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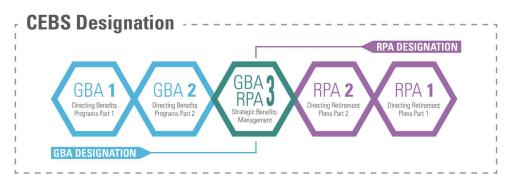








## Success in 2021 What's Holding You Back?



Tell me more...

Certified Employee Benefit Specialist (ifebp.org)



# Today's Speaker & Topic

Leigh Bennett

Medicare Insurance Program Director with IMA Wealth
The Basics of Medicare

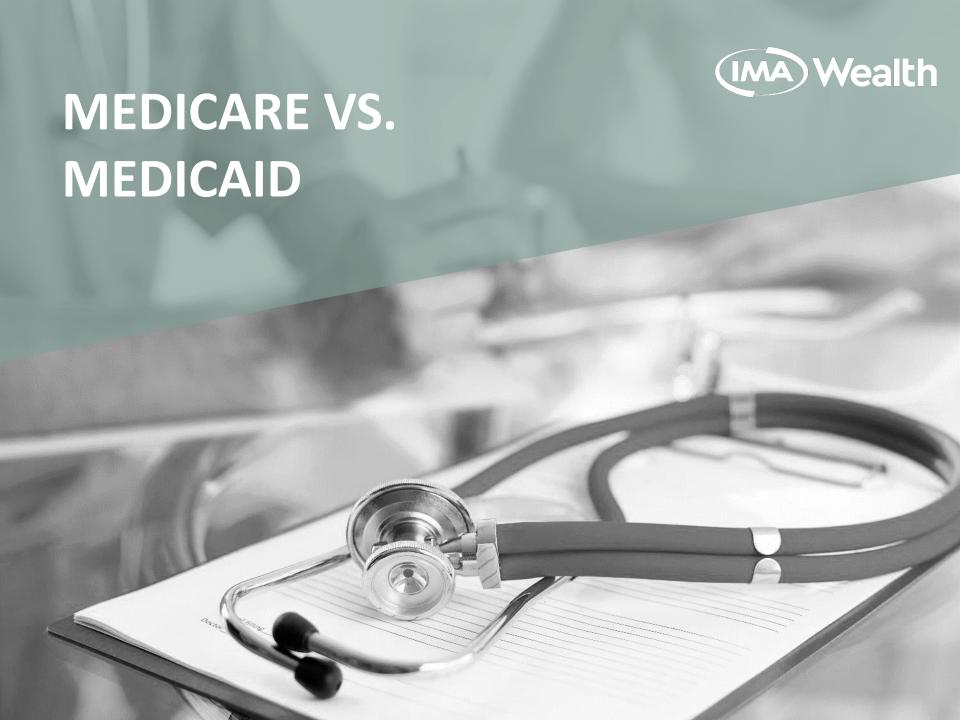


## **AGENDA**

- 1 Medicare vs Medicaid
- 2 Original Medicare
- **3** Medicare Supplements
- 4 Medicare Advantage
- 5 Prescription Drug Plans
- 6 Enrollment Periods
- 7 Medicare Resources
- 8 Timelines







## **MEDICARE VS. MEDICAID**

<u>Medicare</u> is a federal program that provides health coverage if you are 65 or older or have a severe disability, no matter your income.

<u>Medicaid</u> is a state and federal program that provides health coverage for persons of all ages if you have a very low income

If you are eligible for both Medicare and Medicaid (dual eligible), you can have both. Medicare and Medicaid will work together to provide you with very good health coverage.





## **ORIGINAL MEDICARE**

- Original Medicare consists of two parts
  - Part A and Part B
- Part A
  - Hospital, Skilled nursing, Home health care, Hospice
- Part B
  - Doctors, Preventive services, Diagnostic tests, DME
- Part C
  - Medicare Advantage
- Part D
  - Prescription Drugs



## **ORIGINAL MEDICARE (CONT.)**

#### **PART A**

- Work 40 quarters (noncontinuous)
- Qualify under spouse's benefits
- Buy into Part A
  - Up to \$471 Monthly

#### **PART B**

- Standard premium
  - \$148.50 monthly premium
  - Means tested premium
- 10% penalty (for every 12 months not covered)
- Penalty never goes away



## **ORIGINAL MEDICARE (CONT.)**

IF YOUR YEARLY INCOME IN 2019 (FOR WHAT YOU PAY IN 2021) WAS						
FILE INDIVIDUAL TAX RETURN	FILE JOINT TAX RETURN	FILE MARRIED & SEPARATE TAX RETURN	YOU PAY EACH MONTH (IN 2021)			
\$88,000 or less	\$176,000 or less	\$88,000 or less	\$148.50			
above \$87,000 up to \$109,000	above \$176,000 up to \$222,000	Not applicable	\$207.90			
above \$111,000 up to \$138,000	above \$222,000 up to \$276,000	Not applicable	\$297.00			
above \$138,000 up to \$165,000	above \$272,000 up to \$326,000	Not applicable	\$386.10			
above \$165,000 and less than \$500,000	above \$330,000 and less than \$750,000	above \$88,000 and less than \$412,000	\$475.20			
\$500,000 or above	\$750,000 and above	\$412,000 and above	\$504.90			



