



Tom Wolf-Governor

Teresa D. Miller-Human Services Secretary



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Medicare Education and Decision Insight



County of Delaware Services for the Aging

SCS PA MEDI Program is funded in part through the Administration for Community Living under contract with Delaware County Office of Services for the Aging

MEDICARE 101

PENNSYLVANIA MEDICARE EDUCATION DECISION AND INSIGHT PROGRAM - (PA MEDI PROGRAM)



Who Are We?

State Health Insurance Assistance Program (SHIP) – **All 50 States and Puerto Rico**

- **NAMED PA MEDI Medicare Program** – In Pennsylvania **Only**
- Located in **54 of the 67 Counties** in Pennsylvania

How Are We Funded?

PA MEDI Medicare Program Funding comes from the **Federal Government**

- Department of Health and Human Services
- Administration for Community Living
- PA Department of Aging
- Delaware County Office of Services to the Aging
- Senior Community Services – Delaware County Apprise Program

PA MEDI MEDICARE PROGRAM

Provides FREE UNBIASED Information and is designed to
Counsel Medicare Beneficiaries with:

- How Medicare Works
- Prescription Drug & Health Plan Comparisons
- Medicare Supplement (Medigap) Information
- Medicare Cost Sharing Programs
- Your Medicare Rights
- Billing Concerns
- Complaints about Medical Care & Treatment

Medicare Options



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Original Medicare

RED WHITE and BLUE CARD

Part A – Hospital

Part B - Medical



Prescription Drug Plan

Part D



MEDIGAP Policies

Plans **A** through **N**

Or

RETIREE, MEDICAID,
TRICARE, or VA

OR

Medicare Advantage Plans

Also known as Part C, or HMO, or PPO

Includes Medicare

Part A – Hospital

Part B - Medical

Part D - Prescription

Part C - Are Private Insurance Companies that are approved by Medicare

- Must use Plan Network Doctors and Hospitals **or** you pay more
- Some plans charge a monthly premium
- You may pay copayments or/and coinsurances for some covered services
- You must use the HMO, PPO, Part C Drug Plan

What Does Part A Cover?

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PART A - HOSPITAL INSURANCE

- Inpatient Care
- Skilled Nursing Home Care
- Rehabilitation Care
- Hospice
- Home Health Care



How Do I Enroll in Part A?

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Eligible at 65th Birthday

- Do not have to be **Retired** to receive Medicare
- If you are **not** receiving benefits you can apply at a Social Security Office or Online at www.ssa.gov
- You can apply **Three (3) months before** your 65th birthday
- The **month you turn 65**
- **Three (3) months after** you turn 65

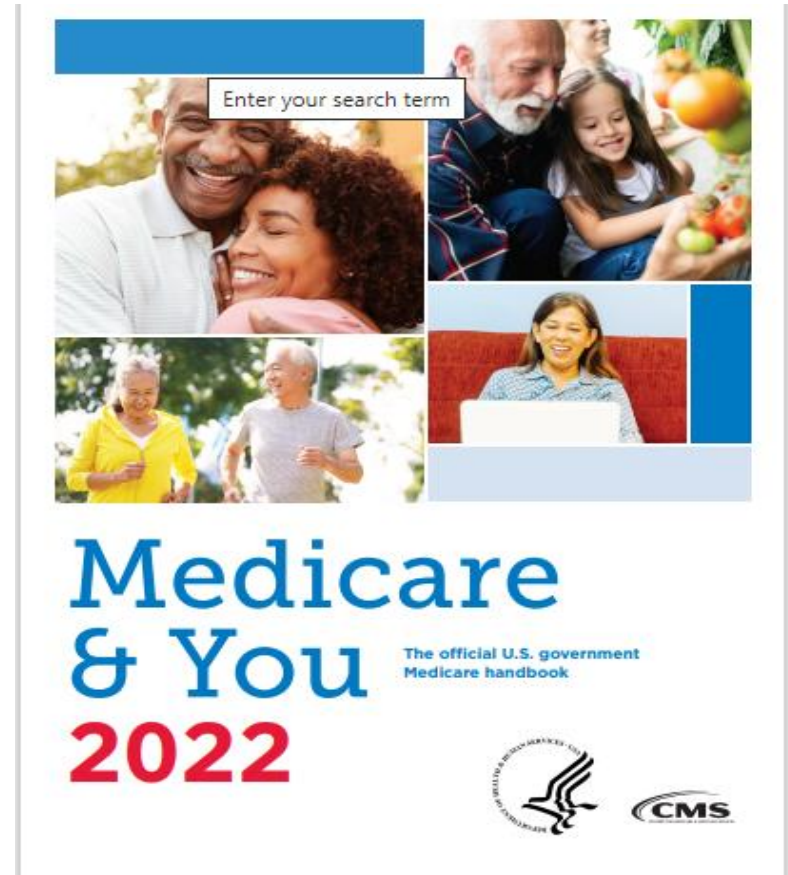
- Social Security automatically sends out Medicare Cards to those eligible if they are receiving:
- **Social Security Retirement**
- **Social Security Disability (Eligible on 25th **Month of Disability**)**
- **Supplemental Security Income (SSI)**

