

Your 2023 Guide To Medicare

You have a lot of options when it comes to Medicare. Understanding what Medicare is and how it can work for you is key to enrolling in the right plan for the year ahead. So, let's get comfortable with everything Medicare that you need to know for 2023.

WHAT IS MEDICARE?

Medicare is a national health insurance program administered by the Centers for Medicare and Medicaid Services.

WHEN CAN I SIGN UP?

Most people become eligible to sign up for Medicare three months before their 65th birthday. But people younger than 65 who have a disability, Lou Gehrig's disease (ALS), or permanent kidney failure that requires dialysis or a transplant (ESRD) are also eligible.

WHAT DO I NEED TO KNOW?

- The Medicare Basics
- How to Sign Up
- How to Determine Coverage Needs
- How to Use Medicare



Medicare Basics | Original Medicare

Part A and Part B are considered Original Medicare and are funded by the federal government. With Original Medicare you can see any doctor in the United States that accepts Medicare.

PART A | HOSPITAL INSURANCE

Covers:

- Inpatient hospital visits
- Nursing facility needs
- Hospice care
- Home health care

PART B | MEDICAL INSURANCE

Covers:

- Doctor and other health care provider visits
- Outpatient care needs
- Medical equipment needs (walkers, hospital beds, wheelchairs, etc.)
- Preventative services (vaccines, wellness check-ups, medical screenings, shots, etc.)



Medicare Basics | Supplemental Insurance Options

Original Medicare covers a lot, but it doesn't cover everything. You have the option to increase your Original Medicare coverage by adding Medicare Supplement Insurance (Medigap), coverage from a former employer or union, or Medicaid. These plans help to pay out-of-pocket-costs such as coinsurances.

MEDIGAP

Supplements your Original Medicare (Part A and Part B) benefits and is provided through a private insurance company for a monthly premium

MEDICAID

Provides health coverage (such as nursing home and personal care services and Medicare cost assistance) for individuals who qualify due to limited income and resources

It's important to know that Original Medicare won't provide coverage for your prescription drug needs. Therefore, you also have the option to purchase Part D – optional coverage for your prescription drugs.

PART D | PRESCRIPTION DRUG COVERAGE

Covers:

- Prescription drug costs (including some vaccinations and shots)

+ Added onto Original Medicare (Parts A and B)



Medicare Basics | Medicare Advantage (Part C)

Medicare Advantage is an alternative to Original Medicare and its supplement options. When you choose a Medicare Advantage plan, you pay a premium to bundle your Part A, Part B, and often Part D coverages.

PART C | MEDICARE ADVANTAGE

Covers:

- Inpatient services (Part A)
- Outpatient services (Part B)
- Prescription drugs (Part D)
- Added healthcare needs – such as vision, dental, and hearing

Separate from Original Medicare.

Provided through a private Medicare entity

WHAT ARE SOME COMMON MEDICARE ADVANTAGE BENEFITS?

The convenience that comes with a Medicare Advantage plan is what makes it a popular choice for healthcare coverage after 65. You have the option to combine the benefits of:

Limited Out-of-Pocket Costs
Hospital Coverage | Medical Coverage
Doctor Services | Outpatient Care | Home Health Care
Dental Coverage | Hearing Coverage
Vision Coverage | Fitness Memberships

NOT ALL MEDICARE ADVANTAGE PLANS ARE THE SAME.

Because Medicare Advantage plans are offered by private companies, each company has its own plan structure and guidelines. It's important to understand that not all Medicare Advantage plans are equal.

When you're comparing different options, keep in mind 3 best practices:

- 1. KNOW** the plan's monthly premiums and individual copay costs.
- 2. UNDERSTAND** what the plan includes (ask about prescription drug, dental, vision, and hearing coverages)
- 3. DETERMINE** the plan's network of providers and how out-of-network providers fit in.

WHY CHOOSE MEDICARE ADVANTAGE?

With Medicare Advantage, you get:

- + **Inpatient services (Part A)**
- + **Outpatient services (Part B)**
- + **Prescription drugs (Part D)**
- + **Added healthcare needs**

Medicare Basics | Costs

With Original Medicare, you pay a monthly premium and a portion of the cost each time you use a service covered under your plan – considering you have not enrolled in a supplemental program such as Medigap or a Medicare Advantage Plan.

