

Medicare Made Clear®

Learning the basics of Medicare



What is Medicare?

PART

A

Medicare is a federal program that offers health insurance to American citizens and other eligible individuals.

PART

B

The program is often called Original Medicare. It has two parts – Part A and Part B.



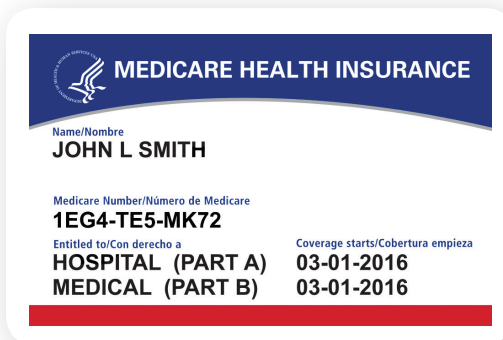
Who can get Medicare?

U.S. citizens and legal residents

Legal residents must live in the U.S. for at least 5 years in a row, including the 5 years just before applying for Medicare.

You must also meet one of the following requirements:

- Age 65 or older
- Younger than 65 with a qualifying disability
- Any age with a diagnosis of end-stage renal disease or ALS



What does Medicare cover?

Original Medicare (Parts A & B) provides many health care benefits



Part A covers inpatient hospital and skilled nursing care.



Part B covers doctor visits and outpatient care.

You can choose private plans to get more coverage



Medicare Advantage plans (Part C) combine Part A and Part B coverage. They often include drug coverage and other benefits you don't get with Original Medicare.



Medicare prescription drug plans (Part D) help pay for medications. You can get a standalone Part D plan or get a Medicare Advantage plan that includes drug coverage.



Medicare supplement insurance (Medigap) helps pay some or all costs not paid by Original Medicare (deductibles, copays and coinsurance).

What are my options?

You can add coverage to Original Medicare or choose a Medicare Advantage plan instead.

Original Medicare

You may add a standalone Part D plan, a Medicare supplement plan or both to Original Medicare (Parts A & B).

The diagram illustrates four combinations of Medicare coverage options:

- Part A (wheelchair icon) and Part B (stethoscope icon).
- Part A (wheelchair icon), Part B (stethoscope icon), and Part D (pill bottle icon).
- Part A (wheelchair icon), Part B (stethoscope icon), and Med Supp (crossed arrows icon).
- Part A (wheelchair icon), Part B (stethoscope icon), Part D (pill bottle icon), and Med Supp (crossed arrows icon).

Medicare Advantage

You may choose to get your benefits through a Medicare Advantage plan (Part C). Many plans come with built-in prescription drug coverage. You can add a standalone Part D plan only with certain Medicare Advantage plan types.

The diagram illustrates three Medicare Advantage options:

- Part C (wheelchair and stethoscope icon) (with no drug coverage).
- Part C (wheelchair and stethoscope icon) and Part D (pill bottle icon) (with built-in drug coverage).
- Part C (wheelchair and stethoscope icon) and Part D (pill bottle icon) (add standalone drug plan).

What does Medicare cost?

Medicare and many Medicare plans charge premiums

A premium is a fixed amount you pay each month for coverage.



You also pay a share of the cost for health care services you receive. The three kinds of payments you might have are:

- **Deductible**
- **Copay**
- **Coinsurance**



Deductible

A set amount you pay out of pocket for covered services each year before Medicare or your plan begins to pay.

You Pay First



Medicare or Your Plan Begins to Pay



Copay

A fixed amount you pay at the time you receive a covered service. For example, you might pay \$20 when you visit the doctor or \$12 when you fill a prescription.

You Pay a Fixed Amount



Medicare or Your Plan Pays the Rest



Coinsurance

A percentage of the cost for a covered service that you pay when you receive it. For example, you might pay 20% and Medicare or your plan would pay 80%.

