Welcome to Medicare

[INSERT YOUR AGENCY NAME/LOGO HERE] [INSERT DATE OF PRESENTATION]

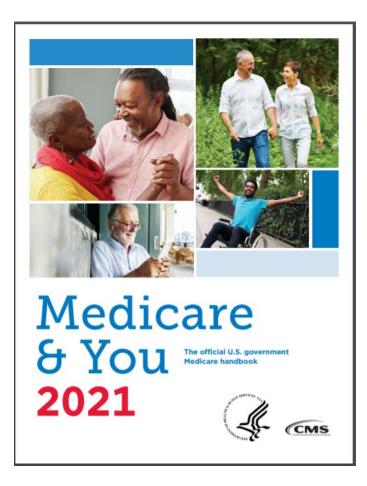


LOCAL HELP FOR PEOPLE WITH MEDICARE

Presentation Outline

- Enrollment in Medicare
- Medicare Basics
- Your Coverage Choices
- SeniorCare
- Help for People with Limited Income
- Words of Caution

Find more detailed information in your Medicare & You 2021 Handbook.



- If you already get benefits from Social Security or Railroad Retirement, you are automatically enrolled in Part A & B the first day of the month you turn 65.
- If you are close to 65 and currently don't receive Social Security benefits, you need to enroll in Part A & B with **Social Security** during your *Initial Enrollment Period*. (Next Slide.)
 - Visit socialsecurity.gov or
 - Call Social Security at 1-800-772-1213
 - Or for the local office: <contact info here>
- If you are under 65 and disabled, you are automatically enrolled in Medicare after receiving 24 consecutive months of SSDI.

Gain access to your personalized information anytime by registering with **MyMedicare.gov**



Initial Enrollment Period

7-month period includes 3 months before, month of, and 3 months after 65th birthday.

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.

Medicare & Employer Coverage

• You can delay enrollment in Medicare if

- You/your spouse are currently working, and
- You are covered under a group health plan based on that employment, and
- Employer has more than 20 employees. (If less than 20 employees you should take Medicare at age 65, even if you are still working.)

Special Enrollment Period

- Enroll in Medicare anytime while actively working.
- Must enroll within 8 months of
 - Stop work (quit or retire), or
 - Lose health insurance through work.

After 8 months a late enrollment penalty will apply and you will need to wait until the General Enrollment Period.

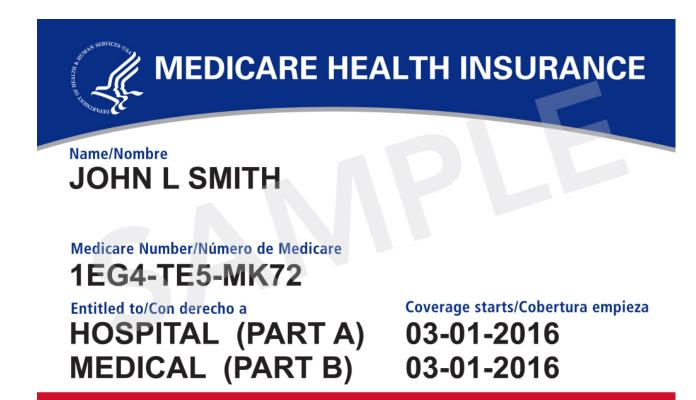
So, If You Are Working and Turn 65:

- 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.)
- If your employer offers an HSA, contact your Human Resources before enrolling into Medicare Part A or B.

Medicare Card



Part of Medicare	What It Covers
Part A (Hospital Insurance)	Helps cover inpatient care in hospitals and skilled nursing facilities, as well as hospice, some home health care, and blood.
Part B (Medical Insurance)	Helps cover doctors' services, outpatient care, home health care, and some preventive services.
Medicare Advantage (Part C)	An alternative to original Medicare, managed by a private insurance company under contract with Medicare. Combines Part A and B and usually Part D.
Part D (Prescription Drug Coverage)	Helps cover prescription drugs. Run by private insurance companies under contract with Medicare.

