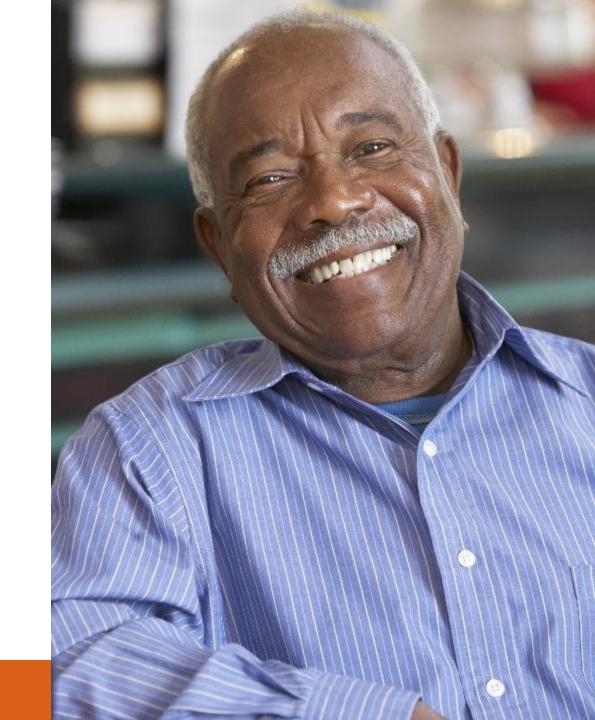


The Importance of Annual Check Ups For People on Medicare

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What Is Medicare?

- National health insurance program for people 65+
- Administered by the Centers for Medicare and Medicaid Services (CMS)
- Enrollment through the Social Security Administration (SSA)



Who Is Eligible for Medicare?

- Everyone over 65
 - All U.S. citizens
 - Legal residents who have lived in the U.S. continuously for at least 5 years
- Some people under 65 who are eligible for Social Security disability benefits



Four Parts of Medicare



Part A

Hospital Insurance



Part B

Medical Insurance







Part C

Medicare Advantage



Part D

Medicare Prescription Drug Coverage

Provided by Medicare

Provided by private insurer that contracts with Medicare

Option 1: Original Medicare

(See pages 61-64)

This includes Part A and B.



Part A
Hospital Insurance





Part B Medical Insurance

You can add:

(See pages 83-96)



Part D

Medicare Prescription
Drug Coverage

You can also add:

(See pages 79-82)



Medigap

Medicare Supplement Insurance

(Medigap policies help pay your out-of-pocket costs in Original Medicare.)

Option 2: Medicare Advantage (Part C)

(See pages 65-78)

These plans are like HMOs or PPOs, and typically include Part A, B, and D.



Part A
Hospital Insurance





Part B Medical Insurance





Part D Medicare Prescription Drug Coverage

(Most plans cover prescription drugs. If yours doesn't, you may be able to join a separate Part D plan.)

Medigap



Private health insurance for individuals

Sold by private insurance companies

Supplement Original Medicare coverage

Parts A and B

Follow federal/state laws that protect you

- Medigap insurance companies can only sell standardized policies
 - Identified in most states by letters
 - MA, MN, and WI standardize their plans differently
- Does not work with Medicare Advantage
- You pay a monthly premium
- Costs vary by plan, company, and location

Medicare Part D – Prescription Coverage

1 Decide if you want

Original Medicare

(Parts A & B + D)

If original Medicare, shop for standalone prescription drug plan (PDP) offered through a private insurer.

Medicare Advantage Plan

(Part C)

If enrolling in Medicare Advantage plan with drug coverage (MAPD), shop for plan.

Apply for Part D through the private insurer or through Medicare at www.medicare.gov or 1-800-MEDICARE (633-4227).

Medicare Advantage Plans



- Health plan options approved by Medicare
- Also called Medicare Part C
- Run by private companies
- Medicare pays amount for each member's care
- May have to use network doctors or hospitals
- Plan may include prescription drug coverage
- May include extra benefits like vision, dental, hearing aids and fitness
- Benefits and cost-sharing may be different

The Importance of Doing an Annual Check Up on Benefits

Plans Change each year – review your annual notice of changes (ANOC) – Mailed in September

Your plans formulary (list of covered drugs) may have changed even if your medications did not



How to Check your Plan Options



Go to www.medicare.gov



Call 1 -800-MEDICARE

Call Your State Health Insurance
Assistance program

Call Your local Broker

Medicare and Private Insurance



Out-of-Pocket Costs Paid by Medicare Beneficiaries

Premiums

- Part B premiums paid to Medicare
- Private insurance premiums for
 - Part D drug plan plus Medigap policy or
 - Medicare Advantage plan
- Other out-of-pocket costs
 - Deductibles
 - Portion of doctor bills not paid by Medicare
 - Services not covered by Medicare

