

What Are My Medicare Options?

Original Medicare

Part A - Hospital | Part B - Medical

Fee-for-service coverage under which the government pays your health care providers directly for your Part A and/or Part B benefits.

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Medicare Supplement

(Secondary) Insurance

Sold by private insurance companies to fill "gaps" in Original Medicare coverage.

Others may have coverage through a retirement health plan or Medicaid.

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Prescription Drug Coverage

Part D

Private companies approved by Medicare run these plans. Plans have different costs and cover different drugs.

OR

Medicare Advantage Plans

(HMOs and PPOs)

Part C

Offered by private companies that contract with Medicare to provide Part A and Part B benefits.

Plan types include health maintenance organizations (HMOs), preferred provider organizations (PPOs), private fee-for-service plans and more.

These plans take the place of Original Medicare and most include the Part D prescription drug benefit.

How Do I Compare Part D Plans?

Ohio Department of Insurance:
1-800-686-1578

Medicare: 1-800-MEDICARE

Important 2017 Dates:

October	Announcement of Part C and Part D plans for the upcoming year. <i>Visit www.medicare.gov to compare plans.</i>
	Medicare open enrollment begins October 15.
December	Medicare open enrollment ends December 7.
January	New plans and plan changes take effect January 1.

The Ohio Senior Health Insurance Information Program (OSHIIP) is a division of the Ohio Department of Insurance that provides free information and education to people covered by Medicare and their caregivers.



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LOCAL HELP FOR PEOPLE WITH MEDICARE
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Get Extra Help With
Medicare
Part D
Prescription Drug Costs.

THE 'EXTRA HELP' PROGRAM

**Ohio Department
of Insurance**

John R. Kasich
Governor

Jillian Froment
Director

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What is Medicare Part D?

Part D is Medicare's comprehensive prescription drug coverage benefit and is available to anyone eligible for Medicare Part A or Part B. People with Medicare may enroll in Part D coverage through either a stand-alone plan or a Medicare Advantage plan. People on Medicare who choose not to enroll and have no other drug coverage may pay more for late enrollment.

What Does Part D Cost?

In 2017 the Medicare Part D out of pocket costs for consumers are:

- Average Monthly Premiums - \$34.00
- Annual Deductible - \$0 - \$400
- Copays - 25% or flat copay amounts based on formulary
- Coverage Gap (donut hole) - \$3,700 - \$7,425 in total drug costs
- Discounts to increase each year until gap is closed in 2020
- Catastrophic Coverage - Approximately 5% copay after coverage gap

How Do I Choose a Part D Plan?

Each year you should review your plan options and look for three things:

- **Convenience** - Know what pharmacies are in network and if the plan has preferred pharmacies.
- **Cost** - Know all possible out of pocket expenses.
- **Coverage** - Make sure all your current prescription medications are included.

For help comparing prescription drug plans and to learn about other programs that may help you pay drug costs, call:

1-800-686-1578

What is the 'Extra Help' Program?

Extra Help is a Medicare program that helps people with limited income and resources pay Medicare prescription drug costs. You may qualify for Extra Help, also called low-income subsidy (LIS), if your annual income and total resources are below these limits this year:

Single Person	Married Person
Monthly Income: \$1,528	Monthly Income: \$2,050
Resources: \$13,820	Resources: \$27,600

For help applying for Extra Help benefits, contact the the Ohio Department of Insurance at 1-800-686-1578.

What Counts as Income & Resources?

Resources include money in a checking or savings account, stocks, bonds, mutual funds, and Individual Retirement Accounts (IRAs). Resources don't include your home, car, household items, burial plot, burial expenses (up to \$1,500 per person), or life insurance policies. Income includes any money received from social security, pensions, employment, interest and more.

If you qualify for Extra Help, Medicare will pay:

- All or most of the monthly premium
- All or most of the annual deductible
- Most of your copayments/co-insurance
- Full coverage during the donut hole

In 2017, drug costs for most people who qualify will be no more than \$3.30 for each generic drug and \$8.25 for each brand name drug. Look on the Extra Help letters you get, or contact your plan to find out your exact costs.

NOTE: All people with Medicare should review their drug options EVERY year and choose the plan that's best for them!