

COMPARISON OF MEDICARE ADVANTAGE PLANS WITH MEDICARE SUPPLEMENT PLANS

MEDICARE ADVANTAGE (MA) BENEFIT PLANS

- Benefits can change annually
- Premiums can change annually
- Out-of-Pocket expenses have climbed steadily: 20% to 30% copays for some MA companies. It sets out-of-pocket maximum on annual basis depending on the type of plan you enroll into. (HMO, PPO, or RPPO).
- It covers for emergencies during your foreign travel.
- Needs annual enrollment into the plan for renewal or change to new carrier.
- Must have primary care physician. Requires referrals to specialists.
- Medicare pays fixed premiums on your behalf to the insurance carrier you have enrolled in.
- MA plans are regulated and approved on annual basis by Centers of Medicare and Medicaid Services, an agency of the U.S. Department of Health and Human Services.
- The insurance carriers contract with medical and pharmaceutical services providers. They can opt out anytime !!
- Insurance carriers create networks of healthcare providers in service areas they market their MA insurance products.
- MA plan members must use doctors in their MA plan network. Out of network providers cost much higher deductibles!
- Attending doctors and surgeons bill their own services in a hospital, independent of billing for facilities of a hospital you may be admitted in. You may have 'out-of-network' doctors under same roof for higher deductibles, or a 'no-network' doctors for non-contractual full fees.
- The insurance carrier administers, controls, and pays your healthcare claims.
- Unlike Medicare Supplement plans, the Medicare Advantage plans can cover chronic illnesses and special need requirements.
- MA plan is generally inclusive of Prescription Drugs Plan, which is termed as MAPD which is tied up to the plan.
- Different carriers compose different 'value added add on features' to make the plan attractive to sell for monthly premiums depending on network features of the plan.
- You make change to your plan only during Annual Enrollment Period: Oct 15 – Dec 7th unless you fall under case of special circumstances where the MA plan cannot serve you.

MEDICARE SUPPLEMENT POLICIES

- Guaranteed Renewable for life as long as premiums are paid on time.
- Can choose any provider within the U.S. who takes Medicare: ANY DOCTOR, ANY SPECIALIST, ANY HOSPITAL, ANY TIME, and covers you for emergencies when away from the U.S.
- All plans have standard benefits that all carriers have to provide. Premium prices are carriers' specific and service areas.
- Plans F is most popular. You pay a set premium and have \$0.00 Out-of-Pocket expenses.
- Plan G is equally popular. You pay set premium and your annual Out-of-Pocket is Part B deductible of \$187.00.
- Plan F and G have 80% coverage for foreign travel emergency, up to plan limit.
- Medical services providers place their claims on your behalf on the private insurance carrier who services your policy, prefers claims with Medicare and picks up your share depending upon the plan you purchase with the carrier.
- You can shop for change your Medicare Supplement insurance any time of the year so long it is medically underwritten.
- If you are currently having Medicare Advantage plan, you can buy Medicare Supplement policy for its effective date only during Annual Enrollment Period: Oct 15th to Dec 7th after disenrollment from MA plan, *unless* you are a first time enrollee and are within first 12 months of initial enrollment.
- You have to purchase a standalone Part D Prescription Drugs Plan depending on your needs.
- When you purchase a Medicare Supplement policy within first 6 months of your enrollment of Part B of Medicare, there are no 'health or medical questions' even if you have pre-existing medical condition. You are vested with this policy.

Our Recommendations

- For Medicare Supplement, within the U.S., GO TO ANY DOCTOR, ANY SPECIALIST, ANY HOSPITAL, ANYTIME .. WHO ACCEPTS MEDICARE. Plan G or F are recommended. Shop carefully: different carriers have different prices for same list of benefits of the standard plans.
- For Medicare Advantage with Prescription Drugs Plan coverage, a PPO plan gives you more flexibility and choice than an HMO plan. Premiums vary from \$0.00 to around \$100.00 depending upon scope of the plan.