Medicare Part A



Part A Hospital Insurance

Part A – Hospital Insurance helps cover:



Part A Hospital Insurance

- Inpatient hospital care
 - Semi-private room, meals, general nursing, other hospital services and supplies. Includes inpatient rehabilitation facilities and inpatient mental health care in a psychiatric hospital (lifetime 190-day limit).
- Inpatient skilled nursing facility (SNF) care
 - After a related 3-day inpatient hospital stay
- Blood (inpatient)
- Home health care
- Hospice care

What's not covered?

- Private-duty nursing
- Private room (unless medically necessary)
- Television and phone in your room (if there's a separate charge for these items)
- Personal care items, like razors or slipper socks
- Custodial (non-skilled) care in SNF

Medicare Part A – 2021 Costs



Part A Hospital Insurance

- Premium No premium for most people.
- Deductible \$1,484 for inpatient stays (days 1-60).
- Copays
 - Hospital Inpatient—See next slide.
 - Skilled Nursing Facility—See separate slide.
 - Home health care \$0 copay.
 - Hospice care \$0 copay.
- **Out-of-pocket maximum** None in Original Medicare.

NOTE: Part B pays for most of your doctor services when you are an inpatient.

Medicare Part A – 2021 Costs

Part A-HOSPITAL Copays

Part A Hospital Insurance	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

Medicare Part A – 2021 Costs

Part A—Skilled Nursing Facility Copays

Part A Hospital	DAYS	MEDICARE PAYS	PATIENT PAYS
Insurance	1-20	All after deductible	\$1,484 deductible
	21-100	All except \$185/day	\$185/day
	Days 100+	None	All

Are You an Inpatient or an Outpatient?

Inpatient – Formally admitted to the hospital with a doctor's order.

Outpatient – No doctor's order to admit you. ER visit is considered Outpatient.

Hospital "Observation Status"

- Outpatient, not Inpatient, even if you spend the night.
- Medicare A pays nothing.
- Medicare Part B pays for doctors services and hospital outpatient services after you pay your deductibles, coinsurance and copayments.
- For drugs received during an observation stay, you'll likely need to pay outof-pocket and submit a claim form to your drug plan for reimbursement. Request an *out-of-network pharmacy claim form* from your Part D plan.

Medicare Part B



Part B — Medical Insurance



Helps cover medically necessary:

- Doctors' services
- Outpatient medical and surgical services and supplies
- Clinical lab tests
- Durable medical equipment (may need to use certain suppliers)
- Diabetic testing supplies
- Preventive services (like flu shots and a yearly wellness visit)
- Home health care

Medicare Part B – 2021 Costs

Part B Medical Insurance

- Monthly Premium Standard premium is \$148.50 (or higher depending on your income, see next slide).
- Yearly deductible \$203
- Coinsurance 20% coinsurance for most covered services, like doctor's services and some preventive services, if provider accepts assignment.
 - \$0 for some preventive services.

Income-Related Monthly Adjustment Amount for 2021 (IRMAA)

Chart is based on your yearly income in 2019 for what you pay in 2021 for Part B premium.

File Individual Tax Return	File Joint Tax Return	File Married & Separate Tax Return	In 2021 You Pay
\$88,000 or less	\$176,000 or less	\$88,000 or less	\$148.50
\$88,000-\$111,000	\$176,000 - \$222,000	Not applicable	\$207.90
\$111,000-\$138,000	\$222,000 - \$276,000	Not applicable	\$297.00
\$138,000-\$165,000	\$276,000 - \$330,000	Not applicable	\$386.10
\$165,000-\$500,000	\$330,000 - \$750,000	\$88,000 - \$412,000	\$475.20
\$500,000 or Above	\$750,000 or Above January 2021 Welcome to Me	\$412,000 or Above	\$504.90

Preventive Services



- Welcome to Medicare Visit
- Yearly Wellness Visit
- Additional screenings/tests/services
 - Most covered with no deductible or co-pay.