New Original Medicare ID Card & Medicare and You Book



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What Does Part A Cost?

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➤ Medicare Premium is based on Employment History

If You worked **40 Quarters (10 years)** or more

- **FREE**
- Paid through Payroll Taxes

Worked less than **40 Quarters**

- Up to **\$499.00/ per month(2022)**
- Based on number of quarters worked

What Does Part A Cost?

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Part A Deductibles

Hospital Deductible - **\$1,556**

60 Day Benefit Period

Skilled Nursing/Rehab Facility

- Must follow **3-Day** Inpatient Hospital Stay

Observation Status – **Does not** count as part of **3 days**

- Days **1-20 - \$0 Copay** – Covered if **Skilled and Medically necessary**
- After Days **21-100** there is a **\$194.50 a day copay**

Home Health Care/Hospice

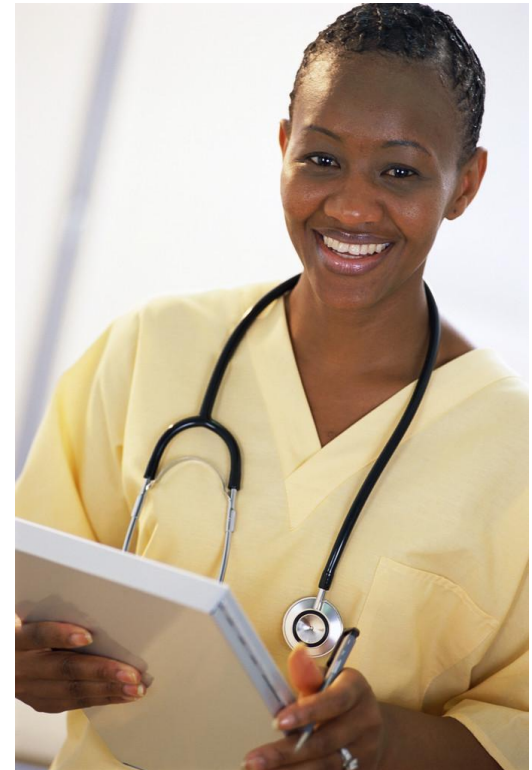
- **No Deductibles**



What Does Part B Cover?

PART B – MEDICAL INSURANCE

- Covers **80%** of Medical Services
- Physician Services
- Outpatient Services
- Diagnostic Tests, Lab, X-Rays
- Ambulance Services
- Medical Equipment
- Emergency Room



How Do I Enroll in Part B?

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Eligible 65th Birthday

- If you are **not** receiving benefits you can apply at a Social Security Office or Online at www.ssa.gov
- You can apply **Three (3) months before** your 65th birthday
- The **month you turn 65**
- **Three (3) months after** you turn 65

Medicare Enrollment & Employer Coverage



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- If you or your spouse are **actively employed** and **have Employer Health Insurance**, **you do not** need to enroll in Part B if you work for an employer with 20 or more employees.
 - Employer Insurance is considered **Creditable Coverage**
 - When Employer Coverage **Ends** – You have **8 months** to sign up for Part B **without Penalty**
- **COBRA** – Must sign up for Medicare **within first 8 months** you are **offered or enroll** into COBRA
- **COBRA is NOT** considered **Creditable** Health Insurance Coverage

What Does Part B Cost?