**You Pay
20%**



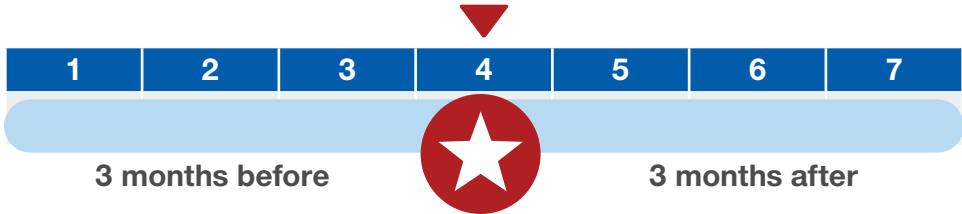
**Medicare or
Your Plan Pays
80%**

When can I enroll?

Enrolling in Medicare for the first time

- Your Initial Enrollment Period (IEP) is 7 months long. It includes your 65th birthday month plus the 3 months before and the 3 months after.
- Your IEP begins and ends one month earlier if your birthday is on the first of the month.
- Your IEP is based on your 25th month of receiving benefits if you become eligible for Medicare due to disability.
- You should be enrolled in Part A and Part B automatically at age 65 if you are receiving social security or Railroad Retirement Board benefits. Medicare will mail your card to you.

**The month you turn 65 years old or
you receive your 25th disability check**



Changing your coverage

- After you're enrolled, you have a chance to make changes to your coverage each year during Medicare Open Enrollment, October 15 to December 7.
- Review your coverage choices yearly. Medicare and plan benefits or costs may change.
- Consider your health care needs and budget for the coming year.
- Keep your current coverage or change it based on your needs.
- You may make coverage changes at other times of the year in certain qualifying situations.

What if I work past 65?

You still have an Initial Enrollment Period

- Your IEP happens when you turn 65 whether you continue to work or not.
- You have Medicare decisions to make even if you have employer coverage (yours or your spouse's).

Be proactive

- Make sure you know your IEP dates.
- Medicare will notify you only if you are receiving social security or Railroad Retirement Board benefits.
- You may need to sign up for Medicare yourself by contacting Social Security.

Medicare may work with employer coverage

- You may want to enroll in just Part A. It's premium free for most people.
- Some employers require you to take full Medicare benefits (Part A and Part B) at age 65.
- Check with your employer plan benefits administrator before making Medicare decisions.



How do I choose?

Think about your needs so you can see how different coverage options might work for you. Answering the following questions can help you get started.

Your health

- How often do you go to the doctor?
- What health problems do you have?
- What medications do you take regularly?

Your budget

- What are you able to pay each month in premiums?
- How comfortable are you covering copays or coinsurance for services?
- How willing are you to accept the risk of high out-of-pocket costs?

Your preferences


- Which doctors, hospitals and pharmacies do you like to go to?
- How important is it for you to have access to health care while traveling?
- What other coverage do you have, such as an employer or retiree plan?




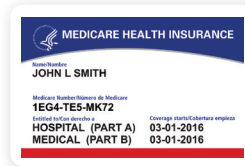
STEP 1

Enroll in Original Medicare.

Original Medicare. Provided by the federal government.

PART A  Helps pay for hospital stays and inpatient care

PART B  Helps pay for doctor visits and outpatient care



STEP 2

Decide if you need additional coverage. There are two ways to get it.

OPTION 1 — OR — OPTION 2

Add one or both of the following to Original Medicare.

Choose a Medicare Advantage plan.

Medicare Supplement Insurance Plan. Offered by private companies.



Helps pay some of the out-of-pocket costs that come with Original Medicare

Medicare Part D Plan. Offered by private companies.



Helps pay for prescription drugs

Medicare Advantage Plan. Offered by private companies.



Combines Part A (hospital insurance) and Part B (medical insurance) in one plan



Usually includes prescription drug coverage



May offer additional benefits not provided by Original Medicare

Want to learn more?



Visit [MedicareMadeClear.com](https://www.MedicareMadeClear.com)

Medicare

1-800-MEDICARE (1-800-633-4227), TTY 1-877-486-2048
[Medicare.gov](https://www.Medicare.gov)

Social Security Administration

1-800-772-1213, TTY 1-800-325-0778
[SSA.gov](https://www.SSA.gov)

State Health Insurance Assistance Program (SHIP)

[shiptacenter.org](https://www.shiptacenter.org)

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