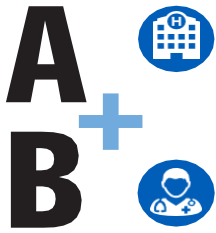


An overview of how Medicare works

If you're new to Medicare, this can help you decide what is right for you.

Original Medicare (Parts A and B) is a federal government program that helps cover:





- **A** - Inpatient care in hospitals and skilled nursing facilities (not custodial or long-term care).
Hospice and some in-home Therapy services.
- **B** - Doctor services, outpatient care (hospital), lab tests, surgery, diagnostic test (X-ray-MRI), office-therapy, Ambulance, medical equipment, and supplies.
Most preventive services, including a yearly wellness exam.

Original Medicare (Parts A and B) does not cover:

- Prescription drugs.
- Vision, dental, or hearing aids



Here are your options. Must have Parts A&B to Qualify.

Option 1: an all-in-one Medicare Advantage plan or Plan C or MAPD	Option 2: One or both of the following
<p>Medicare Part C</p> <h2>C+D+Extras</h2> <ul style="list-style-type: none"> • Includes all of Part A (hospital) and Part B (medical) coverage. • Usually includes Part D prescription drug coverage. • Often has a zero premium. • Often includes extra benefits Dental, vision, hearing, over-the-counter products, flex cards, gym membership. • Caps what you'll pay out-of-pocket for medical services. 	<p>Medicare Supplement </p> <ul style="list-style-type: none"> • Freedom to choose any doctor • Has a premium that increases with age • Medicare Part A or Part B deductibles, coinsurance, or copayments • Medicare Part B excess charges • Skilled nursing facility care coinsurance • Foreign travel emergencies <hr/> <p>Prescription drug coverage</p> <p>Part D </p> <ul style="list-style-type: none"> • Has a Premium and often a deductible • Helps pay for many of your prescribed drugs • Gives you access to home delivery services and pharmacies across the country

Medicare Choices to help pay for Deductibles, Co-Insurance and Co-pays. Must have Parts A&B to Qualify.

1. **Medicare Supplement Plans:** A Medigap policy provides insurance through a private insurance company and helps fill the cost-sharing gaps in Original Medicare, for instance by helping pay for Medicare deductibles, coinsurances, and copayments. Depending on where you live, you have up to 10 different Medigap plans to choose from: A, B, C, D, F, **G**, K, L, M, and N. (Note that plans in Wisconsin, Massachusetts, and Minnesota have different names.) **Plan G gives you the best coverage.** Each type of Medigap offers a different set of benefits. **Premiums vary**, depending on the plan you choose the company you buy it from, and your age. **Freedom to choose any doctor in USA that takes Medicare. (85% of practicing physicians)**
2. **Stand-alone Medicare private drug plan (Part D):** If you have Original Medicare and want Medicare drug coverage, you need to sign up for a private drug plan (PDP). All Medicare drug plans have different costs and a different list of drugs that they cover (known as the formulary). Make sure the plan you choose covers the drugs you need at a cost you can afford. Also know that if you do not sign up for a Part D plan when you first become eligible, you may incur a premium penalty later on, and it will be for life.
3. **Medicare Advantage Plan:** These plans contract with the federal government to provide Medicare benefits. They must provide at least the same set of benefits offered by Original Medicare, but may have different rules, costs, and restrictions. For instance, Medicare Advantage Plans may require that you see **health care providers in a network or Group**, and/or that you get a referral (HMO) from your doctor before seeing specialists. Some private health plans offer extra, Medicare-excluded benefits, such as vision, dental, hearing and OTC. While premiums may be low, service costs may be higher than in Original Medicare for certain services (or vice-versa). You also may pay more for your care if you do not follow the plan rules. Medicare Advantage Plans must have annual limits on out-of-pocket costs. Although these limits vary by product, they should protect you from excessive costs if you need a lot of health care. Benefit packages may change every year, so it is important to review your current coverage and options annually.