

The AMAC Medicare Guide



The Voice of Americans 50+

Better for You. Better for America.

AMAC is Your Resource for All Things Medicare!

Searching for a Medicare plan that meets your needs? AMAC Senior Resources Network is just a phone call away!

With access to multiple “A” rated insurance companies, AMAC is able to deliver choices. More than that, our knowledgeable, licensed agents will take the time to answer all of your questions, explain your options, and give you the tools you need to choose a plan that suits your individual needs.

Personalized Medicare guidance from licensed, certified professionals, plus the ability to choose what’s right for you – another reason why AMAC is better. Better for you. Better for America!

Speak with a trusted, licensed AMAC agent to discuss your needs! **Call 1-888-941-4545**

AMAC CAN MAKE CHOOSING THE INSURANCE PLAN THAT IS RIGHT FOR YOU EASY!

- ▶ AMAC’s trusted, licensed insurance agents are available to help you explore your options. If you’re confused about your choices, or worried that you may end up paying more than you need to, let AMAC be your guide!
- ▶ AMAC works with multiple, “A rated” insurance companies, and can help you with your options! AMAC’s trusted agents will verify that your doctor will accept the plan you choose, and that your drug costs are covered.
- ▶ Our dedicated agents provide personal, professional service. We know you’re not just a policy number. When you call AMAC, you’ll work with a dedicated agent who you can call at any time should you have questions or need assistance. No more getting a different person on the phone each time you call and having to repeat your information.

Making Sense of Medicare, Let AMAC be Your Guide!

Medicare, the United States health insurance program created in 1965, is for people age 65 or older and people under age 65 with certain disabilities such as End-Stage Renal Disease. Medicare is run by CMS, the Centers for Medicare and Medicaid Services.

Medicare was originally signed into law on July 30, 1965, by President Lyndon B. Johnson. President Harry S. Truman was the very first Medicare beneficiary, and President Johnson presented him with the first Medicare card. Original Medicare had only two parts when first implemented: Part A – Hospital Insurance (Inpatient Care) and Part B – Medical Insurance (Outpatient Care). Medicare Part D did not go into effect until January 1, 2006 made possible by the passage of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003.

Medicare Advantage Plans provide a way for beneficiaries to receive their A, B, and D benefits offered by private insurers contracted with Medicare. Medicare Advantage Plans are sometimes referred to as Part C – which delivers Parts A, B, and can include Part D in one comprehensive plan, by replacing Original Medicare. You still retain all of your benefits and rights under Original Medicare. There are different types of Medicare plans such as HMOs, PPOs, Special Needs Plans, Private Fee for Service Plans, and Medicare Savings Accounts.

Medicare Supplement Plans (also known as Medigap Plans), are sold by private insurance companies, but are not like Medicare Advantage Plans. A basic Medicare Supplement policy works with Original Medicare coverage to help pay some of your out-of-pocket costs like co-payments, co-insurance, and the annual Medicare Parts A and B deductibles.

There are ten Medicare Supplemental Plans from which to choose, and AMAC can help you understand your choices. There can be big differences in the premiums of these plans which have the same benefits. A Medicare Supplement Policy can only cover one person. If you are married both you and your spouse must buy separate policies. This also applies to Medicare Advantage Plans and Medicare Prescription Drug Plans.

MEDICARE HAS:

- ▶ Part A (Hospital)
- ▶ Part B (Medical)
- ▶ Part C (Medicare Advantage Plans)
- ▶ Part D (Medicare Prescription Drug Coverage)

As long as you or a spouse have worked for 10 or more years and have paid into Medicare via payroll deduction, there is no charge for Part A. The cost for Part B in 2017 is \$134 per month, or more for higher income earners. All single beneficiaries with earnings more than \$85,000 a year and couples with incomes above \$170,000 pay higher premiums.

Medicare's Out of Pocket Co-Payments, Co-insurance, and Deductibles:

Neither Part A nor B pays for all of a covered person's medical costs due to deductibles and co-insurance, which means the covered individual must pay out of pocket. For example, for each inpatient benefit period, a beneficiary will pay a Part A deductible of \$1,316 for a hospital stay of 1-60 days. Under Part B, a beneficiary must meet a yearly deductible of \$183 and is required to pay 20% of the Medicare-approved amount for most services covered by Part B. Beneficiaries may also be required to pay excess charges up to 15% for services rendered by non-participating Medicare providers. All of these costs can amount to thousands of dollars, draining a beneficiary of his/her savings, or worse yet, leaving a beneficiary with no means to pay for rising medical costs and expensive prescription drugs. For this reason, it is important to consider additional coverage.

