

MEDICARE BASICS

By the Aging and Disability Resource Center of Central WI



Updated 4/17/2021

1

HOUSEKEEPING AND AGENDA

HOUSEKEEPING

- Please turn off your cameras and mute your microphones
- If you are on the phone press *6
- You will see designated times for questions
 - You can unmute your microphone (click the microphone button on your screen again
 - If you are on the phone you can unmute by pressing *6
 - On a computer you can use the "chat box"
 - On tablets/phones you may need to tap your screen, tap the 3 dots and then tap "in call messages"

AGENDA

- Brief Overview of ADRC Services
- All the Parts of Medicare
- Seniorcare
- How to Make your Medicare Decisions and what your next steps are
- Assistance Programs

2

3

WHAT ARE AGING AND DISABILITY RESOURCE CENTERS (ADRC'S)?

- A place to find unbiased information related to aging or living with a disability
- A bridge from one life transition to another, connecting you to community resources that will:
 - Maintain your independence
 - Keep you in your home (or wherever you would like)
 - Stay actively involved in the community

3

WHO DO ADRC'S SERVE?

- Older adults (60 years +)
- Adults with disabilities (18 and over)
- Youth with disabilities transitioning into adulthood
- Families, friends and caregivers

The ADRC-CW is in Langlade, Lincoln, Marathon and Wood counties; offices in:

- Antigo
- Marshfield
- Merrill
- Wausau
- Wisconsin Rapids

ADRC services are offered in every county within the state of Wisconsin.

- Looking for an ADRC in another County? Visit: www.findmyadrc.org



4

5

HOW MUCH DO ADRC SERVICES COST?

ADRCs are funded by county, state and federal dollars and donations.

We serve people of all income levels

- Those with limited income available
- Those with ample income available

Information provided at ADRCs is free of charge

- Some services do suggest a contribution:
 - Nutrition
 - Healthy Living Programs

5

6

MAKE A DIFFERENCE IN YOUR COMMUNITY!

YOUR SKILLS AND TIME CAN HELP US CREATE A COMMUNITY THAT SUPPORTS OLDER ADULTS AND ADULTS WITH DISABILITIES.

*"Alone we can do so little;
together we can do so
much"*
-Helen Keller



- Deliver Meals on Wheels
- Create a welcoming Dining Site for Seniors
- Facilitate programs on health related topics such as pain and diabetes
- Support family caregivers by leading a group
- Find other ways to get involved!
 - Call 1-888-486-9545
 - Email us: adrc@adrc-cw.org
 - Make sure to include your name, contact information and the county you live in

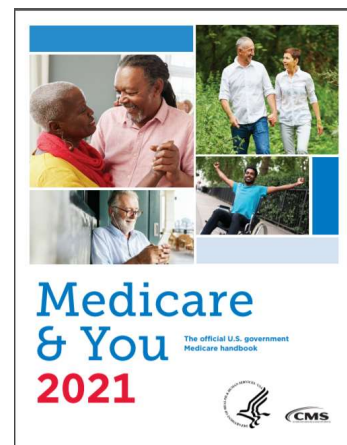
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MEDICARE ELIGIBILITY

7

WHO IS ELIGIBLE FOR MEDICARE

- Individuals 65 and older who have the required 40 credits through Social Security (or through a spouse) (Eligible on the 1st of the month in which you turn 65)
- Individuals who have been on Social Security Disability (SSDI) for 29 months
- Individuals of any age with ESRD (End Stage Renal Disease)



8

9

IF YOU ARE STILL WORKING (OR IF YOUR SPOUSE IS STILL WORKING)

- If you (or a spouse) are ACTIVELY working you may be able to delay Medicare if you choose
 - Medicare defines active employment as still going to work. Getting sick/PTO pay, Cobra, etc. do not qualify as active employment even if you still have insurance.
 - If you are 65 or older and your employer has more than 20 employees OR if you are under 65 (on Medicare due to a disability) and your employer has more than 100 employees
 - the employer insurance will be your primary. If you take Medicare it will be secondary but will not necessarily cover whatever your employer insurance did not
 - You will have a special enrollment to get Medicare Part A and/or Medicare Part B
 - Anytime you are still covered by active employer coverage
 - 8 months following the end of active employment (this is based on when the active employment ends NOT when the coverage ends)
- If you work for a smaller employer (less than 20 employees if you're 65 or older, less than 100 if you're under 65) then Medicare will be primary. You will need to take Medicare.

9

10

IF YOU ARE WORKING AND TURN 65:

- Check with your human resources department.
- Check with your health insurance plan.
- Check with your spouse's health insurance plan.
- Contact Social Security.