"An ounce of prevention is worth a pound of cure" -Benjamin Franklin



Review the preventive services chart & discuss your prevention plan with your doctor.

Preventive Services



"Welcome to Medicare" Visit

Includes:

- Height, weight, and blood pressure
- Body mass index
- Vision test
- Review of potential risk for depression and level of safety
- Discussion about advance directives if you choose
- A written plan regarding screenings, shots, and other preventive services needed

Note: NOT a physical!

Preventive Service



Part B Medical Insurance

Yearly Wellness Visit

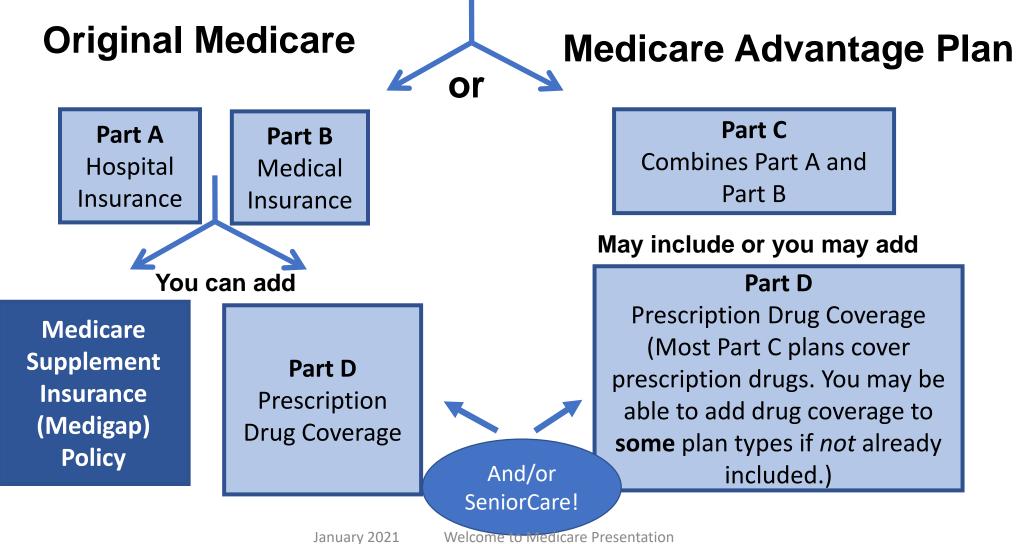
Includes:

- Review of medical and family history
- Develop list of current providers and prescriptions
- Record height, weight, blood pressure
- Create list of risk factors and treatment options
- Detection of cognitive impairment
- Establish schedule of screenings for appropriate preventive services
- Offer personalized health advice

Note: Not a physical. Be sure to ask for **Yearly Wellness Visit** by name.

Your Coverage Choices

Your Coverage Choices



Original Medicare



- Part A Hospital Insurance Part B Medical Insurance
- Original Medicare is Part A (Hospital Insurance) and/or Part B (Medical Insurance).
- Medicare provides coverage.
- You have your choice of doctors, hospitals, and other providers that are accepting new Medicare patients.
 - Costs are affected by whether or not they accept assignment, which is an agreement by your doctor/provider, to be paid directly by Medicare, to accept the payment amount Medicare approves for the service, and not to bill you for any more than the Medicare deductible and coinsurance.

You can add



Medicare Supplement (Medigap) Insurance





Original Medicare

Original Medicare does *not* cover these services or supplies:



- Most Dental care or Dentures
- Cosmetic surgery
- Health care while traveling outside U.S.
- Hearing aids and/or exams for fitting hearing aids
- Long-term care
- Most routine foot care & most supportive devices for feet
- Routine eye care and most eyeglasses
- Routine physicals





Medicare Supplement (Medigap) Insurance



- Private Insurance to supplement Original Medicare. Approved & regulated by WI Commissioner of Insurance.
- You must have Medicare Parts A and B to buy a Medigap policy.
- You pay a monthly premium for this type of plan.
 - Helps pay some health care costs that Original Medicare doesn't cover.
 - Once Medicare pays its share of Medicare-approved amounts for covered costs, then your Medigap policy pays its share.
- Costs vary depending on insurance company, optional benefits selected, age of applicant, where applicant lives.
- Does not include outpatient prescription drug coverage.
- No need to review coverage yearly.