PART A

With Part A, you'll notice premium, deductible, and inpatient stay costs. For most people, the Part A premium is free. A set deductible will determine how much you pay per benefit period for each hospital admission, and copayments are made for inpatient services depending on the duration of stay.

PART D

When you add Part D coverage to your Original Medicare plan, you'll have additional premium and deductible costs. Monthly premiums are determined by the plan you choose to join. Additionally, most plans have a deductible that you must meet before the insurance begins to cover costs.

PART B

Part B has associated premium, deductible, and service costs. You pay a set monthly premium and deductible before Original Medicare starts to pay. You're also responsible for the coinsurance costs for covered services after you've reached your deductible.

MEDICARE ADVANTAGE (PART C)

If you choose to enroll in Medicare Advantage (Part C) instead of Original Medicare, you will pay a monthly premium to an independent provider along with coinsurance and copayments. The amounts are determined by which plan you choose and are subject to change yearly.



Medicare Basics | 65+ and Employed

If you're still working after 65, you might be wondering how Medicare will work for you. There are some core things you need to know about working after 65 and Medicare.

HOW DO I KNOW IF I GET MEDICARE WHILE WORKING AFTER 65?

In general, you do not need to sign up for Medicare while you are still working if you have health insurance through your job. Instead, you wait until you stop working or until you lose health care coverage.

Ask yourself:

Are you self-employed?

Do you have health insurance that is not available across your company?

Does your employer have more than 20 employees?

Do you have COBRA coverage?

If you are still working and:	How Original Medicare works with your situation:
Your (or your spouse's) job has less than 20 employees	<ul style="list-style-type: none">• Medicare will pay for healthcare coverage and your place of employment pays secondarily.• You should ask your employer if you must sign up for Part A and Part B when you turn 65 to determine how they will cover service costs.
Your (or your spouse's) job has more than 20 employees	<ul style="list-style-type: none">• Your place of employment will pay for healthcare coverage and Medicare pays secondarily.• You can choose to sign up for Part A when you turn 65 (or any time after) if you do not have a premium responsibility.• You have the option to wait to sign up for Part B until you start working without facing a penalty for late enrollment.
You (or your spouse) receive(s) a stipend for health insurance or You are working and do not receive health insurance benefits	<ul style="list-style-type: none">• Ask your company if you should sign up for Original Medicare (Part A and Part B) when you turn 65.• When you sign up for Part A and Part B, Medicare will pay first.• You might find that your private insurance provider has its own standards for working with Medicare benefits.

How to Sign Up | Dates to Note

Each year open enrollment is your opportunity to either sign up for benefits or adjust your current plan. To ensure that you're on track with managing your Medicare benefits, you'll want to understand the timeline.

October 1, 2022	<ul style="list-style-type: none">• Review benefits and compare plans• Determine which plan or combination of plans works best for you.
October 15 – December 7, 2022	<ul style="list-style-type: none">• Choose your Medicare coverage for 2023• Join, switch, or leave a Medicare Advantage Plan
January 1, 2023	<ul style="list-style-type: none">• New coverage begins
January 1 – March 31, 2023	<p>If you are already enrolled in a Medicare Advantage plan, you can</p> <ul style="list-style-type: none">• Change to a different one• Switch to Original Medicare



How to Sign Up | *Signing Up for Coverage*

When you're ready to sign up for Original Medicare (Part A and Part B), contact Social Security (or the Railroad Retirement Board if applicable) by phone, online, or in-person. You do not need a Medicare account to sign up, but once you have your Medicare Number, you'll want to create one.

APPLYING FOR COVERAGE

You have two options to receive Medicare coverage:

1. Sign up for only Medicare coverage
2. Apply for Social Security (or Railroad Retirement Board) benefits

HOW TO CONTACT SOCIAL SECURITY

There are several avenues to contact social security when you are ready.