NOTE: Health Savings Account (HSA) Information

- **Contributions can no longer be made to your HSA account once you have Medicare.** (Even if you only have Part A – you may want to delay taking Part A for this reason)
- If your employer offers an HSA, contact your Human Resources before enrolling into Medicare Part A or B.
- If you are retiring after age 65 your part A will backdate up to 6 months (but not before you turned 65). You **may** need to stop HSA contributions prior to retiring to avoid a tax penalty



10

11

HOW TO SIGN UP FOR PART A AND PART B

- If you are receiving Social Security Benefits (Retirement or Disability) you will receive a Medicare card in the mail automatically prior to your effective date
- If you are not receiving social security, YOU MUST APPLY either online or at a Social Security office. It's recommended that you do this 3 months prior to when you want your Medicare to start
 - Sign up online at SSA.gov
 - By phone with Social Security (See end of PowerPoint for phone number)
 - In person (call ahead/check online – SSA offices are currently closed to the public due to COVID19)

11

12

INITIAL ENROLLMENT PERIOD (IEP)

- 7 month window that begins 3 months prior to eligibility and ends 3 months after
- Automatically enrolled into Part A and Part B if already receiving Social Security Retirement, Social Security Disability or Railroad Retirement benefits
- You can opt out if you continue to be covered by an employer group plan from your own or a spouse's employment (see slide 10)



- **IEP takes priority over any other enrollment period**

| If you enroll in this month of your IEP: | Your coverage starts: |
|--|---|
| Any of the 3 months before the month you become eligible | The 1 st day of the month you are first eligible |
| The month you are eligible | 1 month after enrollment |
| 1 month after you become eligible | 2 months after enrollment |
| 2 months after you become eligible | 3 months after enrollment |
| 3 months after you become eligible | 3 months after enrollment |

12

13

- **Special Enrollment Period**

If you wait to enroll in Part B because you or your spouse are still working and have group health plan coverage, you can sign up during the 8 months following the month the group plan coverage ends OR employment ends (whichever is first).

There will be no penalty.

- **General Enrollment Period**

January 1 through March 31. (For those who did not sign up during initial enrollment.)

Penalty: Cost of Part B premium will go up 10% for each full 12-month period you delay enrolling. Coverage begins July 1.

13

14

PART B PENALTIES

- If you don't sign up for Part B when you are first eligible AND you do not have other coverage from active employment:
 - You will be subject to a **permanent** Part B penalty based on the number of months you went without Part B (10% for every 12 months you did not have Part B)
 - You will have to wait until the General Enrollment Period (January 1st – March 31st) and coverage will not start until July
 - The Medicare Open Enrollment Period in the fall DOES NOT apply to signing up for Part B

14

15

MEDICARE HEALTH INSURANCE


Name/Nombre
JOHN L SMITH

Medicare Number/Numero de Medicare
1EG4-TE5-MK72

| | |
|--|--|
| <small>Benefit begins/Comienza a</small> | <small>Coverage starts/Cobertura empieza</small> |
| HOSPITAL (PART A) | 03-01-2016 |
| MEDICAL (PART B) | 03-01-2016 |

MEDICARE CARDS

- Medicare Cards should be shown at Doctors Offices and hospitals
 - If you sign up for drug coverage (Part D) you'll receive a separate card
 - If you join a Medicare Advantage Plan they will send you a card that will replace this card (keep it somewhere secure)
- Do not give this information (especially your Medicare Number) out to unknown people. When in doubt hang up and call a number you are familiar with (for example if someone claims to be calling from your doctor's office or a hospital)
- If you are concerned you were the victim of Medicare related fraud you can call Wisconsin Senior Medicare Patrol (SMP) at 1-888-818-2611



15

PARTS OF MEDICARE

16

Medicare Options



17

Original Medicare


Original Medicare includes Medicare Part A (Hospital) and Part B (Medical).

If you want drug coverage, you can join a separate Part D plan.


Optionally, you can also add a Medigap plan for more comprehensive coverage.

Part A 
 Part B 

You can add creditable Drug Coverage:

Part D 
 Senior Care
 Veteran's Rx Coverage



You can also add:

Medicare Supplement (Medigap) 


Medicare Advantage

Medicare Advantage plans are "bundled" Medicare plans. This type of coverage offers, at a minimum, the equivalent of Parts A + B combined.

Some plans offer extra benefits that you will not get with just Original A + B (such as vision, hearing or dental).

Part A 
 Part B 


You can often wrap in:

Part D 
 Or maintain other creditable Drug Coverage:
 Senior Care
 Veteran's Rx Coverage

Some plans may include:
Not all Advantage plans offer these additional benefits; check directly with the plan to find out more details.

Vision
 Dental
 Hearing
 Over the Counter Rx
 Silver Sneakers

17

 **PART A**
18

Cost: \$0 for most individuals

Covered Services: inpatient care in hospitals and skilled nursing facilities(SNF)*, as well as hospice, some home health care, and blood.

