

Welcome To Medicare



What Is SHIIP?



Objective Information Source

- Part of the State of Iowa Insurance Division
- Answers questions and provides assistance
- Doesn't recommend or endorse specific companies, products or agents

Today We Will Cover

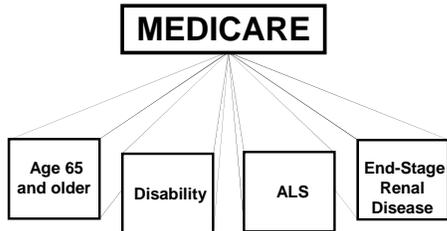


- Medicare eligibility, enrollment & costs
- Your Medicare choices:
 - Original Medicare Parts A & B
 - Supplementing Medicare
 - Prescription Drug Plans – Part D
 - Or
 - Medicare Advantage Plans – Part C

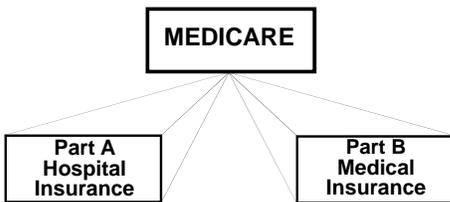
MEDICARE - Who Is Eligible?



Must be a U.S. citizen or permanent resident for 5 years



Medicare Health Insurance



I'm Turning 65



Should I enroll in Medicare?



Are You Retired?



- Medicare is your primary coverage.
- Need to enroll in Medicare Part A and Part B.
- Retirement health coverage from employer will pay after Medicare.

How To Enroll In Medicare When Retired

- Enrollment is automatic if you are drawing Social Security or Railroad Retirement benefits
- Otherwise
 - Call or visit SS or RR
 - Enroll online at www.socialsecurity.gov



When To Enroll In Medicare Parts A & B

Initial Enrollment Period



Cost Of Enrolling In Medicare Part A



Part A is free for people who have 40 quarters of work credit under Social Security or Railroad Retirement.

Cost Of Enrolling In Medicare Part B



- People new to Medicare in 2017 pay \$134 per month for Part B.
- People with higher incomes pay more if their income is above:
 - \$85,000 individual
 - \$170,000 couple filing joint return

Get Help Paying For Part B Premium



Medicare Savings Program – SLMB

- Income below:
 - \$1357 per month individual
 - \$1823 per month couple
- Resources below:
 - \$7280 individual
 - \$10930 couple

How Do I Pay The Part B Premium?



If you are drawing benefits, the premium is taken out of your monthly payment:

- Social Security
- Railroad Retirement
- Federal Government retirement

If you are not drawing benefits, you will be billed every 3 months

Are You Medicare-eligible & You Or Your Spouse Work?



Employer has 20 or more* employees

- Can continue on employer plan
- Employer can't offer alternatives
- Employer coverage is primary
- Keep evidence of having insurance

*For those on Medicare due to disability, the number of employees is 100 or more.

Are You Medicare-eligible & You Or Your Spouse Work?



Employer has fewer than 20 employees

- Employer can offer anything or nothing
- Medicare is primary insurance

Should I Delay Enrolling In Part A While Working?



- Do you have a Health Savings Account?
- If so, do not enroll in Medicare while working
- Enrolling in Medicare means no longer eligible to make contributions to your HSA

Should I Delay Enrolling In Part B While Working?



- If you are actively working and covered by your employer's group health insurance, consider this:
- Part B coverage usually is secondary to employer coverage
- Part B costs a monthly premium
- Enrolling in Part B triggers a 6 month one-time guarantee to purchase a Medicare Supplement.

