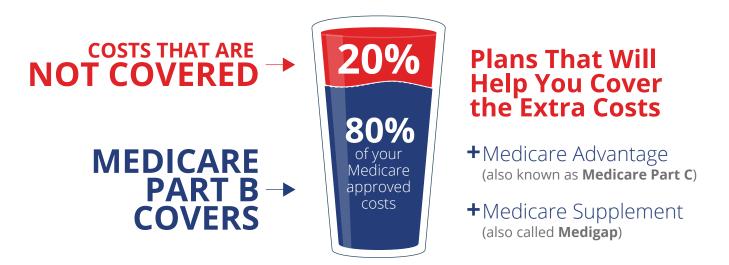
Medicare Advantage:

What You Need to Know to Get the Right Coverage





Finding the right Medicare coverage for you can be complex. And while Original Medicare (Parts A and B) is a good place to start, it only covers 80% of your Medicare costs. That leaves you responsible for the remaining 20% plus your annual Medicare B deductible. Learn more about how you can offset those costs below.



20 percent may not sound like a lot but the costs can be substantial, for example:

EXAMPLE 1: Mary recently experienced a fall in her home which required a visit to the emergency room.

She was taken to the hospital by ambulance. Mary has Original Medicare so here's some of what she was responsible for:

- For the ambulance to transport Mary to the hospital she was responsible for:
 - Part B deductible (\$233 in 2022)¹
 - 20% of the Medicare-approved amount
- For the Emergency Room visit, Mary was responsible for:
 - A copayment for each emergency department visit
 - A copayment for each hospital service. (i.e. lab tests, splints, and casts)
 - Part B deductible if it hadn't already been reached (\$233 in 2022)¹
 - 20% of the Medicare-approved amount for doctor's services





According to the Centers for Disease Control, Medical costs for people with diabetes are more than double the costs for people without diabetes.² While Basic Medicare often covers diabetes supplies, it only covers insulin if you use an external insulin pump to administer the insulin. For this reason, it's important for Fred to also have a Medicare Part D prescription drug plan to help cover expenses for his insulin and other medical supplies. For his diabetes supplies that are covered by Part B, Fred is responsible for the Medicare Part B deductible (\$233 in 2022)¹ and 20% of the remaining Medicare-approved amount.

There is no yearly limit to out-of-pocket costs under Original Medicare so costs can keep accumulating.

How a Medicare Advantage Plan Can Help

Medicare Advantage plans are a popular choice, because everything covered by Original Medicare is required to be included in a Medicare Advantage plan. A major difference is there is an out-of-pocket maximum that varies by plan.While copayment costs vary by Medicare Advantage plan, you'll be aware of your copayment ahead of time as it's typically listed on the front of your Medicare insurance card.

Not Covered by Original Medicare

Routine dental cleanings, dentures, hearing aids and eyeglasses are not covered by Original Medicare. Many Medicare Advantage plans, however, include these benefits in addition to many others.



Not Covered by Original Medicare



Your Medicare Advantage Questions Answered

Medicare Advantage plans are offered by private insurance companies and there are many types of plans to consider. This can make finding the right one for you overwhelming. Consider the following when the time comes to review your coverage:

- + Medicare Advantage plans can be based on an HMO (Health Maintenance Organization) or a PPO (Preferred Provider Organization) model.
- + You'll want to ensure your current doctor(s) are in network.
- + Premiums costs vary from plan to plan.
- + Take the time to learn more about the enrollment periods and when they are, as they're set for specific times of the year.

Understanding your Medicare coverage choices is crucial, because enrolling in the wrong plan for you could potentially end up costing you lots of money and limit your healthcare options. At the Medicare Helpline, our experienced licensed insurance agents can help find the right coverage for you. They can also help answer your Medicare questions, provide unbiased comparisons of coverage and serve as a resource to simplify the entire process.



Is Medicare Advantage **the right choice for you?**

Medicare Advantage is a common choice, as it's often a comprehensive choice to have enough medical coverage at a price that works with your budget. In addition to having the same coverage as Original Medicare (Parts A and B), Medicare Advantage plans often include additional coverage such as:

- + Prescription drug savings
- + Routine vision and dental benefits
- + Health and wellness memberships
- + Over-the-counter allowance
- + Transportation to and from appointments
- + Much more!



What are the costs of a Medicare Advantage plan?

Costs vary depending on your coverage needs, your healthcare utilization throughout the year, and basic factors such as where you live. Our licensed insurance agents will take the time to get to know your situation and ensure you have the right Medicare plan for you.

