

# MEDICARE 101



## MEDICARE HEALTH INSURANCE

Name/Nombre

**JOHN L SMITH**

Medicare Number/Número de Medicare

**1EG4-TE5-MK72**

Entitled to/Con derecho a

**HOSPITAL (PART A)**

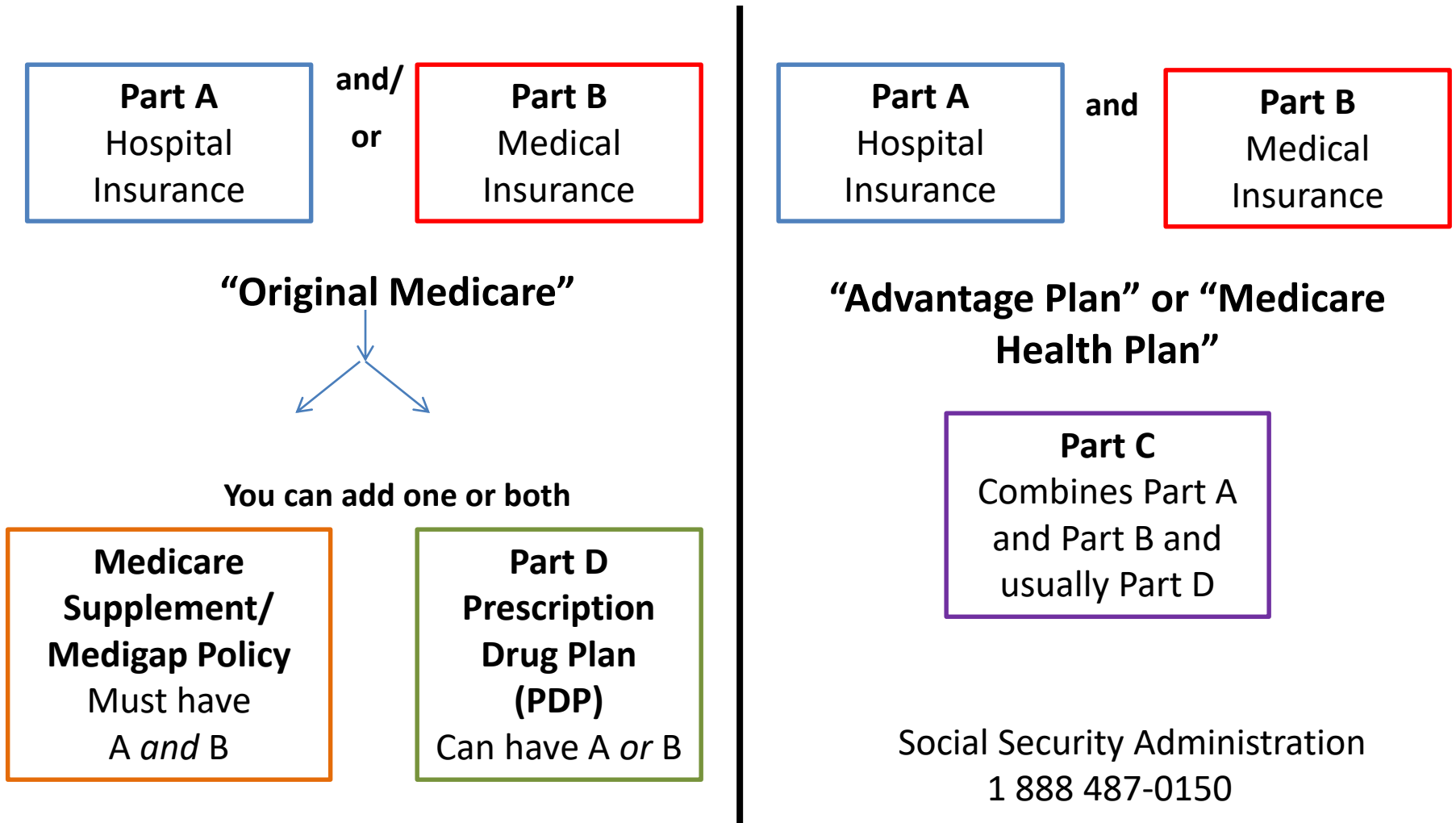
**MEDICAL (PART B)**

Coverage starts/Cobertura empieza

**03-01-2016**

**03-01-2016**

# YOUR MEDICARE PLAN CHOICES



# MEDICARE PART A

HOSPITAL COVERAGE



# PART A: HOSPITAL- INPATIENT

## You Pay:

- \$1,556 deductible per benefit period of 60 days
- \$389 per day for day 61-90 & \$778 through 90 days up to lifetime reserve of 60 days
- Formal Admission vs. Under Observation

# PART A: SKILLED NURSING HOME

## You Pay:

- \$0 for the first 20 days of each benefit period
- \$194.50 per day for days 21-100
- No coverage after 101 days as Medicare is NOT Long-term Care