If You Delay Enrolling In Medicare



Always verify a decision to delay enrollment with Social Security

When You Retire



Enroll in Part A if not enrolled previously
 Enroll in Part B

- You have up to 8 months after worker retires to enroll in Part B

Forms to enroll in Part B





The screenshot shows the Medicare.gov homepage. A white arrow points to the search bar at the top right. Below the search bar, there are several navigation tabs: 'Sign Up', 'Your Medicare', 'Your Medicare Covers', 'Drug Coverage', 'Supplements & Other Insurance', 'Plans & Appeals', 'Manage Your Health', and 'Forms, Help, & Resources'. The main content area features a large heading 'Is my test, item, or service covered?' with a search input field and a 'Go' button. Below this, there are several informational links and buttons, including 'Medicare Open Enrollment is from now until December 7.', 'Review and compare your coverage options.', 'Not sure what coverage you have?', 'Check your current enrollment.', 'Already know what plan you want for 2018?', 'Enroll now.', 'Find out how much Medicare costs in 2018.', 'Get costs.', 'Address change/Medicare card issue?', 'Information for my situation', and 'Find someone to talk to'. At the bottom, there are sections for 'Find doctors, providers, hospitals, plans & suppliers', 'Blogs', 'News', 'Videos', and 'Get help with costs'.

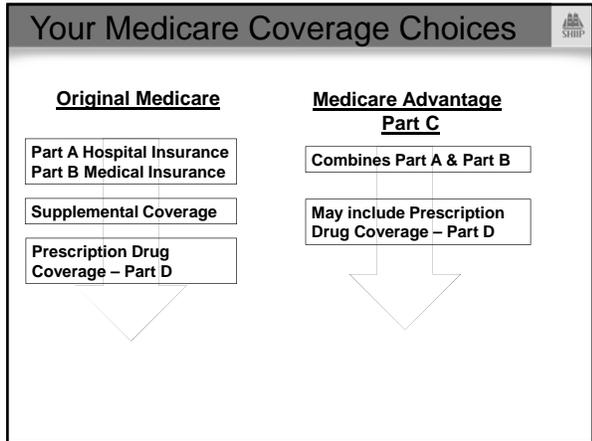
What If You Don't Enroll In Part B



During Your IEP Or When You Retire?

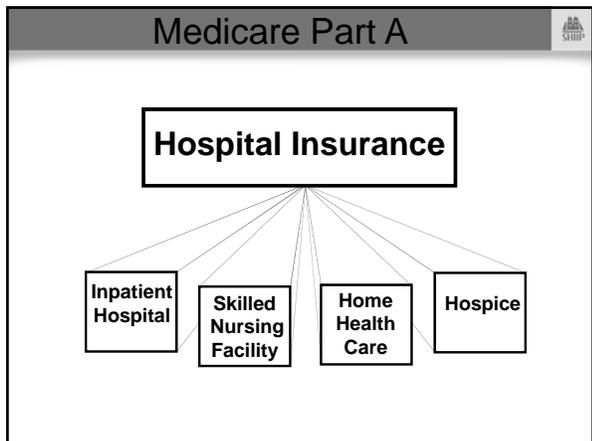
General Enrollment Period

- January 1 through March 31 each year
- Coverage effective July 1
- Premium increases 10% for each 12-month period you were eligible but did not enroll
- Pay this penalty as long as you have Part B

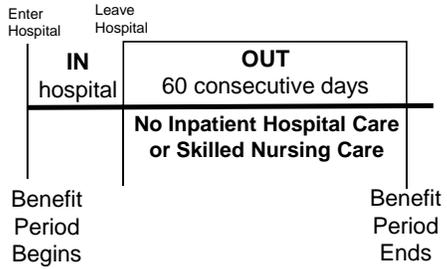


Original Medicare

You are not limited to a provider network. With original Medicare Parts A and B you can use any provider anywhere in the US who accepts Medicare and has a provider number.