When can you enroll in a Medicare Advantage plan?

The best time to enroll in a Medicare Advantage plan is during the Medicare Advantage and Prescription Drug Plan Annual Enrollment Period (also known as the Medicare Annual Enrollment Period or AEP). This enrollment period runs from October 15-December 7 every year, and during the time, millions of Medicare recipients evaluate their current coverage and make changes that are oftentimes more affordable or provide more accurate coverage.

Another option is during a Special Enrollment Period. The following circumstances could qualify you for a Special Enrollment Period:

- + Moving somewhere you have new plan options
- + Retiring and losing employer coverage
- + Diagnose with a chronic condition, such as diabetes or chronic heart failure
- + Moving in or out of a skilled nursing facility or long-term care hospital
- + If a 5-Star Plan is available in your area, you may be eligible to switch

The Medicare Helpline is here to help you enroll in a Medicare Advantage plan.

With so many choices for Medicare coverage, researching and finding the right plan for you can be time consuming and overwhelming. At the Medicare Helpline, we work with more than 10 of some of the most trusted insurance companies in the nation, and our licensed insurance agents can talk you through your options and help you figure out which is right for you. Our service is free and there's never an obligation to enroll.

Connect with a Medicare Helpline licensed insurance agent today at 1-855-600-0330 (TTY: 1-877-486-2048).



Use the following checklist to help you prepare for your call with a Medicare Helpline licensed insurance agent.

Types of Coverage

There are many options when it comes to Medicare coverage, but we can help narrow down your options to figure out which is right for you. Select which type of coverage(s) you think you'd be interested in ahead of your call. If you're unsure, that's okay, too. Our licensed insurance agents will walk you through your options.

Medicare Advantage Plan
Medicare Supplement Plan
Prescription Drug Plan
l don't know

2 Current Insurance

In just minutes, we compare Medicare plans in your area from some of the most trusted insurance companies in the nation. To help your licensed insurance agent accurately compare your options, we'll need some information about your current plan. Use this grid below to compare your current rates to your new rates while working with our team. You can expect to receive official rate and plan details within 14 days of purchase.

	Current Plan	New Plan
Carrier/Plan Name		
Monthly Premium	\$	\$
Annual Deductible	\$	\$
Type of plan (HMO, PPO)		

3 Preferred Doctor(s)

One of the most important considerations when choosing a plan is whether or not you'll be able to see your preferred doctors and specialists. Here you can list out your doctors' information so our team can confirm whether or not they accept your new plan.

Doctor's Name	Type of Doctor	Phone Number	Number of visits in the last 12 months

4 Prescription Drugs

Just like your doctors, it's important to ensure your prescription medications are covered by your new plan. Use the grid below so your licensed insurance agent can make sure it's not only covered by your new plan, but that you also

Name of Drug	Dose	Qty	Cost per refill	\$
Name of Drug	Dose	Qty	Cost per refill	\$
Name of Drug	Dose	Qty	Cost per refill	\$
Name of Drug	Dose	Qty	Cost per refill	\$
Name of Drug	Dose	Qty	Cost per refill	\$

5 Consider Your Priorities

To help you find a Medicare plan that's right for you, we'll need to know what's most important to you. Select any of the boxes below that you consider to be a priority and be sure to mention these at the beginning of the call with your licensed insurance agent.

Cost of co-pays/co-insurance	Additional coverages (rides to appointments, over-the-counter benefits, dental, vision or
Cost of annual deductible	hearing coverage, etc.)
Cost of monthly premiums	Coverage for specialized medications
Cost of prescription medications	Coverage for specialist visits
	Coverage while you're away from home/traveling

6 Get Ready for Your Call

Some Medicare Advantage plans have premiums as low as \$0/month and might also include:

- Prescription drug coverage
- Dental and vision benefits
- Transportation to and from appointments
- · Health and wellness memberships

- Routine hearing checks
- Over-the-counter benefits
- So much more

We want to ensure you have the right coverage for your needs.

While your call with one of our licensed insurance agents will cover a lot of ground, we're here to guide you through the process and answer any questions you have along the way. Be sure to have your current insurance information and/or Medicare ID card (red, white, and blue card) for the call. Use the remainder of this page to write down any questions or concerns you have leading up to your appointment.

Agent's Name	
Agent's Phone Number	
Customer Care Contact Info	1-855-443-3709 (M-F 8 a.m6 p.m. CT; Sat. 9 a.m2 p.m. CT)