

Medicare 101

Presented by: Vanessa Henry and Matthew Applequist

SmartConnect



SmartMatch
Insurance
Solutions

INTRODUCTION

About the Presenters



Vanessa Henry,
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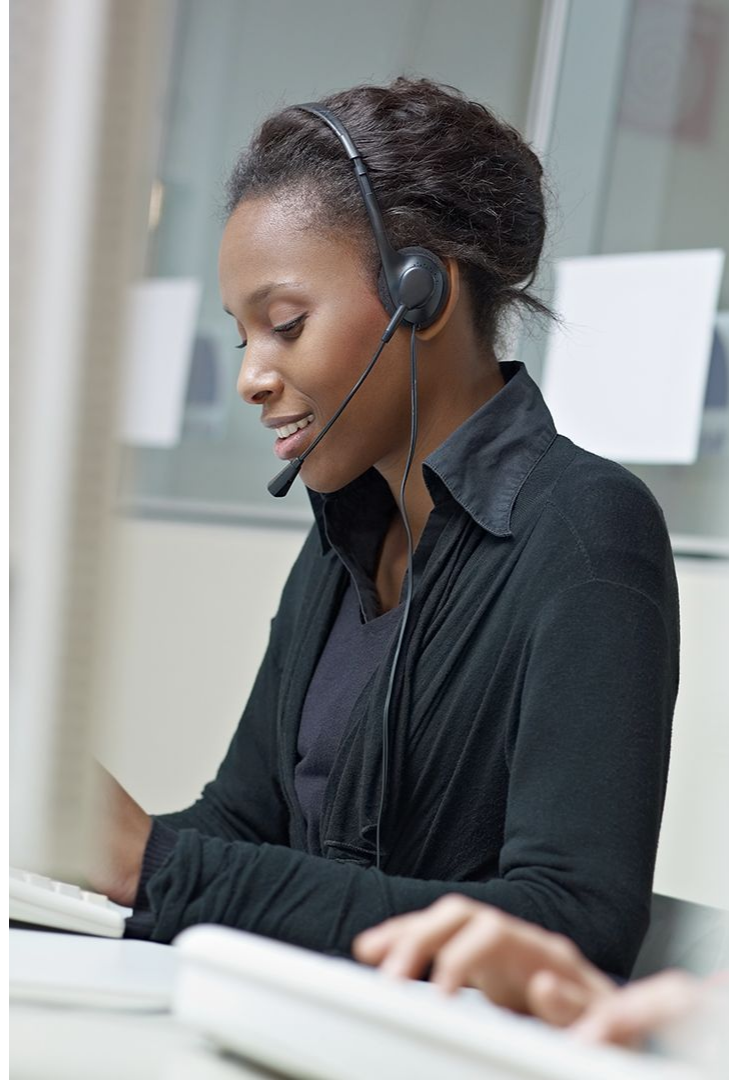


Matthew Applequist,
Director, Sales
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INTRODUCTION

About SmartMatch Insurance Solutions

SmartMatch Insurance Solutions is an independent Medicare insurance agency and digital marketplace that helps consumers research, compare, and purchase Medicare insurance plans. We provide an unfiltered view of the entire range of options and prices available to you.



INTRODUCTION

About the SmartConnect Program

SmartConnect is an exclusive program created specifically for working adults like you, who are Medicare eligible, but may not have fully explored the benefits of Medicare coverage.