Types of Policies



- Traditional Medicare Supplement Policies
 - Attained Age As you age your premiums will change to meet your age range and premiums become higher.*
 - Issue Age Premiums are set at the age you are when you buy the policy and will not increase because you get older.*
 Premiums may increase for other reasons.
- Cost-Sharing Supplemental Policies (50% or 25% cost sharing)
- High-Deductible Medicare Supplement
- Medicare Select

*Medigap Premiums may also increase each year due to cost of living adjustments.



- Basic Benefits: Covers 20% after Part B, copays for Part A, additional inpatient psychiatric days, first 3 pints of blood, 40 home care visits.
- Wisconsin Mandated Benefits: Covers some chiropractic services, 30 days non-Medicare Skilled Nursing Facility. (Only applies to policies issued in Wisconsin to Wisconsin residents.)

*See OCI Publication: "WI Guide to Health Insurance for People with Medicare"



Optional Riders (Benefits):

- Part A Deductible (or Part A 50% Deductible)
- Part B Deductible*
- Part B Copay/Coinsurance (reduces premiums)
- Part B Excess Charges
- Additional Home Health
- Emergency Foreign Travel

*As of January 1, 2020 the Part B Deductible rider is no longer an option for people newly eligible for Medicare. (Still available for those eligible prior to 1/1/20.)

Steps to Buy a Policy

- STEP 1: Decide which benefits (riders) you want, then decide which of the Medigap policies meets your needs.
- STEP 2: Find out which insurance companies sell Medigap policies in your state.
- STEP 3: Call the insurance companies (or insurance agent) that sell the Medigap policies you're interested in and compare costs.
- STEP 4: Buy the Medigap policy.

When You Can Buy a Medigap Policy

- Your one-time 6-month Open Enrollment Period (OEP) begins when you're 65 or older and enrolled in Part B.
- May buy a Medigap policy any time an insurance company will sell you one.

During Your Medigap OEP	NOT During Your Medigap OEP
Best time to buy	May have waiting period for preexisting conditions
Guaranteed Issue Period	May cost more
Companies must sell to you any policy they sell for the same price even if you have a pre-existing condition	Companies can deny coverage

Delayed Open Enrollment Period (OEP)



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- Because you or your spouse are still working, and
- You have group health coverage (primary),
- Then your Medigap OEP is delayed
 - Until you are enrolled in Part B.
- If you have Medicare due to a disability, you get 2nd
 OEP at age 65.



Other times you cannot be denied a policy:

- Your Medicare Advantage plan terminates or stops providing care in your service area.
- You move outside the plan's service area.
- Your employer group health plan ends some or all of your coverage.
- Your employer group plan increases cost by more that 25% in one 12 month period.
- You are in Trial Period of Medicare Advantage plan.

Must apply within 63 days of the date your other coverage ends.

Medigap Insurance

For Questions Contact:

- WI SHIP Medigap Helpline
 1-800-242-1060
- Commissioner of Insurance
 1-800-236-8517
 https://oci.wi.gov
- Medicare
 1-800-MEDICARE
 www.Medicare.gov





Part D Medicare prescription drug coverage

Medicare Prescription Drug Coverage



Part D Medicare prescription drug coverage

- To receive Part D coverage, you must enroll in a Part D Plan.
- Covers prescription medications.
- Run by private companies that contract with Medicare.
- Part D Plans are provided through:
 - Medicare Prescription Drug Plans (PDPs) that work with Original Medicare.
 - Medicare Advantage Prescription Drug Plans (MA-PDs).

