
January 1, 2022	January 1, 2022	January 1, 2022	February 1, 2022	April 1, 2022	June 1, 2022	July 1, 2022

Or

***** Special Enrollment Period *****
(At least age 65 and 4 months)

Still working and Medicare coverage should begin January 1, 2022

Apply 45 days prior to the date you need Medicare to become effective or November 17, 2021

Once your Initial Enrollment Period ends, you may have a chance to sign up for Part A (if you have to buy it) and Part B, but only if you meet certain requirements. If you're covered under a group health plan based on current employment, you can sign up for Part A and/or Part B at any time as long as you or your spouse (or family member if you're disabled) is working, and you're covered by a group health plan through the employer or union based on that work.



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How to Sign Up for Medicare Parts A & B


If you are collecting Social Security Benefits you should receive your Medicare Card about three months before you turn 65. If not, you must contact Social Security in one of the following ways:

- Apply online at Social Security - <https://secure.ssa.gov/iClaim/rib>
- Visit your local Social Security Office
- Call Social Security - 1-800-772-1213

You can sign up during the **7-month** period that begins **3 months before** the month you turn 65, includes the month you turn 65, and ends 3 months after the month you turn 65

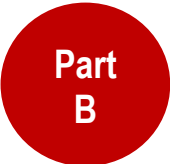
Medicare

Purchased from the Government



Part A

You are automatically enrolled in Medicare Part A hospital insurance if you are collecting Social Security when you turn age 65. Usually there is no cost for this benefit.



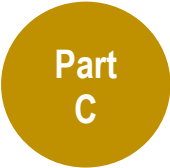
Part B

Medicare Part B covers physician and outpatient hospital services. There is a premium for this benefit. Most people must elect Part B.

Medicare Advantage Plans


Purchased from private insurance companies

who are approved by Medicare. Medicare pays a fee to the plan for your care, and the plan handles its own payments to doctors and hospitals



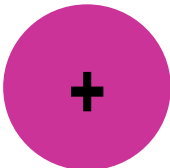
Part C

Part C plans
combines inpatient care, outpatient care and doctor's care in a single plan, usually through a network.



Part D

Built in Medicare Part D Prescription drug coverage
helps pay for prescription drug medications. Some Medicare Advantage plans offer built-in prescription coverage and some plans do not




+

Additional benefits
such as discount vision, hearing and dental services may be purchased for an additional cost

Medicare Supplement Plans

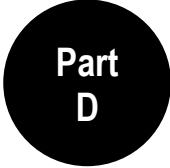
Purchased from private insurance companies

These plans pay after Medicare approves the claim. They help cover the "gaps" in Medicare such as deductibles, co-insurance and excess charges.



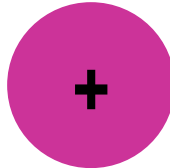
Med Supp

Medicare Supplement Plans
There are 10 standardized supplement plans offered by private insurance companies. You may see any provider as long as they accept Medicare.



Part D

Stand Alone Medicare Part D Prescription drug coverage
helps pay for prescription drug medications. It is purchased separately from your Medigap plan.



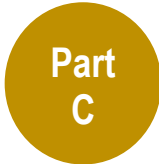
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Additional benefits
such as vision and hearing may be included



Personalized Medicare Planning

General Information on Medicare Advantage Plans



HMO Advantage Plan

- Sold by private insurance companies
- **Replaces original Medicare**
- **Healthcare managed by insurance company**
- Must use network providers
- Must choose a primary physician
- **May require referrals**
- **Only covered for emergency and urgent care out of area**
- Hospital deductibles and /or co insurance; physician co-pays
- **May have as much as \$7550 in out-of-pocket costs annually**
annual out-of-pocket costs exclude drugs
- **Rx coverage can only be purchased through plan**
- May offer extra benefits such as Dental, Vision or Wellness plans
- Plan can only be changed during open enrollment

(October 15th - December 7th - changes take effect January 1st of following year)

