



A guide to understanding your  
Medicare decisions



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SERVING SOUTHWEST GA

# About our agency:

**EZ Life specializes in Medicare, Medicare Supplements, and Medicare advantage plans covering all of Southwest Georgia. We wanted to start an agency whose first goal is service. Our goal is not to just sell you a Medicare plan. Insurance, especially when it comes to Medicare, is not a one size fits all system. We take the time to sit down with our clients and learn about their needs. We have partnered with EVERY Medicare Plan available in our area in order to meet each clients specific needs. Alongside our partners at the Senior Resource Center of GA, we also help clients who need it sign up for extra help, and guide them through getting help for prescription drug costs.**

**We choose to stand out in the Medicare field. If you have any questions at all about your plans, changes you would like to make, or just in general please give us a call at 229-430-9100 or email [team@southgamedicare.com](mailto:team@southgamedicare.com)**



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# Knowing Medicare

HELLO!

I'm Ben E. Ficiary and I will be your guide today. It's my job today to try and answer as many of your Medicare questions as I can.



You'll learn about

- What Medicare Is
- Who qualifies
- Signup Periods
- Part C (Medicare Advantage) Plans
- Part D Plans
- Supplements or Medigap Policies
- Extra Help



Whenever you see the siren, it means the information is really important for you to know and remember. Be on the lookout



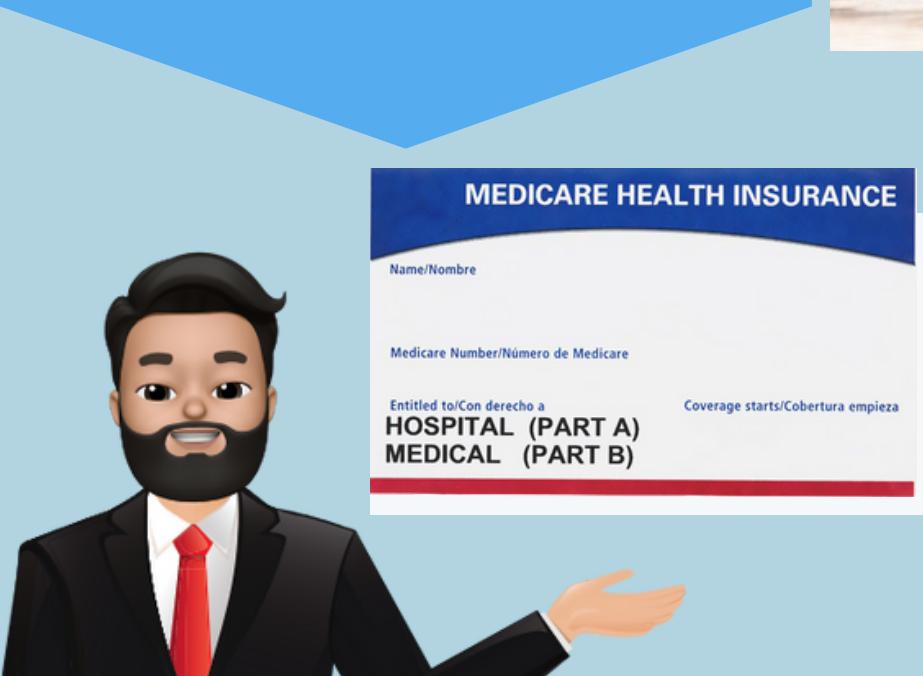
Ready to  
get Started?



# Knowing Medicare

## What is Medicare?

Medicare is federal health insurance for people 65 or older, some younger people with disabilities, people with End-Stage Renal Disease.



This is your Medicare Card. It contains what's known as original Medicare or (Parts A&B). Always keep this card, even if you change plans.

## What does the card tell me?

The card will tell you what coverage you have with original medicare: **A- Hospital**  
**B-Medical or "Doctors"**

It will also give you the effective dates of each part.



# Knowing Medicare

So what does *Original Medicare*

## COVER?

"Hospital"  
Coverage

Surgery

A

Covers:

- Inpatient care in a hospital
- Skilled nursing facility care
- Nursing home care (inpatient care in a skilled nursing facility that's not custodial or long-term care)
- Hospice care
- Home health care

"Medical"  
Coverage

B

Doctors

Covers:

- Medically necessary services: Services or supplies that are needed to diagnose or treat your medical condition and that meet accepted standards of medical practice.
- Preventive services: Health care to prevent illness (like the flu) or detect it at an early stage, when treatment is most likely to work best.



## WHEN CAN WE SIGN UP?



# Knowing Medicare

SIGN UP

## Sign up Periods

There are a few times you can sign up for Medicare. We will hit the basics, then go into when you can change plans.



