



MEDICARE BASICS

Medicare for Lincoln County Employees



Presented by

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SHIBA
Senior Health Insurance Benefits Assistance
541-574-2684

- No cost, independent Medicare counseling
- 1 Counselor in Newport; 1 in Waldport; 2 in Lincoln City
- One-on-one appointments in each city
- Sponsored by RSVP of Linn, Benton, and Lincoln counties



WHAT WE WILL COVER:

- ✓ SHIBA
- ✓ Lincoln County Employee Options
- ✓ Basic Medicare Information
- ✓ Ways to receive Medicare
- ✓ Eligibility and Enrollment
- ✓ Parts A, B
- ✓ Drug Plans (Part D)
- ✓ Medigap (Supplement) Policies
- ✓ Medicare Advantage (Part C)
- ✓ Open Enrollment
- ✓ Questions

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The SHIBA Model of Advocacy

- Senior Health Insurance Benefits Assistance
- Nationally, SHIBA is part of the State Health Insurance Assistance Program (SHIP).
 - It was mandated by Congress and available in all states.
- There is a state SHIBA office in Salem with paid staff, and a Medicare office in Seattle.
- In Oregon, SHIBA services are offered locally by trained volunteers.
- SHIBA and its volunteers:
 - Do NOT sell anything
 - Do NOT receive compensation from anyone.
 - Observe confidentiality.
 - Strive to offer independent information.
 - Do NOT charge for their service.
- **Currently, most appointments are via phone or video only**

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Lincoln County Employee Options at 65 If you ARE drawing your Social Security

- **Accept Part A only (Decline Part B)**
 - Will help with hospital stay costs
 - May also get a Medicare drug plan but not required
 - NO more employee HSA contributions allowed
- **Enroll in Full Medicare, Parts A & B**
 - Can drop County insurance
 - May also get a Medicare drug plan but not required
 - May also get a Medicare Supplement or a Medicare Advantage plan
 - NO more employee HSA contributions allowed

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Lincoln County Employee Options at 65 If you ARE NOT drawing your Social Security

- **Do Nothing**
 - Continue with County insurance and HSA contributions
- **Enroll in Part A only (Decline Part B)**
 - Will help with hospital stay costs
 - May also get a Medicare drug plan but not required
 - NO more employee HSA contributions allowed
- **Enroll in Full Medicare, Parts A & B**
 - Can drop County insurance
 - May also get a Medicare drug plan but not required
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MEDICARE BASICS

Original Medicare



Parts of Medicare

Part A – Hospital Insurance (no premium)

Part B – Medical Insurance (**\$185.00**/month for most beneficiaries)

Part C – Medicare Advantage (**\$0** - **\$48**/month with drug coverage)

Part D – Prescription Drug Coverage (**\$0**-**\$110**/month)

Medigap (Medicare Supplement) (**\$153**-**\$344**/month for Plan G)

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Medicare Coverage – “Free” Preventive Services

Medicare covered preventive services with no co-pay or deductible

- “Welcome to Medicare” *extended visit*
- Annual wellness visit
- Flu, Covid, and RSV Shots
- Mammograms (screening)
- Colorectal cancer screenings
- Vaccines (Pneumococcal/Shingles/...)
- Abdominal aortic aneurysm screening
- Alcohol misuse screening and counseling
- Bone mass measurement
- Cardiovascular screenings
- Cardiovascular disease behavioral therapy)
- Cervical and vaginal cancer screening
- Depression screening
- Diabetes Prevention Program
- Diabetes screenings
- Glaucoma tests
- Pap test/pelvic exam/ clinical breast exam
- Prostate cancer screening
- Hepatitis B screening tests
- Hepatitis C screening tests
- HIV screening
- Lung cancer screening
- Medical nutrition therapy
- Obesity screening and counseling
- Prostate cancer screening
- Smoking cessation



Two Ways to Receive Medicare

Original Medicare

Medicare pays fees for your care directly to the doctors and hospitals you visit.

Part A helps with hospital costs

Part B helps with doctor and outpatient care

Part D helps pay for prescription drugs.

Medicare Supplement Plans, often called Medigap Plans, or other insurance covers some or all of Medicare Parts A & B cost-sharing



Medicare Advantage

Is provided by private companies approved by Medicare. Medicare pays a fixed fee to the plan for your care. Then the plan pays the doctors and hospitals

Medicare Advantage (Part C) plans combine hospital costs, doctor, and outpatient care in one plan. Must have Parts A and B before enrolling.