PPO Advantage Plan

- Sold by private insurance companies
- **Replaces original Medicare**
- **Healthcare managed by insurance company**
- Must use network providers
- Out of network benefits subject to deductible and co insurance
- Covered for emergency and urgent care out of area
- May have additional out of area benefits
- Hospital deductibles and /or co insurance; physician co-pays
- **May have as much as \$7550 annually in out of pocket costs**
annual out-of-pocket costs exclude drugs
- **Rx coverage can only be purchased through plan**
- May offer extra benefits such as Dental, Vision or Wellness plans
- Plan can only be changed during open enrollment

(October 15th - December 7th - changes take effect January 1st of following year)

Medicare Advantage plans usually have a limited regional network

Medicare Advantage Plans generally fall into three premium buckets

\$0 - \$20 monthly premium

Larger co-pays and/or out of pocket cost

\$25 - \$75 monthly premium

Smaller co-pays and/or out of pocket cost

\$100 - \$200+ monthly premium

Smallest co-pays and/or out of pocket cost



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Benefit Chart of Medicare Supplement Plans Effective January 1, 2020



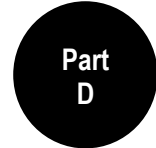
The Annual Medicare Open Enrollment Period (Oct. 15th to Dec. 7th) Does Not Apply to Medicare Supplement Plans ⁶										
Plans Available to All Applicants									Medicare First Eligible Before 2020 Only ⁵	
Effective 1/1/2021	A	B	D	G ¹	K	L	M	N	C	F ¹
Medicare Part A coinsurance and hospital coverage (up to an additional 365 days after Medicare benefits are used)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Medicare Part B coinsurance or copayment	✓	✓	✓	✓	50%	75%	✓	Insured pays up to: • \$20 co-pay for office visit • \$50 co-pay for emergency visit	✓	✓
Blood (first three pints)	✓	✓	✓	✓	50%	75%	✓	✓	✓	✓
Part A hospice care coinsurance or copayment	✓	✓	✓	✓	50%	75%	✓	✓	✓	✓
Skilled Nursing Coinsurance			✓	✓	50%	75%	✓	✓	✓	✓
Part A Deductible - \$1484.00 Per benefit period		✓	✓	✓	50%	75%	50%	✓	✓	✓
Part B Deductible - \$203.00 Calendar year									✓	✓
Part B Excess Charges ²				✓						✓
Foreign Travel Emergency \$250 Ded, Plan pays 80%, \$50,000 Lifetime Max.			✓	✓			✓	✓	✓	✓
2021 Out-Of-Pocket Annual Limit	N/A	N/A	N/A	N/A	\$6,220	\$3,110	N/A	N/A	N/A	N/A

- 1 - Plans F and G also have a high deductible option, which require first paying a plan deductible of \$[2,300] before the plan begins to pay. Once the plan deductible is met, the plan pays 100% of covered services for the rest of the calendar year. High deductible plan G does not cover the Medicare Part B deductible. However, high deductible plans F and G count your payment of the Medicare Part B deductible toward meeting the plan deductible
- 2 - These states do not allow excess billing: CT, MA, MN, NY, OH, PA, RI, VT
- 3 - No Benefits
- 4 - ✓ Benefits covered 100%
- 5 - Newly eligible - have attained age 65 on or after January 1, 2020; or first become eligible for Medicare due to age, disability, or end-stage renal disease, on or after January 1, 2020
- 6 - Medicare Supplement plans can be changed anytime of year. If you change more than 6 months from your Medicare Part "B" effective date, you will be asked health questions and can be accepted or denied based on the severity of your health.