# PART A: HOSPICE

## You Pay:

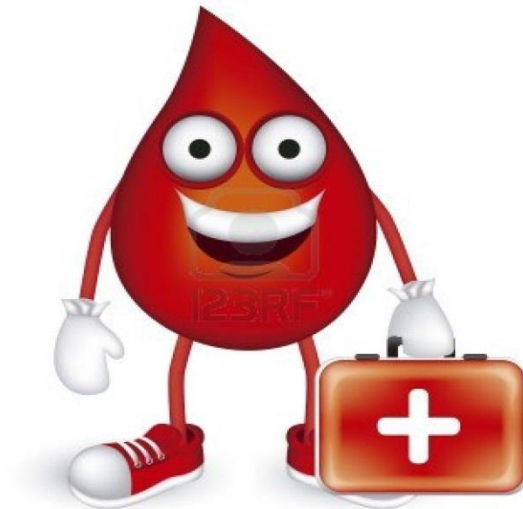
- A co-payment of up to \$5 per prescription for pain management
- 5% Medicare-approved respite



# PART A & B: BLOOD

## You Pay:

- Medicare does not pay for the first three pints



# PART A & B: HOME HEALTH CARE

## You Pay:

- \$0 for homecare services
- 20% of Medicare-approved amount for durable medical equipment
- Durable medical equipment loan closets





# MEDICARE PART B

## DOCTOR COVERAGE



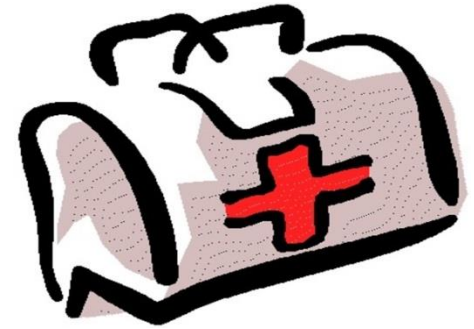
# PART B PREMIUMS/DEDUCTIBLES

## You Pay:

- \$170.10 for monthly premiums
- \$233 deductible per year



## PART B: DOCTORS



### You Pay:

- 20% of Medicare-approved amount

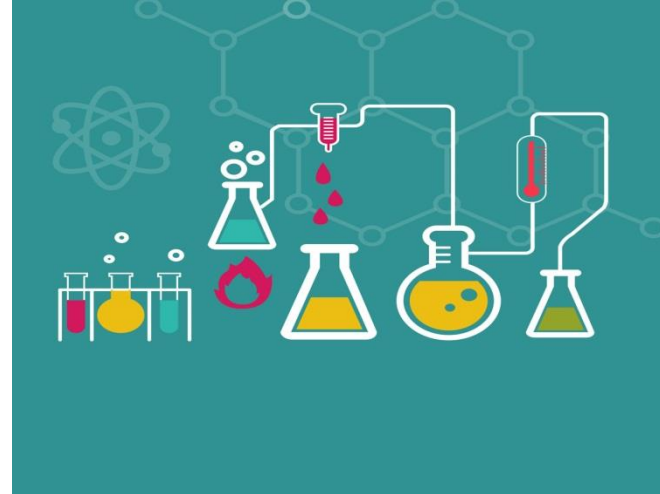
### 3 Doctor Types:

- **Assignment:** Accepts Medicare and it pays
- **Non-Assignment:** Accepts Medicare but not what it pays; charge 15% more
- **Non-Medicare:** Does not accept Medicare; you will pay 100% for doctor's services

# PART B: LABORATORY SERVICES

## You Pay:

- **\$0** for Medicare-approved services



# PART B: OTHER COVERED SERVICES

X-Ray, MRI, ambulance, durable medical equipment, Part B drugs

## You Pay:

- 20% copayment



# PART B: OUTPATIENT HOSPITAL SERVICES

## You Pay:

- 20% of the Medicare-approved amount for doctor/health care provider
- Copayment to the hospital for each service (except some preventive services)

Note: You may save money by having the same service(s) done in the doctor's office instead, if that's an option

# MEDIGAP/SUPPLEMENT POLICY with Original Medicare



# MEDIGAP/SUPPLEMENT POLICY BASICS

## A Medigap/Supplement policy:

- An insurance plan that helps pay for out-of-pocket Medicare costs
- These plans are identified by letters A through D, F, G, and K through N and are standardized to offer the same benefits
- Do not confuse Medicare Part A & B with Medigap Plan A & B
- All same-letter plans have the same basic benefits
  - Plan G is a G no matter whom you purchase it from
  - Same-letter plans vary in cost
- You **MUST** have original Medicare Part A & B
- You cannot also have a Medicare Advantage Plan
- Supplements cover one person. Spouses must buy a separate policy



Benefits	Plans Available to All Applicants								Medicare Newly Eligible before 2020	
	A	B	D	G*	K	L	M	N	C	F*
Part A: Coinsurance & hospital costs (up to an additional 365 days after Medicare benefits are used)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Part B: Coinsurance or copay	✓	✓	✓	✓	50%	75%	✓	✓***	✓	✓
Blood (First 3 pints)	✓	✓	✓	✓	50%	75%	✓	✓	✓	✓
Part A: Hospice care coinsurance or copay	✓	✓	✓	✓	50%	75%	✓	✓	✓	✓
Skilled nursing facility care coinsurance			✓	✓	50%	75%	✓	✓	✓	✓
Part A deductible		✓	✓	✓	50%	75%	50%	✓	✓	✓
Part B deductible									✓	✓
Part B excess charges				✓						✓
Foreign travel emergency			✓	✓			✓	✓	✓	✓
Out-of-pocket yearly limit					\$5,560**	\$2,780**				

Core benefits pay the patient's share of Medicare's approved amount for physician services 20% after a \$185 annual deductible in 2019, the patient's cost of a long hospital stay (\$341/day for days 61-90, \$682/day for days 91-150, all approved costs not paid by Medicare after day 150 to a total of 365 days lifetime) and charges for the first three pints of blood not covered by Medicare.

\*Plans F and G also offer a High Deductible option which require first paying a plan deductible of \$2,300 in 2019 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. Plan G High Deductible does not cover the Medicare Part B deductible. However, high deductible G counts your payment of the Medicare Part B deductible toward meeting the plan deductible.

\*\*Plans K and L pay 100% of covered services for the rest of the calendar year once you meet the out-of-pocket yearly limit.

\*\*\*Plan N pays 100% of the Part B coinsurance, except for a copay of up to \$20 for some office visits and up to a \$50 copay for emergency room visits that do not result in an inpatient admission.

