Welcome to Medicare

John R. Kasich, Governor
Jillian Froment, Director
• Premier, federally funded program for Medicare education in Ohio
• Provides free, unbiased, objective Medicare information and counseling services
  – Counselors available at 1-800-686-1578
• Partners with community groups to provide local, personalized counseling services
What is Medicare?
Federal health insurance program administered by the Centers for Medicare and Medicaid Services (CMS) for those who are:
1. 65 and older
2. any age and Disabled
3. diagnosed with End Stage Renal Disease (ESRD)

- **Option 1**
  - **Original Medicare**
    - Part A and Part B
  - **Secondary Insurance**
    - GHI, MedSup, or Medicaid
  - **Rx Coverage**
    - Part D or GHI

- **Option 2**
  - **Medicare Advantage** (Part C)
    - 1. Hospitalization,
    - 2. Medical
    - 3. Rx (MA-PD)
Applying for Medicare

• Enrollment automatic if you get Social Security or Railroad Retirement benefits prior to Medicare eligibility

• All others must apply with Social Security (or Railroad Retirement) during their

  7 month Initial Enrollment Period (IEP)
  – 3 months before your 65th birthday
  – Month of your 65th birthday
  – 3 months after your 65th birthday

• If you are covered under your (or your spouse’s) current employer group health plan, you may delay enrollment into Medicare Part B
Part A - Hospital

• Inpatient Hospitalization
• Skilled Nursing Facilities
• Home Health Care
• Hospice

Part B - Medical

• Outpatient services
• Doctors/Providers
• Preventive Benefits
• Durable Medical Equipment

- Medicare was never intended to pay 100% of health care costs
- Medicare does not cover non-medically necessary services or care outside the USA in most cases
- Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) must be obtained from a contracted supplier
Medicare Preventive Benefits

• Screening tests and procedures
• No out-of-pocket costs for most preventive benefits
• Examples:
  – Flu, Pneumonia, Hepatitis B Vaccine
  – Welcome to Medicare & Annual Wellness Checks
  – Diabetes testing supplies

• Complete list at [www.medicare.gov](http://www.medicare.gov) or Medicare & You Handbook
2018 Medicare Amounts

Part A
- Monthly Premium $0 for most
- Hospital Deductible
  $1,340/benefit period
- Hospital Copays
  $335/day, days 61-90
  $670/day, days 91-150
  (Lifetime Reserve Days)
- Skilled Nursing Copay
  $167.50/day, days 21-100

Part B
- Monthly Premium $134*
  *average $130(enrolled before 2017 with SSA deduction)
- Premium may be income based
- Late enrollees may incur a 10% penalty for each year of delay
- Annual Deductible $183
- Copayments generally 20% of Medicare Approved Amount

Use MyMedicare.gov to see all your Medicare claims!
2017 Medicare Savings Programs (MSP)

• Pay Part B Premium
  – QMB pays Part A & B coinsurance & deductibles

• Income less than
  – $1,377/month- single
  – $1,847/month- married

• Resources less than
  – $7,560- single
  – $11,340- married

Call OSHIIP or local Jobs & Family Services Office for application
Secondary Insurance

- **Group Health Insurance (GHI)**
  - Insurance from a former employer or union that supplements Medicare

- **Medicaid**
  - Assistance for those with limited income and resources
  - Medicare Savings Programs

- **Medicare Supplemental Insurance**
  - Private insurance that coordinates with Original Medicare
  - Also called Medigap or MedSup
Medicare Supplement Insurance

• Plans are standardized
  • All companies sell same plans (A,B,C,D,F,G,K,L,M,N)
  • Plan premiums vary between companies

• No Network

• Pay only after Original Medicare (Parts A & B)
  • Little or no out-of-pocket cost after monthly premium

• Guaranteed Issue
  • Open Enrollment- 6 months beginning with Part B effective date at age 65 or older
  • Special Circumstances- typically 63 days after loss of coverage

Check Out the Ohio Shopper’s Guide To Medicare Supplement Insurance at www.insurance.ohio.gov
Medicare 101

1. Primary Coverage

2. Secondary Coverage

3. Prescription Drug Coverage

Original Medicare
Part A and Part B

Secondary Insurance
GHI, MedSup, or Medicaid

RX Coverage
Part D or GHI
Medicare Part D

• Medicare’s Prescription Drug Coverage
  – Offered by private companies that contract with Medicare
  – Available two ways
    • Stand Alone Prescription Drug Plans (PDPs)
    • Available through Medicare Advantage Plans (MAPDs)
  – Initial enrollment is the same as Part B

• ALL people with Medicare can get Part D
  – May not need Part D if you have creditable coverage

• Open Enrollment October 15th- December 7th
  – Coverage begins January 1
  – Special enrollment times based on circumstance

• Review plans annually with OSHIIP or www.medicare.gov
2017 Low Income Subsidy
(Extra Help with Prescription Drug Costs)

- Reduced or NO Premium
- Reduced or NO Deductible
- No more than 15% copays

**NO DOUGHNUT HOLE**

Income:
- single- $1,528
- Married- $2,050

Resources:
- single- $14,100
- married- $28,150
Review Drug Plans Each Year!
(3 C’s of PDPs)

• **Convenience**
  – Network & Preferred Pharmacies
  – Mail Order Option

• **Coverage**
  – All plans have a different formulary
  – Take the formulary with you when seeing your physicians

• **Cost**
  – Know all possible costs!