You can compare plans and enroll in a plan on the Plan Finder at: www.medicare.gov



Part D Medicare prescription drug coverage

Enrollment Opportunities

- Initial Enrollment Period
 - 3 months prior, month of, and 3 months after starting Medicare.
- Annual Open Enrollment Period
 - Enroll October 15 thru December 7th each year for coverage starting January 1st of the following year.
- Medicare Advantage Open Enrollment Period
 - January 1 March 31—only for people already enrolled in MA plan
- Special Enrollment Period
 - In certain circumstances, you may be able to change your Medicare prescription drug coverage outside of the Initial or Annual Open Enrollment Period.

Medicare Part D – Costs

Premiums, Deductibles, and Copays or Coinsurance

Part D Medicare prescription drug coverage

- Costs vary by plan and change **annually**.
- 2021 premiums range from \$7.30 to \$132.30 per month.
- 2021 National base beneficiary premium is \$33.06.
- 2021 Limit for a deductible is \$445.
- Copays and coinsurance may vary per drug, per plan, per pharmacy.

Income Related Monthly Adjustment Amount (IRMAA)

- People with Part D who have higher incomes will pay an additional amount on top of their premium. Income thresholds:
 - Individuals: \$88,000
 - Couples filing jointly: \$176,000
- This amount is based on their tax filing from two years prior. (2021 amount is based on 2019 tax filing.) Only about 5% of people with Medicare are subject to IRMAA.

Medicare Part D – Costs



Part D Medicare prescription drug coverage

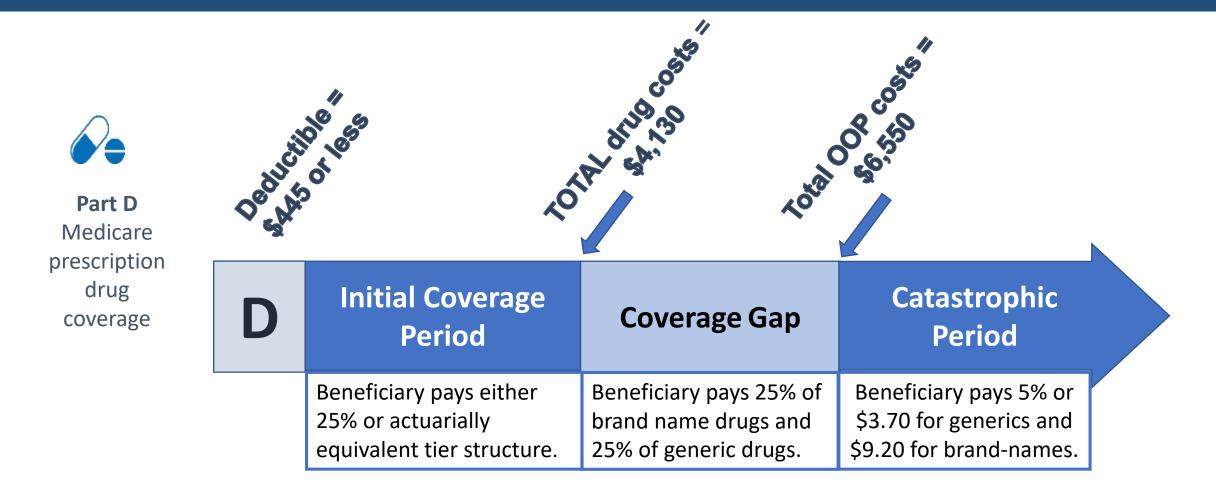
Late Enrollment Penalty

- You may pay a late enrollment penalty if you did not enroll in Part D during the IEP and did not have other *creditable* coverage*.
- The penalty is 1% of the average national monthly premium for every month you delayed enrollment.
- The penalty will be added to your monthly premium if and when you enroll in a Part D plan, and it will continue as long as you are enrolled.

***Creditable Coverage:** Other prescription drug coverage that is expected to pay, on average, at least as much as Medicare's standard Part D coverage, such as:

- Veterans drug coverage
- SeniorCare
- Some types of Employer Coverage (must ask)

Medicare Part D – Costs



From January 1, 2021 (or a later start date for those who enroll after January 1).