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Monthly Premiums

- **YOU** pay **\$170.10** Monthly Premium for **Part B**
- May be more if your income is over **\$91,000/yr.** for **singles** or **\$182,000/yr.** for **couples**
- If you are receiving Social Security, Medicare Payments can be deducted from monthly Social Security Payment
 - Payment Methods must be requested
 - If you are not receiving Social Security – Medicare will bill you quarterly

What Does Part B Cost?

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□ Medicare Part B Yearly Deductible

- YOU pay \$233.00 once a year
- 20% Coinsurance

Medicare Savings or Medicare Buy In Programs



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- Medicare Savings Program** assists with payment of the **Medicare Part B Premiums**.
- The **State** pays the **Part B Premium** each month of **\$170.10** for the year 2022.
- You can **apply** if you are eligible for **Medicare A & B**
- Have a **Community Health Choices HMO Medicaid** Insurance (**Formerly known as Medicaid or the ACCESS Card for Health Insurance**) **Or** have the **Extra Help Program**.

PROGRAM	MONTHLY INCOME	ASSETS	
Medicare Saving Program			
QMB	\$1,133- Single \$1,526 - Couple	\$8,400 - Single \$12,600 - Couple	Pays Part A & B Copays and Deductibles
SLMB	\$1,359- Single \$1,831 - Couple	\$8,400 - Single \$12,600 - Couple	Pays Part B only
QI-1	\$1,529- Single \$2,060 - Couple	\$8,400 - Single \$12,600 - Couple	Pays Part B only



Applying for Medicare Savings Programs

- Receive assistance from **PA MEDI Medicare Program**
- Complete a Medicare Savings Program Paper Application
- Apply Online through PA Department of Welfare
www.compass.state.pa.us (Medicare Saving Program only)
- Apply Online through PA Social Security Department
www.ssa.gov (Extra Help & Medicare Savings Programs)

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Medicare Supplemental Insurance

MEDIGAP Plans



Medicare Supplemental/Medigap Insurance



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- Also know as “**MEDIGAP**” Insurance
- Covers Medicare Copays and Deductibles
 - Part A
 - Part B
- Provided by Private Insurance Companies
 - Monthly Premiums vary by company
 - Lettered Policy Plans
- Multiple Plan Types – Plans A through N
 - Plan types Standardized by Federal Regulations

Guaranteed Issue Period and Supplemental Plan Underwriting

Guaranteed Issue Period

- Is a **6-month Period** following enrollment into **Part B** when Insurance Companies **cannot deny coverage** due to **Pre-Existing Conditions**.

Medicare Supplemental/Medigap Policy Insurance Information



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For Plans Sold since June 1, 2010

Plans Available to All Applicants

First eligible for Medicare before 2020 only

Standard Benefits	A	B	D	G*	K	L	M	N	C	F*
Part A co-insurance and hospital costs up to an additional 365 days after Medicare benefits end	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Part A hospice coinsurance or copayment	✓	✓	✓	✓	50%	75%	✓	✓	✓	✓
Part B co-insurance or copayment	✓	✓	✓	✓	50%	75%	✓	✓**	✓	✓
Blood (first three pints)	✓	✓	✓	✓	50%	75%	✓	✓	✓	✓
Additional Benefits	A	B	D	G	K	L	M	N	C	F*
Part A hospital deductible		✓	✓	✓	50%	75%	50%	✓	✓	✓
Part B medical deductible									✓	✓
Part B medical excess charges (15% of allowed amount)				✓						✓
Skilled nursing coinsurance			✓	✓	50%	75%	✓	✓	✓	✓
Foreign travel emergency (up to plan limits)***			80%	80%			80%	80%	80%	80%
Yearly out-of-pocket limit (after Part B deductible)					\$6,220	\$3,110				

* Plan G and Plan F also offer a high deductible option, which pays benefits after beneficiary has met a deductible of \$2,370 in 2021.

** Plan N pays 100% of the Part B coinsurance, except for a copayment of up to \$20 for some office visits and up to \$50 copayment for emergency room visits that don't result in an inpatient admission.

*** Plans with Foreign travel will pay 80% after an annual \$250 deductible within the first 60 days of trip. This benefit has a lifetime limit of \$50,000.

