

# Medicare 101

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## WELCOME TO YOUR 2021 MEDICARE 101 GUIDE

The information in this guide is designed to help you learn about and understand your Medicare options. Discover how Medicare works and the plan options available to you. Our goal is to be there for you during your decision-making and enrollment process.

### ELIGIBILITY

Medicare is a federal program that offers health insurance to American citizens and other eligible individuals.

#### WHO CAN GET MEDICARE?

- U.S. citizens and legal residents
- Legal residents must live in the U.S. for at least 5 years in a row, including the 5 years prior to applying for Medicare.

#### YOU MUST ALSO MEET ONE OF THE FOLLOWING REQUIREMENTS:

- Age 65 or older
- Younger than 65 with a qualifying disability
- Any age with a diagnosis of end-stage renal disease or ALS

### WE'RE HERE TO HELP

**Your Place Insurance**

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## HOW TO USE THIS GUIDE

There is a lot to learn about Medicare, but it doesn't have to be overwhelming.

This guide simply explains Medicare and the health care plan options available to Florida residents. It can give you the knowledge to help you make informed decisions about your coverage—and offer helpful suggestions to consider as you move ahead with your choices.

Take the time to go over each section. Make notes and write down any questions you may have. Remember, we are here to answer your questions and help you every step of the way.

## WHAT IS MEDICARE?

Created in 1965, Medicare started with just two parts—Part A and Part B. Later on, additional parts—Part C and Part D—were added as the needs of Medicare beneficiaries changed. It is important to understand that Original Medicare (Part A and Part B) does not cover all of your medical expenses.

## HOW DO I ENROLL?

You should be automatically enrolled if you are receiving Social Security or Railroad Retirement Board benefits when you become eligible. You will receive your Medicare card in the mail.

If you are not receiving benefits, you need to sign up for Medicare when you become eligible. Go to [SSA.gov/Medicare](https://ssa.gov/Medicare) to enroll online, or call or visit your local Social Security office.

## INITIAL ENROLLMENT PERIOD

Your Initial Enrollment Period (IEP) is a seven-month timespan. It includes:

- ✓ The three months BEFORE the month you turn 65
- ✓ Your birth month
- ✓ The three months AFTER your birth month

If you are turning 65,  
the best time to  
enroll in Medicare  
**is during the three  
months before your  
65th birthday**  
to help ensure your  
Medicare coverage  
will be effective on the  
date you turn 65.

## WHAT YOU NEED TO ENROLL

- ✓ Your Medicare card
- ✓ Your driver's license
- ✓ A list of your providers and prescriptions
- ✓ Legal paperwork showing POA if applicable

Keep in mind that you must enroll in Medicare before you can purchase other coverage that can help pick up where Medicare leaves off.

## WHAT ARE THE COVERAGE CHOICES?

Original Medicare (Parts A & B) is provided by the federal government. It helps pay for hospital stays and doctor visits, but it does not cover everything.

You may add coverage by enrolling in one or more private Medicare or Medicare-related plans.

### MEDICARE PART A

#### Hospital Insurance for Inpatient Stays and More

- Usually there is no monthly premium for Part A coverage.
- You pay a Part A deductible and co-insurance, which are out-of-pocket expenses, when you receive inpatient hospital care. You are responsible for paying these expenses—unless you have a separate insurance policy to cover them.

### MEDICARE PART B

#### Medical Insurance for Doctor Services and More

- Part B is optional coverage.
- You usually pay a monthly Part B premium.
- For most services, you pay a calendar year Part B deductible and co-insurance—unless you have an additional plan that covers those expenses.

### MEDICARE PART C

#### Medicare Advantage Plan that Combines Medicare Part A and Part B

- Medicare Advantage (MA) plans are health plans offered by private organizations that contract with Medicare.
- They combine all the benefits of Medicare Part A and Part B and usually include prescription drug coverage (Part D).
- Many plans include additional benefits like dental, hearing and vision.
- Premiums and deductibles vary by plan.

### MEDICARE PART D

#### Medicare-approved Prescription Drug Coverage

- Part D is sold only through private organizations that are contracted with Medicare.
- Coverage can be purchased either as a “stand-alone” prescription drug plan (PDP) or may be included with a Part C Medicare Advantage plan. Plans that combine medical coverage and prescription drug coverage are called Medicare Advantage Prescription Drug (MA-PD) plans.