### Initial (IEP)

This period starts 3 months before your 65th Birthday or three months after. During this time (in most cases) You will be enrolled in Part B, and your Medicare card will be mailed to you. During this time you can pick a part D, Part C, or Medicare Supplement.



During this time you also have a "guaranteed issue" period for a supplement. During this time Supplements have to take you no matter your health conditions. After this, they can underwrite you. You can change supplements at any time, but you do have to go through underwriting.



### Annual (AEP)

The period running from Oct 15th-Dec 7th every year where you can make changes to your Part D Plan, or Part C Plan.



### Special (SEP)

A period where you can make changes to your Medicare Advantage and Medicare prescription drug coverage when certain events happen in your life, like if you move or you lose other insurance coverage. Rules about when you can make changes and the type of changes you can make are different for each SEP.



# Knowing Medicare



## Do I have to sign up?



Your specific circumstances affect the answer to the Medicare at 65 question. In order to discover a more precise answer for this question for YOU, you will need to answer some questions.

1. Are you retired?
2. Are you still working?
3. If working, how many employees does the company that you work for have?
4. How rich is your employer group health coverage?



In most cases, you will be signed up at least for Part A when you become eligible. Most of the time if you're not on group health coverage, or still working you will automatically be assigned Part B once you get social security.



Once you get Part B your next step should be finding a plan to cover your prescription drug costs. These plans are known as "Part D Plans" and if you don't sign up when you get Part B, and do not have credible coverage, then you could face a penalty.



# Knowing Medicare

## Part D Plans



With Original Medicare the next thing you will need is a prescription drug plan, also known as a "Part D Plan"

## What do they Cover?

Medicare Part D, the prescription drug benefit, is the part of Medicare that covers most outpatient prescription drugs. Part D is offered through private companies either as a stand-alone plan, for those enrolled in Original Medicare



## Check Your Plan!

Before signing up for a Part D Plan make sure to check the plans formulary (list of covered drugs, deductibles/premiums, check copays, and pharmacies covered to try and avoid unnecessary extra costs.



Signed up for a Part D Plan is important. If you do not sign up for a plan during your initial enrollment phase (and do not have credible coverage during that time) you may owe a late enrollment penalty when you sign up for a plan. The cost of the late enrollment penalty depends on how long you went without Part D or creditable prescription drug coverage. The normal penalty is normally 1% times the average cost of a part D Plan times the number of uncovered months.



# Knowing Medicare



## Part D Plans -More to Know



### THE DONUT HOLE!

What is it ?

What does it mean ?

Can I avoid it?

#### What's the Donut Hole?



Simply put, the "donut hole" refers to a gap in your Medicare Part D Coverage, during which you pay more for your prescription drug costs. Meaning, after you and your drug plan have spent up to a certain amount for covered drugs, you have to pay a percentage up to your yearly limit.

#### What does it mean?

At the start of the plan year, your plan will pay a percentage of your part D costs, until you hit \$4,130. From there to \$6,550 you are in the coverage gap, where you'll pay no more than 25% for your covered prescriptions



#### How do I know if I will hit the donut hole?

If you are taking a majority brand name drugs, or you are prescribed a higher number of prescriptions, chances are high that you will hit the donut hole stage.

#### Ways to avoid?

The most effective way to avoid a coverage gap is to shop your Medicare Part D Plan around. Make sure you check each available Part D Plan for your specific drug costs to see if you will hit a coverage gap.





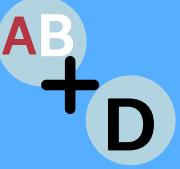
# Knowing Medicare

## "Part C" Medicare Advantage



"Part C" aka Medicare Advantage Plans, are plans sold by private insurance companies. They cover everything original Medicare does, but with some extra benefits added in.

### What to Know about Part C

 Combines Original Medicare and Part D. Administered by a private insurance company.

 Adds additional benefits- Silver sneakers membership, some dental coverage, some vision, OTC Benefits

 Just like original Medicare, these plans cover 80% of Medicare costs. Meaning if you have a surgery, you will be left with 20% of the costs

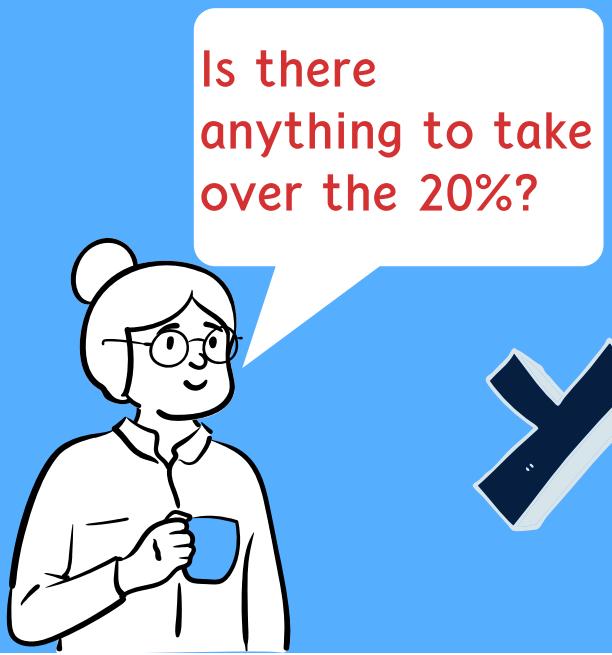
 Most plans have a small premium attached, and some have a \$0 premium.