# MEDIGAP/SUPPLEMENT POLICY ELIGIBILITY

## Open Enrollment:

- **6-month** period beginning when you start Part B
  - Usually starts when you turn 65
- If you have *creditable* coverage, the 6 months begin when your current coverage ends and your Part B starts.
  - During this 6 months, you have a “guaranteed issue right”, meaning they do not look at pre-existing conditions (except for Plans **G** and **N**)
  - After open enrollment, they may charge you more or not insure you at all
  - If you switch from a Medigap to an Advantage Plan, you can try it out; if you want to switch back to your Medigap you must do so within 1 year.

# MEDIGAP/SUPPLEMENT POLICY ENROLLMENT

## How to enroll:

- You must purchase a Medigap plan through an insurance agent. Try to see an *independent* agent.
- The booklet provided is from the State Commissioner of Insurances in MT
  - Gives estimated annual costs for each plan and companies who provide them. Call phone number on last page for information.

## Cost:

- Same-letter plans vary in cost depending on company
- Annual plan premiums change based on your age

# MEDIGAP/SUPPLEMENT POLICY

## What's *not* covered:

- Medication costs (which are only covered by Medicare Part D – see next page)
- Monthly Medicare Part B premium of \$170.10/month
- Most vision, dental or hearing services, including hearing aids, dentures, and eyeglasses (which are covered by some in-house member plans or the more expensive of the Medicare Advantage Plans)

# MEDICARE PART D with Original Medicare

**PERScription MEDICATION  
COVERAGE**

# PART D DRUG COVERAGE



## You Pay

- **Monthly Premiums:**
  - Premiums will vary depending on your medications and what insurance company you choose (cheapest is **\$6.80/month**)
- **Medication Co-Pays or co-insurances:**
  - You may pay part of the cost of your prescriptions
  - The **Donut Hole is Gone**, enrollees pay 25% of drug costs after meeting their deductible until they reach catastrophic coverage, \$4430.00 to \$7050.00
- **Deductibles:**
  - Some Medicare Part D plans have deductibles to meet before the plan starts covering the cost when you fill your medications

# PART D DRUG COVERAGE

## Choosing a Plan:

- You need to choose your **drug plan** carefully. Make sure your plan covers all of your drugs.
- When you enroll in Part B you **MUST** get enrolled in a Part D (unless you have creditable coverage) to:
  - **avoid a penalty** of 1% of the premium per month for every month that you do not have a policy.
  - This **penalty** is added to your Part D premium every month **for life!**

# MEDICARE PART C

ADVANTAGE PLANS/MEDICARE  
HEALTH PLANS



# MEDICARE PART C

- **What Is Part C:**

**A Medicare Advantage (MA) Plan (Medicare Health Plan):** is a choice offered by private insurance companies

- You **MUST** have both Part A and B to participate in Part C
- These plans will cover your medical and drug needs according to rules set up by Medicare.



# MEDICARE PART C

- **How Does Medicare Part C Work:**

- Medicare pays each month to the insurance company instead of covering you with Medicare part A & B for your medical costs
  - “Out of pocket costs” are determined by the plan you choose
  - Deductibles & co-pays for doctors, suppliers, & prescription medications are all considered “out of pocket costs”
- You may only go to doctors, facilities, or suppliers that belong to their “network” and, and you may need permission for “out-of-network” services
  - Your out-of-pocket costs will be higher when out-of-network

# MEDICARE PART C

- **Medicare Part C Insurance Companies:**
  - In Montana, the companies must have approval for sale in your county
  - In Flathead County as of 2022 there are 3 companies approved: Blue Cross Blue Shield, Humana and Lasso



COMMON CONCERNS	SUPPLEMENT/MEDIGAP	MEDICARE ADVANTAGE (MA)
Restrictive network of doctors, hospitals and providers	NO	YES
Co-payment to providers	NO	YES
Cap on out-of-pocket expenses (excluding prescription drugs)	NO Except Plans K and L	YES
Health plan decides what tests and procedures are approved for you	NO	YES
Can your plan be cancelled?	NO As long as premiums are paid	YES Plans are approved yearly and can be dropped
Ability to travel in country and use any Medicare-approved doctor or hospital	YES	POSSIBLY Exception: MA covers emergency out-of-network care
Pre-certification required for some treatments	NO	YES Penalties can apply if pre-certification not done
Hard to re-enroll after cancelled	YES	NO
MAYO clinic included	YES	POSSIBLY
Emergency internat'l coverage	SOME PLANS	POSSIBLY

# STOP FRAUD ANYTIME

- Read your Medicare Summary Notice or Medicare Advantage Explanation of Benefits when they arrive.
- Wait for Medicare and other insurers to pay before paying a bill and call SMP when you think something is not right.

