

Medicare Medigap vs MAPD Altruis, July 16, 2024

What is Medicare?



What is Medicare?



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Medicare prescription drug coverage



Types of drugs most **prescribed for Medicare** beneficiaries as determined by federal standards

Specific brand name drugs and **generic** drugs included in the drug list (formulary)

Commercially available vaccines not covered by Part B



Part

Medicare prescription drug coverage Helps with the cost of prescription drugs





Part

5 MAPD plans are plans offered by private insurance companies.

What does Medicare cover?



What does Medicare cover? Parts A & B: Original Medicare Provided by the federal government



- ✓ Hospital care
- ✓ Skilled nursing care
- ✓ Hospice care





Medicare covers just 80%

- All of the cost of your care you have out-of-pocket costs, with no limit
- Prescription drugs
- Routine dental, vision or hearing care
- Eyeglasses, contacts or hearing aids
- Long-term or custodial care (help bathing, eating, dressing)
- Excess charges for services by doctors who don't accept
 Medicare assignment
- Care received outside the U.S., except for certain circumstances



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

Medicare Part B cost example

Medical Insurance

Part

B

- Debbie has heard about doctors accepting Medicare assignment and it has something to do with out-ofpocket costs.
- She asks what the difference in cost would be if the doctor accepts assignment or not.

Debbie's costs	Accepts assignment	Refuses assignment
Usual and customary doctor's fees	\$300	\$300
Medicare-approved amount	\$240	\$240
Reduced Medicare- approved amount		\$278
Medicare pays 80%	\$192	\$223
Ellen pays 20% coinsurance	\$48	\$56
Ellen pays doctor's excess charges (15%)		\$42
Total Debbie pays	\$48	\$98
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Formulary: List of covered drugs

Tiered formulary

- Drugs are grouped into tiers
 based on cost
- In general, the lower the tier, the lower the cost
- **Deductibles** may be charged by tier

Fast facts

- Must be enrolled in Par A, Part
 B or both
- May be required to use pharmacy network
- Coverage and costs vary by plan and may change per year
- Part D premium penalty for late enrollment



Part

Which plan is right for me?







Helps pay some costs not paid by Medicare

- Supplements Original Medicare (Part A & Part B)
- Can't be used with Medicare Advantage
- Insurance companies can offer up to 12 standardized Medigap Plans (Plans A-N)
- You'll pay a **monthly premium** for a Medigap plan and you must continue to pay your Part B premium
- Medigap plans do not include prescription drug coverage
- Starting in 2025, plans must have unisex rates



Plans may help pay:

- Part A and Part B deductibles
- Copays, coinsurance and provider excess charges
- Cost for extra 365 days of hospital care after lifetime reserve days used
- Cost of blood transfusions, first three pints
- Cost of foreign travel emergency, up to plan limit \$50,000 Lifetime

Plans do not help with:

- Prescription drugs
- Routine dental, vision or hearing care*
- Eyeglasses, contacts or hearing aids*
- Extra days in a skilled nursing facility after Part A benefit
- Custodial care (help bathing, eating, dressing) – Biggest misunderstanding
- Long-term care



Med Supp

Medigap

Benefit	Plan A	Plan B	Plan C ¹	Plan D	Plan F ¹	Plan G	Plan K	Plan L	Plan M	Plan N
Part A hospital coinsurance and 365 extra hospital days	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Part A deductible		100%	100%	100%	100%	100%	50%	75%	50%	100%
Part B coinsurance or copays	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%*
Part B annual deductible			100%		100%					
Part B excess charges					100%	100%				
Cost of blood transfusion (first three pints)	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%
Cost of foreign travel emergency (up to the plan limits)			80%	80%	80%	80%			80%	80%
Hospice care coinsurance costs	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%
Part B preventive care coinsurance	100%	100%	100%	100%	100%	100%	100%		100%	100%
Skilled nursing facility care coinsurance			100%	100%	100%	100%	50%	75%	100%	100%
Yearly out-of-pocket limit before all benefits paid at 100% (2020)							\$5,880	\$2,940		



Med Supp

Medigap

14 *except certain copays

¹Only available to beneficiaries who became eligble in 2019 or earlier, and who enrolled prior to Jan. 1, 2020

Medigap plans might be right for you if: You are enrolled in both Medicare Part A and Part
 B and live in the state where the plan is offered

Med Supp

Medigap

- You don't mind paying a higher monthly premium in exchange for paying less—or even nothing when you get medical care
- You travel outside of Michigan for an extended period each year and want to seek routine health services when you're away
- You want the freedom to **use any provider** that accepts Medicare—no network to worry about
- You already have or don't mind having to purchase a stand-alone Part D prescription drug plan
- You're in the open enrollment period or are losing
 your health insurance coverage
 Priority Health

Medicare Advantage



Health plans offered by private insurance companies

- Offers additional coverage to Parts A and B
- Becomes an MAPD plan if it includes Part D
 prescription drug coverage
- Best way to get the lowest cost plans with Parts A, B and D together
- May also include extras like dental, vision and fitness memberships
- With MAPD, just one card, one company to use for your medical and pharmacy needs



MAPD

Medicare Advantage

Medicare Advantage plans might be right for you if:

- Paying a lower monthly payment is important to you
- You want **more coverage** than Original Medicare (Parts A and B) offers, including things like:
 - Prescription drugs
 - Vision, dental, hearing, fitness membership and more
- You prefer predictable copayments
- You like the idea of having just one plan, and one card, for all your medical and pharmacy needs
- You want to know there's a maximum you'll pay outof-pocket each year so you're protected financially
- You like the idea of using a network of providers to save money

How Medicare Advantage works



How do I decide which plan is right for me?





