

See what's included:

- 8 Medicare benefits you might not know about
- Medicare on your mind?
- Preventive care checklist
- Federal and state resources



Insurance for all of us.®

MEDICARE INSIDER

Benefits and resources you might be missing out on



8 Medicare benefits you might not know about

If you're a Medicare recipient, you probably already realize it's a tall order to know all the benefits it provides. Here's just a glimpse of a few of the services it covers.



Medicare on your mind?

Making far-reaching decisions about your Medicare coverage in retirement can seem nervewracking. To help you make the best choice for you, check out these answers to common questions about Medicare, and find out what's the most important thing for you to understand as you approach age 65.



Preventive care checklist

Bring this checklist to your doctor and ask which services may be right for you. Getting the preventive care you need today can help you enjoy a healthier retirement.



Federal and state resources

Keep this list of contacts handy for help with Medicare, Social Security and more.

Questions? Give us a call at 1-800-325-7500



8 Medicare benefits

you might not know about



If you're a Medicare recipient, you probably already realize it's a tall order to know all the benefits it provides. From the "Medicare & You 2019" booklet, here's just a glimpse of a few of the Part B services it covers.

'Welcome to Medicare' preventive visit

New to Medicare? During the first 12 months that you have Part B, you can get a "Welcome to Medicare" preventive visit. This includes a review of your medical and social history related to your health. It also includes education and counseling about preventive services, along with certain screenings, flu and pneumococcal shots, and referrals for other care, if needed. When you make your appointment, let your doctor's office know you'd like to schedule your "Welcome to Medicare" preventive visit.

Yearly 'Wellness' visit

If you've had Part B for longer than 12 months, you can get a yearly "Wellness" visit to develop or update a personalized plan to prevent disease or disability based on your current health and risk factors. This visit is covered once every 12 months. When you make your appointment, let your doctor's office know you'd like to schedule your yearly "Wellness" visit.

Advance care planning

Medicare covers voluntary advance care planning as part of the yearly "Wellness" visit. This is planning for care you would want to get if you become unable to speak for yourself. You can talk about an advance directive with your health care professional, and he or she can help you fill out the forms, if you like. An advance directive is an important legal document that records your wishes about medical treatment at a future time, if you're not able to make decisions about your care.

4 | Bone mass measurement (bone density)

This test helps determine if you're at risk for broken bones. It's covered once every 24 months (more often if medically necessary) for people who have certain medical conditions or meet certain criteria.

8 Medicare benefits

you might not know about continued

Diabetes prevention program (new)

Type 2 diabetes can sometimes be delayed or prevented with health behavior changes, such as losing even a small amount of weight if you're overweight and getting regular exercise. If you have Medicare Part B, have prediabetes, and meet other criteria, this new Medicare program covers a proven health behavior change program to help you prevent diabetes. The program begins with at least 16 core sessions offered in a group setting over a 6-month period. After the core sessions, you may be eligible for additional monthly sessions to help you maintain healthy habits.

Diabetes self-management training

Medicare covers diabetes outpatient selfmanagement training to teach you to cope with and manage your diabetes. The program may include tips for eating healthy, being active, monitoring blood sugar, taking medication, and reducing risks. You pay 20 percent of the Medicare-approved amount, and the Part B deductible applies.

Therapeutic shoes and inserts for people with diabetes

If you have diabetes and severe diabetic foot disease, Medicare covers the furnishing and fitting of one pair of custom-molded shoes and inserts or one pair of extra-depth shoes and inserts each calendar year.

Medicare will only cover therapeutic shoes if your doctor and supplier are enrolled in Medicare – and if the supplier participates in Medicare. You may have to pay 20 percent of the Medicare-approved amount, and the Part B deductible applies. For more information about this benefit, visit medicare.gov/coverage/therapeutic-shoes-inserts.

Smoking and tobacco-use cessation (counseling to stop smoking or using tobacco products)

Medicare covers up to eight face-to-face visits in a 12-month period. All people with Medicare who use tobacco are covered.

There's a lot to know about Medicare, but taking time to thumb through your copy of "Medicare & You 2019" (also available online) or perusing medicare.gov can help you understand more about the benefits available to you.



Medicare on your mind?

Check out these answers to common questions



Turning 65 soon? Congratulations! With this milestone birthday, you'll be eligible for Medicare. If that prospect is exciting and overwhelming to you, you're not alone. Thousands of Americans become eligible every day for this federally run insurance program, and might be feeling the same way you are. During our working years, many of us get the chance to make changes to our employer-sponsored health insurance every year. It's something we're familiar with. But Medicare is a whole new ball game. It's complicated, and isn't an apples-to-apples comparison to the group coverage we had when we were working.