**MONTANA SMP**

**1-800-551-3191**

**PROTECT      DETECT      REPORT**



*Montana SMP is a program administered by Missoula Aging Services, partnered with local Montana Area Agencies on Aging and supported, in part by grant 90MP0233, from the U.S. Administration for Community Living. Points of view or opinions do not necessarily represent official ACL policy.*

# STOP FRAUD

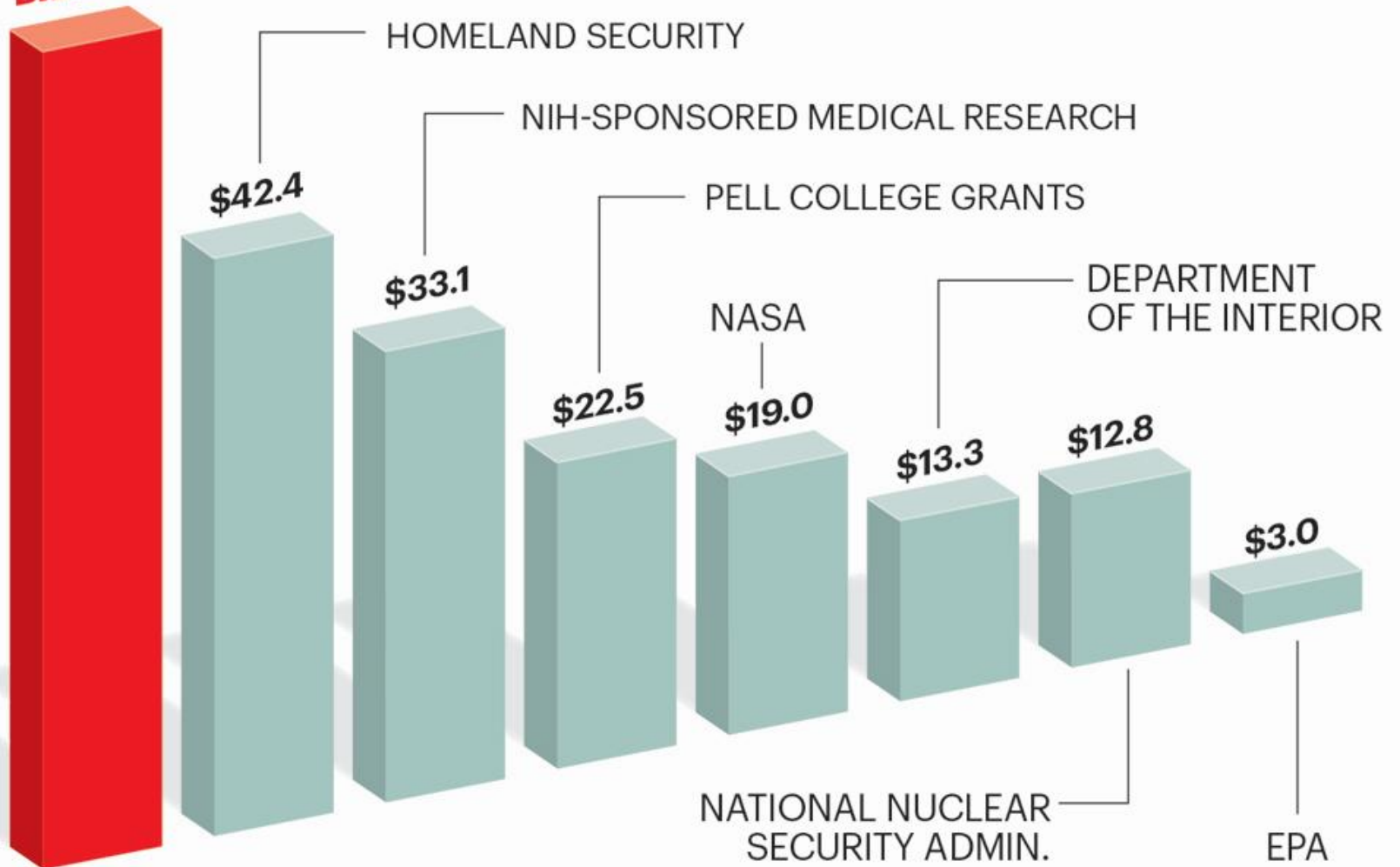
1. Medicare will never call or visit. Medicare will only send information via postal mail service.
2. Protect your Medicare number like you would a credit card.
3. If you receive a call about Medicare or from anyone requesting personal information, especially from a number you do not recognize, hang up immediately.
4. Call Montana SMP if you feel you've been the victim of Medicare waste, fraud or abuse.