What is Covered



Part D Medicare prescription drug coverage

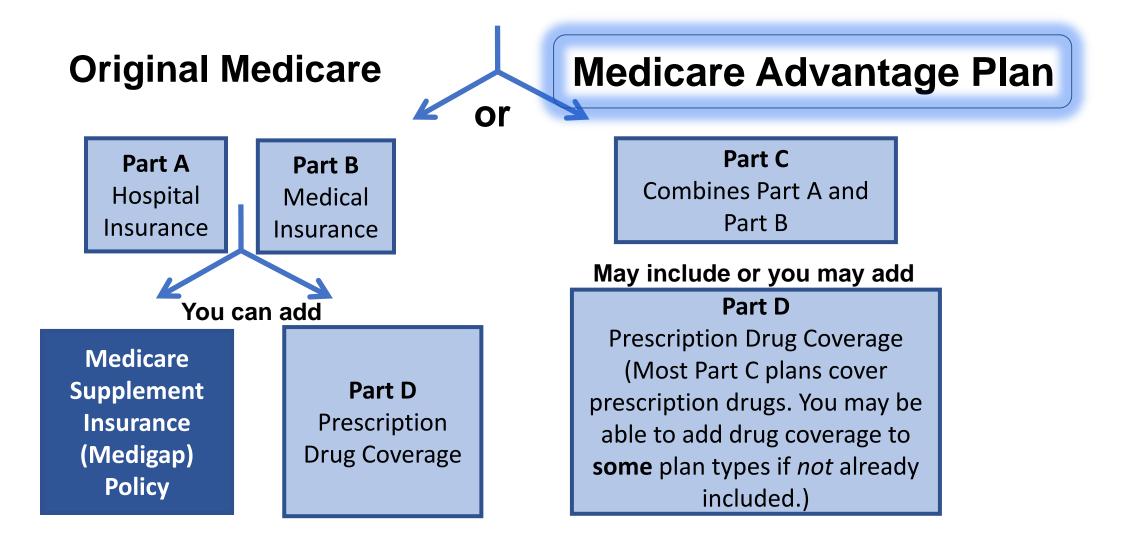
- Prescribed medications
- Medications that are included in a plan's formulary (Not all medications are covered by all plans.)
- The law excludes certain medications from coverage under Part D.
- Medications must be for medically prescribed use.
- Insulin and needles and syringes for the administration of insulin



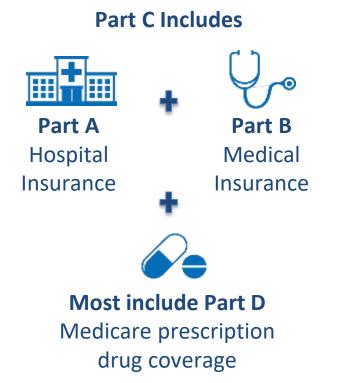
What Is Not Covered?

- Medications that are not on a plan's formulary are usually not covered.
- Non-prescription, over-the-counter drugs
- Drugs that are not approved by the Federal Drug Administration (FDA)
- Vitamins and minerals
- Cough medicine
- ED medications
- Drugs for cosmetic purposes
 - Weight loss or weight gain
 - Hair loss

Your Coverage Choices



Medicare Advantage Plans (Part C)



- Medicare Advantage, sometimes called Part C, includes both Part A, Part B, and usually Part D.
- Private insurance companies approved by Medicare provide your Medicare coverage.
- Most plans are HMOs or PPOs with provider networks. You must use plan doctors, hospitals, and other providers, or you will pay more or all of the costs.

