

Medicare & You

Navigating the Maze of Medicare

Presented by:

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Central VT Council on Aging

CVCOA is a private 501c3 non-profit
supporting elders in leading
healthy, independent, meaningful,
and dignified lives



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CVCOA Services

- Personalized Case Management
- Information & Assistance
- Community and Home- Delivered Meals
- Health Insurance Counseling
- Family Caregiver Support
- Mental Health & Legal Counseling
- Transportation Services



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SHIP

State Health Insurance Program

SHIP is designed to provide help with Medicare-related issues for those with disabilities or aged 65+

Programs Include:

- Medicare - Parts A, B, C & D
- Medicaid
- Medigap Supplemental Insurance
- VPharm (VT's drug program for those with Medicare)



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The aim of this workshop is to:

- Gain a basic understanding of Medicare
- Review the options available when you begin to receive Medicare
- Provide you with information and tools to make informed decisions about Medicare



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We will discuss:

- Applying for Medicare
- Medicare Parts A, B, & D
- Supplemental Insurance & Advantage (Part C) Plans
- State and Federal Resources available to you



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I'm Turning 65. What's Next?

- 3 months before your birthday, Social Security will send an eligibility letter
- Contact the Social Security Office
- Consider your eligibility options:
 - Do I want to keep working?
 - Am I eligible for Medicare? (*page ref?*)



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Signing Up for Medicare

- **Avoid Delays:**

- Register as early as 3 months before your 65th birthday

- **Avoid Penalties:**

- Register by the 3rd month after your 65th birthday



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Medicare Part A

Your Hospital Coverage

- ***Inpatient*** hospital care
- Skilled nursing facility care (short-term)
- Medically-necessary home health care
- Hospice care

(Medicare & You Section 3; pages 29-33)



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Medicare Part A

Your Hospital Coverage

- Automatically begins at age 65 *or* after your second year on disability
- There is no premium* for Part A (usually)
- Hospital stay deductibles:
 - Days 1-60: \$1,216.00
 - Days 61-90: \$304.00 per day
 - Days 91-100: \$608.00 per day



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Medicare Part A

Your Hospital Coverage

- You **must** be admitted as an “inpatient”
- Admissions for hospital stays are **not** necessarily “inpatient”
- If you are not admitted as an “inpatient” and later need rehabilitative or Home Health Services, **Medicare will not pay**



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Medicare Part B

Your Health Care & Doctor Coverage

- Part B is optional
- Covers outpatient health care
- Monthly premium of \$104.90*
 - Deducted from Social Security income
- Annual deductible of \$147.00*

* for most



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Medicare Part B

Your Health Care & Doctor Coverage

- Covers 80% of your health care costs
- These include:
 - Diabetic Supplies
 - Assistive Devices
 - Some Medication
 - Chiropractic Visits
 - Cataract Surgery
 - Glaucoma Visits

(Medicare & You Section 3; pages 34-56)



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Medicare Part B Preventative Health Care

- You may not have to pay for approved preventative care
- These include:
 - Flu Shots
 - Pneumonia Shots
 - PSA Tests
 - Hepatitis Shots
 - Breast and Vaginal Exams

(Medicare & You Section 3; pages 34-56)

Look for the blue apple!



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Medicare Part B

Limitations of Coverage

- Part B **does not** cover some services
- These include:
 - Long-Term Care
 - Routine Dental Care
 - Hearing Aids & Exams
 - Dentures
 - Cosmetic Surgery
 - Routine Eye Care

(Medicare & You Section 3; page 56)



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Medicare Part B

Avoiding Penalties

- If you choose to not enroll in Medicare B when it is first offered:
A penalty of **10% per year** for each year of non-enrollment will apply
 - * unless you have other insurance



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Medicare Part B

Increased Costs with Greater Income

If you earn:	Your premium will be:
\$85,000-\$107,000 (Indiv.)	\$146.90
\$170,000-\$214,000 (Couple)	
\$107,000-\$160,000 (Indiv.)	\$209.80
\$214,000-\$320,000 (Couple)	
\$160,000-\$214,000 (Indiv.)	\$272.70
\$320,000-\$428,000 (Couple)	
\$214,000+ (Indiv.)	\$335.70
\$428,000+ (Couple)	



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Supplement Insurances

“Medigap”

- These are private policies that work with Medicare
- Some plans will cover the other 20% cost “gap” as long as you go to a Medicare provider first
- You cannot be refused coverage if you are within 6 months of being new to Medicare
- In the first month, you can get out of a supplement plan, no questions asked



(Medicare & You Section 5; page 67)

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Supplement Insurances

- There are many different supplement policy types
- They vary in cost and coverage
- Plans must cover all items described in the policy
- Individual policies may include additional coverage



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Supplement Insurances

Legitimate Plans may be found at:

VT Dep't of Financial Regulation
Insurance Division

1-800-964-1784

www.dfr.vermont.gov/insurance/insurance-division



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Advantage Plans

“The Privatization of Medicare”