## MEDICARE SUPPLEMENT PLANS

- Medicare Supplement plans are health plans offered by private organizations that contract with Medicare.
- They help you pay medical costs not covered by Medicare Parts A and B and are often paired with a Part D prescription drug plan.
- Most plans allow you to choose any doctor, specialist or hospital that accepts Medicare.
- Benefits provided and premium amounts depend on the plan you choose, your age, tobacco use and county of primary residence.

# QUICK TIPS

## 1. INITIAL ENROLLMENT PERIOD

- You can choose Original Medicare (Parts A & B). Part A is hospital coverage, and Part B is medical coverage. Original Medicare is provided by the federal government. Benefits and coverage are the same across the country, or you can join a Medicare Advantage plan (Part C). Medicare Advantage plans combine Part A and Part B coverage. Many also include prescription drug coverage (Part D) and offer additional benefits. Plans are offered by private insurance companies.

## 2. YOU WILL PAY A SHARE OF YOUR COSTS

- Neither Original Medicare nor a Medicare Advantage plan will pay for everything. You are responsible for monthly premiums as well as out-of-pocket costs, such as deductibles, co-pays and co-insurance.

## 3. PROTECTION FROM HIGH OUT-OF-POCKET COSTS IS AVAILABLE

- Medicare Advantage plans put a cap on your out-of-pocket costs for covered medical services. It's called the "annual out-of-pocket maximum," and it provides built-in financial protection. There is no out-of-pocket cap with Original Medicare.
- Medicare supplement insurance plans help pay some out-of-pocket costs not paid by Original Medicare, like deductibles and co-insurance. (Plans are sold by private insurance companies.) You do not need and cannot use a Medicare supplement insurance plan if you have a Medicare Advantage plan.

## 4. THERE ARE THREE WAYS TO GET DRUG COVERAGE

- You may add a standalone prescription drug plan (Part D) to Original Medicare, you may enroll in a Medicare Advantage plan that includes prescription drug coverage (plans are offered by private insurance companies) or you may get a Part D plan along with a Medicare supplement policy.

## 5. YOU HAVE MANY OPTIONS

- Medicare Advantage plans and prescription drug plans vary in terms of coverage and cost.
- Medicare supplement insurance plans are standardized and are the same nationwide, except in Minnesota, Wisconsin and Massachusetts.

## 6. IT IS WISE TO REVIEW YOUR CHOICES EVERY YEAR

- Medicare Open Enrollment happens each year from October 15 to December 7. You may change your coverage choices during this time if you decide to. You may switch from one Medicare Advantage plan or prescription drug plan to another. You may also switch from Original Medicare to a Medicare Advantage plan, or vice versa. Changes go into effect on January 1.

## 7. YOU MAY ENROLL OR MAKE CHANGES AT OTHER TIMES

- Medicare provides Special Enrollment Periods for qualifying life events. You may also sign up for a 5-star plan throughout the year. Visit [Medicare.gov](https://www.medicare.gov) for a complete list of qualifying events.



# KEY TERMS

## CO-INSURANCE

The costs that you and the health insurance plan pay are split on a percentage basis.

For example, you might pay 20 percent of the total allowed cost of a service and the plan would pay the remaining 80 percent.

## CO-PAY

The fixed amount you pay at the time you receive a covered service.

For example, you might pay \$20 when you visit the doctor or \$12 when you fill a prescription.

## DEDUCTIBLE

A set amount you pay out of pocket for covered services each year before your plan begins to pay.

## OUT-OF-POCKET MAXIMUM

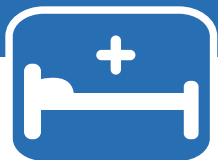
The maximum amount you pay during a policy period (usually a year). This amount does not include your premium or the cost of any services that are not covered by your plan.

After you reach your out-of-pocket (OOP) maximum, your plan pays 100% of the allowed amount of covered services for the rest of the policy period.

