Get To Know The Medicare Basics 10 Tips To Help You Make An Informed Decision

UNDERSTAND
THE DIFFERENCE
BETWEEN
MEDICARE PLANS
AND
FIND A PLAN
THAT'S RIGHT
FOR YOU

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When It Comes To Medicare, You Have Choices.

Medicare isn't "one size fits all." Understanding the basics may help you choose wisely.

Your choices include:

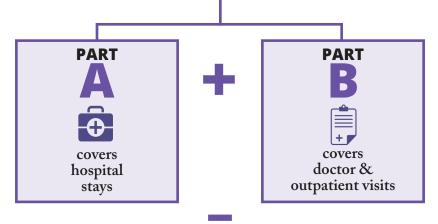
- Original Medicare, which includes hospital stays (Part A) and doctor visits (Part B).
- Original Medicare with a stand-alone prescription drug plan (Part D) and/ or a Medicare supplement insurance plan.
- Medicare Advantage (Part C), which often includes a prescription drug plan plus extra benefits (Part D) in addition to hospital stays (Part A) and doctor visits (Part B).



Medicare Choices

STEP 1

Enroll in original Medicare when you become eligible.

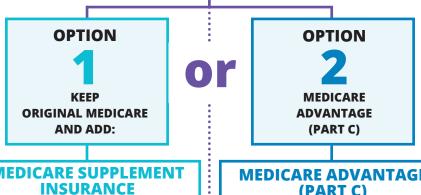


ORIGINAL MEDICARE

(government-provided)

STEP 2

If you need more coverage, you have choices.



MEDICARE SUPPLEMENT



Covers some or all of the costs not covered by Parts A & B (offered by private companies)

AND/OR

MEDICARE PART D



Covers prescription drugs (offered by private companies)

MEDICARE ADVANTAGE (PART C)



Combines Parts A & B



Additional benefits



Most plans cover prescription drugs (offered by private companies)

Questions To Consider

Following are a few questions that may help you get closer to understanding your needs.

- **1.** Are you in good health or do you have chronic conditions?
- **2.** Which prescription drugs do you take regularly? How much do you spend?
- **3.** What doctors do you see regularly and for what kind of care? How would you feel about seeing a new doctor?
- **4.** How much do you travel and where?
- **5.** Are you eligible for any health care coverage besides Medicare? Will you keep that coverage when you retire?
- **6.** How much did you spend on health care last year? Do you expect similar costs this year?
- **7.** How does health care fit into your budget? Will you need financial help to pay for Medicare premiums?







10 Tips About Medicare

1. There are two main ways to get Medicare.

- You can choose Original Medicare (Parts A and B), which is provided by the federal government.
- Or choose a Medicare Advantage plan (Part C). These plans are offered through private insurance companies.

2. With Original Medicare, you'll pay a share of the cost.

- You contributed to Medicare by paying taxes. That's why you're eligible for Medicare when you turn 65.
- Original Medicare doesn't pay for everything. You still pay a share of the cost in monthly premiums and copays.

3. Medicare supplement insurance helps control out-of-pocket costs.

It helps with some of the expenses Medicare Parts A and B don't pay, like copays and deductibles.



Important:

Review your choices once a year.

4. Prescription drug coverage helps limit drug costs.

As a Medicare member, you can get optional prescription drug coverage (Part D).

- You can enroll in a stand-alone Part D plan to go with your Original Medicare coverage.
- Or you can enroll in a Medicare Advantage plan that includes prescription drug coverage.

5. Know the choices in your state.

- Original Medicare (Parts A and B) is the same across the United States.
- Medicare Advantage (Part C) and prescription drug (Part D) plans are offered by private insurance companies and may be available only in certain counties, states or regions.
- Medicare supplement policies offer nationwide coverage and are available by state.

6. Enroll at the right time.

The Initial Enrollment Period (IEP) is your first chance to enroll in Medicare. It's the three months before your 65th birthday month, the month of your birthday, and the three months after your birthday month.

- If you enroll before the month you turn 65, coverage starts on the first day of your birthday month.
- If you enroll during your birthday month or later, coverage starts on the first day of the month following the date you enroll.

7. Review your choices once a year.

After you choose your Medicare coverage, you can make changes each year during the Medicare Open Enrollment Period (OEP), October 15 – December 7. Review your coverage to see if it still fits your needs. Keep in mind there may be limitations to rejoining a Medicare employer-sponsored plan.

8. Special Election Period (SEP).

In some cases you may be able to enroll in, or switch, plans outside of the IEP and OEP. This includes changes in your life situation, such as:

- You retire and leave a health care plan through your employer or union.
- You move out of your current health plan's service area.



Additional financial help in paying for Medicare may be available for those with lower incomes. Contact your local Social Security Administration office for more information.

9. Review your current coverage.

For example, if you have group coverage from your job, or retiree insurance from a former employer, you'll want to see how it fits with Medicare.

10. Help is available.

Medicare can be complicated, but help is available. You may even qualify for financial help. See the list of resources on the next of this guide.







Explore Your Choices

Working beyond 65.

Save some money.

If you have an individual health plan, a Medicare plan could help you save money on your health care expenses. If you have health insurance through your employer, a Medicare plan could work with your employer-sponsored coverage. Check with your benefits administrator to see if it makes sense for you to sign up for Original Medicare (Parts A and B) in addition to the coverage you get today.

Start with basic coverage.

Many people who choose to work past age 65 enroll only in Part A because there is no monthly premium. Some choose to enroll in both Parts A and B together (Original Medicare). However, Part B comes with a monthly premium based on your income, so many don't enroll in Part B until they lose their employer-sponsored coverage.

Is enrollment required?

Most people are not required to enroll in Medicare when they turn 65. Check with your benefits administrator to see if your employer requires you to enroll in Medicare Part A or Part B.

Retiring at 65.

Are you ready?

If you're ready for retirement, you will be eligible for Original Medicare (Parts A and B) and other Medicare plans when you turn 65. If you don't have employer-sponsored coverage, you should consider enrolling during your Initial Enrollment Period: the three months before the month you turn 65, the month of your birthday, and the three months after.

Stay ahead of the game.

If you're retiring, you have 63 days after your employer sponsored coverage ends to enroll in a Medicare plan without penalty. But it's best to sign up before you retire to avoid a gap in coverage.

Change is good.

Health care needs can change from year to year. Be sure to review your needs (upcoming surgeries, current prescription drugs, new wellness goals) so you can find a plan to best meet them. You can change your plan once a year during the Open Enrollment Period (OEP). This is a seven-week period from October 15 through December 7.



Additional Resources

For questions about Medicare and detailed information about plans, go to Medicare.gov or call:

1-800-MEDICARE TTY 1-877-486-2048

For help with questions about eligibility, enrolling in, or about your eligibility for help with the cost of Medicare coverage, go to Medicare.gov or call:

> 1-800-772-1213 TTY 1-800-325-0778

For help in finding local, state and community-based organizations that serve older adults in your area, go to Eldercare.gov or call:

1-800-677-1116 TTY 711



Please call Steve today at (702) 410-8020 to schedule a free consultation or group seminar. Steve can also be reached at steve@blueskylv.com.