But it's a great program, and the good news is that taking time to learn about it – and your choices – can help you make the best decision for your health coverage in retirement. If you or someone you know will be transitioning to Medicare in the not-too-distant future, we have answers to a few common questions to get you started.



I'm turning 65 this year and will be enrolling in Medicare. What should I do first?

A: Give yourself plenty of time to learn.

Medicare.gov is a thorough resource. You'll also want to talk with a licensed insurance agent who specializes in Medicare. Everyone's situation is different. For example, some people may have retiree or spousal benefits to consider as coverage options. So, it's important to talk with an expert who can walk you through your options and enrollment deadlines.



What are the Medicare 'parts'?

A: There are two ways to get your Medicare coverage. You can go with Medicare – Part A and Part B. Or, you can opt out of Medicare and go with Part C, also known as Medicare Advantage (described later).

Part A provides benefits for inpatient hospital care, skilled nursing, hospice and home health care. Most people don't pay a premium for Part A since it's usually covered by the taxes you paid while you were working. For most people, it's a

Medicare on your mind?

Check out these answers to common questions

continued

good idea to sign up during your Initial Enrollment Period (three months before your 65th birthday, the month in which you turn 65, and the three months after your birthday).

Part B is your medical coverage and helps pay for things like doctors' services, outpatient procedures and ER visits. It has both an annual deductible and coinsurance. If you'll still be working at 65, you might be able to delay enrolling in Part B if your employer-sponsored group health insurance will be your primary coverage. Check with Medicare.

Part C is Medicare Advantage, an alternative to Medicare (described below).

Part D helps cover prescription drugs for an additional monthly premium. If you have Medicare, you're entitled to enroll in Part D.



What are 'Medicare Supplement' and 'Medicare Advantage'?

A: The terms are sometimes used interchangeably in the marketplace, but that's incorrect. They're very different from each other:

Medicare Supplement insurance (also called Medigap) is coverage many people buy to help fill in the gaps left by Medicare, which generally covers about 80% of your Part B services. You can get Medicare Supplement insurance only if you're enrolled in Medicare.

- During your Medicare Supplement Open Enrollment Period, you can't be excluded from buying a Medigap insurance policy for preexisting conditions, and you can't be charged a higher premium. As long as you continue the coverage by paying the premiums, your insurance policy is guaranteed renewable for the rest of your life.
- But if you want to change Medigap insurance coverage after your enrollment period, insurance companies are allowed to apply medical underwriting. That means you could be charged a higher premium, or excluded altogether. Switching from one Medigap insurance policy to another one may not come with the same coverage or premiums – or may not be possible at all.

Medicare Advantage (Part C) is the alternative to Medicare, meaning you surrender Parts A and B. It's offered by private insurers to offer comparable

Medicare on your mind?

Check out these answers to common questions

continued

services to Medicare, and generally includes prescription drug coverage.

- Medicare Advantage insurance coverage typically has lower premiums than a Part B/Part D/Medigap combination, but higher co-payments and more restrictions, such as provider networks. This insurance coverage can change from year to year, doctors can leave a network at any time, or it could be discontinued.
- Unlike Medigap insurance policies, which are guaranteed renewable for the rest of your life, Medicare Advantage insurance policies aren't guaranteed renewable, so coverage can be canceled.

Q

What's the most important thing for me to understand?

A: The decision you make about how to get your Medicare coverage – go with Medicare (Part A and Part B), or opt out of Medicare and go with Medicare Advantage (Part C) – is a major health care insurance decision that can affect you for the rest of your life.

That can be nerve-wracking. A recent study of people approaching retirement who aren't yet enrolled in Medicare showed that a leading fear they have about this transition is that they'll make the wrong choice for their health coverage.

That's why it's important to get help from an expert – a licensed insurance agent who specializes in Medicare, who can guide you to the right option for you.



Preventive Care Checklist

Take care of yourself today – so you can enjoy a healthier retirement

Bring this checklist to your doctor and ask which services are right for you.