Most Medicare Supplemental Plans Cover



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- Medicare Part A Coinsurance and Hospital Cost
- Medicare Part B Coinsurance or Copayment
- Blood (First 3 Pints)
- Part A Hospice Care Coinsurance or Copays
- Skilled Nursing Facility Care Coinsurance
- Foreign Travel Emergency (Up to Plan Limits)

Sample Medicare Supplement Card

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Note: Your Supplemental Plan Policy Letter Typed on Your ID Card **Ex: Plan G**

Plans C and F can not be sold to New Medicare Beneficiaries

- Supplemental Companies are prohibited from selling Standardized Medigap Plan **C** or **F** (including the **F High Deductible**) to **“Newly Eligible”** Medicare Beneficiaries.

Who is Considered Newly Eligible

- Anyone who **attained age 65** on or after **January 1, 2020**
- **First becomes eligible for Medicare due to age, disability or end-stage Renal Disease** on or after January 1, 2020.
- **Companies can continue to sell Plan C and F to current Beneficiaries in other limited situations.**

Newly Added Plan G and G High Deductible



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- Plans **D, G, and N** will be **replacement** equivalents to plan **C and F**.
- There will be a **new “High Deductible Plan G”** added that will **replace** Supplemental Plan **High Deductible Plan F** for Newly Eligible Medicare Beneficiaries.

If You Choose to Switch from Supplemental Plans C and F



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No Federal Guaranteed Issue Rights to transfer to another Medigap Plan. (Individuals will be subjected to Underwriting)

How Do I Enroll in MEDIGAP?

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Contact Private Insurance Company Directly

- **PA MEDI Program** can **assist:**
 - In providing **Company Names** , **Phone Numbers** and **Company Plan Ratings**
 - In providing **Cost Estimates** through CSG Actuarial Data System

Medicare Options

Part D

Prescription Drug Plans



Part D Prescription Drug Plan

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- ❑ Helps with cost of Prescription Drugs
- ❑ **DOES NOT** cover Over the Counter Drugs
- ❑ Drug plans may have Co-Pays and Deductibles
- ❑ If your Medicare Advantage Plan (HMO or PPO) provides drug coverage you **DO NOT** need to enroll in a separate Prescription Drug Plan

Part D How Do I Enroll?

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Through Private Insurance Companies

- **25 Plans** available in Pennsylvania (2022)
- **NOTE: You DO NOT** need to enroll in a Part D Plan if you receive any of the following:
 - **Veteran's Benefits**
 - **PACE/PACENET**
 - **Employer Prescription Plan (with equivalent coverage)**
 - **Federal Employee Health Benefit Drug Plan (FEHB)**

What Does Part D Cost?

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- Monthly Premium
 - Varies by Insurance Company

- Annual Deductible

- Copays per Prescription

- Coverage Gap/Donut Hole

Prescription Drug Plan

Coverage Gap

Ms. Smith joins ABC Prescription Drug Plan January 1, 2022

Annual Deductible

Ms. Smith pays the first **\$480** of her drug costs before her plan starts to pay its share of her drug costs.

NOTE: Not all drug plans have a deductible of **\$480** - some have a smaller or even no deductible

Copayment/Coinsurance (what you pay at the pharmacy)

Ms. Smith pays a copayment on her drugs. Her Plan pays its share for each covered drug.

This will continue until the combined amount plus the deductible reaches **\$4,430**.

Coverage Gap (aka donut hole)

Once Ms. Smith and her Plan have spent **\$4,430** for her covered drugs .

She now is in the

COVERAGE GAP

In 2022, she will pay **25%** of the cost for her covered Brand Name drugs or **25%** of the cost for covered Generic Drugs.

Catastrophic Coverage

Once Ms. Smith's True Out of Pocket cost for the year reaches **\$7,050** her coverage gap ends.

Now she pays **5%** or **\$3.95** for **Generics** and **\$9.85** for **Brand Name**, whichever is greater, for each covered drug until the end of the year. Medicare then begins to pay at **95%** instead of **80%**

Sample Prescription Drug Card



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an EmblemHealth company

**GHI Medicare
PDP**

MEMBER: JOHN G. SAMPLEPLACEHOLDER
ID NUMBER: 12345678900

CAT Code:
Deductible:
Copay: **Rx**

MedicareRx
Prescription Drug Coverage

Rx BIN#: 013344
Rx PCN#: 0020080229
Issuer#: (80840)
CMS#: S5966000

A Medicare Prescription
Drug Plan

CBP

Extra Help Program or Low-Income Subsidy(LIS)

Helps Medicare Beneficiaries **dramatically** lower their prescription drug costs.

