A simple guide to getting started with Medicare.

Whether you're new to Medicare or simply need a refresher, read on to quickly learn about how coverage works, the basics of choosing a plan, and the resources available to help you make the best decision for your health care coverage needs.

senior health connect

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Understanding how Medicare works

The essential ABCs (and D!) of Medicare

When you turn 65, you become eligible for certain medical benefits from the government, known as Medicare Part A and Medicare Part B (also known as Original Medicare). But you can also choose private Medicare coverage, known as Medicare Part C (also known as Medicare Advantage plans). Finally, you can opt for Part D prescription drug coverage that is added to Original Medicare.

Here's what you need to know about how Medicare works:

Hospital Coverage

Part A

Most people who qualify for Medicare automatically get Part A coverage without having to pay a premium. Part A mainly includes inpatient hospital care, skilled nursing facility care, hospice, and home health care after a hospital stay.

Medical Coverage

Part B

Part B helps cover medically necessary medical services, such as doctor visits, lab tests, outpatient hospital care, durable medical equipment, ambulance transportation, and certain preventative services, like screenings and wellness visits. Part B premiums are generally deducted from your Social Security check each month to help pay the cost of this coverage.

Medicare Parts A and B are often referred to as "Original Medicare."

Medicare Advantage Plans

Part C

You have the option to join a Part C plan instead of Original Medicare. This coverage is provided by a private health plan called a Medicare Advantage (MA) plan. These health plans are contracted with and approved by Medicare to care for you. The coverage includes everything covered under Part A and Part B, except hospice care (Original Medicare continues to cover hospice care). Often, the plans include Part D prescription benefits as well. The MA plans may also include additional benefits not available with Original Medicare, such as vision care, gym membership, dental care, and more. The type and scope of supplemental benefits vary by plan and in certain cases, members may need to use doctors in the plan's network in order to obtain covered benefits.

Prescription Drug Coverage

Part D

If you join a Medicare Part D prescription drug plan, it can help lower your prescription drug costs, which are generally not covered by Medicare. Part D prescription drug coverage may be included in Medicare Advantage plan coverage. This coverage is available as a stand-alone plan that you can add to your Original Medicare coverage or certain Medicare Advantage plans that do not offer prescription drug coverage.

How to choose

Medicare coverage based on your health needs

Before you enroll in a Medicare plan, think about your health needs and budget, and compare your options.

Here are a few insights to help:

Original Medicare

Part A and Part B do not cover 100% of your medical and hospital costs. Like some other health insurance coverage, you may be required to meet a deductible and pay a portion of the cost of your care (depending on the services). Original Medicare also does not provide coverage for prescription drugs. For this, you need a stand-alone plan that may charge an additional monthly premium. In some instances, you may have Medicaid, military retiree, or employer or union coverage that pays some or all of the costs that Original Medicare doesn't cover. There are certain advantages, however. For instance, you can generally see any physician who participates in Medicare.

Medicare Supplemental Coverage

If you receive Medicare benefits through the Original Medicare program, you may decide to use a combination of Original Medicare and Medicare Supplemental coverage (also known as Medigap) to manage costs. This coverage can help pay for expenses like copays and other out-of-pocket costs that Original Medicare does not cover. Private insurance companies offer these plans. This coverage generally requires an additional monthly premium.

Medicare Advantage Plan

A Medicare Advantage plan (also referred to as Medicare Part C) includes all the health care benefits you are entitled to under Original Medicare and may also include coverage like vision, hearing, dental and prescription drug coverage, or over-the-counter supply allowances. Certain MA plans may cover you for costs only with providers within the plans' networks and may charge additional premiums and/or other out-of-pocket costs (depending on the particular plan). Medicare Advantage plans have a yearly limit on what you would pay out of pocket for services. Once you reach that limit, you pay nothing for the care provided under Part A and Part B for the rest of the year. Medicare Advantage plans can, however, choose not to cover the costs of services that are not medically necessary under Medicare. Medicare Advantage plans contract with the government to provide coverage to you, so you still have Medicare, but you don't need to use your Medicare card when you obtain medical services. You will present an insurance member card instead.

Important dates to remember

If you're turning 65 soon or you're over 65 and retiring, it may be time to enroll in Medicare or explore your Medicare coverage options. Enrollment in federal health insurance isn't automatic, so learning sign-up dates is important.

Make sure to mark your calendar.

Initial Enrollment Period

If you'll soon be turning 65, you're eligible to participate in an Initial Enrollment Period determined by your birth month. Your Initial Enrollment Period starts three (3) months before your 65th birthday, includes your birth month, and extends three (3) months after your birth month. It's important to enroll during the Initial Enrollment Period to avoid any gap in coverage, potential late enrollment penalties, or having to delay enrollment until the next General Enrollment Period.

If you enroll during the first three (3) months of your enrollment period, your coverage will begin sooner than if you sign up later in the enrollment period.

Enroll by visiting your local Social Security office or calling the Social Security Administration at 800-772-1213 (TTY 711).