- O One-Time "Welcome to Medicare"
 Preventive Visit
- Yearly "Wellness" Visit
- Abdominal Aortic Aneurysm Screening
- O Alcohol Misuse Screening and Counseling
- O Bone Mass Measurement (bone density)
- O Breast Cancer Screening (mammogram)
- O Cardiovascular Disease (behavioral therapy)
- O Cardiovascular Disease Screening
- O Cervical and Vaginal Cancer Screening
- O Colorectal Cancer Screenings
 - Multi-Target Stool DNA Test
 - ☐ Fecal Occult Blood Test
 - ☐ Flexible Sigmoidoscopy
 - Colonoscopy
 - ☐ Barium Enema
- O Depression Screening
- O Diabetes Screening
- O Diabetes Self-Management Training
- O Flu Shots
- O Glaucoma Tests
- O Hepatitis B Shots
- O Hepatitis C Screening Test
- O HIV Screening

- O Lung Cancer Screening
- Medical Nutrition Therapy Services
- O Obesity Screening and Counseling
- O Pneumococcal Shot
- O Prostate Cancer Screening
- Sexually Transmitted Infections
 Screening and Counseling
- O Tobacco Use Cessation Counseling (counseling for people with no sign of tobacco-related disease)

These are additional preventive services Medicare Part B does not pay for. If interested, work with your doctor or dentist to personalize your own preventive health care plan.

- O Physical Exams
- O Hearing Exams
- O Regular Dental Exams
- Refractive Eye Exams
- O Shingles (Zoster) Vaccine*
- O TDAP Vaccine*
- Any preventive services performed more frequently than Medicare Part B's requirements

To learn more about these services that may be available to you at no cost, visit www.medicare.gov. You can also call 1-800-MEDICARE (1-800-633-4227).

^{*}Medicare Part D may offer some coverage

Federal and State Resources

Important contacts

Medicare

For questions about Medicare or for personal help in choosing the coverage that is right for you:

- Call 1-800-MEDICARE (1-800-633-4227) or TTY 1-877-486-2048.
- Visit Medicare.gov, the official Medicare website.
- Login to MyMedicare.gov, a free, secure online service for accessing personalized information regarding your Medicare benefits and services.
- Read "Medicare & You," the official Medicare handbook that includes information on Parts A, B, C and D.



Social Security Administration

If you have questions about eligibility and enrollment in Medicare, Social Security retirement benefits, and/or low-income assistance for a Part D plan, call 1-800-772-1213 or TTY 1-800-325-0778.



Your State's Medical Assistance or Medicaid office (in California, Medi-Cal office)

If you have questions about your state's Medicaid program, call Medicare and ask for the phone number for your state's Medical Assistance or Medicaid (in California, Medi-Cal) office.

Your State's Health Insurance Assistance Program (SHIP)

For help with questions about buying insurance, choosing a health plan, and your rights and protections under Medicare, visit shiptacenter.org or call Medicare and ask for the phone number for your state's Health Insurance Assistance Program's office.



Your health plan's customer service center

For help with your existing health coverage, call the phone number on your identification card.

Information from: Medicare.gov and the Medicare & You handbook, 2019



8 Medicare benefits you might not know about

"Medicare & You 2019," Department of Health & Human Services, USA, Centers for Medicare & Medicaid Services

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Medicare on your mind?

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"How Do I Get Health Insurance When I Retire?" by Dana Anspach, thebalance.com, updated March 12, 2018

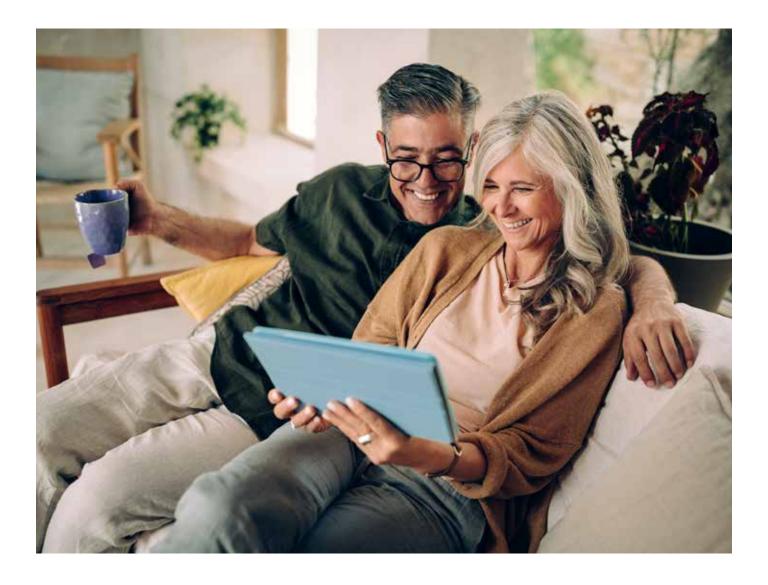
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"How To Enroll In Medicare And Avoid Costly Mistakes," by Judith Graham, Kaiser Health News, khn.org, October 27, 2016

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