## PREMIUM

The fixed amount you pay your health insurance or plan for Medicare coverage. You may pay your premium to Medicare, to a private insurance company or both, depending on your coverage. Most premiums are charged monthly.





# MEDICARE PART A: HOSPITAL INSURANCE

## MEDICARE PART A HELPS PAY FOR HOSPITAL STAYS & INPATIENT CARE

You cannot be denied Part A coverage. You may go to any qualified health care provider in the United States who participates in the Medicare program and is accepting Medicare patients.

### Medicare Part A covers hospital stays and inpatient care, including:

- A semi-private room
- Your hospital meals
- Skilled nursing services
- Care in special units, such as intensive care
- Drugs, medical supplies and medical equipment used during an inpatient stay
- Lab tests, X-rays and medical equipment as an inpatient
- Operating room and recovery room services
- Some blood transfusions in a hospital or skilled nursing facility
- Inpatient or outpatient rehabilitation services after a qualified inpatient stay
- Part-time, skilled care for the homebound
- Hospice care for the terminally ill, including medications to manage symptoms and control pain

### Part A costs in 2021:

#### Premium

- \$0 per month for most people
- Up to \$458 per month if neither you nor your spouse paid Social Security taxes for at least 10 years (40 quarters)

#### Deductible

- \$1,484 per benefit period

#### Co-pay for Hospital Stays

- \$0 for days 1–60
- \$371 a day for days 61–90
- \$742 a day for each lifetime reserve

#### Co-pay for Skilled Nursing Facility Stays

- \$0 for days 1–20
- \$185.50 a day for days 21–100
- All costs for each day after day 100 of the benefit period

#### Hospice Care

- Co-pay up to \$5 for each prescription to manage symptoms
- Co-insurance for inpatient respite care to give primary caregiver rest or time off

**Part A coverage and costs are based on benefit periods.** A benefit period begins the day you are admitted to the hospital. It ends when you have been out for 60 days in a row.





# MEDICARE PART B: MEDICAL INSURANCE

## MEDICARE PART B HELPS PAY FOR DOCTOR VISITS AND OUTPATIENT CARE

You cannot be denied Part B coverage. You may go to any doctor or qualified health care provider in the United States who participates in the Medicare program and is accepting Medicare patients.

### Medicare Part B covers doctor visits and outpatient care, including:

- Doctor visits, including in the hospital
- An annual wellness visit and preventive services, like flu shots and mammograms
- Lab services, like blood tests
- X-rays and some other diagnostic tests
- Some health programs, like smoking cessation, obesity counseling and cardiac rehab
- Physical therapy, occupational therapy and speech-language pathology services
- Diabetes screenings, diabetes education and certain diabetes supplies
- Mental health care
- Durable medical equipment for use at home, like wheelchairs and walkers
- Ambulatory surgery center services
- Ambulance and emergency room services
- Skilled nursing care and health aide services for the homebound on a part-time or intermittent basis

### Part B costs in 2021:

#### **You pay \$144.60 or higher (depending on income) if:**

- You enroll in Part B for the first time in 2020
- You do not get Social Security benefits
- You are directly billed for your Part B premiums
- You have Medicare and Medicaid, and Medicaid pays your premiums
- Your modified adjusted gross income as reported on your IRS tax return from 2 years ago is above a certain amount  
(See *income chart on page 10.*)

#### **Premium (2020)**

**Deductible** • \$203 per year

#### **Co-insurance**

- 20% of the Medicare-approved amount for most covered services after you pay the deductible, with no annual out-of-pocket maximum.

**Part B may charge a premium penalty if you do not sign up when you are first eligible, unless you qualify for a Special Enrollment Period.**



## MEDICARE PART B: CONTINUED

### MEDICARE PART B PREMIUM INCOME CHART

If you are in one of these five groups, here is what you will pay:

If your yearly income in 2018 was:			You Pay (in 2020)
File individual tax return	File joint tax return	File married & separate tax return	
\$87,000 or less	\$174,000 or less	\$87,000 or less	\$144.60
above \$87,000 up to \$109,000	above \$174,000 up to \$218,000	n/a	\$202.40
above \$109,000 up to \$136,000	above \$218,000 up to \$272,000	n/a	\$289.20
above \$136,000 up to \$163,000	above \$272,000 up to \$326,000	n/a	\$376.00
above \$163,000 and less than \$500,000	above \$326,000 and less than \$750,000	above \$87,000 and less than \$413,000	\$426.70
\$500,000 or above	\$750,000 or above	\$413,000 or above	\$491.16