Medicare Advantage Plans

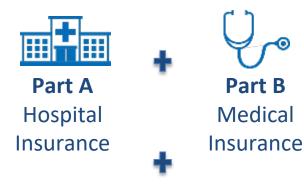


What you Pay in 2021

- Part B monthly premium
- Additional monthly premium depending on the plan
- Deductibles, coinsurance, and copayments
 - Different from Original Medicare
 - Vary from plan to plan
 - May be higher if out-of-network
- Out-of-Pocket Maximum \$6,700 (individual)

Medicare Advantage Plans

Part C Includes





Most include Part D Medicare prescription drug coverage

If you join a Medicare Advantage Plan you:

- Still get all services covered by Part A and Part B, but you get them through the Medicare Advantage Plan.
- May choose a plan that includes Part D prescription drug coverage.
- May have different benefits and cost-sharing.
- Can't be charged more for certain services than you would pay under Original Medicare.
- May have a yearly limit on your out-of-pocket costs for medical services.
 - Once you reach this limit, you'll pay nothing for covered services.
- May choose a plan that includes extra benefits not covered by Original Medicare, such as vision or dental care.
- Cannot use a Medigap policy to supplement your coverage.

Medicare Advantage Plans

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.

Disadvantages

- May have higher out-of-pocket expenses.
- Higher costs when 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.

Medicare Parts C & D

Annual Open Enrollment Period

October 15th – December 7th

- Medicare Advantage Plans and Medicare Part D plans can change their plan details each year.
- Plan formularies, pharmacy networks, premiums, and other costs can change each year.

Medicare Advantage Plans have another Open Enrollment Period

January 1 – March 31—*only for people already enrolled in MA plan.*

Review your current plan each year!

The Medicare Plan Finder



Compare plans at www.medicare.gov

- Personalize your search to find plans that meet your needs.
- Compare plans based on star ratings, formularies, benefits, costs, and more.

Other Types of Health Insurance

- Employer/Retiree Group Health Plan
 - Is it a Supplement or Medicare Advantage?
 - Some offer creditable prescription coverage.
 - Contact your employer or union benefits administrator to find out how your insurance works with Medicare.
- Military Coverage: VA or TriCare
- Medical Assistance/Low Income Programs



SeniorCare

Wisconsin's Prescription Drug Assistance Program

- Available to Wisconsin residents age 65 and over who are U.S. citizens or have qualifying immigrant status.
- \$30 annual application fee. (No monthly premium.)
- No asset limit.
- Creditable coverage.
- Your annual income determines your level of coverage.
 - No deductible at Level 1.
 - Level 2a and 2b have a deductible.
 - Level 3 has a deductible and spenddown.
- May use alone or in addition to Part D.



For more information or to access an application online: www.dhs.Wisconsin.gov/seniorcare

> Or call: 1-800-657-2038

Help for People with Limited Income



Medicare Savings Programs

- If eligible, your Medicare Part B premium will be paid for you.
- Some also have Medicare copays and deductibles paid as well based on income and assets.

Extra Help (Low Income Subsidy)

- Assistance with Medicare prescription drug coverage.
- Reduces Part D premiums, deductibles, and copays based on income and assets.

Senior Care

Level of assistance depends on annual income.



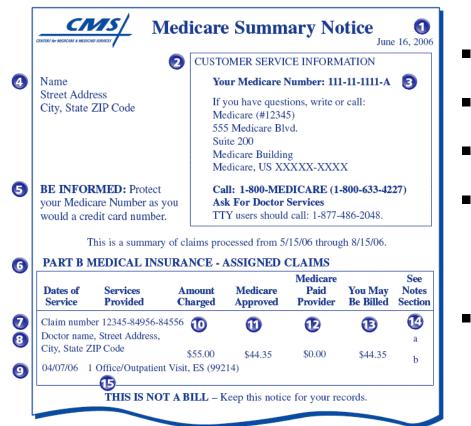
Help for People with Limited Income

Program Eligibility Guidelines

Program	Single Individual (Unmarried)		Married Couple	
	Monthly Income	Assets	Monthly Income	Assets
Medicare Savings Program	< \$1,449	< \$7,970	< \$1,959	< \$11,960
Extra Help	< \$1,610	< \$13,290	< \$2,177	< \$26,520
Wisconsin SeniorCare Level 1	< \$1,717	No asset limit	< \$2,322	No asset limit

*Income Limits based on 2021 federal poverty guidelines.