Apply online at <https://www.ssa.gov/benefits/medicare/>



Call 1-800-772-1213 (or 1-800-325-0778 for TTY users)



Contact your local Social Security office



Call the Railroad Retirement Board (if applicable) at 1-877-772-5772

Coverage Needs | *Original Medicare vs Medicare Advantage*

With Medicare services, you choose how you'd like to receive coverage. You will first need to determine whether you would like to enroll in Original Medicare or Medicare Advantage.

Let's compare:

Original Medicare	Medicare Advantage
<p>If you choose to enroll in Original Medicare:</p> <ul style="list-style-type: none">• You will be enrolled in Part A and Part B• You pay for services as you receive them along with your monthly premium responsibilities• You can add prescription drug coverage (Part D) at an additional cost• You can add supplemental coverage to help with out-of-pocket costs	<p>If you choose to enroll in a Medicare Advantage plan:</p> <ul style="list-style-type: none">• You'll still have Medicare but also receive access to additional coverage such as dental, vision, and more• Most plans will also include drug coverage (Part D)• You'll need to seek healthcare providers who participate in the Medicare Advantage plan's network and service area to avoid additional costs• Plans place a limit on out-of-pocket expenses for covered services.• You can access healthcare providers that are out-of-network at a higher price

Coverage Needs | Adding Prescription Drug Coverage (Part D)

There are two ways that you can add prescription drug coverage to your Medicare plan:

- 1. Add Part D to your Original Medicare plan:** If you have Part A and/or Part B, you have the option to join a separate Medicare drug plan.
- 2. Choose Medicare Advantage (or another Medicare plan that includes prescription drug coverage):** When you choose a Medicare Advantage (or similar) plan, your Part A, Part B, and drug coverage are bundled together. If you want a Medicare Advantage plan, remember that you must have Part A and Part B as well, and note that not all those plans offer drug coverage.

WATCH OUT FOR PENALTIES!

If you choose not to enroll in Medicare Part D when you become eligible and do not have any prescription drug coverage, you'll face a recurring penalty for joining the plan late.

Here's out to avoid a penalty:

- 1. Enroll when you become eligible.** The best way to avoid a penalty is to enroll in your Part D plan during your Initial Enrollment Period.
- 2. Enroll if you lose prescription drug coverage from another source.** If you've been getting your prescription drug coverage from an outside source (such as an employer, TRICARE, or individual health insurance) and those benefits end, you cannot go for more than 63 days without coverage.
- 3. Keep a record of your prescription drug insurance providers.** You will need to keep track of how you've been insured for your Medicare plan if you are not enrolled in Part D.



Coverage Needs | *Adding Supplement Insurance (Medigap)*

A Medigap policy only supplements your Original Medicare benefits. You must be enrolled in Medicare A and B to be eligible to receive Medigap benefits. You will pay a private insurance company a monthly premium for your policy.

MEDIGAP HELPS COVER COSTS ASSOCIATED WITH:



Copayments



Coinsurance





Deductibles


Coverage Needs | *Working with a Licensed Medicare Advisor*

If you need assistance with determining your coverage needs, you can work with a Medicare advisor to get support. Medicare advisors can help you find a doctor, address your current medical coverage, go over Medicare costs for plans and services, find a dental plan, and more.

You choose how to connect:

 In person

 At a seminar

 Over the phone

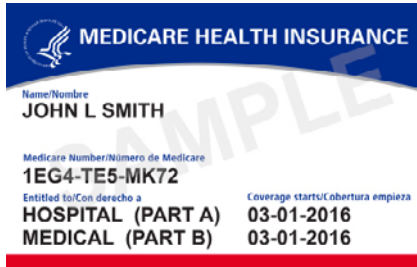
 Online (via webinar or direct contact)

Whether you are new to Medicare or are looking to further cater your plan to your needs, a licensed Medicare professional knows the ins-and-outs of the program and can help – at no cost to you.

VISIT [PLANADVISORSMEDICARE.COM/FIND-A-MEDICARE-ADVISOR](https://planadvisorsmedicare.com/find-a-medicare-advisor)
OR CALL 866-214-1808 **TO GET SUPPORT REGARDING YOUR**
MEDICARE COVERAGE.

Using Medicare | Your Medicare Card

Your Medicare card has all the information you need to join a Medicare plan and purchase Medigap. Once you sign up for Medicare, you will receive it in the mail. Keep your card in a safe place. You will need it to utilize healthcare services or adjust any of your plan details.