Part D is included as a part of some Medicare Advantage plans

Additional benefits are often included, such as dental, vision and hearing services, sometimes for an additional premium



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Medicare Part A – Hospital Coverage

No premium if individual or spouse worked 10 years or more; otherwise, there may be a premium of up to \$518 per month

- Inpatient hospital - **\$1,676** deductible per benefit period (~60 days)
 - No co-insurance for days 1-60
 - \$419** daily co-insurance for days 61-90
 - \$838** daily co-insurance for days 91-150
- Skilled Nursing Facility - No deductible for each benefit period
 - No co-insurance for days 1-20
 - Up to **\$210** daily co-insurance 21-100

Covers: Hospital inpatient care
Skilled nursing facility (SNF) care
Home health care
Hospice care
Blood

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Original Medicare



Medicare Part B – Medical Coverage

Premium is \$185.00 per month if individual annual income is below \$106,000, or below \$212,000 for a couple.

- Annual deductible **\$257**
- NO co-pay for common preventative services
- 20% co-pay for physician, outpatient mental health, and other medical services

Covers: Doctors' services
Outpatient medical/surgical services & supplies
Diagnostic tests
Outpatient therapy
Outpatient mental health services
Some preventive health care services
Other medical services

Medicare Parts A and B – Items NOT Covered

- **Routine** vision (i.e., refraction and eyeglasses/contacts)
- Dental care
- Hearing aids
- Long-term (custodial) care
- Private-duty nursing
- Acupuncture
- Naturopathy
- Cosmetic Surgery
- Travel outside the U.S.
- Health Club membership
- Non-emergency Transportation

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Medicare Part D – Prescription Drug Coverage

Medicare Part D provides help with the cost of prescription drugs offered through private companies

In Lincoln County, there are **10** plans available

Part D is “voluntary,” but there are penalties for late enrollment.
Penalties waived if other creditable coverage is in place

2025 premiums range from \$**0** to \$**110** per month

New in 2023: Insulin cost is limited to \$35 per month for covered insulins, even in the deductible phase of coverage

The “Plan Finder” at Medicare.gov will find the least expensive option based on medications taken. SHIBA counselors can help with that process or you can do it yourself at Medicare.gov by selecting “Find health & drug plans”

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Medicare Part D – Prescription Drug Coverage

Cost Sharing:

INITIAL COVERAGE PERIOD

You pay reasonable co-payments (and sometimes deductibles) until you pay to the pharmacy a total of \$2,100. The cost for each prescription is calculated as what you pay plus what the plan pays.

CATASTROPHIC COVERAGE

After you have paid \$2,100, you pay nothing for all drugs until the end of the year. Plan pays it all.

Medicare Supplement (Medigap) Policies

Private insurance that helps pay your part of cost-sharing in traditional Medicare Parts A & B. (see slides 19 and 21 for some of those amounts)

There are 12 “flavors” of supplements (known as plans A, B, C, D, F, F high, G, G high, K, L, M, and N). The differences are which co-payments and deductibles are covered. The most comprehensive plan is plan “F”, which pays all approved costs that Medicare does not pay.

For enrollees newly eligible for Medicare in 2020 and later, plans F, F high, and C are NOT available. A new plan, G high, has been added.

A typical Plan G supplement would have a premium of around \$160 per month for a 65-year-old female non-smoker. Rates vary, sometimes dramatically, from company to company, and for males vs females. Almost all Medigap plans have age-related increases in premiums. Discounts are available in some circumstances.

A SHIBA counselor can help you to find the best supplement for your needs. Plans are sold by private insurance companies directly by the company or through registered agents.

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Original Medicare



Medicare Supplement (Medigap) Policies

Medigap Enrollment Periods:

Guaranteed Enrollment :

Medigap Initial Enrollment Period – 6 months from Part B effective date

Other Guaranteed Issue Periods

- **Employer group coverage ends**
- Disabled, turn 65
- Other special circumstances

- Birthday Rule

May apply at any time, but can be denied or charged a higher rate if not in guaranteed enrollment period.

