

Pre-Retiree Academy Registering for Medicare

Overview of Medicare

- + Began in 1966
- + Single Payer system
- + 30-50% of commercial payers contract with Medicare
- + Insures citizen 65 years or older
- + Insures younger people with disability
- + End Stage Renal Disease (ESRD)
- + [https://en.wikipedia.org/wiki/Medicare_\(United_States\)](https://en.wikipedia.org/wiki/Medicare_(United_States))

Medicare Parts (A,B)

Part A

- + Covers inpatient hospital, skilled nursing
- + Facility care, Home Health and Hospice

Part B

- + Covers Doctor Visits, Office based testing, services
- + Laboratory, X-ray, and Ambulance services
- + Covers durable medical equipment (wheelchairs, hospital beds) and blood and medical supplies
- + Outpatient services



Medicare Parts (C,D)

- Part C

- Private Health

- + Health Maintenance Organizations (HMO's)- Require you to seek care in a specified network of hospitals and doctors

- + Preferred Provider Organizations (PPO's)-Allow members to obtain care from providers outside networks, at higher costs.

- + Private Fee-for-Service (PFFS)

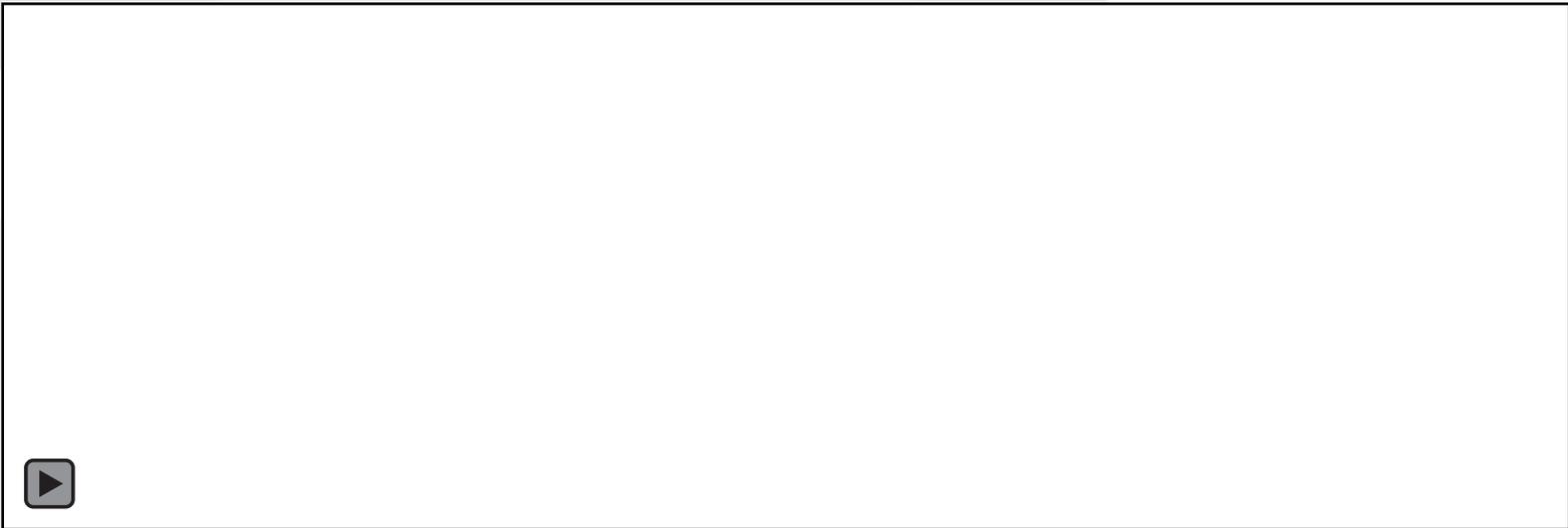
- Part D

- + Covers outpatient prescription drugs available through Medicare private drug plans or Medicare private health plans



Medicare Coverage Rules

- + Item or service must be reasonable and necessary for the diagnosis or treatment of illness or injury ; or to improve the functioning of a malformed body member, and
- + Not be statutorily excluded



Medicare – The Coverage Exclusions

- + Dental care
- + Cosmetic Surgery
- + Personal Care
- + Private duty nursing
- + Long-term care
- + Alternative Medicine - (including experimental procedures and treatments, acupuncture, and chiropractic services, except when manipulation of the spine is medically necessary)
- + Care outside of the United States
- + Hearing aids (except certain implants for extreme hearing loss)
- + Eyeglasses (except after cataract surgery)
- + Custodial care (unless skilled nursing care is provided)

Eligibility

- + Must be a U.S. citizen or have been a permanent legal resident for 5 continuous years and be 65 years or older: or
- + Under 65, disabled and have been receiving Social Security Disability Insurance (SSDI) for at least 24 months
- + Receiving continuing dialysis for permanent kidney failure or need a kidney transplant; or
- + Have Amyotrophic Lateral Sclerosis (ALS - Lou Gehrig's disease)



