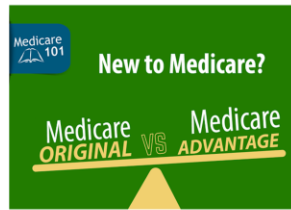
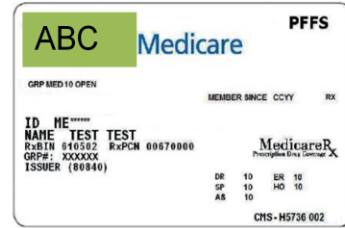




Original Medicare



OR



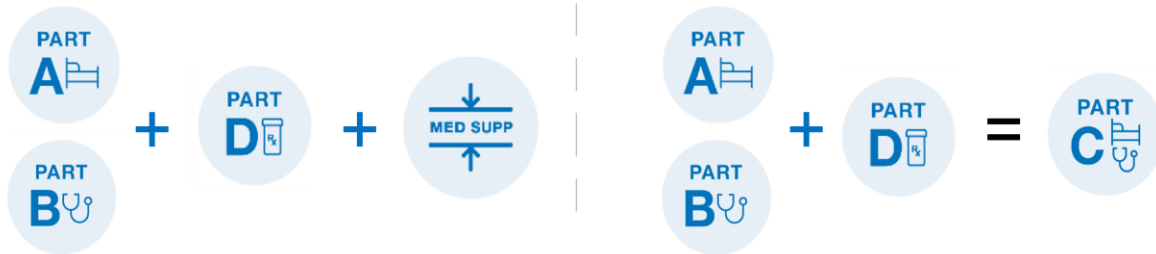
Medicare Advantage

✓ Medicare Part A & B

- Prescription Drugs Plans
- Medicare Supplement Plans

✓ Medicare Part A & B

- include: Prescriptions (MAPD)
- include: dental, vision, hearing,
- without Prescription Plan (MA)



NOTE: Once the Plan receives an enrollment request, it must provide the consumer with a notice of acknowledgment, denial, or request for additional information with 10 days

Part C - Covers:

Part C Plans - are also known as “Medicare Advantage” Plans.

These are single plans offered by private insurance-companies that combine coverage for Original Medicare (Parts A and B) and sometimes prescription drug coverage (Part D).

Part A: All the benefits of Part A, except hospice care

- Hospital stays, skilled nursing and home health

Part B: All the benefits of Part B

- Doctor’s visits, outpatient care, screenings, shots and lab tests

Part D: Prescription drug coverage

- Included in many Part C plans, but not all of them

Additional benefits

- May include routine vision care, hearing, wellness programs and nurse phone line support varies by plan

Medicare Advantage plans

- combined coverage of Original Medicare (Parts A and B)
- and sometimes prescription drug coverage (Part D).

- Fitness Programs
- Gym Membership
- Mail-delivery Pharmacy
- Health Education Programs
- A 24-hour Nurse Advice Line



There are different types of Part C plans.

Coordinated care plans

- Health Maintenance Organization (HMO) plans
- Preferred Provider Organization (PPO) plans
- Special Needs Plans (SNP)
- Point of Service (HMO-POS) plans

Other plans

- Private Fee-For-Service (PFFS) plans
- Medical Savings Account (MSA) plans

Medicare Advantage Plans

vary greatly both in cost and scope of coverage, so look closely at All your options..

to make sure they fit, what you want from your plan.



What is a PFFS

- Private Fee-For-Service
- Offered by private insurance companies
- Many plans may offer prescription drug coverage

What's an HMO

- Health Maintenance Organization
- Plan with a network of physicians, hospitals and other health care professionals
- Generally, you must get routine care from an approved network of doctors and hospitals
- Many plans include prescription drug coverage and additional benefits

What is a PPO

- Preferred Partner Organization
- Hospital costs, doctor and outpatient care in one plan
- Many plans include prescription drug coverage and additional benefits



What you'll pay in premiums depends in large part on the extent of the coverage the policy provides, with more all-inclusive policies charging higher monthly premiums.

In addition to premiums, you may also be responsible for deductibles, copayments, and other costs. For instance, hospital stays and covered skilled-nursing care often requires a per-day copayment from the patient.

Medicare Advantage plans



Keep in mind:

- Doctors and hospitals must accept the payment terms and conditions of the private insurance company
- Important to make sure your doctor or hospital will accept payment from your specific plan each time before receiving services
- Payment comes from the Private Fee-For-Service plan, **Not Medicare**

Cost -

What you'll pay in premiums depends in large part on the extent of the coverage the policy provides, with the more all-inclusive policies charging a higher premium.

Part C -

In addition to premiums, you may also be responsible for deductibles, copayments and other costs.. for instance; hospital stays and skilled-nursing care often-times require a per-day copayment from the patient.