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Medicare Eligibility



Age: 65 and older

Disability: under 65 and collecting Social Security Disability Insurance for 24 months, eligible the 25th month

Illness: any age with end-stage renal disease or ALS

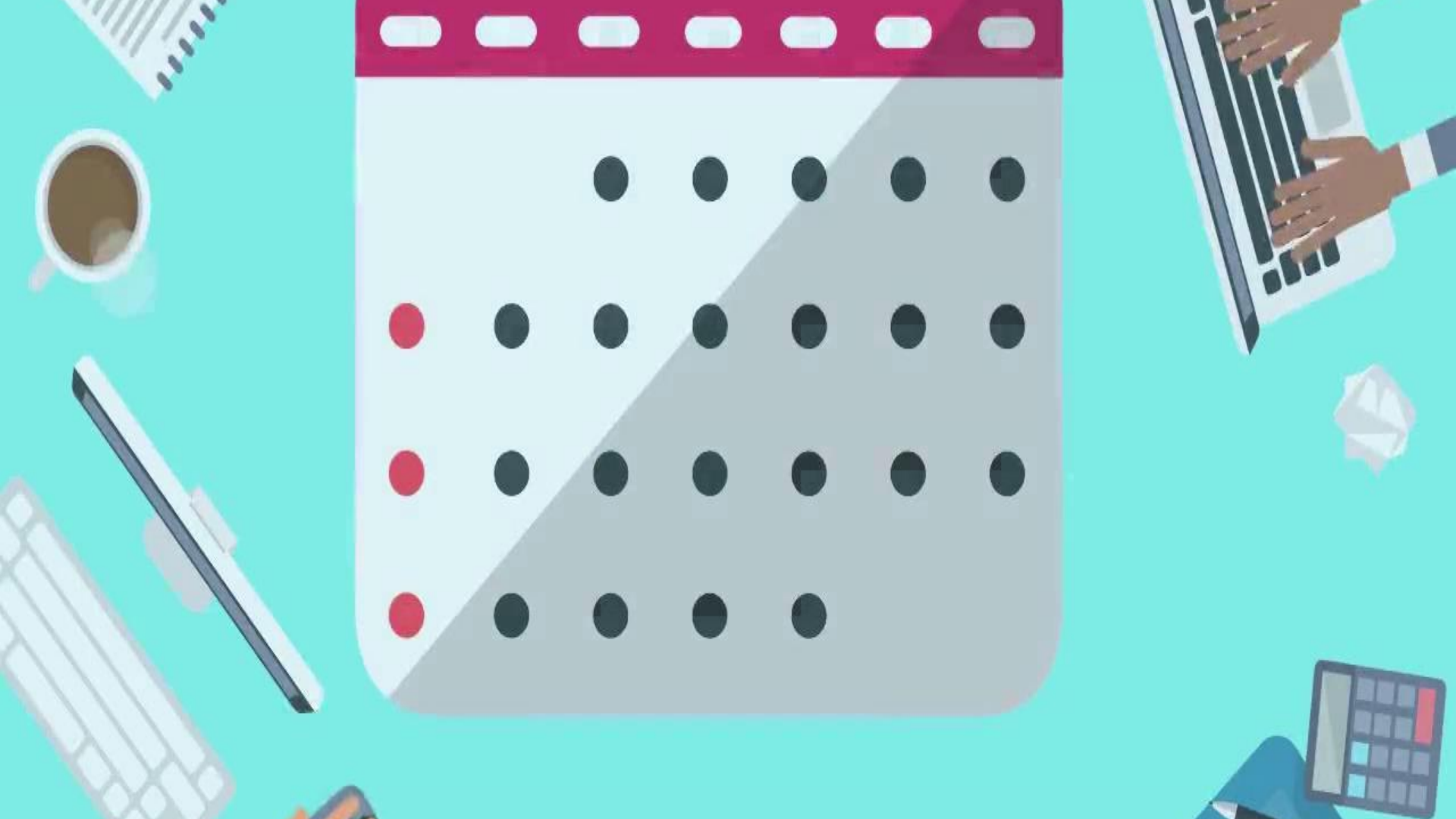
Common Misconceptions



You are **not** required to participate in employer-based coverage even if you are still actively working. In fact, your employer plan may not be the most affordable option.

You **do have the choice** to:

- Transition onto Medicare as your primary insurance
- Add additional Medicare coverage that can be tailored to your medical needs
- Drop your group coverage.