Coverage in 2021:

Deductible: \$1,484 per Benefit Period

A benefit period begins the day you're admitted as an inpatient in a hospital or SNF. The benefit period ends when you haven't gotten any inpatient hospital care (or skilled care in a SNF) for 60 days in a row. If you go into a hospital or a SNF after one benefit period has ended, a new benefit period begins. You must pay the inpatient hospital deductible for each benefit period. There's no limit to the number of benefit periods.


Copays: See next 2 slides

*SNF coverage requires a 3 day prior inpatient hospitalization
 *Medicare does not cover long term care/stays

Note: you may purchase other insurance to cover some/all of these costs

18


19

 **PART A
HOSPITAL COPAYS**

| DAYS | MEDICARE PAYS | PATIENT PAYS |
|--------|----------------------|--------------------|
| 1-60 | All except \$1,484 | \$1,484 deductible |
| 61-90 | All except \$371/day | \$371/day |
| 91-150 | All except \$742/day | \$742/day |

19

20

 **PART A
SKILLED NURSING FACILITY COPAYS**

| DAYS | MEDICARE PAYS | PATIENT PAYS |
|-----------|-------------------------|--------------------|
| 1-20 | All after deductible | \$1,484 deductible |
| 21-100 | All except \$185.50/day | \$185.50/day |
| Days 100+ | None | All |

20

Vision, Dental, Hearing

Examples of what is/is not covered (not a comprehensive list)
 [this coverage is what Original Medicare covers – Advantage Plans may or may not have additional benefits in these areas]

| Area | Covered | Not Covered |
|---------|--|--------------------------------------|
| Vision | Diabetic related eye issues, cataracts, glaucoma | Routine Eye Exams, glasses, contacts |
| Dental | n/a | Cleanings, X-rays |
| Hearing | n/a | All |


Medicare Options


Original Medicare

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Part B 

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Senior Care

Veteran's Rx Coverage

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Dental

Hearing

Over the Counter Rx

Silver Sneakers

23



PART B

Cost: \$148.50 (2021)

Covered Services: Doctor visits, outpatient tests, durable medical equipment, some drugs (generally only those given via IV or durable medical equipment), some preventative services, hospital observation stays

Coverage in 2021:

Deductible: \$203

Copay/Co-insurance: 20% (After the deductible is met)

Out of Pocket Maximum: no set number

Note: you may purchase a Medicare Supplement to cover some/all of these costs

23

24

NOTES ABOUT PART A AND B

- Part A and B are often called Original Medicare
- Part A and B do not provide 100% coverage
- You must sign up for Part A and Part B prior to signing up for a Medicare Supplement OR a Medicare Advantage Plan
- Medicare Advantage plans replace your Part A and B

24

QUESTIONS?





Medicare Options

Original Medicare

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27




PART C MEDICARE ADVANTAGE

- Medicare Advantage is a private insurance that is an “all in one” alternative to Original Medicare. These “bundled” plans include Part A, Part B, and usually Part D
- Choosing a Medicare Advantage Plan means Medicare no longer pays your bills directly. All bills go through the company you've selected
- Generally, an HMO/PPO/PPFS/POS
 - you'll want to make sure your providers are in network
 - Check with the insurance company and the hospital or clinic
- Check if there is out of network coverage and what the copays are
 - There may be higher copays/coinsurance/out of pocket maximum
 - OR there may be no coverage
- May provide limited coverage of things not normally covered by Medicare such as Vision, Dental, Hearing
 - May be included or may be available for an extra charge

27

28



PART C MEDICARE ADVANTAGE

Cost: \$148.50 (Part B)+ plan premium (\$0-\$226)

Covered Services: all services covered and A and B

Copays/Co-insurance: Will Vary with plan, you'll need to ask each plan for a list of their copays

May include Part D Drug coverage – usually if you want part D and you are on a Advantage Plan you will have to get the coverage through that plan

Out of Pocket Maximum: Varies (within the ADRC-CW Region 2021 rates range from \$1,200 to \$6,700 in network and up to \$10,000 out of network)

Note: No Medical Questions asked

28

29

MEDICARE MEDICAL SAVINGS ACCOUNTS (MSA)

- High Deductible option with a Savings Account deposit provided
- The plan will make deposits into the MSA Account (members cannot make deposits).
- The bank may provide you with a checkbook and/or debit/credit card
- Can be used on any IRS approved Medical expense (only those that would be covered by Medicare are counted towards the Out of Pocket limit)
- Cannot have with an Advantage Plan or Supplement
- Only 2 MSA's available in Wisconsin
 - Security Health Plan Secure Saver
 - Network Health – Network Prime

29

30

QUESTIONS?