Compare annually at [www.medicare.gov](http://www.medicare.gov)!
Part D Costs in 2018

- **Average Monthly Premiums**: $35
- **Annual Deductible**: $0-$405
- **Copays**: 25% or flat copay amounts based on formulary
- **Coverage Gap** (doughnut hole): $3,750-$7,508.75 in total drug costs
  - 65% Brand Name Discount
  - 56% Generic Discount
  - Gap will be closed in 2020
- **Catastrophic Coverage**: Approx. 5% copay after coverage gap

**Things to Consider**
- All plans have a different cost structure and formulary
- Costs based on individual drug needs and change annually
- Late enrollees may incur a 1% penalty for each month of delay
Medicare Options

Option 1

Original Medicare
Part A and Part B

+ Secondary Insurance
GHI, MedSup, or Medicaid

+ RX Coverage
Part D or GHI

Option 2

Medicare Advantage
(Part C)
1. Hospitalization,
2. Medical
3. Rx (MA-PD)

OR
Medicare Advantage

• Available to those
  – enrolled in Part A & B
  – That live within the plan’s service area (county)
  – No age or medical restrictions
    • Except ESRD

• Alternative to Original Medicare
  – Offered by private companies to replace Original Medicare
  – Plans types
    • HMO (Health Maintenance Organization)
    • PPO (Preferred Provider Organization)
  – Most plans include Part D benefit (MAPD)
  – Enrollees pay Part B premium and any other applicable costs
  – Networks, Premiums and Copays vary by plan
Medicare Advantage

• Initial Enrollment Period
  – 7 Months surrounding Medicare eligibility

• Open Enrollment **October 15th- December 7th**
  – Coverage begins January 1
  – Other enrollment times based on circumstances

• MA Annual Disenrollment Period
  – January 1st - February 14th (first 45 calendar days of the year)
  – May disenroll from a MA plan and return to Original Medicare with a Part D Plan
Moving Between Options

• Supplement to Medicare Advantage
  – Guaranteed Issue anytime enrollment is open

• Supplement to Supplement
  – No Guaranteed Issue
  – Can try anytime
    – no annual open enrollment period

• Medicare Advantage to Medicare Advantage
  – Guaranteed Issue anytime enrollment is open

• Medicare Advantage to Supplement
  – No Guaranteed Issue
  – Unless in a Special Enrollment Period
## At a Glance

<table>
<thead>
<tr>
<th></th>
<th>Medicare Supplement</th>
<th>Medicare Advantage</th>
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<tbody>
<tr>
<td><strong>Cost</strong></td>
<td>• Part B Premium</td>
<td>• Part B Premium</td>
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<tr>
<td></td>
<td>• Higher plan premium</td>
<td>• Lower plan premium</td>
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<td></td>
<td>• $150-$200+ monthly</td>
<td>• $0-$100/month</td>
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<td></td>
<td>• Little or no out of pocket cost when used</td>
<td>• Charged out of pocket cost as plan is used</td>
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<td><strong>Provider Choice</strong></td>
<td>• Any provider that accepts Medicare</td>
<td>• Plan will have a provider network. Cost will be higher</td>
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<td>• May have foreign travel emergency coverage</td>
<td>out of network</td>
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<td>• Check with plan for travel restrictions</td>
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<tr>
<td><strong>Considerations</strong></td>
<td>• Important to use any provider without network restrictions</td>
<td>• Willing to use network of providers</td>
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<td></td>
<td>• Can afford higher monthly premiums</td>
<td>• May have added benefits (vision, dental, hearing,</td>
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<td>fitness, etc.)</td>
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<td><strong>Drug Coverage Included?</strong></td>
<td>• No</td>
<td>• Yes</td>
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<tr>
<td></td>
<td>• Need to purchase separate Part D Plan</td>
<td>• Some plans available without drug coverage</td>
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Know Your Options!

Option 1

Original Medicare
Part A and Part B

Secondary Insurance
GHI, MedSup, or Medicaid

RX Coverage
Part D or GHI

OR

Option 2

Medicare Advantage
(Part C)

1. Hospitalization,
2. Medical
3. Rx (MA-PD)
New Medicare Cards

• Coming in 2018
• New Cards with new numbers
• “Guard Your Card”
Protect Yourself From Unscrupulous Sales Practices

• The following sales tactics are prohibited:
  – Door to Door Sales
  – Giving out cash gifts or gifts exceeding $15
  – High Pressure Sales Tactics
  – Misrepresenting a plan or giving incomplete information
  – Representing themselves as Medicare

• If you feel you have been victimized by an agent or a company
  – Get as much information as possible
    • Agents card, including name, address, phone
    • Company and plan information
  – Report the incident to the Ohio Dept. of Insurance at;
    • 1-877-727-6427 Healthcare Exchange Reports
    • 1-800-686-1527 All Other Reports
Thank you for your attention

Questions?

1-800-686-1578
www.insurance.ohio.gov

Medicare.gov
The Official U.S. Government Site for Medicare
1-800-MEDICARE
www.medicare.gov
www.mymedicare.gov

1-800-772-1213
www.socialsecurity.gov

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