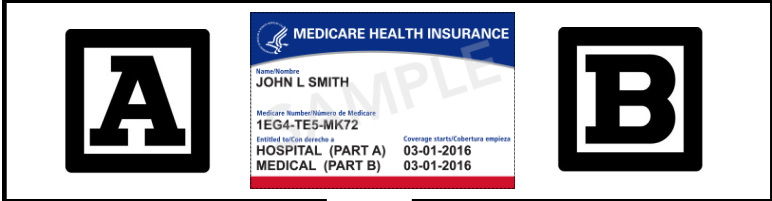




Parts and Paths of Medicare

2024



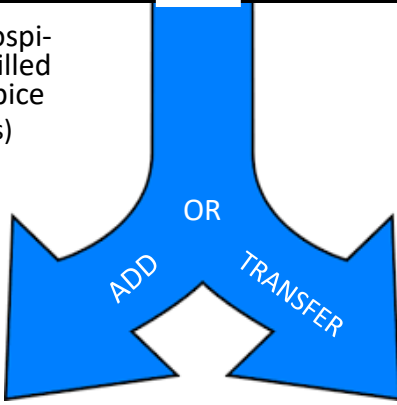
INPATIENT: Medically necessary hospital, equipment, mental health, skilled nursing (SNF), home health and hospice

- Premium = \$0 (if worked 40+ quarters)
- Deductible = **\$1632** /stay of care
- Copay (days 1-60) = \$0
- Copay (days 61-90) = **\$408/day**
- Copay (days 91+) = **\$816/day**
- First 3 pints of blood (Bank or ~\$900)
- SNF copay (days 21-100)= **\$204/day**

OUTPATIENT: Medically necessary doctor visits, preventive exams, labs, mental health, x-ray, ambulance and durable medical equipment.

- Premium = **\$174.40**month
- Deductible = **\$240/year**
- Copay = 20% Medicare approved rate
- Excess = ≤15% only if MD does not accept "Medicare Assignment"

Penalties if you do not enroll on time
Higher premiums for income >**\$103,000** single or **\$206,000** couple OR if worked less than 40 qtrs



PRESCRIPTION DRUG PLAN (PDP): Plan to provide prescription medication to Medicare beneficiaries.

- Choose from many non-standardized plans
- Plans change formulary, premiums, deductible, copays and restrictions every year
- **PENALTIES** unless you have "creditable coverage" from another source like employer health plan or the VA or a Part C plan that includes drug coverage.

MEDICARE ADVANTAGE (MA) PLAN: Private insurance companies contract with Medicare to provide all your Medicare benefits. NOT a Medicare Supplement

- Low premiums; copays/co-insurance when you use services
 - Most include prescription drug coverage (with copays)
 - Limits to out of pocket costs (not including prescription costs)
 - HMO must use plan's network doctors/hospitals
 - PPO network with out-of-network covered but at higher cost
 - Referral required before seeing specialists (except PPO)
 - Prior Authorization by plan for some treatments
 - One year contract—Plans can change doctors, hospitals, copays, deductibles, premiums and other benefits each year
 - Switch to another MA plan 10/15-12/7 & ONE TIME Jan-March or a 5-star plan ONCE during the year
 - Includes additional non-Medicare benefits (varies by plan)
 - Special Needs Plans for Medi-Medi and Chronic Diseases
- For more information, see HICAP Comparison Chart, How to Shop and HICAP Part C/Medicare Advantage handout**



MEDIGAP (MEDICARE SUPPLEMENT): Optional coverage sold by insurance companies that help pay some or all of the deductibles, copays and other charges that Medicare Parts A & B do NOT pay.

- 10 **STANDARDIZED** plans/policies with varying coverage
- Go to any MD, specialist or hospital who accepts Medicare
- "Guaranteed Right" in IEP and a few other guaranteed issue periods (i.e. SEP) means they cannot refuse to cover you if you have health problems. *Underwriting (health questions)* can occur later; they can refuse to cover you, charge you more or make you wait for coverage

**Ventura County Area Agency on Aging
HICAP Program 800-434-0222
646 County Square Drive, Ventura, CA 93003
"free and unbiased Medicare information and education"**

