



Medicare Advantage Plans Things to Consider

Medicare Advantage (MA) Plans (also called Part C or Medicare Health Plans) are a different way to access your Medicare benefits through private health insurance companies.

With an MA Plan you continue to pay:

- Part A premiums (if any)
- Part B premiums
- The MA Plan's premium
- Any deductibles, copays, or coinsurance

The MA Plan will pay for all medically necessary care covered by Original Medicare. The MA Plan also may include prescription drug (Part D) coverage and added benefits, such as eye and hearing exams and wellness classes. There are no waiting periods or denials of service due to pre-existing conditions to purchase an MA Plan, except for beneficiaries with End-Stage Renal Disease. In order to join an MA Plan, you must also have both Part A and Part B of Medicare and be within the plan's service area.

Types of Medicare Advantage Plans

There are four common types of MA Plans:

- **Health Maintenance Organization (HMO):** Plans that cover care only when clients see providers contracted with the plan.
- **Preferred Provider Organization (PPO):** Plans that cover more costs when clients see providers contracted with the plan, but still cover some costs with non-contracted providers.
- **Private-Fee-For-Service (PFFS):** Plans that cover care with any provider willing to take the plan. Providers may change whether they take the plan anytime during the year.
- **Special Needs Plan (SNP):** Plans that provide more focused and specialized care for certain groups, such as people with both Medicare and Medicaid, people who live in a nursing home, or people who have certain chronic medical conditions.

Please see the reverse for a checklist of things to consider before you join! →

What to Do Before You Buy

Review the following checklist before you enroll in a Medicare Advantage Plan:

- ___ **Make sure your medical providers will accept the plan.** Many providers will not accept all the plans available in your county. Please check the attached list to see an at-a-glance list of which major providers in Whatcom County accept various plans.
- ___ **Make sure you understand what the costs of the plan will be.** Plans may have a monthly premium, various copayments for covered services, deductibles before coverage starts, out-of-pocket limits, added fees for using non-network providers, and special rules related to referrals. It is important for you to consider your individualized health care needs when making a decision.
- ___ **Make sure the plan works with your desired service area.** To use an MA Plan's services (except for emergency care), you may need to stay within their service area. If you live in another county or state part of the year, it will be important to make sure your plan works in both locations.
- ___ **Make sure the plan meets your specific prescription drug needs.** Most people with an MA Plan will also get their prescription drug coverage through the plan. You should make sure that the MA Plan's drug coverage works with your current prescriptions. You cannot have prescription drug coverage through **both** a stand-alone Prescription Drug Plan and a Medicare Advantage Plan. If you have creditable coverage through an employment or retiree plan, you may want to choose an MA Plan **without** prescription drug coverage, to avoid disenrollment from your current plan.
- ___ **Make sure you understand the enrollment periods.** During the Annual Enrollment Period (AEP) each year, Medicare beneficiaries can choose to stay with their current plan, switch to a different MA or Part D Plan, and/or return to Original Medicare. In 2010, the AEP begins on November 15 and continues until December 31. In 2011, the AEP will begin on October 15 and end on December 7. Unless you are in your Initial Enrollment Period or qualify for a Special Enrollment Period, you will not be able to join or switch MA Plans after the AEP ends. Instead, from January 1 to February 14, there is an Annual Disenrollment Period. During this time, you can drop an MA Plan, return to Original Medicare, and join a stand-alone Prescription Drug Plan.
- ___ **Consider whether you may be eligible for Extra Help affording your prescription drug costs.** If you are a single person with an income of less than \$1,354 a month and resources less than \$12,510 or if you are a married person with a combined income of less than \$1,821 a month and resources less than \$25,010, you may qualify for prescription drug help from Social Security. If you think you may fit, contact SHIBA at **788-6533** for help applying!

Remember, MA Plans change the cost of their premiums, deductibles, and copayments every year. Provider networks change every year too. **Contact the Whatcom SHIBA HelpLine at 788-6533 or call 1-800-Medicare every fall for help reviewing your coverage options!**