When you look at your card, you will find that it:

- Has a unique Medicare Number
- Shows which plans you have
- Lets you know when your coverage begins

USING YOUR CARD WITH ORIGINAL MEDICARE

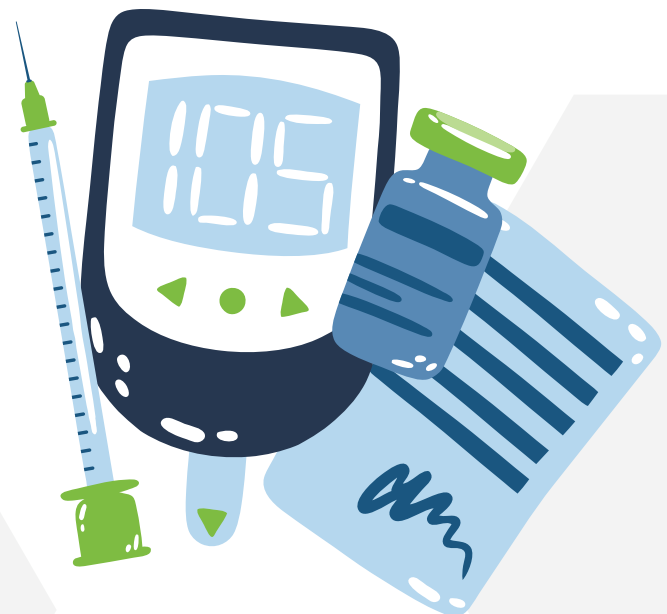
If you have original Medicare, you'll want to keep your card on your person. You will show the card when you utilize healthcare services. If you have enrolled in a prescription drug plan (Part D), you will have a separate card that you will need to keep with you as well.

USING YOUR CARD WITH MEDICARE ADVANTAGE

When you enroll in Medicare Advantage, your Medicare Card is used to switch plans and adjust services. You will use your Medicare Advantage plan's card when you utilize healthcare services.

BEWARE OF SCAMS

Keep your Medicare card in a safe place and never share the information with anyone who contacts you – unless they are a trusted healthcare or Medicare provider. No Medicare representative or agency will call you to access your private information.



Using Medicare | Accessing Healthcare

Your plan choice determines how and where you access your healthcare services.

Original Medicare (Part A and Part B)	<ul style="list-style-type: none">• Use your Medicare Card to receive services.• You can use any healthcare provider that accepts Medicare.• Be sure to ask your healthcare provider if they charge the Medicare approved amount to avoid excessive out-of-pocket costs.
Medicare Advantage (Part C)	<ul style="list-style-type: none">• Use your Medicare Advantage Card to access services.• Your Medicare Advantage plan may have a network of providers that you must use to receive full benefit.• Network requirements do not apply for emergency care services.
Prescription Drug Coverage (Part D)	<ul style="list-style-type: none">• Use your Part D Card to access services.• Your Medicare drug plan or Medicare Advantage plan will have a list of drugs that are covered, called a formulary.• Part D plans cover most vaccines unless they are covered in your Part B plan (flu, pneumonia, and hepatitis B vaccinations).

Using Medicare | *Reviewing Your Coverage Annually*

Whether you are enrolled in Original Medicare and a supplementary plan or you're enrolled in a Medicare Advantage plan, it is important to review your coverage annually to ensure you have the right plan or plans for your current and anticipated needs.

Medicare Advantage plans also change yearly. If you're enrolled in a Medicare Advantage plan, then in September each year you will receive a letter from your plan provider called an Annual Notice of Change. This letter details the coverage changes for your plan for the upcoming year.

It's important to review these changes and determine if the plan is still right for you.

A Medicare advisor, also known as a licensed agent, can help you review your plan details and ensure your plan is still right for you. Be sure to schedule an appointment each year during Medicare Annual Enrollment (Oct. 1 - Dec. 15) to review your plan.

VISIT PLANADVISORSMEDICARE.COM/FIND-A-MEDICARE-ADVISOR
OR CALL 866-214-1808 **TO GET SUPPORT REGARDING YOUR**
MEDICARE COVERAGE.