30

Medicare Options



31

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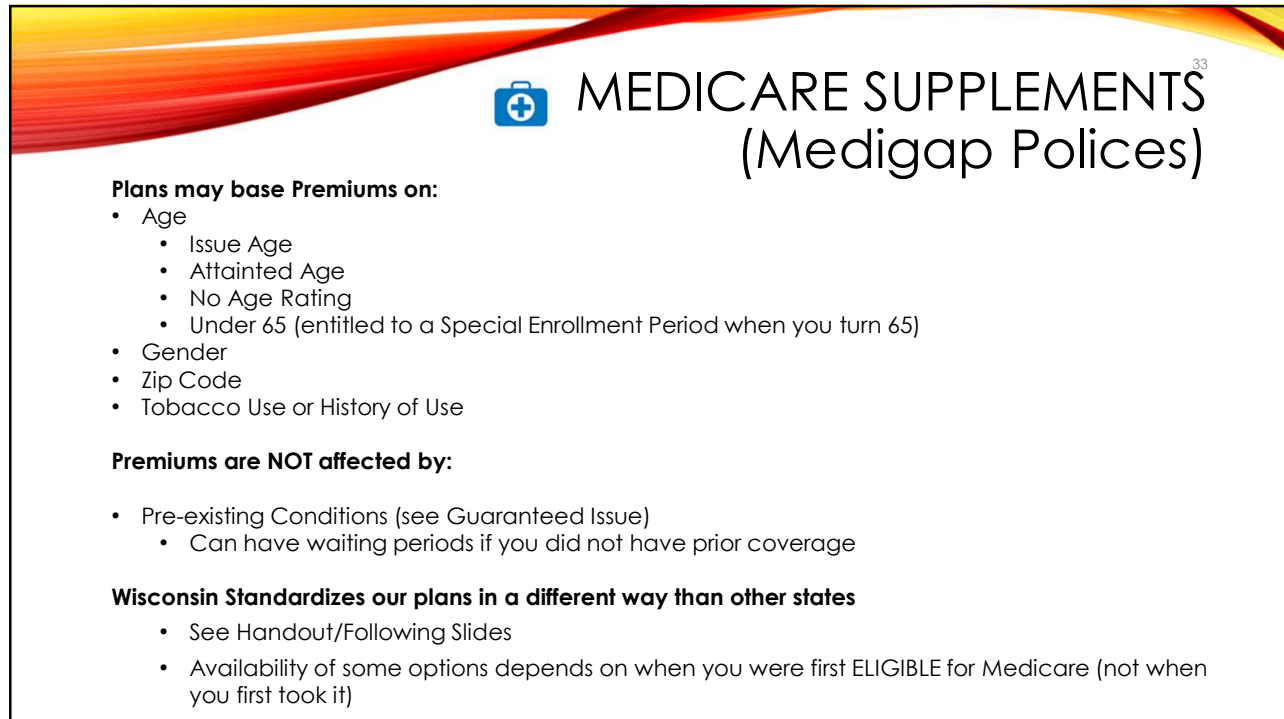
Vision
 Dental
 Hearing
 Over the Counter Rx
 Silver Sneakers


31


MEDICARE SUPPLEMENTS
(Medigap Policies)
32

- Secondary Insurance Sold By Private Companies
- Designed fill coverage gaps of Original Medicare (Part A and Part B only)
- Guaranteed issue vs. Medical Underwriting
 - Guaranteed issue when
 - The month you are first eligible for Medicare and 3 months after
 - If you were on Medicare prior to age 65 you get another opportunity to get a supplement at age 65
 - Other special circumstances (Contact ADRC or Medigap Helpline for more info)
 - Medical Underwriting
 - If you don't have guaranteed issue and try to sign up for a supplement (OR make changes to you your existing policy) plans can ask Medical questions
 - Plans can deny you (this is legal)

32



 **MEDICARE SUPPLEMENTS³³**
(Medigap Policies)

Plans may base Premiums on:

- Age
 - Issue Age
 - Attainted Age
 - No Age Rating
 - Under 65 (entitled to a Special Enrollment Period when you turn 65)
- Gender
- Zip Code
- Tobacco Use or History of Use