Medicare Advantage / MediGap Policies



- + Medicare does not cover all the cost as noted above
- + Most people on Medicare purchase supplemental insurance also know as a MediGap policy which fills in the “gaps”
- + Medicare Advantage plans are an alternative to Medicare supplements
- + When a Medicare beneficiary selects a Medicare Advantage plan they no longer need a supplement

How Medicare Advantage Works

A private health organization contracts with Medicare for a certain plan type and service area (United Healthcare, Aetna, Humana, Cigna)

The plan types include Health Maintenance Organization (HMO), Preferred Provider Organization (PPO), Private Fee for Service (PFFS), Medicare Savings Account and Special Needs Plan

Plans may be local and designate certain counties in a particular state as the service area

Plans may be regional but must be a PPO and cover the entire region with a uniform benefit package (There are 26 Medicare Advantage regions)



How Medicare Advantage Works...

- + Medicare Advantage plans must cover everything original Medicare covers and beginning in 2006, and in general, must also offer Part D benefits as well
- + Plans are allowed to enhance benefits above and beyond original Medicare, however, premium increases or increases in cost sharing can only occur in January after approval from CMS (Centers for Medicare & Medicaid Services) and advance notice to enrollees.

What Should You Consider When Deciding to Enroll in Medicare Part A?

- + Most people don't pay a premium for Part A
- + You can no longer contribute to a Health Savings Account (HSA) if you have Medicare
- + You're not eligible for Marketplace premium tax credits and cost-sharing reductions (CSRs) that lower your Marketplace plan deductible, copayment, and coinsurance when you have premium-free Part A
- + If you aren't eligible for premium-free Part A, and you don't buy it when you're first eligible, your monthly premium may go up 10%
- + You'll have to pay the higher premium for twice the number of years you could have had Part A, but didn't sign up

What Should You Consider When Deciding to Enroll in Medicare Part B ?

- + Most people pay a Part B monthly premium
 - + If you get Social Security or Railroad Retirement Board (RRB) benefits, it will get deducted automatically from your benefit payment
- + If you do not get Social Security or Railroad Retirement Board (RRB) benefits, there are four ways to pay your premium bill
 - Online by credit card or debit card
 - Pay directly from your savings or checking account through your bank's online bill payment service
 - Sign up for Medicare Easy Pay
 - Mail your payment to Medicare
- + Amount depends on income from 2 years ago
- + **You don't have to enroll in Part B, but if you get it later, you may have to pay a lifetime late enrollment penalty**
- + Veterans Affairs (VA) benefits don't work with Medicare
- + Visit [VA.gov](https://www.va.gov). If you have VA coverage, you won't be eligible to enroll in Part B using the Special Enrollment Period (SEP).

When Must You Enroll in Medicare Part B?

- + If you want to buy a Medicare Supplement Insurance (Medigap) policy, you must have Part A and Part B
- + If you want to join a Medicare Advantage (MA) Plan you must have Part A and Part B
- + If you're eligible for TRICARE for Life (TFL) or Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA)
- + If your employer coverage requires you or your spouse/household member to have it (less than 20 employees)
 - + Talk to your employer or union benefits administrator

Enrolling in Medicare—Automatic Enrollment

If you're already getting Social Security or RRB benefits for at least 4 months before you turn 65, you'll be automatically enrolled in Medicare

- You'll get your IEP package in the mail, along with your Medicare card, about 3 months before you turn 65
- Coverage begins the first day of the month you turn 65

You may qualify for Medicare based on a disability

- You must be entitled to Social Security Disability Insurance (SSDI) benefits for 24 months
- On the 25th month, you're automatically enrolled in Part A and B
- If you have ALS (Amyotrophic Lateral Sclerosis, also called Lou Gehrig's disease) there's no waiting period

NEW Special Medicare Notice When You Turn 65

- + Mailed to you a few months before you turn 65 to inform about
 - + Medicare eligibility and changing health coverage
 - + Next steps
 - + When to enroll in Medicare
 - + Impact of keeping Marketplace coverage if enrolled in Medicare
- + [Marketplace.cms.gov/applications-and-forms/notice-for-consumers-turning-65.PDF](https://www.Marketplace.cms.gov/applications-and-forms/notice-for-consumers-turning-65.PDF)

Ways to Find Out More

Medicare:

- + <https://www.medicare.gov/plan-compare/>
- + <https://www.medicare.gov/>

Understanding Part D

- + <https://www.medicare.gov/drug-coverage-part-d>

Difference between Medicare & Medicare Advantage

- + <https://www.bcbsm.com/medicare/help/faqs/works/difference-original-medicare-advantage.html>















