## **ORIGINAL MEDICARE (CONT.)**

#### **PART A**

- Hospital Deductible: \$1,484
- Covers stays up to 60 days
- Days 61 90: \$352 per day
- Days 91 150: \$704 per day
- Skilled Nursing Facility
- Days 1 20: \$0
- Days 21 100: \$176.00 per day

#### **PART B**

- Annual Deductible: \$203
- 80/20 Coinsurance or co-payment
- Excess Charges 15% (Assignment)



### **ORIGINAL MEDICARE**

#### Medicare-Eligible and still working

#### **Groups of less than 20 Employees**

- Medicare is primary coverage
- Need Part A
- Need Part B in most cases

#### **Groups of 20 or more Employees**

- Medicare is secondary coverage
- Part A is optional but not necessary
- Part B not necessary





## **MEDICARE SUPPLEMENTS**

Cover "gaps" in Original Medicare

Also Referred to as Medigap Plans

Include 9 Modernized Plans A, B,D,G, K-N (Plan C & F have been discontinued effective 1/1/2020 and not available to those newly eligible for Medicare as of 1/1/20 and after. Those currently on Plans C & F will be able to maintain these plan)

Plans provide the same coverage regardless of carrier

Have a monthly premium

Premiums vary by carrier (Age, ZIP Code, Gender, etc.)

Offer freedom of choice (no networks)

Only requirement is that the provider accept Medicare

**Exceptions on Medical Underwriting** 

- Enrollment during initial enrollment period
  - (Six months from 65th birthday or Part B effective date)
- Loss of certain types of coverage
- Must have Part A and Part B of Original Medicare



## **MEDICARE SUPPLEMENTS (CONT.)**

	MEDICARE SUPPLEMENT INSURANCE (MEDIGAP) PLANS									
BENEFITS	А	В	С	D	F *	G	K	L	М	N
Medicare Part A <i>coinsurance</i> and hospital costs (up to an additional 365 days after Medicare benefits are used)	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Medicare Part B coinsurance or <i>copayment</i>	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%
Blood (first 3 pints)	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%
Part A hospice care coinsurance or copayment	100%	100%	100%	100%	100%	100%	50%	75%	100%	100%
Skilled nursing facility care coinsurance			100%	100%	100%	100%	50%	75%	100%	100%
Part A <i>deductible</i>		100%	100%	100%	100%	100%	50%	75%	50%	100%
Part B deductible			100%		100%					
Part B excess charges					100%	100%				
Foreign travel emergency (up to plan limits)			80%	80%	80%	80%			80%	80%

<sup>\*</sup>Plan F is also offered as a high-deductible plan by some insurance companies in some states. If you choose this option, this means you must pay for Medicare-covered costs (coinsurance, copayments, deductibles) up to the deductible amount of \$2,240 in 2018 before your policy pays anything.

Out-of-Pocket Limit in 2018\*\* \$5,240 \$2,620



<sup>\*\*</sup>For plans K and L, after you meet your out-of-pocket yearly limit and your yearly Part B deductible (\$183 in 2018), the Medigap plan pays 100% of covered services for the rest of the calendar year.

# **MEDICARE** (IMA) Wealth **ADVANTAGE**

## **MEDICARE ADVANTAGE**

#### **MEDICARE PART C**

- Run by private insurance companies
- Medicare pays "capitation" rate per enrollee
- All care and claims handled by carrier
- CMS is "watchdog" operation

#### **TYPES OF PLANS**

- HMO: Health Maintenance Organization
- PPO: Preferred Provider Organization
- **PFFS:** Private Fee for Service
- <u>SNP:</u> Special Needs Plan
  - Dual Eligible
  - Chronic Illness



## MEDICARE ADVANTAGE (CONT.)

#### **ELIGIBILITY REQUIREMENTS**

- Reside in service area
- Enrolled in Medicare Parts A and B

#### **VALUE PROPOSITION**

- \$0 or low monthly premium
- Small co-pays or coinsurance
- Guaranteed Issue
- Can include prescription drug coverage
- May provide extra benefits
- Such as vision, hearing, dental, gym membership





## PRESCRIPTION DRUG PLANS

#### **Medicare Part D**

- Available to all people with Medicare
- Requires Part A and/or B

#### **Provided Through**

- Stand-alone Medicare Prescription
   Drug Plans
- Medicare Advantage Plans
- Some employers or unions

#### Part D Premium Details

- Standard premiums: \$15 \$150 per month
- 2020 national base premium: \$32.74
- 1% of national base premium for each month not enrolled
- Means tested premium