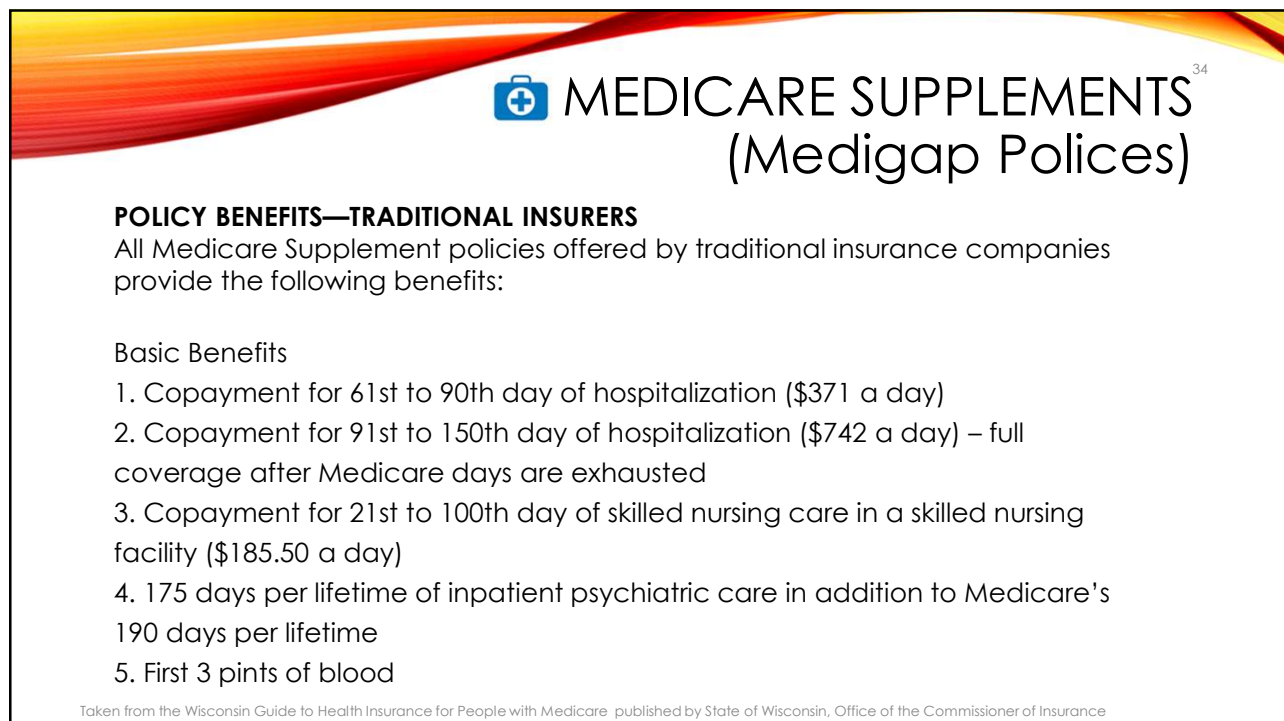
Premiums are NOT affected by:


- Pre-existing Conditions (see Guaranteed Issue)
 - Can have waiting periods if you did not have prior coverage

Wisconsin Standardizes our plans in a different way than other states

- See Handout/Following Slides
- Availability of some options depends on when you were first ELIGIBLE for Medicare (not when you first took it)

33



 **MEDICARE SUPPLEMENTS³⁴**
(Medigap Policies)

POLICY BENEFITS—TRADITIONAL INSURERS

All Medicare Supplement policies offered by traditional insurance companies provide the following benefits:

Basic Benefits

1. Copayment for 61st to 90th day of hospitalization (\$371 a day)
2. Copayment for 91st to 150th day of hospitalization (\$742 a day) – full coverage after Medicare days are exhausted
3. Copayment for 21st to 100th day of skilled nursing care in a skilled nursing facility (\$185.50 a day)
4. 175 days per lifetime of inpatient psychiatric care in addition to Medicare's 190 days per lifetime
5. First 3 pints of blood

Taken from the Wisconsin Guide to Health Insurance for People with Medicare published by State of Wisconsin, Office of the Commissioner of Insurance

34



MEDICARE SUPPLEMENTS (Medigap Policies)

35

6. 40 home health care visits in addition to Medicare – must also meet the insurance company's standards as medically necessary
7. 20% of Medicare's Part B services with no lifetime maximum or, in case of hospital outpatient department services under a prospective payment system, applicable copayments
8. Coverage for full usual and customary cost of non-Medicare-covered chiropractic care, non-Medicare hospital and ambulatory surgery center charges, anesthetics for dental care, and non-Medicare-covered breast reconstruction – must also meet the insurance company's standards as medically necessary.
9. Coverage for 30 days non-Medicare skilled nursing facility care – no prior hospitalization required but must meet the insurance company's standards as medically necessary

Note: Policies may also include preventive health care services, such as routine physical examinations, immunizations, health screenings, and private duty nursing services.