- An alternative to original Medicare
- Private health care offered by insurance companies
- You are no longer on Medicare
- Services are provided through PPOs, PFFSs, or HMOs



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Advantage Plans

“The Privatization of Medicare”

- The best time to consider an Advantage Plan is when you are new to Medicare
- If your health care usage is limited, you might pay very little out of pocket
- You continue to pay Plan B premiums



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Advantage Plans

“The Privatization of Medicare”

- You cannot have both Supplement and Advantage plans.
- These are “Cost Share” Plans
- Advantage plans have an Out-of-Pocket spending limit



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Advantage Plans

“The Privatization of Medicare”

- Plans can vary significantly:
 - By County or Region
 - By Drug Coverage
 - By Deductible
 - By Health Care Provider



(Medicare & You Section 5; pages 72-82)

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Medicare Part D Drug Coverage Plans

- Coverage is based on the medications that you take
- 31 plans are offered in Vermont
- 9 plans work with people receiving State or Federal assistance



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Medicare Part D Drug Coverage Plans

- Plans vary in cost – both premium and deductible
- They may have either “preferred” or “excluded” pharmacies
- Plans also vary in medications covered
 - Complex, compound drugs may not be insured



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Medicare Part D

Avoiding Penalties

- If you choose to not enroll in a Part D plan when first eligible:

A penalty of **1% per month** for each month of non-enrollment will apply



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Medicare Part D

“The Donut Hole” – Part D Coverage Gap

- When your true out-of-pockets costs reach \$2850, then...
- You pay a proportionate amount of the cost of medication until...
- You spend \$4550 out-of-pocket

(Medicare & You Section 6; page 93)



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Medicare Part D

“The Donut Hole” Reduction Schedule

Year	% of Brand Names You Pay	% of Generics You Pay
2014	47.5%	72%
2015	45%	65%
2016	45%	58%
2017	40%	51%
2018	35%	44%
2019	30%	37%
2020	25%	25%



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State and Federal Assistance

Medicaid

Medicaid is a low-cost health care program for people with lower incomes:

- Income of \$991 or less per month
- Individual resources – less than \$2000
- Couple resources – less than \$3000



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State and Federal Assistance

Medicaid

Medicaid for the Working Disabled

- Individual Income of \$2432 or less
- Couple Income of \$3278. or less
- Individual resources – less than \$5000
- Couple resources – less than \$6000



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State and Federal Assistance Other Programs

- Federal Low-Income Drug Subsidies
- State Programs for Drug Assistance
- Medicare Savings Programs



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State and Federal Assistance

Federal Low-Income Drug Subsidies

- Low-Income Subsidies (LIS) reduce your cost for prescribed medications
- One can be either Full or Partial LIS

Annual Income Limits:	Resource Limits:
\$17,235.00 (Indiv.)	\$18,660.00 (Partial)
	\$13,750.00 (Full)
\$23,265.00 (Couple)	\$26,860.00 (Partial)
	\$13,750.00 (Full)



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State and Federal Assistance

State Pharmacy Assistance Programs

VPharm Program	Monthly Income Limits:
VPharm 1	\$1,459.00 (Indiv.)
	\$1,967.00 (Couple)
VPharm 2	\$1,720.00 (Indiv.)
	\$2,294.00 (Couple)
VPharm 3	\$2,189.00 (Indiv.)
	\$2,950.00 (Couple)



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State and Federal Assistance Medicare Savings Programs

Program:	Monthly Income Limits:
Qualified Medicare Beneficiaries	\$973.00 (Indiv.)
	\$1,311.00 (Couple)
Specified Low-Income Medicare Beneficiaries	\$1,167.00 (Indiv.)
	\$1,573.00 (Couple)
Qualified Individuals-1	\$1,313.00 (Indiv.)
	\$1,770.00 (Couple)



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Helpful Information

More about Medicare

- Your doctor can request an exception to have a procedure done that is not normally covered
- Your Medicare ID is usually your SSN
- Review your bill regularly and compare against your explanation of benefits



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Helpful Information

Working with Insurance Agents

- In Vermont, law forbids agents from cold-calling
- They can not visit your home to discuss insurance without prior invitation
- Agents can not discuss forms of insurance other than what you have requested



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Helpful Information

Fraud, Waste & Abuse

- We partner with the Community of Vermont Elders (COVE) to prevent fraud, waste and abuse
- We report fraud to Center for Medicare and Medicaid Services, COVE, & the VT Dep't of Financial Regulation



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Helpful Information

Your Resources

Social Security Office

Montpelier, VT

1-800-772-1213

www.ssa.gov

Central Vermont Council on Aging

Barre, VT

1-800-642-5119

www.cvcoa.org

Medicare

1-800-Medicare

www.medicare.gov

VT Dept. of Children and Families

1-800-250-8427

www.myBenefits.vt.gov



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Questions?

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*- CVCOA & You -
Growing Older Together!*

IF THIS WORKSHOP HAS BEEN HELPFUL,
PLEASE CONSIDER MAKING A GIFT
IN SUPPORT OF OUR WORK

Thank you!



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