MEDICARE BASICS

Original Medicare



What Medigap plans cover

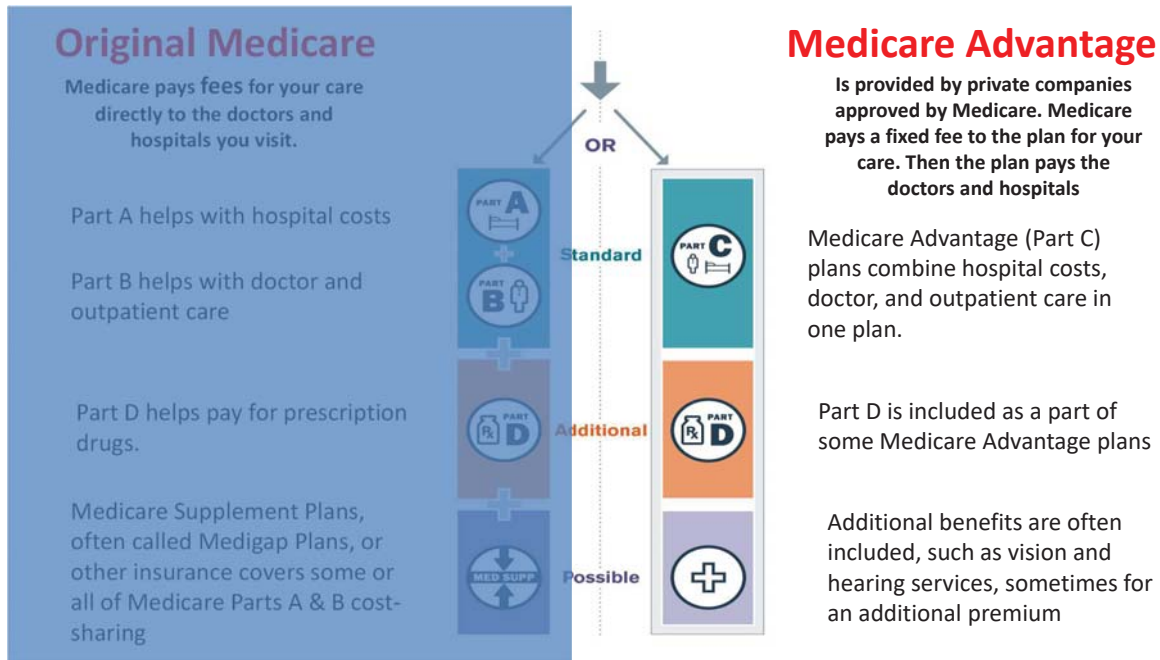
Medigap plans help pay the deductibles, co-payments, and co-insurance in Medicare Parts A and B. These standardized plans offer the same benefits from company to company

| | Plan A | Plan B | Plan C <small>(note 1)</small> | Plan D | Plan F <small>(note 1)</small> | Plan F-high <small>(note 1)</small> | Plan G | Plan G-high | Plan K | Plan L | Plan M | Plan N <small>(note 2)</small> |
|---|--------|--------|-----------------------------------|--------|-----------------------------------|--|---------|-------------|---------|---------|--------|-----------------------------------|
| BENEFITS (MEDICARE GAPS) | | | | | | | | | | | | |
| Example Premium (Female, 65, non-smoker) | \$94 | \$176 | \$194 | \$176 | \$187 | \$32 | \$153 | \$36 | \$55 | \$107 | \$150 | \$113 |
| Part A (Hospital) Deductible | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | 50% | 75% | 50% | ✓ |
| Part A (Hospital) Coinsurance | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Blood Coinsurance | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | 50% | 75% | ✓ | ✓ |
| Hospice Care Coinsurance | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | 50% | 75% | ✓ | ✓ |
| Skilled Nursing Facility (SNF) Coinsurance | | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | 50% | 75% | ✓ | ✓ |
| Part B (Medical) Deductible | | | ✓ | | ✓ | | ○ | | | | | |
| Part B (Medical) 20% Coinsurance | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | 50% | 75% | ✓ | ✓ |
| Part B (Medical) Excess 15% Charges | | | | | ✓ | ✓ | ✓ | ✓ | | | | |
| Emergency care outside the US | | | 80% | 80% | 80% | 80% | 80% | 80% | | | 80% | 80% |
| Out-of-pocket Maximum | | | | | | | | \$2,870 | \$7,220 | \$3,610 | | |
| Plans F-High and G-High Deductible (note 3) | | | | | | \$2,870 | \$2,870 | | | | | |

NOTES

- 1 - As of 1/1/2020, Plans C, F, and F-High are not available to newly eligible Medicare enrollees
- 2 - Pays the Part B co-insurance, except you pay up to a \$20 co-pay per physician visit and a \$50 co-pay per emergency room visit.
- 3 - No benefits paid until enrollee has met the annual deductible amount

Two Ways to Receive Medicare



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Medicare Part C – Medicare Advantage

Medicare Advantage (Part C) is an alternative approach to Original Medicare. Part C plans are offered by private insurance companies and offer combined coverage for Part A and B (and sometimes Part D) expenses.

Coverage under an Advantage plan is similar to coverage under an employer HMO or PPO group policy.

In Lincoln County, there are **three** plans available from two companies; all are HMO plans. There is an additional plan without drug coverage which is available to those with other drug coverage (primarily veterans).