 If you purchase a Part C Plan, you CANNOT have a supplement. You can change to a supplement if accepted by a company later on if you wish



# Knowing Medicare

## Medicare Supplements (Medigap) Plans



Is there anything to take over the 20%?

**YES!**



Medicare Supplements (also known as Medigap) are private insurance plans that cover the "Gaps" left over from Medicare. This is normally the 20% left over from Medical expenses.



These plans have a premium that increases every year depending on your age. The premium is also impacted by which plan you choose.

### What do they cover?

With Plans that range from G, F, etc ALL supplements have to cover the 20% left over from Medicare charges

### What else do I need?

In addition to a supplement, you will need to purchase a part d plan to cover Prescription drug costs.



## More about Medigap

1. You must have Medicare Part A and Part B to apply.
2. A Medigap policy is different from a Medicare Advantage Plan. Those plans are ways to get Medicare benefits, while a Medigap policy only supplements your Original Medicare benefits.
3. You pay the private insurance company a monthly premium for your Medigap policy. You pay this monthly premium in addition to the monthly Part B premium that you pay to Medicare.
4. A Medigap policy only covers one person. If you and your spouse both want Medigap coverage, you'll each have to buy separate policies.
5. You can buy a Medigap policy from any insurance company that's licensed in your state to sell one.



### Important

- You cannot have a Part C and a supplement at the same time. It's an either/or choice.
- If you are not in a guaranteed issue period companies can underwrite you and deny coverage. That's why its important that if you have a supplement, to keep it at all costs.



# Knowing Medicare

## Summary of Choices



Below are the basic choices for choosing a Medicare Plan. The only thing Medicare really requires you to have is Part D Coverage.



**Original Medicare + Part D Plan**  
COSTS- Part B Premium (unless qualified for extra help) Premium for Part D



**Part C or Medicare Advantage**  
COSTS- Part B Premium (unless qualified for extra help) Premium for Part C (unless on a zero-premium plan)