Inpatient Hospital & SNF Benefit Period



Part A Inpatient - What You Pay



Days 1-60	Days 61-90	60 Lifetime Reserve Days	You pay all costs
Deductible \$1,316	Daily Coinsurance \$329	Daily Coinsurance \$658	
Renewable days	Renewable days	Each day available only once	

Skilled Nursing Facility Care - What You Pay



Requirements:

- 3-day inpatient hospital stay
- Need daily skilled care
- Use a Medicare-certified skilled nursing facility (SNF)

Days 1-20	Days 21-100	You pay all costs
Medicare pays 100%	Daily Coinsurance \$164.50	

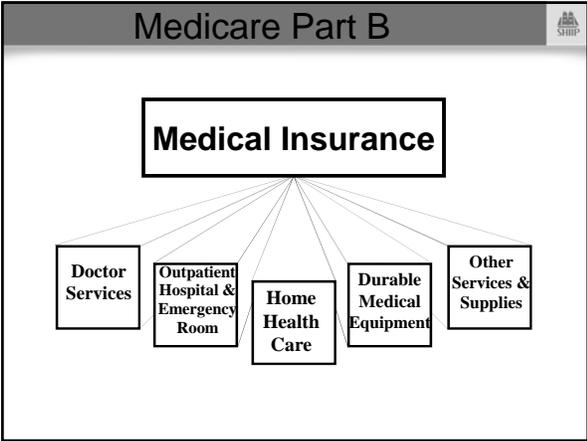
Home Health Care – What You Pay

Covered Services – no cost

- Part-time skilled nursing care
- Therapy—occupational, physical, speech-language
- Some home health aid services

Hospice Services –What You Pay

- You pay nothing for hospice care from a Medicare-certified Hospice provider.
- You may pay part of the cost of medications and respite care



Medicare Part B - Payments For Services

Approved Amount

You pay \$183 annual
Medicare pays 80%.
You pay 20%.
You may pay excess of 15% (or more for equipment).
No annual or lifetime limit

Medicare Part B - Claims

If provider accepts "assignment"

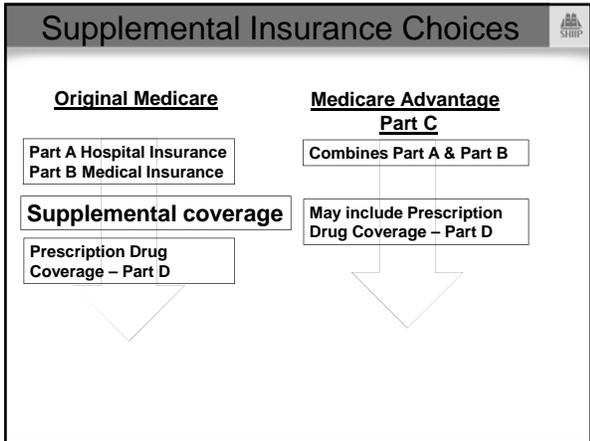
- Agree to accept Medicare's "approved" amount as full payment
- You only pay deductibles & coinsurance
- Medicare sends its payment directly to the provider

If provider does not accept "assignment"

- May charge up to 15% more than the "approved" amount
- May ask you to pay entire charge at time of service
- Medicare sends its payment to you and you pay the provider

Covered Preventive Services

- Welcome to Medicare preventive visit
- Annual wellness visit
- Abdominal aortic aneurysm screening
- Alcohol misuse counseling
- Bone mass measurement
- Cardiovascular screenings
- Colorectal cancer screenings
- Depression screening
- Diabetes screening
- Flu shots, pneumococcal shots & Hepatitis B shots
- Glaucoma tests
- Hepatitis C screening
- Lung cancer screening
- Mammograms (screening)
- Obesity screening & counseling
- Pap test/pelvic exam/clinical breast exam
- Prostate cancer screening
- Smoking cessation



- ### Options For Filling Medicare's Gaps
- Medicare Supplement insurance
 - Retiree health plan from employer
 - Medicare Savings Program – QMB
 - Medicaid
 - TRICARE/TRICARE for Life
 - Indian Health Services/tribal medical benefits

- ### Medicare Supplement Insurance
- Health insurance policies sold by private insurance companies
 - Also called “Medigap”
 - Cover “gaps” in Original Medicare Plan
 - 10 standardized policies
 - Plans A, B, C, D, F, G, K, L, M, N
 - Guaranteed renewable