The information in this chart can be found at [Medicare.gov/your-medicare-costs/medicare-costs-at-a-glance](https://www.medicare.gov/your-medicare-costs/medicare-costs-at-a-glance). If you have questions about your Part B premium, call Social Security at 1-800-772-1213. TTY users can call 1-800-325-0778. If you pay a late enrollment penalty, these amounts may be higher.



# MEDICARE PART C: MEDICARE ADVANTAGE

## MEDICARE ADVANTAGE (PART C) IS ANOTHER WAY TO GET YOUR MEDICARE BENEFITS

There are different types of Part C plans. Some plans have provider networks you need to use. These plans are offered by private insurance companies approved by Medicare. Your choices vary depending on where you live. Coverage and costs beyond the standards set by Medicare vary from plan to plan. You must be enrolled in both Part A and Part B to be eligible for a Part C plan.

### All Medicare Advantage plans cover:

- All the benefits of Part A (except hospice care, which is still covered by Part A)
- All the benefits of Part B

### Most Medicare Advantage plans cover:

- Prescription drugs

### Medicare Advantage plans may offer additional benefits, such as:

- Dental exams, cleanings and X-rays
- Eye exams, eyeglasses and corrective lenses
- Hearing tests and hearing aids
- Wellness programs, fitness membership and worldwide emergency coverage

### Part C costs in 2020:

#### Premium

- Plan premiums vary widely and can change from year to year.
- You continue to pay your Part B premium to Medicare.

#### Deductible

- Some plans have deductibles, and others do not. Plans may charge deductibles for drug benefits only.
- Amounts vary from plan to plan.

#### Co-pay

- Many plans charge co-pays for doctor visits, prescriptions, etc.
- Amounts vary from plan to plan.

#### Co-insurance

- Plans may set co-insurance terms for certain services
- Costs during the Part D coverage gap may apply.

**Medicare Advantage plans put a cap on your out-of-pocket costs for covered medical services.** This offers financial protection. The maximum is \$6,700 in 2020, but plans may set lower limits. There is no limit with Original Medicare.



# MEDICARE PART D: PRESCRIPTION DRUG

## MEDICARE PART D HELPS WITH THE COST OF PRESCRIPTION DRUGS

You can get drug coverage with a standalone Part D plan or as part of a Medicare Advantage plan (Part C). Some plans have pharmacy networks and mail order pharmacies that offer discounted prices.

Plans are offered by private insurance companies approved by Medicare. Your choices vary depending on where you live. Coverage and costs beyond the standards set by Medicare vary from plan to plan. You must be enrolled in Part B to be eligible for a Part D plan.

### Medicare Part D plans cover:

- Types of drugs most commonly prescribed for Medicare beneficiaries as determined by federal standards.
- Specific brand name and generic drugs on the plan formulary, or list of drugs.

### Medicare Part D coverage stages

Part D coverage is broken into four stages. You pay a share of the cost for your drugs in each stage. The stages progress based on how much you and your plan pay, up to set limits. The cycle restarts at the beginning of each year.

1. Annual deductible: You pay 100% of the cost up to the plan deductible amount.
2. Initial coverage: You pay co-pays or co-insurance up to a set limit (\$4,020 in 2020).
3. Coverage gap (donut hole): You pay a percentage of the cost up to an out-of-pocket limit (\$6,350 in 2020).
4. Catastrophic coverage: You pay reduced co-pays for the rest of the year.

### Part D costs in 2021:

#### Premium

- Plan premiums vary widely and can change from year to year.
- You may pay a premium penalty if you are late to enroll in Part D.
- Some Part C plans include drug coverage at no additional premium.

#### Deductible

- The maximum deductible in 2021 is \$455.
- Not all plans have a deductible.
- Plans may apply separate deductibles for different formulary tiers.

#### Co-pay

- Plans may charge co-pays for prescriptions and refills. Amounts vary.