**1-800-551-3191**

**\$60.0  
BILLION**

## **MEDICARE FRAUD LOSSES IN 2017**





# Flathead County agency on aging

Flathead County Agency on Aging

40 11<sup>th</sup> St W, Kalispell

**758-5730**



## Learn More About Benefits

Learn more about the programs that can help you save money.



Medications



Health Care



Income  
Assistance



Food &  
Nutrition



Housing &  
Utilities



Tax Relief



Veteran



Employment



And More

### Medications

You may be eligible for programs that save money on **medications and other health care costs (such as copays and deductibles)**. People who have applied for these benefits **can save, on average, \$4,000 annually** in assistance.

[Find My Benefits](#)

### Examples of Medication Programs

- Medicare Part D
- Medicare Low Income Subsidy (LIS)/Extra Help
- State Pharmaceutical Assistance Program (SPAP)
- Patient Assistance Programs
- Prescription Savings and Discount Cards



# A Better Way to Find Benefits



## Simple Steps

Answer a few questions and quickly find the benefits you deserve.



## Secure & Protected

Search for benefits with confidence. We do not track your personal information.



## Tailored to You

Your benefits search will find the programs that meet your unique individual needs.

Confidential, online tool that includes state-specific public and private programs for older adults with limited income.



The free benefits screening takes about 20 minutes and can be done by phone, in person or mail. After providing information on income, resources, and expenses a benefits report will list the programs that may help you with:

- **Prescription drug savings**
- **Health care costs**
- **Utility bill assistance**
- **Property tax assistance**
- **Food expense**
- **Medicaid**
- **Veteran services**

# **What are some of the Available Benefits?**

## **Core Benefits**

- **Medicare Part D Extra Help**- helps with premium, deductibles and coinsurance
- **Medicare Savings Program (MSP)**-helps pay Medicare Part A and/or Part B premiums, deductibles and copayments
- **Medicaid**-pays for medical care for people who have very low incomes and also helps pay for long-term care at home or in a facility
- **Supplemental Nutrition Assistance Program**-provides an electronic card use to purchase food at the grocery store
- **Low Income Energy Assistance Program (LIEAP)**-pays for weatherization and/or part of winter energy bills

# Enrollment Assistance for Other Benefits

- ☒ Montana Big Sky Rx
- ☒ Property Tax Relief
- ☒ Other local and state benefits

# WE FOLLOW THROUGH!

Expect us to follow-up with you to make sure benefits have been approved and the services are meeting your needs.

The ultimate goal: a streamlined process to identify and apply for multiple benefits at one time based on an individual's circumstances.



Do you know someone who needs a



A neighbor, friend, or parent?



**758-5730**