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The 4 Parts of Medicare



Part A: Hospital insurance

Part B: Medical insurance

Part C: Medicare Advantage plans

Part D: Prescription Drug Plans

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Part A - Hospital Insurance

Helps with costs of inpatient hospital stays, skilled nursing home costs, hospice care, and limited home health benefits.



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Part B - Medical Insurance

Helps with cost of doctor visits and other medical services, including outpatient care at hospitals and clinics, lab tests, some diagnostic screenings, and some skilled nursing care.



If your yearly income in 2018 (for what you pay in 2020) was			You pay each month (in 2020)
File individual tax return	File joint tax return	File married and separate tax return	
\$87,000 or less	\$174,000 or less	\$87,000 or less	\$144.60
above \$87,000 up to \$109,000	above \$174,000 up to \$218,000	Not applicable	\$202.40
above \$109,000 up to \$136,000	above \$218,000 up to \$272,000	Not applicable	\$289.20
above \$136,000 up to \$163,000	above \$272,000 up to \$326,000	Not applicable	\$376.00
above \$163,000 up to \$500,000	above \$326,000 up to \$750,000	above \$87,000 up to \$413,000	\$462.70
\$500,000 or above	\$750,000 and above	\$413,000 and above	\$491.60

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Original Medicare

Original Medicare (Part A and Part B) generally covers **80%** of your hospital and medical expenses.



Original Medicare does not cover:

- Prescription drugs
- Routine dental or eye exams
- Hearing aids or related services
- Most care while traveling outside the U.S.
- Help with bathing, dressing, eating, etc.
- Long-term care
- Cosmetic surgery
- Most chiropractic services
- Acupuncture
- Routine foot care

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Part C - Medicare Advantage

Medicare Advantage plans are approved by Medicare and offered by private insurance companies that are contracted by the Federal Government and follow their rules.



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Part D - Prescription Drugs

Part D is a government program that helps Medicare beneficiaries cover some of the cost of prescription drugs. Part D plans are offered by private insurance companies or other private companies approved by Medicare.



Prescription Drug Plan Eligibility



Consumers can enroll in a **stand-alone Prescription Drug Plan** if these conditions are met by the beneficiary:

- Enrolled in either Part A or B
- Permanently reside in the service area of the plan

Prescription Drug Plan Eligibility



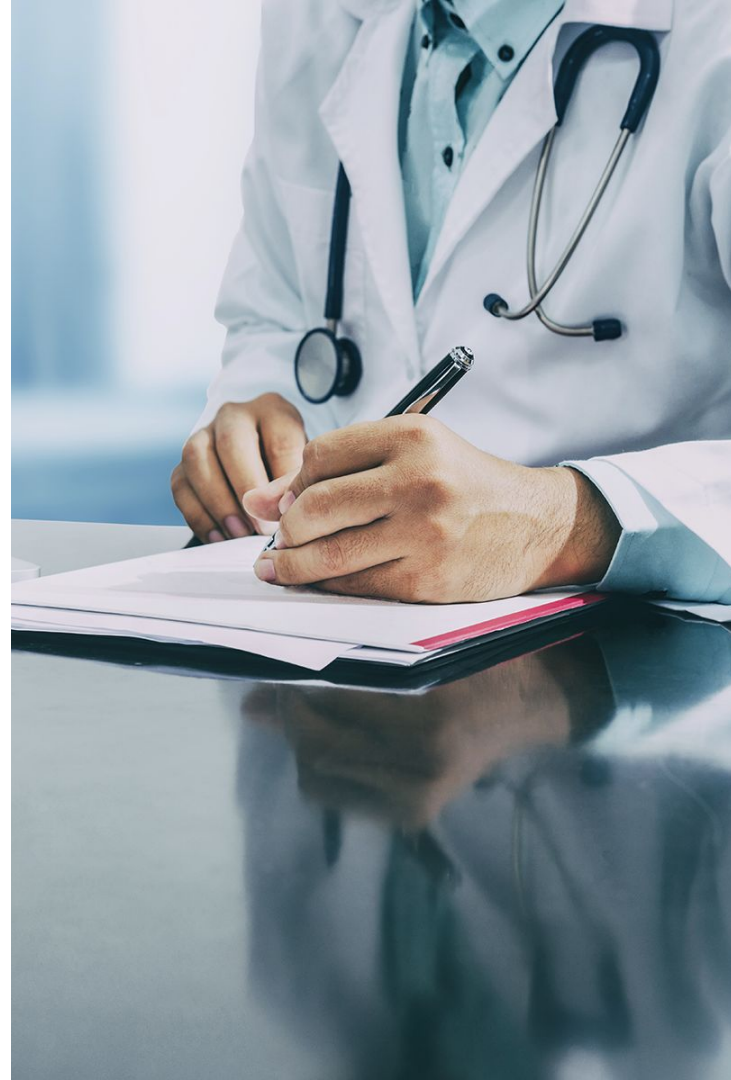
Consumers can enroll in a **Medicare Advantage Prescription Drug Plan** if these conditions are met by the beneficiary:

