Learning the Medicare basics.

Medicare Made Clear[™]

Get Answers Series



Look inside to:

- Understand the difference between Medicare plans
- Find a plan that's right for you





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).

Important: Most Part C plans include vision, hearing and dental benefits.

Medicare Choices

Step 1

Enroll in Original Medicare when you become eligible.

ORIGINAL MEDICARE



Covers hospital stays



Covers doctor and outpatient visits

Government-provided

Step 2

If you need more coverage, you have choices.

Option 1

or

Option 2

Keep Original Medicare and add:

MEDICARE SUPPLEMENT INSURANCE



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

10 tips about Medicare.

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.

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.

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.

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.

Important: If you don't sign up for Part D coverage when you enroll in Medicare, you may pay a penalty if you enroll later unless you qualify for an exception.







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.

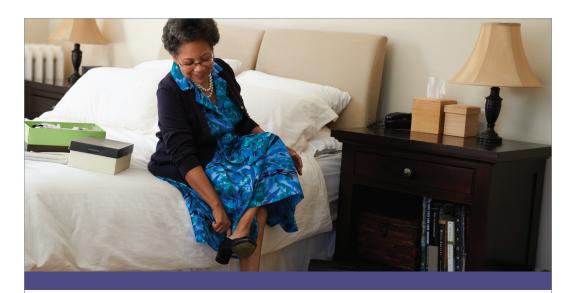
Enroll at the right time.

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.

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.



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.

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.

Help is available.

Medicare can be complicated, but help is available. You may even qualify for financial help. See the list of resources on pages 10 and 11 of this guide or visit **Medicare**MadeClear.com.



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

Questions to consider.

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

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



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.



Where to get more answers.



Check out **Medicare**MadeClear.com to watch videos, sign up for our newsletter, take quizzes, find tools and get answers to your Medicare questions.

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Your state's resources.

Your state's Medical Assistance or Medicaid office

To see if you're eligible for help with the costs of Medicare, call your state's Medical Assistance or Medicaid office. They can answer questions about programs like Program of All-Inclusive Care for the Elderly (PACE) and the Medicare Savings Program. You can also call the Medicare Helpline and ask for the number for your state's Medical Assistance or Medicaid office.

Your State Health Insurance Assistance Program (SHIP)

For help with questions about buying insurance, choosing a health plan, buying a stand-alone prescription drug plan or Medigap policy, and your rights and protection under Medicare, call your State Health Insurance Assistance Program. This program offers free counseling for decisions about Medicare coverage. In some states, this program is called the Health Insurance Counseling and Advocacy Program (HICAP).

Your state's hospice organizations

For information about hospice care programs in your area, call your state's hospice care organization. Call the Medicare Helpline to get the number.

Additional resources.

Medicare Helpline

For questions about Medicare and detailed information about plans and policies in your area, call **1-800-MEDICARE** (**1-800-633-4227**), TTY **1-877-486-2048**, 24 hours a day, 7 days a week. Or go to **Medicare.gov**.

Medicare & You

The official Medicare handbook for Medicare programs is updated each year. You can download a copy at the Medicare website or call the Medicare Helpline to request a copy. For online tools to find and compare drug plans, Medicare Advantage plans and Medigap policies, go to **Medicare.gov.**

Social Security Administration

For help with questions about eligibility for and enrolling in Medicare or Social Security retirement benefits and disability benefits, and for questions about your eligibility for help with the cost of Medicare coverage, call: 1-800-772-1213, TTY 1-800-325-0778, between 7 a.m. and 7 p.m., Monday through Friday.

Administration on Aging

For help in finding local, state and community-based organizations that serve older adults and their caregivers in your area, call **1-800-677-1116**, TTY **711**, between 9 a.m. and 8 p.m. ET, Monday through Friday. Or go to **Eldercare.gov**.

Your current health plan

Your health plan's customer service center may answer questions you have about your current coverage. Call the number on your member ID card.

AARP®

For information about Medicare and other programs for seniors, go to **aarp.org.** The AARP website offers educational materials about Medicare in its health section. You can also order publications online.

Interested in learning more?

Check out **Medicare**MadeClear.com to watch videos, sign up for our newsletter, take quizzes, find tools and get answers to your Medicare questions.

Stay informed:









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Additional information resources:

- Visit Medicare.gov
- Call 1-800-MEDICARE (1-800-633-4227),
 TTY 1-877-486-2048, 24 hours a day, 7 days a week
- Call your State Health Insurance Assistance Program (SHIP) to see if you qualify for any financial assistance



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