How To Avoid A Waiting Period For Coverage Of Pre-existing Conditions



- During the first 6 months of being enrolled in Part B
IF you apply within 63 days of loss of creditable
coverage
 - OR
- If the new Medicare Supplement policy replaces
your current Medicare Supplement policy
 - OR
- If a company has no waiting period

Employer Retiree Health Plans



- How does your plan coordinate with Medicare?
- What is the premium?
- Are there any extra benefits?
- Does it have prescription drug coverage as good
as or better than Medicare's?
- Is there a provider network?

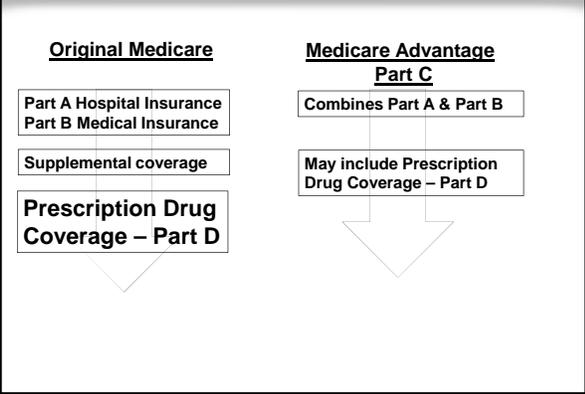
Medicare Savings Programs



Qualified Medicare Beneficiary (QMB)

- Pays Medicare premium(s), deductibles &
coinsurance
- Income Limits:
 - \$1010 per month – individual
 - \$1355 per month – couple
- Resource Limits:
 - \$7280 – individual
 - \$10,930 – couple

Prescription Drug Coverage Choices



Medicare Part D

- Available for all people with Medicare
 - Enrolled in Part A and/or Part B
 - Includes those on Medicare due to disability, ALS or ESRD



What Is "Creditable Coverage" ?

- Drug coverage that is as good as or better than a Medicare prescription drug plan
- Includes:
 - VA drug benefits
 - Tricare for Life
 - Some employer or retiree coverage
 - Indian Health Services

What Is The Late Enrollment Penalty?



- Assessed 1% of base premium* for every month you were eligible to enroll in Medicare's prescription drug coverage and did not enroll
- Pay penalty for life
- Example: Did not enroll in 2006-your penalty would be 127 months X 1% or 127% X \$35.63 or \$45,26 per month in penalty
- * \$35.63 in 2017

When Can You Enroll In A Prescription Drug Plan?



Annual Open Enrollment Period



October 15 – December 7

- During the Open Enrollment Period you can:
- Change prescription drug plans
- Enroll in a drug plan for the first time
- Drop Medicare drug coverage
- Change from Original Medicare and a prescription drug plan to a Medicare Advantage plan
- Keep your current coverage

Part D Special Enrollment Periods



- Loss of employer/retiree coverage
- Change in residence
- Moving into, residing in or leaving a long-term care facility
- Qualify for low income assistance
- Qualify for Medicaid coverage including help with Part B premium (Medicare Savings Plans)

Special Considerations For Worker Or Spouse



If actively working, you may be able to delay enrollment into Part D until you retire

- Check if employer coverage is “creditable”
- Special enrollment period – 2 months after employer coverage ends

Creditable Coverage Notice



• Individuals receiving their prescription drug coverage from an employer, retiree or pre-standard Medicare supplement plan will receive a notice by October 15 each year telling them if their coverage is “as good as or better than Medicare coverage”.

- Keep this notice.

Part D Premiums



- Each plan has a monthly premium, set by the individual plan.
 - Premium can change from year to year
- Some people receive assistance paying the premium.
- Some people pay more than the plan's usual monthly premium if their income is above:
 - \$85,000 individual
 - \$170,000 couple filing a joint return

Qualify For "Extra Help" With Prescription Drug Costs



- Helps pay premium, deductible and co-pays
- Monthly Income limits: Resource limits:
 - \$1505 individual \$13,820 individual
 - \$2022.50 couple \$27,600 couple

Apply through Social Security

SHIP can help!