#### Co-insurance

- Some plans may set co-insurance rates for certain drugs or drug tiers.
- In the coverage gap you will pay 37% of the price for generic drugs and 25% of the price for brand name drugs.

**Part D may charge a premium penalty if you do not sign up when you are first eligible, unless you qualify for a Special Enrollment Period.**



## MEDICARE PART D: CONTINUED

### PART D MONTHLY PREMIUM

The chart below shows your estimated prescription drug plan monthly premium based on your income. If your income is above a certain limit, you will pay an income-related monthly adjustment amount in addition to your plan premium. The information in the chart above can be found at: [Medicare.gov/your-medicare-costs/medicare-costs-at-a-glance](https://www.medicare.gov/your-medicare-costs/medicare-costs-at-a-glance).

If your yearly income in 2018 was:			You Pay (in 2020)
File individual tax return	File joint tax return	File married & separate tax return	
\$87,000 or less	\$174,000 or less	\$87,000 or less	Your plan premium
above \$87,000 up to \$109,000	above \$174,000 up to \$218,000	n/a	\$12.20 + your plan premium
above \$109,000 up to \$136,000	above \$218,000 up to \$272,000	n/a	\$31.50 + your plan premium
above \$136,000 up to \$163,000	above \$272,000 up to \$326,000	n/a	\$50.70 + your plan premium
above \$163,000 and less than \$500,000	above \$326,000 and less than \$750,000	above \$87,000 and less than \$413,000	\$70.00 + your plan premium
\$500,000 or above	\$750,000 or above	\$413,000 or above	\$76.40 + your plan premium

### 2021 PART D NATIONAL BASE BENEFICIARY PREMIUM – \$33.06

This figure is used to estimate the Part D late enrollment penalty and the income-related monthly adjustment amounts listed in the table above. The national base beneficiary premium amount can change each year. See your Medicare & You handbook or visit [Medicare.gov](https://www.Medicare.gov) for more information.

For more information about Medicare costs, visit [Medicare.gov](https://www.Medicare.gov).





# MEDICARE SUPPLEMENT INSURANCE: MEDIGAP

## MEDICARE SUPPLEMENT INSURANCE HELPS PAY SOME OUT-OF-POCKET COSTS THAT COME WITH ORIGINAL MEDICARE

There are 10 Medicare supplement insurance plans standardized by the federal government. Each is labeled with a letter. Every plan with the same letter offers the same benefits, no matter what state it is offered in or by which insurance company. Massachusetts, Minnesota and Wisconsin have different plans.

The level of coverage varies. There are standardized plans that cover all your Medicare deductibles, co-payments and co-insurance, while others leave some costs for you to pay on your own. Medicare supplement plans provide nationwide coverage.

### Medicare supplement insurance helps with:

- Part A and Part B deductibles
- Co-pays and co-insurance
- Provider excess charges
- An additional 365 days of hospital care during your lifetime, beyond your Medicare lifetime reserve days
- Blood transfusions (first 3 pints)
- Foreign travel emergencies (most plans)

### Medicare supplement insurance costs:

#### Premium

- Insurance companies set their own plan premiums.
- Plans that provide more coverage generally have higher premiums.
- Premiums may vary from insurer to insurer, even if the plans offer the exact same coverage.
- Premiums may change from year to year.

**You can request enrollment in a Medicare supplement plan at any time, but you may be denied coverage or charged more based on your health history if you enroll after your Medicare Supplement Open Enrollment Period.**



# MEDICARE SUPPLEMENT INSURANCE: CONTINUED

## HOW DO I COMPARE MEDIGAP POLICIES?

The chart below shows basic information about the different benefits that Medigap policies cover for 2020. If a percentage appears, the Medigap plan covers that percentage of the benefit, and you're responsible for the rest.