How to Enroll in Medicare Parts A and B:

- ▶ An individual who is receiving monthly Social Security or Railroad Retiree Benefits (RRB) at least 4 months prior to turning age 65 does not need to file a separate application to become entitled to premium-free Part A.

In this case, the individual will get Part A automatically at age 65.

- ▶ An individual who is not receiving monthly Social Security or RRB benefits must file an application for Medicare by contacting the Social Security Administration.
- ▶ To get in contact with Social Security you can call 1-800-772-1213, TTY users should call 1-800-325-0778, or you can also go to the Social Security website at www.ssa.gov/medicare/apply, or visit your local Social Security office to apply for both Medicare Parts A and B.
- ▶ If you worked for a railroad, contact the RRB to sign up. After you enroll, you'll receive your Medicare card. If you are already getting benefits from Social Security or the Railroad Retirement Board (RRB), in most cases, you'll automatically get Part A and Part B starting the first day of the month you turn 65. If your birthday is on the first day of the month, Part A and Part B will start on the 1st of the prior month.
- ▶ To get Part A and/or Part B the month you turn 65, you will be applying during your "initial enrollment period." This is a 7-month period that begins 3 months before the month you turn 65, includes the month you turn 65, and ends 3 months after the month you turn 65.
- ▶ If you would like your benefits to start on the 1st of the month that you turn 65, you must sign up during the first 3 months before the month you turn 65. If you wait until the last 4 months of your Initial Enrollment Period to sign up for Part A and/or Part B, your coverage will be delayed. You will not be subject to late penalties enrolling in the last 4 months of your Initial Enrollment Period.
- ▶ If you sign up for Part A and/or Part B during the first 3 months of your Initial Enrollment Period, your coverage start date will depend on your birthday. If your birthday isn't on the first day of the month, your

Part B coverage starts the first day of your birthday month. For example, Mr. Green's 65th birthday is July 20, 2016. If he enrolls in April, May, or June, his coverage will start on July 1, 2016. If your birthday is on the first day of the month, your coverage will start the first day of the prior month. For example, Mr. Kim's 65th birthday is July 1, 2016. If he enrolls in March, April, or May, his coverage will start on June 1, 2016. If you do not enroll into Medicare during the Initial Enrollment Period because you have existing health insurance coverage that is deemed "creditable coverage," which includes both medical and prescription coverage, you may apply for Medicare up to three months prior to the end of your current coverage. Your coverage will start the day after your current policy ends, or on the 1st of the following month.

- ▶ For medical coverage to be creditable you cannot have had a break in coverage that lasted more than 63 days in a row immediately before you buy your policy. Prescription drug coverage must be as good as Medicare's drug coverage in order to be deemed creditable. Be sure to ask your administrator about both to avoid penalties.

Frequently Asked Questions

Can I enroll in a Medicare Part D Plan, Medicare Supplement Plan, or Medicare Advantage Plan if I am not enrolled in Original Medicare?

No. You must be enrolled in Medicare in order to be eligible to enroll in a Medicare Part D Plan, Medicare Supplement Plan, or Medicare Advantage Plan. A Medicare Part D prescription drug plan only requires that you be enrolled in Medicare Part A or Part B. However, in order to enroll into a Medicare Supplement Plan or a Medicare Advantage Plan, you must first be enrolled in both Medicare Part A and Medicare Part B.

Do all Medicare Part D plans cover the same medications?

No, each plan may have a unique list of covered drugs. The list of covered drugs is known as a formulary. Medicare requires

all Medicare Part D plans to cover at least two medications in each therapeutic category/class approved by Medicare. Medicare also has a four tier structure that plans must follow, or improve upon. The drugs within the formulary are assigned to tiers. The tier determines the co-payment or out-of-pocket costs a person within the plan will pay for the drug. If you take a medication that is not covered on your Part D plan's formulary, you will pay full retail price.

Do I have to be enrolled in Medicare Part B before I enroll in a Medicare Advantage program?

Yes.

If I enroll in a Medicare Advantage plan or a Medicare Supplement Plan, do I still have to pay my Medicare Part B premium?

Yes. You will have to pay your monthly Medicare Part B premium to Medicare alongside the monthly premium you pay for your Medicare Advantage Plan or Medicare Supplement Plan.

This also applies to a Medicare Prescription Drug Plan. However, if you qualify for extra help you may get assistance with your Part D premium.