## PRESCRIPTION DRUG PLANS (CONT.)

IF YOUR FILING STATUS AND YEARLY INCOME IN 2019 WAS						
FILE INDIVIDUAL TAX RETURN	FILE JOINT TAX RETURN	FILE MARRIED & SEPARATE TAX RETURN	YOU PAY EACH MONTH (IN 2021)			
\$88,000 or less	\$176,000 or less	\$88,000 or less	your plan premium			
above \$88,000 up to \$111,000	above \$174,000 up to \$218,000	not applicable	\$12.30 + your plan premium			
above \$111,000 up to \$138,000	above \$222,000 up to \$276,000	not applicable	\$31.80 + your plan premium			
above \$138,000 up to \$165,000	above \$276,000 up to \$330,000	not applicable	\$51.20 + your plan premium			
above \$165,000 and less than \$500,000	above \$330,000 and less than \$750,000	above \$88,000 and less than \$412,000	\$70.70 + your plan premium			
\$500,000 or above	\$750,000 and above	\$412,000 and above	\$77.10 + your plan premium			



## PRESCRIPTION DRUG PLANS (CONT.)

#### **Overview for 2021**

- Maximum deductible of \$445
- 75/25 cost sharing
- Initial Coverage Limit: \$4130
  - Total Drug Costs
- Coverage Gap
  - Member Pays 25% (amount will vary based on mix of brand-name and generic drugs)
- Annual Out-of-Pocket Threshold (TrOOP): \$6550
- Catastrophic Coverage
  - 5% of the drug cost or \$3.70 (Generic) or \$9.20 (Name Brand) whichever is greater



# **ENROLLMENT** (IMA) Wealth **PERIODS**

## **ENROLLMENT PERIODS**

#### **Initial Enrollment Period (IEP)**

- Parts B, C and D
- Lasts 7 months (3 before, eligible month, 3 after)
- Coverage begins no earlier than first day of ELIGIBLE month

#### **General Enrollment Period (GEP)**

- Part B only
- January 1 through March 31
- Coverage effective July 1

#### **Annual Enrollment Period (AEP)**

- Parts C and D
- October 15 through December 7
- Coverage effective January 1



## **ENROLLMENT PERIODS (CONT.)**

#### **MA Open Enrollment Period (OEP)**

- Parts C only (must be enrolled in a MA or MA-PD)
- January 1 through March 31
- Change to a different MA or MA-PD plan, disenroll from their plan and return to Original Medicare (with or without a Part D plan)
- One time change allowed
- Coverage begins first day of the next month

#### **Special Enrollment Period (SEP)**

- Events include:
  - Loss of certain types of coverage
  - Move out of service area
  - Plan termination
  - Dual-Eligible
  - Chronic Illness





### **MEDICARE RESOURCES**

#### SHIP COUNSELORS

- Can help an individual understand what their Medicare options will look like compared to what they
  have with their employer group plan as an initial step in transitioning to Medicare
- To find a Medicare approved SHIP Counselor in your state, use the following link: <a href="https://www.medicare.gov/Contacts/#resources/ships">https://www.medicare.gov/Contacts/#resources/ships</a>

#### THE GOVERNMENT AGENCY - MEDICARE

- www.medicare.gov
- 1-800-MEDICARE (1-800-633-4227)

#### **CERTIFIED MEDICARE ADVISOR**

- Leigh Bennett IMA, Wealth
- Certified Medicare Products Specialist for over 8 years (Medicare Supplement plans, Stand-Alone Part D plans & Medicare Advantage plans)





## **ADVISING TIMELINE**

#### **Turning 65**

- Contact me a minimum of 2 months prior to your
   65<sup>th</sup> birthday month
- Overview of Original Medicare
- Medicare needs assessment
- Medicare plan selection assessment
- Enrollment assistance and application submission
- Application tracking and enrollment confirmation





## **ADVISING TIMELINE**

## Already 65 – Moving Off Employer Group Plan

- Contact me a minimum of 3 months prior to the expected transition off the current group medical plan
- Overview of Original Medicare
- Medicare needs assessment
- Medicare plan selection assessment
- Enrollment assistance and application submission
- Application tracking and enrollment confirmation







**LEIGH BENNETT**Medicare Insurance Program Director *leigh.bennett@imacorp.com*972.759.3760



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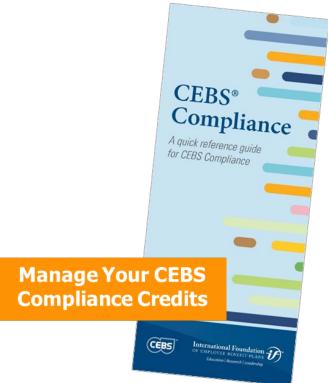


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Follow the prompts on the orange box to report your credits





## Reminders

- ➤ Next meeting, March 11 Sarah Borders, CEBS, Principal & Founder of Benefits Compliance Solutions

  Recent Legislative Changes to Health & Dependent Care FSAs
- > Become a member! It's easy to join! <a href="www.ifebp.org/membership">www.ifebp.org/membership</a>
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