Monthly Premiums



Paid to Medicare

- \$0 if self or spouse paid into Social Security ≥40 quarters (10 years)
- \$278/mo. if 30-39 quartersSS
- ▶ \$506/mo. if <30 quarters SS



Paid to Medicare

- **\$174.70/mo**. in 2024
- Plus income-related adjustment if applicable



Paid to Private Insurer

- Varies with plan
- Plus income related adjustment paid to Medicare if applicable

Monthly Premiums for Parts B & D Including Income Related Adjustment Amounts

MAGI Single	MAGI Joint	MAGI Married filing separately	Part B monthly premium paid to Medicare	Part B income-related adjustment amount paid to Medicare	Part D monthly premium (average) paid to insurer	Part D income-related adjustment amount paid to Medicare	Total Parts B & D premium
≤\$103,000	≤\$206,000	≤\$103,000	\$174.70	\$0.00	\$40.00	\$0.00	\$214.40
\$103,000- \$129,000	\$206,000- \$258,000		\$174.70	\$69.90	\$40.00	\$12.90	\$297.50
\$129,000- \$161,000	\$258,000- \$322,000		\$174.70	\$174.70	\$40.00	\$33.30	\$422.70
\$161,000- \$193,000	\$322,000- \$386,000		\$174.70	\$279.50	\$40.00	\$53.80	\$548.00
\$193,000- \$500,000	\$386,000- \$750,000	\$97,001- \$402,999	\$174.70	\$384.30	\$40.00	\$74.20	\$673.20
≥\$500,000	≥\$750,000	≥\$403,000	\$174.70	\$419.30	\$40.00	\$81.00	\$714.70

Deductibles For 2024 (Amount You Pay)



\$1,632

per spell of illness



\$240

per year

Waived for some preventive services such as flu shots, some mammograms and Pap smears, bone mass tests, prostate screening, diabetes tests, some others



\$545

per year

Part D Coinsurance

Medicare's standard benefit design; individual plans vary and may pay more Under the standard drug plan design, beneficiary pays:

Deductible: \$545 (up from \$505 in 2023);

Then Co-pays and Co-insurance

Initial coverage limit: \$5,030 (up from \$4,660 in 2023);

Then 25% of cost till you reach

Out-of-pocket threshold: \$8,000 (up from \$7,400) Then \$0 in 2024

- But...drug plans vary widely
 - Some will pay more
 - It will be important to find a plan that covers the drugs YOU take

Do Your Annual Check Up Each Year









Review Your Medical and Prescription Coverage Have A Yearly Wellness Visit or Physical Exam Schedule your
Preventive
services
(flu shots, certain
screenings)

See "Medicare & You – 2024 for up-to-date information For a complete list of covered services, Call 800-633-4227 or go to www.medicare.gov.

What Can You Do During the Annual Enrollment Period Oct 15 – Dec 7th



- You can change your prescription drug plan to another prescription drug plan
- You can change your Medicare Advantage plan for another Medicare Advantage Plan
- You can go from Original Medicare to a Medicare Advantage Plan
- You can go from a Medicare Advantage plan back to Original Medicare

Annual Enrollment Period for Medicare Advantage Plans Jan 1 – March 31



What Medicare Does Not Cover



- Long-term care
- Care delivered outside the U.S.
- Dental care
- Vision care
- Hearing aids
- Cosmetic surgery
- Acupuncture and other alternative care
- Amounts over Medicare-approved amount
- Amounts not covered by deductibles and coinsurance (20%)

What Private Insurance May Cover in Full or Part

- Deductibles and coinsurance amounts, such as:
 - The Part A deductible
 - Hospital costs after 60 days
 - The 20% of doctor bills that Medicare doesn't pay
 - Amounts the doctor charges over the Medicareapproved amount

Prescription drugs

- The deductible (maybe)
- Most of the cost of certain drugs during initial benefit period and catastrophic coverage period (but not donut hole)

Shop Carefully for Private Insurance



Medigap policies are standardized but premiums vary considerably

- Choose the policy that offers the coverage you need (A-N)
- Choose a reputable company offering that policy at the lowest price
- ✓ Make sure your health care provider processes the billing for the company you choose
- Drug plan benefits vary considerably
 - Choose the plan offering the coverage you need for the medicines you take
- Medicare Advantage plans vary considerably
 - Choose the plan offering the coverage you need for the medicines you take

Take The Time
To Compare Your
Options and
Have A Healthy
2024!