□ **You may be eligible for Extra Help if:**

- Have Medicare Parts **A and B**
- Have a **Limited Income** and **Resources**
- Have a **Community Health Choices HMO Medicaid Insurance** (Formerly known Medicaid or the ACCESS Card)
- **Receive** Medicare Savings Program (MSP) Assistance for Medicare Part B Premium

Income Guidelines for Extra Help Full Benefit Program

Full Subsidy - 2022

Singles

- Income - **\$1,699**/Monthly or less in Income
(**\$20,388**/Yearly)
- Resources - **\$9,900** or less in Resources

Couples

- Income - **\$2,289**/Monthly or less in Income
(**\$27,468**/Yearly)
- Resources - **\$15,600** or less in Resources

How Does Full Extra Help Assist with Part D Costs

Persons with Full Extra Help Program:

- Have **No** Monthly Premium
- Have **No** Annual Deductible and No Doughnut Hole
- Pay **low** Copays (**\$1.35/\$4.00** (Has Medicaid) **or**
- **\$3.95/\$9.85** (No Medicaid Benefits) on prescriptions; depending on income and on whether drug is generic or brand name
- Have **No Copays** for the rest of the year once you reach **\$7,050** in total out of pocket costs

Income Guidelines for Extra Help Partial Benefit Program

Partial Subsidy - 2022

Singles

- Income - **\$1,529/Monthly** or less in Income
(\$18,348/Yearly)
- Resources - **\$15,510** or less in Resources

Couples

- Income - **\$2,060/Monthly** or less in Income
(\$24,720/Yearly)
- Resources - **\$30,950** or less in Resources

How Does Partial Extra Help Assist with Part D Costs

If you are awarded a Partial Subsidy:

- Get **help** paying **Part D** Plan Premiums (On a **Sliding Scale** depending on your income)

Have your Annual **Deductible reduced** from **\$480** to **\$99**

- Have **No** Doughnut Hole
- Pay **15% Co-pays** for all drugs until out-of-pocket costs reach **\$7,050** then you pay small co-pay **\$3.95** **Generics** and **\$9.85** **Brand Name** for the rest of the year.

How to Apply for Extra Help

- Receive assistance from **Delco SCS PA MEDI Medicare Program**
- Apply online at www.ssa.gov
- Complete Extra Help Program Paper Application
- Apply by calling the 1-800 Benefits Data Trust (BDT)
1-800-866-1807

PACE/PACE NET

Eligibility Criteria for PACE/PACE NET

- **65** years of age or older
- Resident of Pennsylvania for at least **90** days
- **Not** receiving prescription benefits under Medical Assistance
- Meet the Pace/Pace Net Income Guidelines

PACE

Single Person

- Previous years income below **\$1,208/mo.**
(\$14,500/yr.)

Married Couple

- Previous years income below **\$1,475/mo.**
(\$17,700/yr.)

Cost of Prescriptions

- **\$6** co-pay for **Generic** Medications - (30-Day Supply)
 - **\$9** co-pay for name **Brand** Medications- (30-Day Supply)
 - Can get a **90-day** supply with **PACE & Part D** Medicare Plan
- * 90-day supply contingent upon PDP offering 90-day Supply Benefit

PACE NET

Single Person

Previous years income below **\$2,791 (\$33,500/yr.)**

Married Couple

Previous years income below **\$3,458 (\$41,500/yr.)**

Cost of Prescriptions

- **\$40.74** Monthly Deductible
- **\$8** co-pay for **Generic** Medications- (30-Day Supply)
- **\$15** co-pay for **Brand** Name Medications- (30-Day Supply)
- Can get a **90-day** supply with **PACE & Part D** Medicare Plan

* 90-day supply contingent upon PDP offering 90-day Supply Benefit

How to Apply for PACE/PACE NET

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1. **Delco PA MEDI Medicare Program** can mail PACE/PACE NET Application
2. Complete PACE/PACE NET Paper Application
3. Call PACE at 1-800-225-7223
4. Call Benefits Data Trust (BDT) 1-800-866-1807
5. Email PACE/PACE NET papace@magellanhealth.com
6. **Website:** www.pacecares.magellanhealth.com