- Enrolled in both Part A and B
- Permanently reside in the service area of the plan

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Medicare Supplement Insurance

Original Medicare only covers 80% of hospital and medical expenses. Medicare Supplement Insurance plans are designed to fill in the remaining 20% to ensure you have full health coverage.



Medicare Supplement Insurance

Medicare Supplement Insurance plans are assigned a letter that aligns with associated benefits.



From NAIC.org

Draft: 3/1/16
 Model #651
 Comments are being requested on this draft by March 17, 2016. The revisions to this draft reflect changes made from the existing model. Comments should be sent only by email to David Forlan at dforlan@naic.org.

Benefit Chart of Medicare Supplement Plans Sold on or after January 1, 2020

This chart shows the benefits included in each of the standard Medicare supplement plans. Some plans may not be available. Only applicants **first** eligible for Medicare before 2020 may purchase Plans C, F, and high deductible F.

Note: A ✓ means 100% of the benefit is paid.

Benefits	Plans Available to All Applicants								Medicare first eligible before 2020 only	
	A	B	D	G ¹	K	L	M	N	C	F ¹
	Medicare Part A coinsurance and hospital coverage (up to an additional 365 days after Medicare benefits are used up)	✓	✓	✓	✓	✓	✓	✓	✓	✓
Medicare Part B coinsurance or Copayment	✓	✓	✓	✓	50%	75%	✓	✓ copays apply ³	✓	✓
Blood (first three pints)	✓	✓	✓	✓	50%	75%	✓	✓	✓	✓
Part A hospice care coinsurance or copayment	✓	✓	✓	✓	50%	75%	✓	✓	✓	✓
Skilled nursing facility coinsurance			✓	✓	50%	75%	✓	✓	✓	✓
Medicare Part A deductible		✓	✓	✓	50%	75%	50%	✓	✓	✓
Medicare Part B deductible									✓	✓
Medicare Part B excess charges				✓						✓
Foreign travel emergency (up to plan limits)			✓	✓			✓	✓	✓	✓
Out-of-pocket limit in [2016] ²					[\$4,960] ²	[\$2,480] ²				

¹ Plans F and G also have a high deductible option which require first paying a plan deductible of [\$2180] before the plan begins to pay. Once the plan deductible is met, the plan pays 100% of covered services for the rest of the calendar year. High deductible plan G does not cover the Medicare Part B deductible. However, high deductible plans F and G count your payment of the Medicare Part B deductible toward meeting the plan deductible.

² Plans K and L pay 100% of covered services for the rest of the calendar year once you meet the out-of-pocket yearly limit.