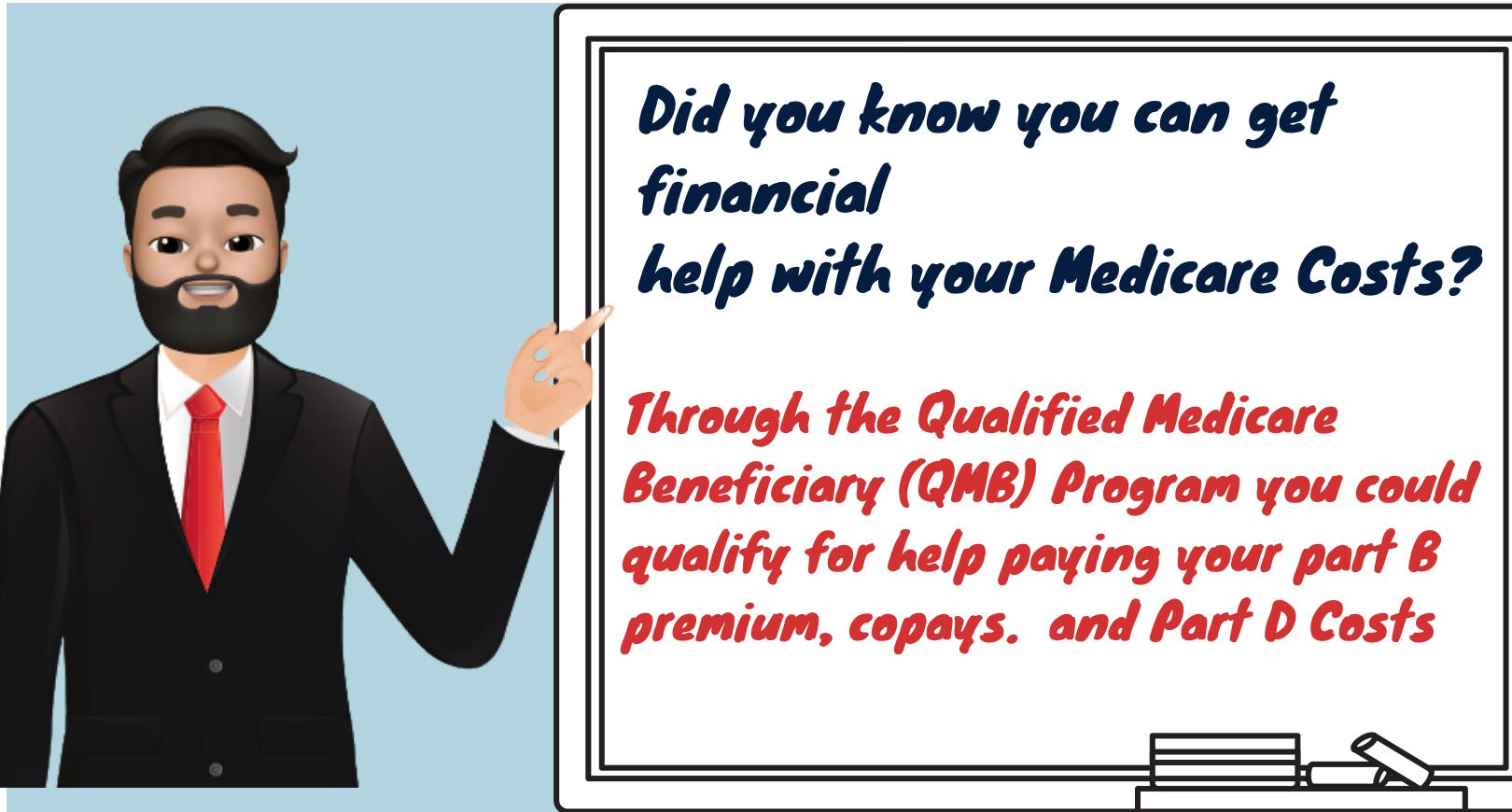


**Medicare Supplement+ Part D Plan**  
COSTS- Part B Premium (unless qualified for extra help) Premium for Supplement, Premium for Part D Plan



# Knowing Medicare

## Financial Help



*Did you know you can get financial help with your Medicare Costs?*

*Through the Qualified Medicare Beneficiary (QMB) Program you could qualify for help paying your part B premium, copays, and Part D Costs*

### QMB Program (Qualified Medicare Beneficiary)

If you meet certain financial criteria (normally make less than \$1,200 a month) the QMB Program will take care of your Part B Premium, take care of the 20% left of Medicare Costs, and lessen the cost of your Part D Drugs.

### SLMB Program (Specified Low income Medicare Beneficiary)

If you meet certain financial criteria (normally make less than \$1,300–1500) a month the QMB Program will take care of your Part B Premium, and lessen the cost of your Part D Drugs.



# Knowing Medicare

## Looking to change Plans?

Things to consider when thinking about changing Medicare Plans



**Coverage** Are the services you need covered?

**Your other coverage**—Do you have, or are you eligible for, other types of health or prescription drug coverage (like from a former or current employer or union)? If so, read the materials from your insurer or plan, or call them to find out how the coverage works with, or is affected by, Medicare.

**Cost**—How much are your premiums, deductibles, and other costs? How much do you pay for services like hospital stays or doctor visits? What's the yearly limit on what you pay out-of-pocket? Your costs vary and may be different if you don't follow the coverage rules.

**Doctor and hospital choice**—Do your doctors and other health care providers accept the coverage? Are the doctors you want to see accepting new patients? Do you have to choose your hospital and health care providers from a network? Do you need to get referrals?

**Prescription drugs**—Do you need to join a Medicare drug plan? Do you already have creditable prescription drug coverage? Will you pay a penalty if you join a drug plan later? What will your prescription drugs cost under each plan? Are your drugs covered under the plan's formulary? Are there any coverage rules that apply to your prescriptions?



# Knowing Medicare

## Terms to Know



**Original Medicare**- Parts A&B administered by the Government. Covers 80% of Medical costs.

**Part A**- Hospital Coverage. This covers hospital stays, surgeries, etc.

**Part B**- Doctor Coverage, covers doctor visits

**Part C (Medicare Advantage)**- Plans sold by health insurance companies which combine Parts A&B, add in Part D Benefits and additional benefits.

**Supplement (Medigap)**- Plans sold by insurance companies which cover the 20% that Medicare does not cover.

**Donut Hole**- Coverage gap in Part D Policies.

**AEP**- The Annual Enrollment period for Medicare.

**IEP**- Your initial enrollment period for Medicare.

**Deductible**- Amount you will have to pay before plan starts paying

**Pharmacy List**- Pharmacies that will take your plan.

**Formulary**- The list of drugs covered by the plan

**Premium**- The monthly cost of your plan