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Medicare Advantage Plans

Part C

HMO

PPO



Part C – Medicare Advantage

Part C is another **method of choosing** Medicare Insurance

- You will still have Medicare

Covers **the same services** as Original Medicare

- Part A, Part B, and most cover Part D

May cover some **Hearing, Vision, and Dental Benefits**

- May have a fee associated

Part C – Medicare Advantage

Can choose from **several** Managed Care Structures

- HMO (Health Maintenance Organization)
- PPO (Preferred Provider Organization)
- PFFS (Private Fee-for-Service)
- MSA (Medical Savings Account)
- SNP (Special Needs Plan) ***Must have Medicare and Medicaid***

Provided by Private Insurance Companies

Part C – What Does it Cost?

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Costs Vary by Insurance Company

- Most include deductibles, copays, and/or co-insurances

- **NOTE:** You cannot purchase a **Medicare Supplement Insurance Plan** if you purchase a Medicare Advantage Part C Plan

- You cannot enroll in a **separate Part D Prescription Plan** when you are enrolled in a Medicare Advantage Plan.

- Enrolling into a separate Part D Prescription Plan can cause your Medicare Advantage Plan to be terminated.

Sample Medicare Advantage Card

 BlueCross BlueShield of Alabama		 Blue Advantage A Medicare Approved PPO	
Member Name John Doe			
Member ID MBG123456789		CMS Contract# and PBP# CMS H0104-002	
Issuer 80840		Rx BIN 014897	
Effective Date 7/1/2010		Rx PCN MBG	
		Rx GRP 90100	
		Rx ID MBG123456789	
		MedicareRx Prescription Drug Coverage 	
		 MA PPO MEDICARE ADVANTAGE	

Medigap vs. Medicare Advantage Comparison

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Medigap

- ❑ Can use with **any** hospital or doctor that accepts Medicare
- ❑ Covers **most** deductibles, copays, and coinsurances
- ❑ **No** Referrals
- ❑ Coverage **standard** by Plan Letter
- ❑ If you want a drug plan, you must purchase one **separately**
- ❑ Can **switch** drug plan yearly
- ❑ **Does not cover** extra benefits (**Vision, Dental, or Hearing**)
- ❑ **Readily** accepted by Doctors
- ❑ May have **Underwriting** if switching plan. Can be **rejected** for **Pre-existing** Medical Conditions
- ❑ Premiums can be **increased** due to other health conditions

Medicare Advantage

- ❑ They are your **HMO's** or **PPO's** or **SNP** Health Plans
- ❑ Plans are usually **local** and has **assigned** network doctors
- ❑ Usually **includes** drug plan
- ❑ Monthly **Premium** may be less
- ❑ **Has** Copays and Deductibles
- ❑ May **need** a referral
- ❑ Benefits **vary** company to company
- ❑ Can **change/switch Health Plans** yearly (**Special Enrollment Period - Jan, Feb, & March**)
- ❑ May get **extra benefits**, sometimes at **extra cost**
- ❑ **Not all doctors** accept all Medicare Advantage Plans
- ❑ Have a **Maximum** Out of Pocket (**\$6,700 or \$10,000**)



Medicare Options Review

Original Medicare
RED, WHITE and BLUE CARD
Part A – Hospital
Part B - Medical



Prescription Drug Plan
Part D

OR



MEDIGAP Policies
Plans **A** through **N**
Or
RETIREE, MEDICAID,
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Medicare Advantage Plans

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&

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Part C - Are Private Insurance Companies that are approved by Medicare

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- Some plans charge a monthly premium
- You may pay copayments or/and coinsurances for some covered services
- You must use the Part C Drug Plan

Resource Information & Help

- Call **PA MEDI Medicare Program** for Information and Individual Counseling Appointment **484-494-3769**
- Medicare Website www.Medicare.gov
- Call Medicare 1-800-Medicare (1-800-633-4227)
- Call Social Security Administration www.ssa.gov

NEED HELP???

If you need additional information an **PA MEDI Medicare Program Counselor** is available to help you!

484-494-3769

Senior Community Services

PA MEDI Medicare Program of Delaware County

Glenda A. Radical PA MEDI Medicare Program Director

Email: DECLOPAMEDI@scs-delco.org

Website: www.delcomedicareprogram.org

QUESTIONS



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