Medicare Supplement Insurance (Medigap) Plans										
Benefits	A	B	C	D	F*	G*	K	L	M	N
Medicare Part A co-insurance and hospital costs (up to an additional 365 days after Medicare benefits are used)	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Medicare Part B co-insurance or co-payment	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%***
Blood (first 3 pints)	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%
Part A hospice care co-insurance or co-payment	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%
Skilled nursing facility care co-insurance			100%	100%	100%	100%	50%	75%	100%	100%
Part A deductible		100%	100%	100%	100%	100%	50%	75%	100%	100%
Part B deductible			100%		100%					
Part B excess charges				100%	100%					
Foreign travel emergency (up to plan limits)			80%	80%	80%	80%			80%	80%

Out-of-pocket limit in 2021:	
K**	L**
\$6,220	\$3,110

\* Plans F and G also offer a high-deductible plan in some states. With this option, you must pay for Medicare-covered costs (co-insurance, co-payments, and deductibles) up to the deductible amount of \$2,370 in 2021 before your policy pays anything. (Plans C and F won't be available to people who are newly eligible for Medicare on or after January 1, 2020.)

\*\*For Plans K and L, after you meet your out-of-pocket yearly limit and your yearly Part B deductible (\$203 in 2021), the Medigap plan pays 100% of covered services for the rest of the calendar year.


















\*\*\* Plan N pays 100% of the Part B co-insurance, except for a co-payment of up to \$20 for some office visits and up to a \$50 co-payment for emergency room visits that don't result in an inpatient admission.

# How Much Coverage Do I Need?

## COVERAGE COMBINATIONS: YOUR OPTIONS

### MEDICARE IS NOT ONE-SIZE-FITS-ALL

You can combine different Medicare parts and plans to customize your coverage. There are seven possible combinations.

1.			Original Medicare (Parts A & B) or just Part A or just Part B
2.		 + 	Original Medicare (Parts A & B) <b>plus</b> a standalone Part D plan
3.		 +  + 	Original Medicare (Parts A & B), a standalone Part D plan <b>plus</b> a Medicare supplement plan
4.		 + 	Original Medicare (Parts A & B) <b>plus</b> a Medicare supplement plan
5.			A Medicare Advantage (Part C) plan with built-in drug coverage
6.			A Medicare Advantage (Part C) plan without drug coverage
7.	 + 		A Medicare Advantage (Part C) plan without drug coverage <b>plus</b> a standalone Part D plan; only works with certain Medicare Advantage plan types

# HELP WITH MEDICARE COSTS

## YOU MAY QUALIFY FOR HELP IF YOU HAVE A LOW INCOME AND FEW ASSETS

Income includes money you get from retirement benefits or other money that you report for tax purposes. Income eligibility levels vary by state and program.

The following programs offer financial assistance for people who qualify. There may also be other assistance programs in your state.

### MEDICAID

Medicaid provides health care coverage for people and families with limited incomes. It may also offer some services not covered by Medicare. Each state creates its own program, so contact your state Medicaid office for more information.

If you qualify for both Medicare and Medicaid, you are “dual eligible.” Sometimes the two programs can work together to cover most of your health care costs.

### EXTRA HELP

The Extra Help program helps eligible people pay for some or all of their Medicare Part D premiums, deductibles and co-pays.

### MEDICARE SAVINGS PROGRAMS

Medicare Savings Programs help pay some or all Part A and Part B premiums, deductibles and co-insurance. You automatically qualify for the Extra Help program if you qualify for a Medicare Savings Program.

### PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY (PACE)

PACE combines medical, social and long-term care services for frail elderly people who live in the community, not in a nursing home. (This program is not available in all states.)

**Do not assume you do not qualify for financial help.**

Visit [Medicare.gov](https://www.Medicare.gov) to learn more about financial assistance programs. You may also contact your local Social Security office, Medicaid office or State Health Insurance Assistance Program for help.



**TIP:**

Visit page 19 for more helpful information and websites.

# HOW DOES MY OTHER INSURANCE WORK WITH MEDICARE?

When you have other insurance and Medicare, there are rules for whether Medicare or your other insurance pays first.