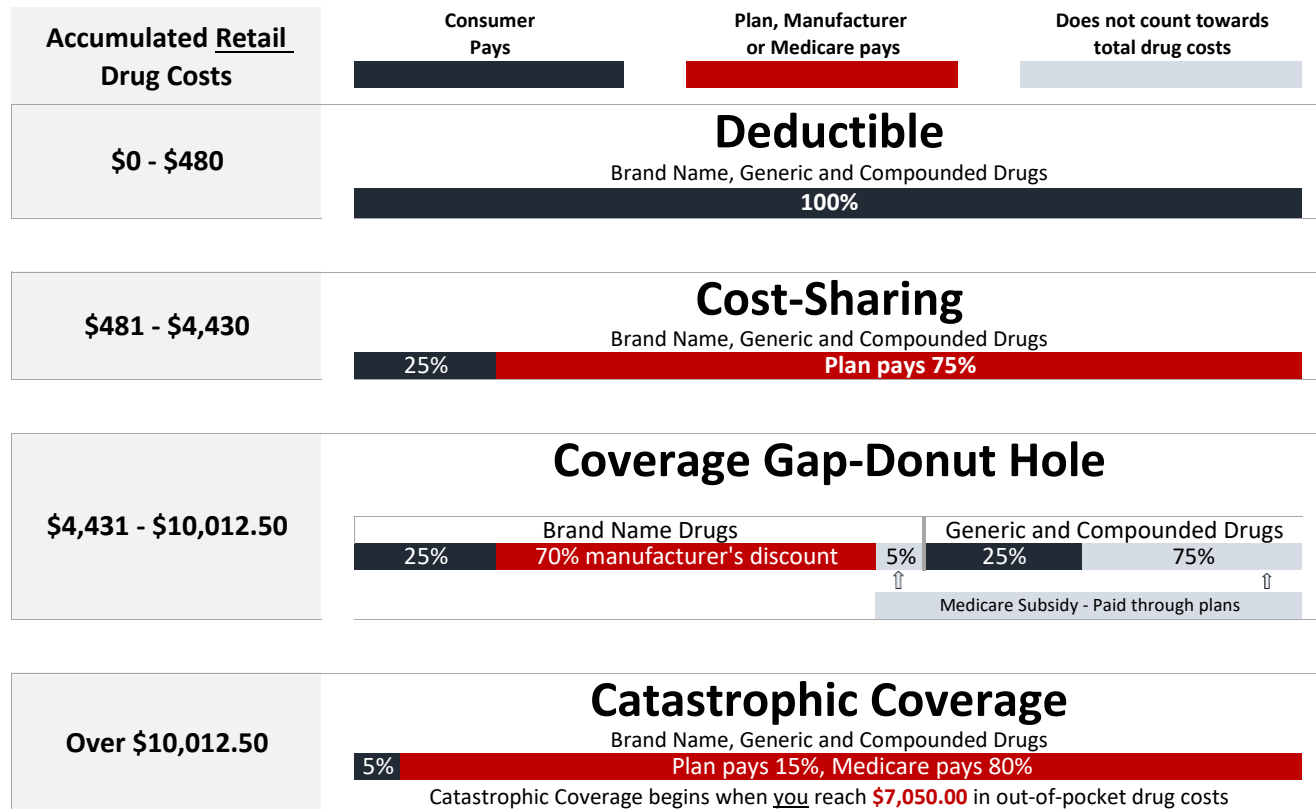
Medigap plans have the largest network of doctors and facilities across the country
Find Medicare physicians & other clinicians, <https://www.medicare.gov/physiciancompare/>



Personalized Part "D" Planning



Medicare Standard Part D Drug Benefit at a glance (2022 calendar year)



Even if you don't take prescriptions now...

You should consider joining a plan anyway to avoid paying a penalty later. In most cases, if you don't join when you are first eligible you will pay a penalty that increases every month you wait and you must wait until the next open enrollment period to enroll. **Medicare calculates the penalty by multiplying 1% of the "national base beneficiary premium" (\$00.00 in 2022) times the number of full, uncovered months you didn't have Part D or creditable coverage.** The monthly premium is rounded to the nearest \$.10 and added to your monthly Part D premium.

Part "D" plans can only be changed during open enrollment
(October 15th - December 7th - changes take effect January 1st of following year)