³ Plan N pays 100% of the Part B coinsurance, except for a co-payment of up to \$20 for some office visits and up to a \$50 co-payment for emergency room visits that do not result in an inpatient admission.

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Original Medicare **or** Medicare Advantage



Medicare Supplement ↑

Medicare Advantage ↓



Part A & B
Covers 80% of doctor visits and hospital costs



Medicare Supplement
Helps cover the remaining 20% of doctor visits and hospital costs



Part D
Covers prescription costs



Part C
Replaces Part A & B, generally an HMO or PPO-type of plan



Part D
Most Medicare Advantage plans include prescription coverage

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Enrollment Periods



Initial Enrollment Period

Special Enrollment Period

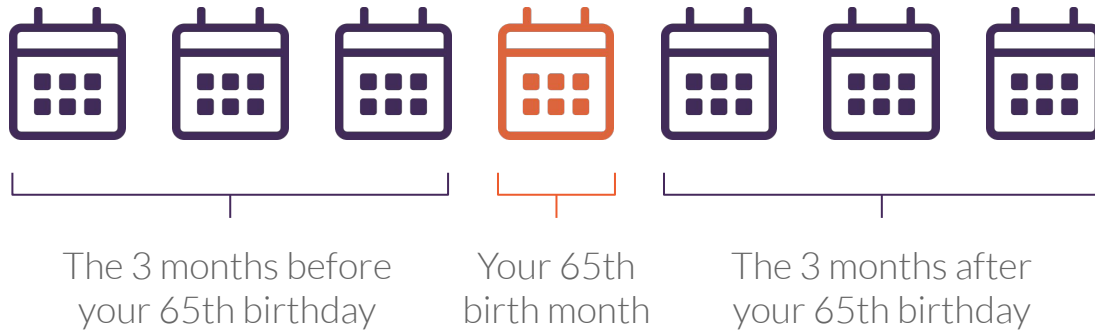
General Enrollment Period

Medigap Open Enrollment

Annual Enrollment Period

Initial Enrollment Period (IEP)

IEP is a seven-month period in which you can sign up for Medicare for the first time. You may join Medicare Parts A, B, C, and D in the seven months surrounding your 65th birthday.



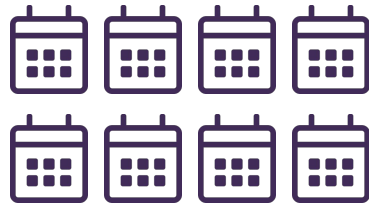
Special Enrollment Period (SEP)

The SEP is for those enrolling in Parts B, C, and D **after 65** and after their Initial Enrollment Period expires. After group coverage expires, you are allowed eight months to register for Part B without penalty and 63 days to register for a Part D plan without penalty.



OR

For Part A & Part B



The 8 months after your employer-based coverage ends

For Part C & Part D



+

The 63 days after your employer-based coverage ends

While you have coverage from an employer

General Enrollment Period

January 1 through March 31: If you missed your Initial Enrollment Period and you are not eligible for a Special Enrollment Period, you may enroll in Part A, Part B, or both at this time. Coverage will start July 1st of the same enrollment year.



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Medigap Open Enrollment

A one time six-month period, beginning on your Part B effective date.

Enroll in any Medigap plan with no health questions asked.



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Medicare Annual Enrollment Period

From October 15 to December 7, annually

Enroll, disenroll, or change your Part D or Medicare Advantage plans.



Medicare Open Enrollment Period

January 1 through March 31: OEP allows Medicare beneficiaries who are enrolled in a Medicare Advantage Plan to make a one-time change.



January 1 through
March 31

Current Medicare
Advantage Plan

- Original Medicare
- New Medicare Advantage Plan

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Contact Information



(855) 900-5482 | TTY: 711

Monday - Friday, 8 a.m. - 5 p.m. CST

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Sources

Information in this presentation was collected from a variety of sources, including Medicare.gov and NAIC.org.





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