Always review your Medicare Summary Notice!



- This is not a bill. Sent quarterly.
- Check name, address, Medicare number for accuracy.
- Did you receive the service?
- Be sure claim is processed and paid. If item is denied, call doctor's office to make sure claim was coded properly. If not, office can resubmit.
- If denied, you have appeal rights. Appeal deadline is 120 days.

Three Steps to Prevent Fraud

Step 1: Protect Yourself and Others from Medicare Fraud

DON'T

 Don't give out your Medicare number except to your doctor or other Medicare provider.



DO

- Do treat your Medicare card and number like your credit card.
- Do watch out for identity theft.
- Do be aware that Medicare doesn't call or visit to sell you anything.
- Do be cautious of offers for "free" medical services.
- Do pass it on!

Step 2: Detect Medicare Fraud & Abuse

- Always review those **Medicare Summary Notices (MSNs)**!
- Access your Medicare information online at <u>www.MyMedicare.gov</u>.
- Create a **Personal Health Care Journal**:
 - Record doctor visits, tests and procedures in the journal and take it with you to appointments.
 - Compare your MSNs and other statements to your journal to make sure they are correct.

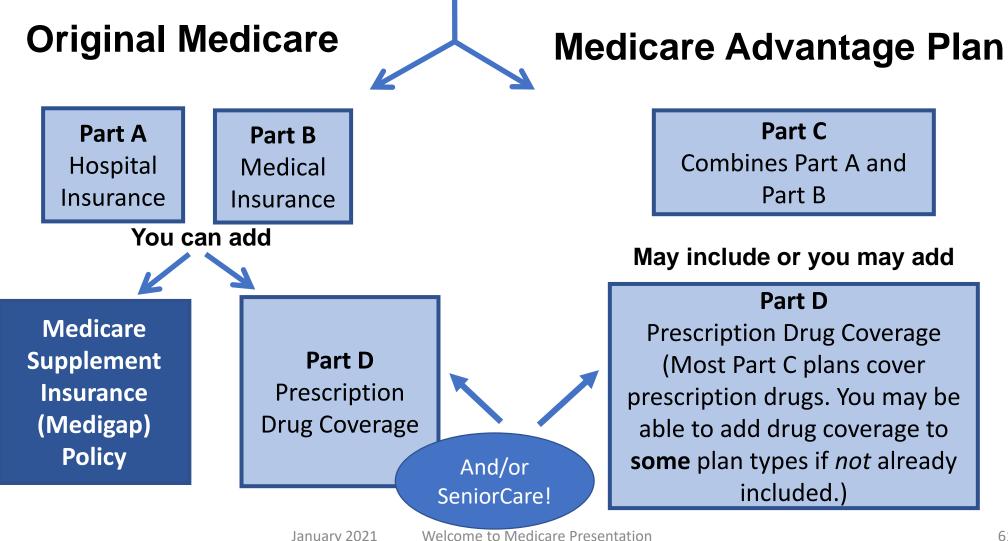


Step 3: Report Suspected Medicare Fraud and Abuse

- Call the provider.
- Gather information and documentation.
- Contact **WI Senior Medicare Patrol (SMP)**:
 - Call Toll-free: **1-888-818-2611** (Free and Confidential!)
 - To report suspected fraud/abuse.
 - For training, speakers, and/or materials.
 - To volunteer with the SMP program.



Review—Your Coverage Choices



For More Information or Assistance

- Call Medicare at 1-800-633-4227 or visit <u>www.medicare.gov</u>
- Wisconsin SHIP Resources:
 - Medigap Helpline: 1-800-242-1060
 - Medigap Part D Helpline (for ages 60+): 1-855-677-2783
 - Disability Drug Benefit Helpline: 1-800-926-4862
 - Local assistance: <INSERT YOUR CONTACT INFO HERE>



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