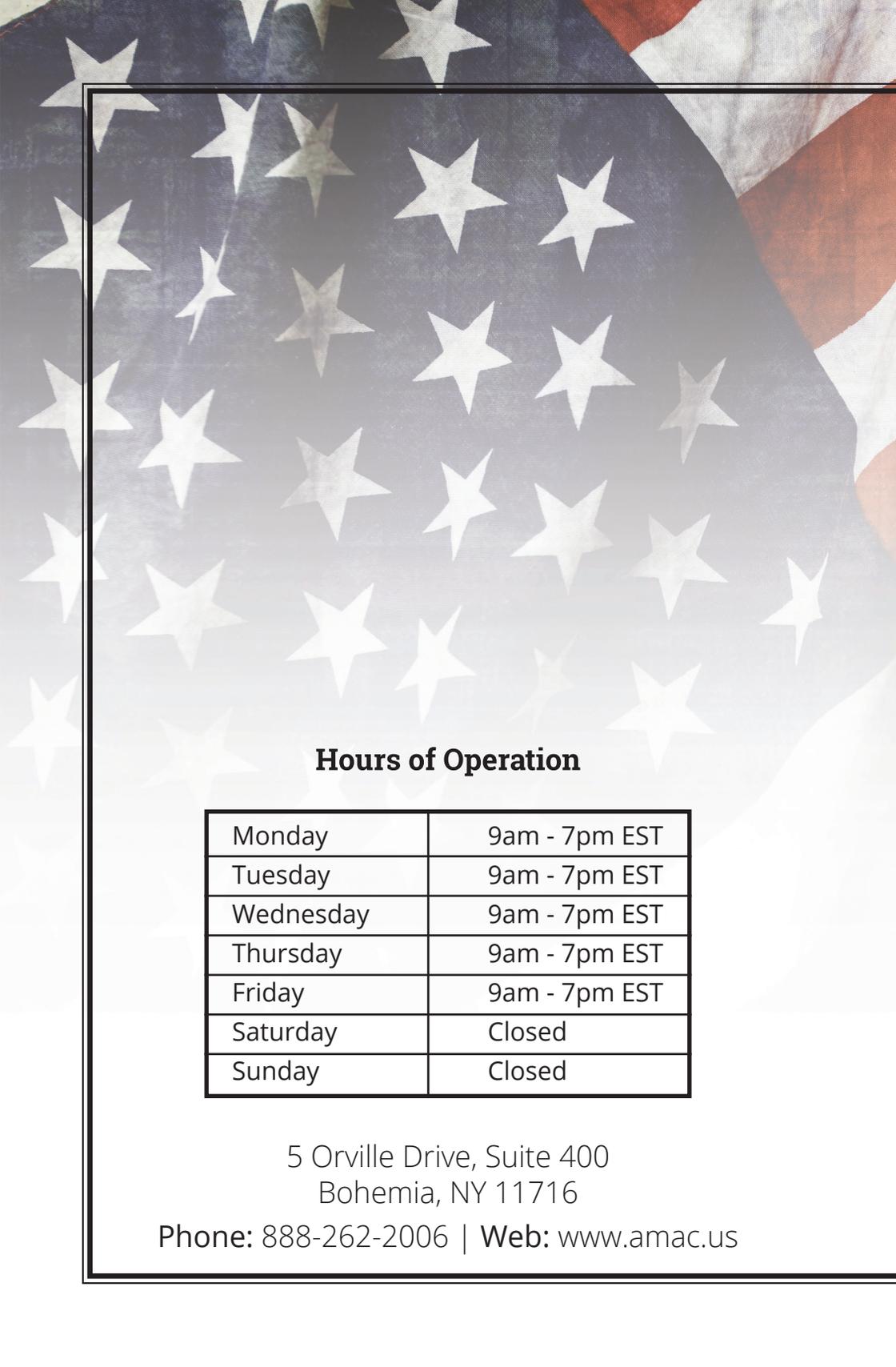
If I enroll in a Medicare Supplement Plan, will it also cover my spouse?

No. You and your spouse must each enroll in a Medicare Supplement Plan in order to obtain Medicare Supplemental coverage.

The same applies to Medicare Advantage Plans and Medicare Prescription Drug Plans.

Are Medicare and Medicaid the same thing?

No. Medicare is a federal health coverage program designed for the elderly as well as individuals with certain qualifying health conditions such as End Stage Renal Disease. Medicaid is a state-run health coverage program primarily designed for low-income individuals within the state.

The background of the entire page is a faded American flag, showing the stars and stripes. The stars are white on a dark blue field, and the stripes are red and white.

Hours of Operation

Monday	9am - 7pm EST
Tuesday	9am - 7pm EST
Wednesday	9am - 7pm EST
Thursday	9am - 7pm EST
Friday	9am - 7pm EST
Saturday	Closed
Sunday	Closed

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