What is Medicare and who is it for?

Medicare is the federal health insurance program for:

- People who are 65 or older
- Certain younger people with disabilities
- People with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a transplant, sometimes called ESRD)

How do you get it?

You are automatically enrolled by the federal government at age 65.

What are the parts of Medicare?

The different parts of Medicare help cover specific services:

- Medicare Part A (Hospital Insurance)
 Part A covers inpatient hospital stays, care in a skilled nursing facility, hospice care, and some home health care.
- Medicare Part B (Medical Insurance)
 Part B covers certain doctors' services, outpatient care, medical supplies/equipment, and preventive services.
- Medicare Part C (Medicare Advantage Plan)
 Pays a fixed amount for your care every month to the company offering Medicare Advantage Plans if you enroll in it.
- Medicare Part D (Prescription Drug Coverage)
 Helps cover the cost of prescription drugs, including many recommended shots or vaccines.

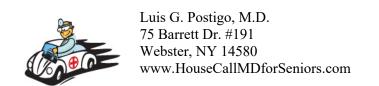
Who pays for Medicare:

- Medicare Part A (Hospital Insurance)
 Is free if you worked and paid Medicare taxes for 10 years
- Medicare Part B (Medical Insurance)
 Is not free. You pay a monthly fee that is automatically deducted if you receive a payment from either: Social Security, the Railroad Retirement Board or the Office of Personal Management (if you worked for the Federal Government). If you don't get a payment from any of these 3 entities you will get a bill.
- Medicare Part C (Medicare Advantage Plan)
 Is not free. You will continue to pay the Medicare B fee, plus the fee of the private Medicare Advantage Plan that you join.
- Medicare Part D (Prescription Drug Coverage)
 Is not free. Monthly premiums vary based on which private plan you join.

What is Original Medicare if you use it as your main insurance?

Original Medicare also called Traditional or Straight Medicare which includes Medicare Part A (Hospital Insurance) and Medicare Part B (Medical Insurance). You pay for services as you receive them. You don't need to enroll yearly; it is automatically renewed. Original Medicare is valid in all the United States.

At the start of each year, you will pay a deductible. After that, Medicare starts covering 80% and you usually pay 20% of the cost of the Medicare-approved services, the 20 % you are responsible for is called coinsurance.



Original Medicare doesn't cover prescriptions. To activate your Medicare Part D prescription drug coverage, you need to enroll only your Medicare Part D with a private insurance plan.

So, you will have Original Medicare plus Medicare Part D with a private insurance plan.

Medicare Prescription Drug Coverage (Part D)

Medicare Part D prescription drug coverage helps pay for the prescription drugs you need. To get it, you must join a Medicare D approved plan through a private insurance that will charge you a monthly fee, called a monthly premium.

Each plan can vary in the amount they will charge you and which medicines they cover.

The list of prescription drugs they cover is called a formulary and they place each prescription drug into a different level called a tier, according to which tier your medicine is located you will pay a different copayment when ordering that medicine.

What is a Medicare Supplemental Insurance Policy (Medigap)?

You can get also get a secondary private insurance called Medicare Supplemental Insurance Policy (Medigap) that can help pay some of the remaining health care costs of your Original Medicare, like deductibles and coinsurance. Some Medigap policies also cover services that Original Medicare doesn't cover, like emergency medical care when you travel outside of the U.S.

What is a Medicare Advantage Plan (Medicare Part C)? Can it replace my Original Medicare?

A Medicare Advantage Plan is a Medicare-approved plan from a private company that offers an alternative to Original Medicare for your health and drug coverage. These "bundled" plans include Part A, Part B, and Part D. Is also known as Medicare Part C.

These plans may not cover some services covered by Original Medicare like dialysis or hospice or these plans may offer some extra benefits that Original Medicare doesn't cover like vision, hearing, and dental services.

The Advantage Plan must notify you about any changes before the start of the next enrollment year. You enroll in these plans year by year and there is no automatic renewal. These plans are only valid in a specific area of your state. If you move to a different city within your state, you need to change to a new plan.

Each Medicare Advantage Plan can charge different out-of-pocket costs, like the copayment that you need to pay in each visit. Each Medicare Advantage Plan receive a monthly fee from Medicare Part C while you are enrolled in the plan.

<u>Do Medicare Supplement Insurance policies (Medigap) work with Medicare Advantage Plans?</u>

You cannot enroll in and cannot use a Medigap Insurance while you're enrolled in a Medicare Advantage Plan. You can't use Medigap to pay for any costs (copayments, deductibles, and premiums) you have under a Medicare Advantage Plan.

Where can I get more information about Medicare?

Phone: 1-800-633-4227

Webpage: www.Medicare.gov