General Enrollment

January 1 – March 31
If you miss your Initial Medicare Enrollment period, you can sign up for Original Medicare (Medicare Part A and/or Part B) during the General Enrollment Period that runs from January 1 to March 31 of every year. You might have to pay a late enrollment penalty for Part A and Part B if you did not sign up when you were first eligible.

Medicare Annual Enrollment

October 15 – December 7
This is when anyone who has Medicare can make coverage changes for the upcoming year. Each year, health plans review and may change their benefits and the prescription drug formularies. Changes can be substantial from year to year, and many new plan features may be added. Moreover, your health situation or budget may change. As such, it is wise for you to evaluate your coverage options each year during the Medicare Annual Enrollment Period. You may find it helpful to meet annually with a licensed insurance broker to review your current coverage and health care needs so you can decide whether your current plan is still the best fit for you.

Medicare Advantage Open Enrollment

January 1 – March 31
This is when people who are currently enrolled in a Medicare Advantage plan can change to another plan or enroll in Original Medicare.

Have questions or want to learn more?

We can put you in touch with an independent, licensed broker who can help you navigate your Medicare coverage options.

(419) 237-1001 (TTY 711).

Key takeaways

One of the first things you'll need to do when deciding what coverage is best for you is to carefully consider whether Original Medicare (Parts A and B) or Medicare Advantage (Part C) coverage better meets your health care needs.

Remember:

- Once you enroll in Medicare and decide to switch to another coverage option, you can do so during the Annual Enrollment Period that runs from October 15 to December 7 each year.
- If you enroll in a Medicare Advantage plan, you can change to another plan or enroll in Original Medicare during the Medicare Advantage Open Enrollment Period (OEP) from January 1 to March 31.

Frequently asked questions

What if I'm covered by a group health plan?

If you are working past 65, are covered by group health insurance, and plan to retire soon, your separation date from work triggers a Special Enrollment Period when you can enroll in Medicare. You may want to work with an independent insurance broker to ensure there are no gaps in coverage.

How do I avoid a penalty fee?

If you don't sign up for Medicare coverage during your Initial Enrollment Period and you don't have other similar coverage, you may have to pay a late enrollment penalty when you eventually do sign up. This penalty is added to your monthly premium every month after that. The penalty increases the longer you neglect to sign up for Medicare and do not have similar coverage, such as coverage from your employer. You must have credible proof of this coverage to avoid the penalty.

What is a Special Election Period?

If you qualify for Extra Help, also called Low Income Subsidy (LIS), you may join or switch Medicare Advantage plans once per calendar quarter during the first nine months of the year. This Special Election Period can be used once during one of these three periods: January through March, April through June, or July through September.

Senior Health Connect

The Toledo Clinic wants to help you reach your health and wellness goals. The Senior Health Connect program is a collaborative approach to care delivery that focuses on preventive care and providing care coordination resources for Medicare-eligible patients.

Through this program, the primary care physicians and care teams at The Toledo Clinic are able to offer services that focus on your total health, including no-cost education about your Medicare options.

Taking the first steps in Medicare enrollment might seem complicated, but you don't have to figure it all out on your own. Through Senior Health Connect, no-cost resources are available to help you feel more confident in making informed health care choices.

We encourage you to take advantage of the educational resources offered by The Toledo Clinic to its Medicare-eligible patients.

To get started, you need to determine your status and where you fall in the different enrollment periods explained in this document. If you are already a patient enrolled in a Medicare Advantage plan with one of the participating insurance companies, you are automatically part of the Senior Health Connect program. Please consult with your physician or practice staff if you are unsure.

Need a little help getting started?

You don't have to go it alone. Here's how to connect with an expert who can assist you.

Chat with a broker

Call **(419) 237-1001 (TTY 711)** to speak to an independent licensed broker who can help explore your Medicare options and find coverage that meets your needs.

Get more help at SeniorHealthConnect.com/TTC/ABCD

Our website offers several resources that may help you in your Medicare and Medicare Advantage research, including a Medicare Enrollment Prep Guide. This guide can assist you in selecting the right plan for your specific needs, as well as helping you prepare to meet with a local broker when the time comes.

Independent, licensed insurance brokers work with Medicare beneficiaries to explain Medicare coverage options, including with respect to Medicare Supplement Insurance as well as Medicare Advantage Plan and Medicare Prescription Drug Plan options offered by organizations contracted with Medicare. The independent, licensed insurance brokers are not an affiliate of the provider group or the Medicare Advantage Plans. Independent, licensed brokers may not offer every plan available in your area. Senior Health Connect contracts with many Medicare Advantage Plans in your area. Any information the independent, licensed brokers provide will be limited to those plans they offer in your service area. For a complete listing of available Medicare Advantage Plans, please call 1-800-Medicare (TTY users should call 1-877-486-2048), 24 hours a day, 7 days a week, or consult www.Medicare.gov. Enrollment in any Medicare Advantage Plan depends upon contract renewal.

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