

AllHealthPlansCA.com

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Medicare Simple Explanation of information directly from:
MEDICARE.GOV

1.) Medicare Options and Link to the Dept. of Medicare – www.medicare.gov

Original Medicare: Part A (Hospital Coverage) and B (Outpatient Coverage), Part B costs approx. \$134.00 per mo. for most people, unless you qualify with a state program for special assistance. Some may pay slightly more for part B, due to income. This is usually an automatic payment from your social security benefit. Contact Medicare direct for Part B.

With original Medicare, you would probably want to purchase a Medigap plan **and** a Prescription Drug Plan so you have RX coverage and coverage with a Medigap policy for items that Original Medicare and/or Part B doesn't cover. a.k.a. gaps in medicare.

Medicare Advantage Plans (PART C): You have just as much coverage as Original Medicare with the government and sometimes more. Each plan is designed by a private company and is offered through. i.e. Anthem Blue Cross, Blue Shield, Health Net, etc. etc. Your Medicare is with a private company, and you have a private plan. The costs vary from approx. \$0 - \$200 per mo. Most private plans have an option of a plan that **includes** RX, Dental, and coverage for items original medicare doesn't cover. Below is a simplified definition of all options.

Original Medicare Part A and Part B

This fee-for-service plan covers many health care services. You can go to any doctor or supplier **that is enrolled and accepts Medicare** and is accepting new Medicare patients, or to any hospital or other facility.

Medigap (Medicare Supplement Insurance) Policies

These policies help pay some of the health care costs that Original Medicare doesn't cover. If you are in Original Medicare, you could get a Medigap policy to help cover the extra health care costs and have almost zero (0) out of pocket expenses.

Medicare Health Plans (like HMOs and PPOs)

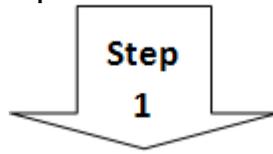
These plans are approved by Medicare and ran by private companies Aka... Medicare Advantage Plans. When you join one of these plans, you are still in Medicare. Some of these plans require referrals to see specialists. They provide all of your Part A (hospital) and Part B (medical) coverage. They generally offer extra benefits, and many include prescription drug coverage (Part D). These plans often have networks, which means you may have to see doctors who belong to the plan or go to certain hospitals to obtain covered services. In many cases, your costs for services can be lower than Original Medicare, but it is important to check with the plan because the costs for services will vary.

Medicare Prescription Drug Plans

These plans add prescription drug coverage to Original Medicare, some Medicare Cost Plans, some Medicare Private Fee-for-Service Plans, and Medicare Medical Savings Account Plans.

There are Two Main Choices for How You Get Your Medicare additional options.

Follow These Steps to Help You Decide:

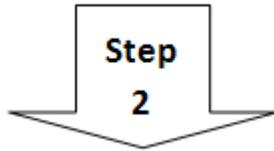


Decide if You Want Original Medicare or a Medicare Advantage Plan (PART C)

Original Medicare

Part A (Hospital Insurance) and Part B (Medical Insurance)

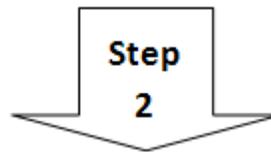
- **Medicare** provides this coverage.
- You have your choice of doctors, hospitals, and other providers, which accepts Medicare.
- Generally, you or your supplemental coverage pay deductibles and coinsurance.
- You usually pay a monthly premium for Part B to Medicare.gov.



Medicare Advantage Plan (like an HMO or PPO)

Part C – Includes BOTH Part A (Hospital Insurance) and Part B (Medical Insurance)

- Private insurance companies approved by Medicare provide this coverage.
- In most plans, you need to use plan doctors, hospitals, and other providers or you pay more or all of the costs.
- You usually pay a monthly premium (in addition to your Part B premium) and a copayment or coinsurance for covered services.
- Costs, extra coverage, and rules vary by plan.



Decide If You Want Prescription Drug Coverage (Part D)

- If you want this coverage, you must choose and join a Medicare Prescription Drug Plan.
- These plans are run by private companies approved by Medicare.



Decide If You Want Prescription Drug Coverage (Part D)

- If you want prescription drug coverage, and it's offered by your plan, in most cases you must get it through your plan or it is included.
- If your plan doesn't offer drug coverage, you can choose and join a Medicare Prescription Drug Plan.

Decide If You Want Supplemental Coverage

- You may want to get coverage that fills gaps in Original Medicare coverage. You can choose to buy a Medigap (Medicare Supplement Insurance) policy from a private company.
- Costs vary by policy and company.

Continue Below

Note: If you join a Medicare Advantage Plan, you don't need a Medigap policy. If you already have a Medigap policy, you can't use it to pay for out-of-pocket costs you have under the Medicare Advantage Plan.

I hope this helps. If there is confusion please email or call me. WENDY WILSON 9167689166

MEDICARE SUPPLEMENT PLANS ALSO KNOWN AS MEDI-GAP

What is Covered by Medigap Plans "A" through "N"

✓ Indicates "Benefit Is Covered"

✓ Indicates "Benefit Has Limited/Additional Coverage" Rest your mouse pointer on these icons to see the difference.

Medigap Benefits/Options

	A	B	C	D	F	F*	G	K	L	M	N
Part A Copay	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Part B Copay	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
365 Hosp Days	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Blood	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Hospice	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
SNF			✓	✓	✓	✓	✓	✓	✓	✓	✓
Home Health	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Part A Ded		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Part B Ded			✓		✓	✓					
Part B Excess					✓	✓	✓				
Foreign Travel			✓	✓	✓	✓	✓			✓	✓
High Ded						✓					
OOP Max								✓	✓		

2018 costs at a glance

Part A premium	Most people don't pay a monthly premium for Part A (sometimes called " premium-free Part A "). If you buy Part A, you'll pay up to \$422 each month. If you paid Medicare taxes for less than 30 quarters, the standard Part A premium is \$422. If you paid Medicare taxes for 30-39 quarters, the standard Part A premium is \$232.
Part A hospital inpatient deductible and coinsurance	You pay: <ul style="list-style-type: none"> • \$1,340 deductible for each benefit period • Days 1-60: \$0 coinsurance for each benefit period • Days 61-90: \$335 coinsurance per day of each benefit period • Days 91 and beyond: \$670 coinsurance per each "lifetime reserve day" after day 90 for each benefit period (up to 60 days over your lifetime) • Beyond lifetime reserve days: all costs
Part B premium	The standard Part B premium amount is \$134 (or higher depending on your income). However, some people who get Social Security benefits will pay less than this amount (\$130 on average).
Part B deductible and coinsurance	\$183 per year. After your deductible is met, you typically pay 20% of the Medicare-approved amount for most doctor services (including most doctor services while you're a hospital inpatient), outpatient therapy, and durable medical equipment .