If you have retiree insurance from your or your spouse's former employment:

**Medicare pays first.**

If you are 65 or older, have group health plan coverage based on your or your spouse's current employment and the employer has 20 or more employees:

**Your group health plan pays first.**

If you are 65 or older, have group health plan coverage based on your or your spouse's current employment and the employer has fewer than 20 employees:

**Medicare pays first.**

If you are under 65 and have a disability, have group health plan coverage based on your family member's current employment and the employer has 100 or more employees:

**Your group health plan pays first.**

If you are under 65 and have a disability, have group health plan coverage based on your or a family member's current employment and the employer has fewer than 100 employees:

**Medicare pays first.**

If you have Medicare because of End-Stage Renal Disease (ESRD):

**Your group health plan will pay first for the first 30 months after you become eligible to enroll in Medicare. Medicare will pay first after this 30-month period.**

**Note:** In some cases, your employer may join with other employers or unions to form or sponsor a multiple-employer plan. If this happens, the size of the largest employer/union determines whether Medicare pays first or second.

## NOTES/QUESTIONS:



# MORE INFORMATION

## MEDICARE HELPLINE

Call for questions about Medicare and detailed information about plans and policies in your area.  
1-800-MEDICARE (1-800-633-4227)  
TTY 1-877-486-2048  
(24 hours a day, 7 days a week)

## MEDICARE.GOV

The Medicare website provides information and offers online tools to find and compare Part D plans, Medicare Advantage plans and Medicare supplement insurance plans.

## MEDICARE & YOU

You may request the official government Medicare handbook when you call the Medicare Helpline, or you can download it at [Medicare.gov](https://www.medicare.gov).

## SOCIAL SECURITY ADMINISTRATION

Get answers to questions about Medicare eligibility and enrollment, Social Security retirement benefits or disability benefits. You can also ask about your eligibility for financial help.  
1-800-772-1213 | TTY 1-800-325-0778  
[SSA.gov/Medicare](https://www.ssa.gov/Medicare)

## ADMINISTRATION ON AGING

Discover local, state and community-based organizations that serve older adults and their caregivers.  
1-800-677-1116 | TTY 711  
[Eldercare.gov](https://www.eldercare.gov)

## YOUR CURRENT HEALTH PLAN

Your health plan's customer service center should be able to answer questions you have about your current coverage. Find the number on the back of your member ID card.

## AARP.ORG

AARP® provides information about Medicare, as well as other programs and services available to people as they age.

## MEDICAREMADECLEAR.COM

Watch videos, sign up for the newsletter, take quizzes, find helpful tools and get answers to your Medicare questions.

## MEDICAID.GOV

Medicaid provides health coverage to millions of Americans, including eligible low-income adults, children, pregnant women, elderly adults and people with disabilities. Learn more about eligibility, benefits and how to apply.

## STATE HEALTH INSURANCE ASSISTANCE PROGRAM (SHIP)

Your State Health Insurance Assistance Program offers free counseling and can help with questions about buying insurance, choosing a health plan and your rights and protection under Medicare.  
[shiptacenter.org](https://www.shiptacenter.org)

## NATIONAL HOSPICE AND PALLIATIVE CARE ORGANIZATION

Learn about hospice care and hospice programs where you live. Your doctor or other health care provider may also be able to help you find local services.  
[NHPCO.org](https://www.nhpco.org)

## STEPS TO FINDING MEDICARE COVERAGE THAT IS A GOOD FIT FOR YOU:

- ✓ **Learn about your choices.** Explore [Medicare.gov](https://www.Medicare.gov) for more information about Medicare, your choices and additional resources.
- ✓ **Understand your needs.** Think about how you use health care to help focus on the type of coverage that may work best for you.
- ✓ **Find plans in your area.** Go to [Medicare.gov](https://www.Medicare.gov) to get a list of plans available where you live and details about coverage and costs.
- ✓ **Compare your plan options.** Use the worksheet on the next page to compare plans based on your needs.
- ✓ **Select a plan.** Enroll online, find an agent, or call the plan directly.



# ENROLLING IN MEDICARE: WORKSHEET

## INITIAL ENROLLMENT PERIOD

**Your Initial Enrollment Period (IEP) is seven months long.** It includes your 65th birthday month plus the three months before and the three months after. It begins and ends one month earlier if your birthday is on the first. You may enroll in Part A, Part B or both. You may also choose to join a Medicare Advantage plan (Part C) or a prescription drug plan (Part D).