35



MEDICARE SUPPLEMENTS (Medigap Policies)

36

OPTIONAL BENEFITS

Optional Benefits Insurance companies may offer the following optional benefits as a separate benefit for an additional premium:

1. Part A deductible (\$1,484)
2. Additional home health care (up to 365 visits per year). The care also must meet the insurance company's standards as medically necessary.
3. Part B deductible (\$203) - not available to people who are newly eligible for Medicare on or after January 1, 2020
4. Part B excess charges up to the actual charge or the limiting charge, whichever is less

36



MEDICARE SUPPLEMENTS OPTIONAL BENEFITS

5. Foreign Travel Emergency: May have a deductible of up to \$250. Must pay at least 80% of billed charges for Medicare-eligible expenses for medically necessary emergency care received outside the U.S. Emergency care must begin during the first 60 days of a trip outside the U.S. Benefit limit must be at least \$50,000 per lifetime.

6. Medicare 50% Part A deductible

7. Part B copayment or coinsurance rider. After the Part B deductible is met, it will cover the lesser of \$20 per office visit or the Medicare Part B coinsurance and the lesser of \$50 per emergency room visit or the Medicare Part B coinsurance. The emergency room copayment or coinsurance is waived if the emergency room visit results in hospitalization.

37

38

Deciding between a Medicare Supplement vs. a Medicare Advantage plan

Some Questions to Consider

- Do I plan to travel within the US?
- Do I want/need the flexibility to seek medical care anywhere?
- Do I prefer a higher premium with more coverage or a lower premium with more copays?
- How much can I afford to spend on premiums/copays/deductibles/out of pocket maximum?
- What services do I know I will need based on my medical history?
- What are my drug coverage needs? Do I need/want the flexibility to change just this piece of my coverage every year?

38

Medicare Advantage Plans ³⁹

Advantages

- May have lower monthly premium (beyond Part B premium)
- Coordinated care with network physicians
- Some offer extra benefits (vision, dental, hearing)
- Varied plans and choices
- Can change plans each year
- Out-of-pocket copay maximum
- Must follow CMS regulations
- May have Part D coverage bundled in

Disadvantages

- May have higher out-of-pocket expenses.
- Higher costs when out of network – depending on the plan you may not have any coverage out of network
- No state mandates or protections for extras
- Confusion over plans/coverage.
- Must re-evaluate plan each year/May need to change plans
- Enrollment is limited to specific times of the year
- Do not have the flexibility to choose a different drug plan (in our area)

39

Things to Consider Before Choosing a Medicare Advantage Plan ⁴⁰

- **Verify** doctors, hospitals and laboratories are part of the plan's network
- **Review** drug coverage & costs
- **Understand** your cost share for services you will receive including the Out of Pocket Maximum
- **Understand** coverage and cost share for non-emergency out of network coverage
- **Clarify** specifics around "extra benefits" such as vision/dental/hearing
 - Where can you get these services (is your current provider included)
 - What is covered?
- **Research** the plan's Star Rating found on Medicare.gov – based on customer service

40

Medicare Supplements ⁴¹

Advantages

- Works anywhere in the United States where Medicare is accepted
- Consistency makes them easier to compare
- Lower copays/coinsurance when services are received (depends on optional benefits chosen)
- Out of Pocket Limit not defined but determined by the benefits you choose
- State mandated benefits
- Foreign Travel Rider Option

Disadvantages

- Higher monthly premiums regardless of use
- No open enrollment to join later or switch plans – subject to medical underwriting
- Higher Premiums for those under age 65

41

Things to Consider before choosing a Medicare Supplement Plan ⁴²

- **Review** coverage
- **Review** any optional benefits
- **Understand** your cost share for services you will receive
- **Understand** how/when premiums will change

42

QUESTIONS?



43

Medicare Options

Original Medicare

Original Medicare includes Medicare Part A (Hospital) and Part B (Medical).

If you want drug coverage, you can join a separate Part D plan.

Optionally, you can also add a Medigap plan for more comprehensive coverage.

| | |
|--|---|
| <input checked="" type="checkbox"/> Part A |  |
| <input checked="" type="checkbox"/> Part B |  |

You can add creditable Drug Coverage:

| | |
|--|---|
| <input type="checkbox"/> Part D |  |
| <input type="checkbox"/> Senior Care | |
| <input type="checkbox"/> Veteran's Rx Coverage | |

You can also add:

| | |
|--|---|
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|--|---|


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| | |
|--|--|
| <input checked="" type="checkbox"/> Part A |  |
| <input checked="" type="checkbox"/> Part B |  |

You can often wrap in:

| | |
|--|--|
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| <input type="checkbox"/> Veteran's Rx Coverage | |

Some plans may include:

Not all Advantage plans offer these additional benefits; check directly with the plan to find out more details.