Standard Benefit-What You Pay



Understanding drug coverage stages

Deductible	Initial Coverage	Coverage Gap (Donut Hole)	Catastrophic Coverage
Up to \$400	Up to \$3700 total cost	Up to \$4950 out-of-pocket costs	Through the end of the year

Comparing Part D Plans

- Premium
- Deductible
- Formulary – the drugs that are covered
- Restrictions on your medications
- Out of pocket costs at pharmacy
- Coverage in the Gap
- Pharmacy network (national availability?)

How Do You Compare Plans?

Information is Online
www.medicare.gov



SHIIP can help you compare plans

Plan Finder



Medicare.gov
 The Official U.S. Government Site for Medicare

Is my test, item, or service covered?

Find health & drug plans | Apply for Medicare | Get started with Medicare

Medicare Open Enrollment is from now until December 7. Review and compare your coverage options.

Not sure what coverage you have? Check your current enrollment.

Already know what plan you want for 2017? Enroll now.

Find out how much Medicare costs in 2015. Get costs.

Address change/Medicare card issue? | Information for my situation? | Find someone to talk to?

Find doctors, providers, hospitals, plans & suppliers

Get help with costs | Find out how Medicare works with other insurance | Mail you get about Medicare

Your Medicare Coverage Choices

Original Medicare

- Part A Hospital Insurance
- Part B Medical Insurance

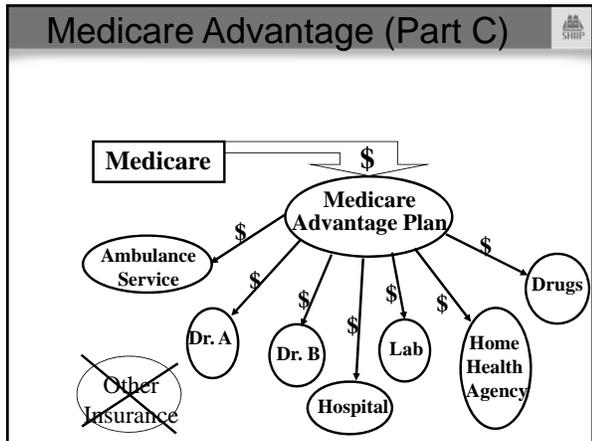
Supplemental coverage

Prescription Drug Coverage – Part D

Medicare Advantage Part C

Combines Part A & Part B

May include Prescription Drug Coverage – Part D



Medicare Advantage - A Private Solution

- Medicare contracts with a private company on an annual basis.
- Contracts require that plans provide Medicare Part A & B services.
- The plan handles claims.
- You receive services and make payments based on the private plan's rules.
- The plan may offer extra coverages – dental, vision, health club membership

Questions to Ask About MA Plans 

- Do I live in the service area for the plan?
- Will my doctors, hospital and other medical providers accept payment from the MA plan?

Questions to Ask About MA Plans 

- What is the monthly premium?
- What is the annual out-of-pocket maximum?
- What are the deductibles, co-payments or coinsurance for the benefits I'm most likely to use?
- Does the plan include prescription drug coverage

Medicare Advantage - Out-of-Pocket Costs 

- Must still pay Part B premium
- May pay additional monthly premium
- Pay other out-of-pocket costs
 - Different from Original Medicare Plan
 - Vary from plan to plan

Medicare Advantage - Types of Plans



- HMO-Health Maintenance Organization
- PPO-Preferred Provider Organization
- Private Fee-For-Service
- Cost Plan

Medicare HMO



- Check that your providers will accept the plan.
- Generally must get care and services from plan's network
- May have to pay full cost of care outside of plan's network
- May need to choose primary care doctor
- Need referral to see a specialist

Medicare PPO



- There are in-network and out-of-network providers.
- Co-payments are set by the plan.
 - Usually higher for out-of-network care
- You don't need a referral to see an out-of-network provider.
- An out-of-network provider does not have to accept your PPO plan.
- You don't need a referral to see a specialist.