What are my options?



Medicare coverage combinations

with Original Medicare



- Predictable Part A and Part B cost share
- Limited maximum out-of-pocket
- Stops/prevents Part D penalty
- No network member can seek care from any provider who accepts Original Medicare
- Coverage is standardized making it easier to compare plans

CONS:

- Highest cost option under Original Medicare*
- Only covers what Original Medicare allows
- Coverage doesn't extend outside the U.S. or its territories – except for emergencies (limited coverage)
- May be underwritten for medical conditions



Option Parts

A, BD+ Medigap

Medicare coverage combinations

with Medicare Advantage

PROS:

- Predictable premium and copays, most times lower than Medigap
- Predictable drug copays
- Can offer benefits Original Medicare doesn't cover (dental, vision, OTC)
- Emergent and urgent coverage outside of the U.S.
- Stops/prevents Part D drug penalty

CONS:

- May be required to use a provider in the plan's network
- May pay higher copays if non-network provider used
- Coverage changes January 1st of every year (must be as good as Original Medicare)
- All plans have a MOOP (Maximum Out of Pocket)



Option:

Parts C+D (MAPD)

Medicare Supplement or Medicare Advantage?

Considerations	Medicare Supplement	Medicare Advantage			
Coverage	 Pays some costs not paid by Original Medicare Does not help with drug costs Nationwide coverage 	 Provides benefits of Original Medicare and beyond Often includes drug coverage May have provider network 			
Cost	 Monthly plan premium Drug plan premium and other costs if coverage added Out-of-pocket costs depend on plan chosen 	 May charge plan premium Often no additional premium for drug coverage Copays or coinsurance for most covered services Annual out-of-pocket maximum 			
Convenience	 Multiple plans (when added to Original Medicare along with a Part D plan) 	All-in-one plan			



When can I enroll?



Initial enrollment period

You have a seven-month window to join—from three months before the month you turn 65, through your birthday month and three months after the month you turn 65. If you don't sign up during this window, you must wait until the **General Enrollment Period**.





General enrollment period



Jan 1 – Mar 31 each year



For those who miss their Initial Enrollment Period	May enroll in Part A, Part B or both	May choose to enroll in a Medicare Advantage plan (Part C) or a Rx plan (Part D)	Late enrollment premium penalties may apply
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Special enrollment period: Working past 65

- For those who delayed enrollment
- May enroll in Part A, Part B or both
- Part B enrollment triggers
 Medicare Supplement
 Open Enrollment

Month after the last month of employment or employee health coverage



- May choose a Part C or Part D plan
- Enroll in Part D early to avoid penalty





Medicare Supplement Open Enrollment

- No medical underwriting if you enroll in this time
- May enroll in a plan later but could be denied or charged more based on health history





6 months after the month you're 65 or older and enrolled in Part B



Late enrollment premium penalties



- No penalties, if qualified for premium-free coverage
- Otherwise, 10%



- No penalties, if qualified for SEP
- Otherwise, 10%
 for each full 12 month period



- No penalties, if less than 63
 days without coverage
- Otherwise, 1% of current monthly premium for each month eligible and did not have it



When can I change my coverage?



Medicare Annual Enrollment Period (AEP)

Every year Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec Oct 15 – Dec 7

Not an opportunity to enroll in Part A or Part B	Switch from one Medicare Advantage plan to another	Join, switch or drop a Medicare prescription drug plan (Part D)
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Medicare Open Enrollment Period (MA-OEP)



Jan 1 – Mar 31

Available to Medicare Advantage plan members only Switch to a different Medicare Advantage plan or return to Original Medicare

Enroll in Part D plan if returning to Original Medicare Beneficiaries may make only one election change during MA OEP Effective date of disenrollment is first of the month following receipt of the disenrollment request



Special Enrollment Period: Qualifying events

- Move out of plan service area
- Move within plan service area and have new plan options
- Leave or lose other health care coverage
- Qualify for a **Special Needs Plan**
- Move into or out of an institution, such as a nursing home
- Get or lose financial help with Medicare
- Move back to U.S. after living outside the country
- Enrolling in a 5-Star plan, once per year

Month after you move or the month after you notify your plan





How can I keep my plan affordable?



Your benefits drive your savings

Benefits that save on costs

- Get your annual preventive exams/services
- Use plan's provider network if applicable
- Save on **prescriptions** with generic alternatives and preferred pharmacies
- Use virtual visits as your plan allows