- Vision
- Dental
- Hearing
- Over the Counter Rx
- Silver Sneakers

44



DRUG COVERAGE OPTIONS

Creditable Coverage: Coverage that meets or exceeds Medicare drug coverage regulations. If you do not have creditable coverage there is a penalty

- Medicare Part D (Standalone OR Wrapped into a Medicare Advantage Plan)
- Seniorcare
- VA/Veteran's Prescription Coverage (Tricare or ChampVA)
- Employer/Retiree Group Health Coverage (check with plan)

Non-creditable coverage: Coverage that does not meet Medicare's rules. If this is your only drug coverage you would later be subject to a Part D Penalty

- Discount cards/clubs
- Pharmaceutical Patient Assistance Programs

45



Medicare Part D Penalty

The part D late enrollment penalty is an amount that's permanently added to your Part D Premium. You may have a late enrollment penalty if at any time after your initial enrollment period is over, there's a period of 63 or more days in a row when you don't have Part D or other creditable prescription drug coverage. You'll generally have to pay the penalty for as long as you have Part D Coverage

3 Ways to Avoid Paying a Penalty

1. Enroll in Medicare drug coverage when you're first eligible.

Even if you don't take drugs now, you should consider joining a Medicare drug plan or a Medicare Advantage Plan with drug coverage to avoid a penalty. You may be able to find a plan that meets your needs with little to no monthly premiums.

2. Enroll in Medicare drug coverage if you lose other creditable coverage.

Creditable prescription drug coverage could include drug coverage from a current or former employer or union, TRICARE, Indian Health Service, the Department of Veterans Affairs, or individual health insurance coverage. Your plan must tell you each year if your non-Medicare drug coverage is creditable coverage. If you go 63 days or more in a row without Medicare drug coverage or other creditable prescription drug coverage, you may have to pay a penalty if you sign up for Medicare drug coverage later.

3. Keep records showing when you had other creditable drug coverage, and tell your plan when they ask about it.

If you don't tell your Medicare plan about your previous creditable prescription drug coverage, you may have to pay a penalty for as long as you have Medicare drug coverage.

46



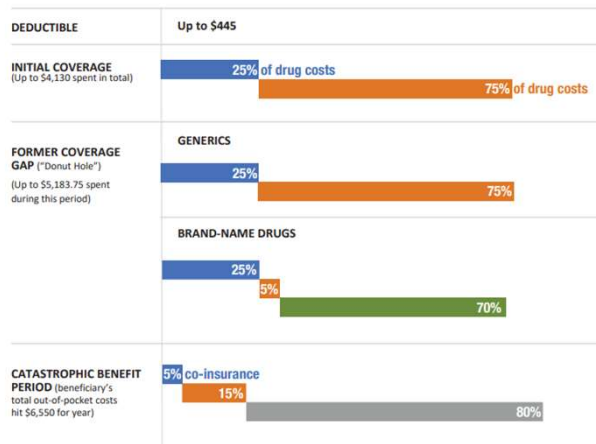
MEDICARE PART D

- Medicare Part D is drug coverage that you add to Medicare (purchased from a private company)
 - with original Medicare you would purchase a stand alone drug plan
 - with a Medicare Advantage Plan you would bundle your drug coverage into the plan
- All plans follow a standard set of rules set by Medicare however they may have different, premiums, deductibles and copays
- plans may differ in the drugs they cover (called a formulary), the pharmacies that are in network and the prices they have negotiated
- Best way to compare Part D plans is using the Medicare Planfinder available on medicare.gov



PART D DETAILED

WHO PAYS WHAT UNDER PART D IN 2021





- State of Wisconsin Prescription Assistance program
- Provides Creditable Drug Coverage
- Eligibility
 - 65 years or older (no exceptions for younger individuals on Medicare)
 - US Citizen or qualifying immigrant
 - Wisconsin Resident
 - Pay \$30 fee per person per year (renew based on when you enroll)
 - All income levels eligible but the program works differently (see next slides)

SENIORCARE[®]
 Prescription Drugs for Wisconsin Seniors **X**

49



What Counts as income

*Seniorcare looks at estimate FUTURE income in the next 12 months NOT prior year such as taxes

- gross Social Security Payments (before any deductions)
- gross wages
- Interest, dividends, and capital gains
- Net self-employment
- Retirement income
- Other including: unemployment, workers compensation, alimony, support and rental income

50



4 Levels Based on income (See Handout)

Level 1 - \$0 deductible

Level 2a - \$500 deductible

Level 2b - \$850 deductible

Level 3 – Spenddown plus \$850

Once you've met your deductible (and spenddown if applicable) – Copays are \$5 for covered generics and \$15 for covered brand names

51

Advantages

- Can be your standalone drug plan
- Can be combined with another drug plan
- Can help reduce your costs while in the doughnut hole
- Can get you a Special Enrollment Period

Disadvantages

- Does not cover shingles shot (normally covered under Part D)
- Does not cover needles/syringes (covered under Part D)
- Does not cover “self administered” drugs (those given during observation status stays)
- Does not work with out of state pharmacies