1	2	3	4 (Turning 65)	5	6	7
Month	Month	Month	Your Birth Month	Month	Month	Month

### EXAMPLE

1	2	3	4 (Turning 65)	5	6	7
Month	Month	Month	Your Birth Month	Month	Month	Month
Oct.	Nov.	Dec.	January	Feb.	Mar.	Apr.

**Are you eligible for Medicare due to disability?** Your 7-month IEP includes the month you receive your 25th disability check plus the 3 months before and the 3 months after

## GENERAL ENROLLMENT PERIOD

**You may use the General Enrollment Period (GEP) to enroll in Medicare Part A, Part B or both if you miss your IEP.** The GEP happens every year from January 1 to March 31. You may also choose to join a Medicare Advantage plan or a prescription drug plan from April 1 to June 30 the same year.

JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUN
GEP for Medicare Part A, Part B or Both			GEP for Medicare Part C or Part D		

## MEDICARE SUPPLEMENT OPEN ENROLLMENT PERIOD

**Your Medicare supplement open enrollment is six months long.** It begins the month you are 65 or older and are enrolled in Medicare Part B. You cannot be denied coverage or charged more based on your health history if you enroll during your open enrollment. Some states may allow for additional Open Enrollment Periods.

### NOTES/QUESTIONS:



## ENROLLING IN MEDICARE: CONTINUED

### SPECIAL ENROLLMENT PERIOD: WORKING PAST 65

You may qualify for a Special Enrollment Period (SEP) to enroll in Part A, Part B or both **without penalty** for up to eight months after the month your (or your spouse's) employment or employer coverage ends, whichever comes first. You may join a Medicare Advantage plan or prescription drug plan up to two full months after the same event, if you are eligible.

You may want to enroll in just Part A during your IEP if you work past age 65 and have employer coverage. Check with your benefits manager before you decide.

### LATE ENROLLMENT PENALTIES

**It is important to know your enrollment dates and to enroll on time.** The following penalties could apply if you do not, unless you qualify for a SEP or another exception.

#### PART A

People who pay a premium (most do not) could pay an additional 10% of the premium amount. The penalty is charged every month for twice the number of years enrollment was delayed.

#### PART B

You could pay an additional 10% of the premium amount for each full 12-month period enrollment is delayed. The penalty is charged every month for as long as you have Part B.

#### PART D

You could pay an additional 1% of the average Part D premium for each month you delay enrollment. The penalty is charged every month for as long as you are enrolled in Part D.

### MEDICARE SUPPLEMENT INSURANCE

You could be denied coverage or charged a higher premium based on your health history.

#### NOTES/QUESTIONS:

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**Medicare Open Enrollment is October 15 to December 7 every year.** During this time you may join, switch or drop a Medicare Advantage plan (Part C) or a prescription drug plan (Part D).

**You may join, switch or drop a Medicare Advantage plan or a prescription drug plan outside of Medicare Open Enrollment if you have a qualifying event, such as moving or losing other health insurance. In general, you have two months after the month of a qualifying event to make plan changes.**

**Two months from the date above is:**

**Do I need to make plan changes?** (circle one)      **YES**      **NO**

**You may choose to drop a Medicare Advantage plan January 1 to February 14 every year.** If you do, your coverage will automatically switch to Original Medicare and you may want to add a standalone prescription drug plan, a Medicare supplement plan or both.

## NOTES/QUESTIONS:



# PLAN COMPARISON: WORKSHEET

## COMPLETE A COLUMN FOR EACH PLAN YOU ARE CONSIDERING

In the top section, check off which benefits each plan provides. In the bottom section, fill in the cost for each item. You can get coverage and cost information from plan websites or materials.

	Plan 1	Plan 2	Plan 3
Insurance Company			
Name of Plan			
Type of Plan			
<b>Compare Coverage</b>			
Current Physician	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Current Prescriptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nurse Phone Line	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hearing Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dental Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vision Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chiropractic Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTC Allowance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Podiatry Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fitness Benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Compare Costs</b>			
Original Medicare Costs			
Monthly Plan Premium			
Emergency Costs			
Estimated Monthly Co-pays/Co-Insurance			
Annual Medical Deductible			
Annual Out-of-pocket Maximum			
Annual Prescription Drug Deductible			
Estimated Monthly Prescription Drug Costs			



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