Medicare PFFS 

- Check that your providers will accept the plan before receiving care
- Understand when you can change plans
- If plan does not include drug coverage, you can add a stand-alone Medicare Prescription Drug plan

Medicare Advantage - Eligibility 

- Have Medicare Parts A & B
- Do not have end-stage renal disease
- Live in service area (county-specific)
- Covers people on Medicare because of disability

When Can You Join? 

- You can join a Medicare Advantage Plan or other Medicare plan
 - During your Initial Enrollment Period – when you are first eligible for Medicare
 - Each year, during Open Enrollment Period (October 15 - December 7)
 - During a Special Enrollment Period

Open Enrollment Period 

October 15 – December 7

Can choose new plan
 Medicare Advantage Plan
 Medicare Prescription Drug Plan
 Original Medicare

New plan starts January 1

Special Enrollment Periods 

- Move out of the plan's service area
- Loss of employer/retiree coverage
- Moving into, residing in or leaving a long-term care facility
- Qualify for "Extra Help"
- Qualify for Medicaid coverage including help with Part B premium (Medicare Savings Plans)

Medicare Advantage - Disenrollment Period 

- January 1 – February 14 each year:
 - Can return to original Medicare
 - Can enroll in a stand alone Part D drug plan
- Change effective first day of following month
- Does not give you a guaranteed right to purchase a Medicare Supplement without answering health questions

“Trying Out” A Medicare Advantage Plan



- If you enroll in a Medicare Advantage plan when you first enroll in Medicare part B at age 65
AND
- You disenroll from the Medicare Advantage plan within 12 months
THEN
- You will be able to get a Medicare Supplement without answering health questions

mymedicare.gov



Health Insurance Marketplace



If I have Medicare, do I need to do anything about the Health Insurance Marketplace?

- Medicare isn't part of the Marketplace
- If you have Medicare, you are covered and don't need a Marketplace plan

If you have a Marketplace plan before you enroll in Medicare:

- Cancel your Marketplace plan when Medicare begins
- Any premium tax credit and reduced cost-sharing will end when Medicare starts

Contacting SHIP



- Statewide: 1-800-351-4664
(TTY 1-800-735-2942)
- Website: www.therightcalliowa.gov
- E-mail: shipp@iid.iowa.gov
- Local: Check Website or call toll-free

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Volunteering for SHIP



- A challenging and rewarding opportunity to help Iowans on Medicare
- Be a counselor, computer volunteer, member of our speakers bureau/help promote SHIP
- For more information call SHIP at 1-800-351-4664

Thank You For Coming Please Complete Your Evaluation



SHIP PRESENTATION FEEDBACK

Program _____

Date _____ Location _____

Please use the following scales:
(circle appropriate number)

	Strongly Agree	Agree	Disagree	Strongly Disagree
Presenter/Method				
1. The presenter was knowledgeable	4	3	2	1
2. The presenter kept my interest	4	3	2	1
3. The presenter was effective communicating the information	4	3	2	1
4. The visual aids/handouts added to the presentation	4	3	2	1
Participant Benefits				
5. The presentation met my expectations	4	3	2	1
6. My knowledge of the subject has increased	4	3	2	1
Status				
7. Currently enrolled in Medicare	_____			
Expected Medicare Effective date	Preparing for Medicare _____			
Other				
8. How did you hear about this presentation?	_____			
9. Is there information you would like to have added to the presentation? If so, please list.	_____			
10. Please have someone call me to set up an individual appointment with SHIP Counselor. (Please provide your name and phone number below).	Yes	No		
11. I would like someone to contact me about volunteering for SHIP. (Please provide your name and email address below)	Yes	No		
Name: _____ Phone # _____				
Email Address: _____				
Comments: _____				