52

53



SENIORCARE VERSUS PART D

| Seniorcare | Part D |
|--|---|
| Provides creditable drug coverage | Provides creditable drug coverage |
| \$30 enrollment fee every 12 mo. | Monthly Premium Varies (\$7.30-\$132.30 Standalone plans) |
| Deductible from \$0-\$850+ based on income | Max deductible of \$435 (regardless of income) |
| Once deductible and spenddown are met - \$5 covered generic, \$15 covered brand name | Varies (you pay approximately 25% until you reach the coverage gap) |
| No Coverage Gap | Coverage gap once your costs have reached \$4,130 (2021) |
| Does not cover drugs given under hospital observation status | Does cover drugs under observation status |
| Does not cover non-Part B vaccines (example: Shingles shot) | May cover non-Part B vaccines (example: Shingles shot) |

53

54

HEALTH ASSISTANCE PROGRAMS

- Seniorcare
- Medicare Savings Programs (QMB, SLMB, SLMB+)
 - These programs Pay your Part B premium (and in some cases Part A)
 - Automatically Qualify you for Prescription Extra Help
- Medicaid
- MAPP (Medical Assistance Purchase Plan)
 - Individuals who are disabled but working or doing a work related activity
- Prescription Extra Help

**See Brochure "Paying for Prescriptions and Medicare" in your packets
Contact the ADRC or your county Social Services/Human Services Department for assistance**

54



55



56

57

WHAT DO I DO NEXT?

- Decide if you want/need to take Medicare. If so when do you want/need it to start?
- If you're receiving Social Security but need to delay your Medicare return the card as directed. If you are receiving SSRE you'll get a card automatically 3 months before
- Decide if you want a Medicare Supplement or a Medicare advantage plan
 - Research Plans – see previous slides/handouts for questions to ask
- Decide how to get your drug coverage
 - Part D
 - Standalone plan with a supplement or a Medicare MSA
 - Combined plan with a Medicare Advantage Plan
 - Seniorcare
 - Veteran's Coverage
- Review coverage annually during the Medicare Open Enrollment OR the Advantage plan open enrollment

57

58

SPECIAL ENROLLMENTS

Annual Open Enrollment Period October 15-December 7

- Medicare Advantage Plans and Medicare Part D plans can change their plan details each year. You will receive an "Annual Notice of Change" by September 30th each year
- Plan formularies, pharmacy networks, premiums, and other costs can change each year
- Note: this does not apply to Medicare Supplements
- If you do nothing, you will remain in your plan
 - unless the plan no longer exists - they will notify you and sometimes auto enroll you in another plan

Medicare Advantage Plans Open Enrollment Period

January 1 – March 31—*only for people already enrolled in an Advantage plan*

Review your current plan each year!

58

YOU ARE EMPOWERED!

- Social Security Administration
 - National 1-800-772-1213
 - Wausau 1-855-269-9186
 - Wisconsin Rapids 1-855-686-1465
- Medicare 1-800-MEDICARE or 1-800-633-4227
- Medigap Helpline 1-800-242-1060
- Part D Helpline
 - 60 and over 1-855-677-2783
 - 59 and under 1-800-926-4862
- Aging and Disability Resource Center of Central Wisconsin 1-888-486-9545

59

MEDICARE PLAN FINDER

- A tool on Medicare.gov that allows you to compare stand-alone Medicare Part D plans and Medicare Advantage Plans
- It does not allow you to get prices for Medicare Supplements or compare them
 - You'll need to reach out to each company and/or an insurance agent/broker
- We recommend creating a MyMedicare account (once you have your Medicare card)
 - You can store your drug information, so you don't have to reenter it when you go back into the site
 - You can get your Medicare Notices online if you so choose – signing up for an account DOES NOT turn this on automatically
 - You can also see reminders for preventative health services

60

61

QUESTIONS?



61

62

PLANFINDER TIPS

- If you use the educational tool it only compares Original Medicare to Medicare Advantage plans. It does not incorporate the options of a Medicare Supplement or a Standalone drug plan. This can be misleading.
- Although the plan finder compares advantage plans it primarily compares the drug coverage portion of the plan. Make sure you are still carefully considering the other aspects of the plans such as the medical copays and out of pocket maximums.
- If you use the "compare" plans functions it does NOT compare the total cost based on your drugs. It provides a general comparison of the plans. We recommend looking at the details of each individual plan

62

DEMONSTRATION

Items needed to use the plan finder

- Your Medicare Card
- A list of your medications that includes the drug name, dose, frequency (you will need to enter how many you get at a time (for example if you take a pill once a day and refill it every 90 days then you'd need to select 90 every three months)

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

Included in your packet for your reference
The Medicare Planfinder – Create an Account

Also available –
Planfinder Walkthrough (can be emailed or mailed)

63

QUESTIONS?



64