2026 premiums are \$0 - \$48 per month for plans with drug coverage

Medicare Part C – Medicare Advantage

ADVANTAGES

- Access to primary care and specialists is guaranteed
- Convenience of single plan
- Premiums are the same for all ages and are usually lower than Medicare supplements
- Prescription drug coverage is included for no additional premium
- Many may offer additional benefits not covered by Medicare (e.g., dental, eyeglasses, hearing, health club, ...)
- Eligibility for enrollment is not affected by your health or financial status

DISADVANTAGES

- Co-pays and deductibles can add significant costs
- In most plans, you receive your coverage in a limited service-area—unless it's an emergency
- Your access to doctors and hospitals is restricted to a network of providers
- Plans can change from year to year
- You cannot automatically switch to Original Medicare with a supplement without medical underwriting
- Care decisions may sometimes involve the insurance company in addition to you and your doctor

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Medicare Part C from Devoted Healthcare

Devoted will be the **ONLY** Medicare Advantage company in 2026 for Lincoln county

Three choices available:

CORE Plan – No Monthly Premium

PREMIUM Plan – \$**47.50** Monthly premium

GIVEBACK Plan – No Monthly Premium and Reduction of Part B Premium

Current Samaritan members can choose any one of the three, or they can also get a Medicare Supplement (MediGap) plan with no medical questions.

Samaritan members have until Feb 28 to make a choice, but most will choose by Dec 31. The Oct 15 deadline does not apply.

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Medicare Advantage



Medicare Part C from Devoted Healthcare: CORE Plan

Plan Monthly Premium: \$0

Plan highlights:

- \$0 copay for primary care visits
- \$40 copay for specialist visits
- \$1,500 yearly dental allowance
- \$300 yearly eyewear allowance
- \$40 per quarter over-the-counter allowance
- \$60 per month Food & Home card
- Prescription drugs starting at \$0

MEDICARE BASICS

Medicare Advantage



Medicare Part C from Devoted Healthcare: Premium Plan

Plan Monthly Premium: \$47.50

Plan highlights:

- \$0 copay for primary care visits
- \$40 copay for specialist visits
- \$3,000 yearly dental allowance
- \$400 yearly eyewear allowance
- \$40 per quarter over-the-counter allowance
- \$75 per month Food & Home card
- Prescription drugs starting at \$0

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Medicare Advantage



Medicare Part C from Devoted Healthcare: GIVEBACK Plan

Plan Monthly Premium: **\$0**

\$154.20 Reduction in your Part B Premium (**\$185** down to **\$31**)

Plan highlights:

- **\$0** copay for primary care visits
- **\$50** copay for specialist visits
- **\$250** yearly dental allowance
- **\$200** yearly eyewear allowance
- **\$150** per year fitness allowance
- Free membership in SilverSneakers fitness club
- Prescription drugs starting at **\$0**

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Medigap vs Medicare Advantage Policies

MEDIGAP (Plan G example)

- **Premium varies for age, gender, and health**
- No co-pay, no out-of-pocket Max
- Only cost is the Part B deductible
- No network
- Stand-alone PDP required
- Benefits never change
- Apply anytime*
- Usually no “extras”
- **Good for you if:**
 - **Need frequent care**
 - **Plan to move**
 - **Travel a lot**

Medicare ADVANTAGE

- **Premium is the same for all enrollees in a service area.**
- Co-pays for almost all services
- Out-of-pocket maximum
- Limited Provider network
- Drug coverage included
- Benefits may change yearly
- Enrollment period
- Covers “extras”
- **Good for you if:**
 - **Can’t find a PCP**
 - **Do not need frequent care**

* May require medical underwriting and can be denied

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Medicare Advantage



Medicare Advantage vs Medigap Costs

| | Devoted Core | Devoted Giveback | Devoted Premium | Medigap Plan G |
|------------------------------|---------------|------------------|-------------------------------|----------------------------|
| Premium | \$0/mo | \$0/mo | \$47.50/mo (\$570.00/year) | \$160/mo (\$1,920/year) |
| Meds | included | included | included | \$10 (\$120/year) |
| Annual Maximum Out-of-Pocket | \$5,900 | \$7,900 | \$5,900 | |
| Deductible | None | None | None | \$257 |
| COPAYS | | | | |
| PCP | \$0 | \$0 | \$0 | \$0 |
| Specialist | \$40 | \$50 | \$40 | \$0 |
| Inpatient | Up to \$1,700 | Up to \$1,925 | Up to \$1,700 | \$0 |
| ER | \$130 | \$115 | \$130 | \$0 |
| Clinics (PT, etc.) | \$40-\$50 | \$35-\$50 | \$40 | \$0 |
| CT, PET, MRI | \$250-\$400 | \$200-\$300 | \$250-\$400 | \$0 |
| DME | 17% | 15% | 18% | \$0 |
| Dialysis | 20% | 20% | 18% | \$0 |
| Part B Drugs | 20% | 20% | 20% | \$0 |

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Open Enrollment

October 15 through December 7

- You can:
- Change from Original Medicare to an Advantage plan
 - Change from an Advantage plan to original Medicare
 - Switch Advantage plans
 - Join a prescription drug plan
 - Switch prescription drug plans

***EVERYONE on Medicare should review their choices during this period
SHIBA counselors can help.***

January 1 through March 31

- You can:
- Change from an Advantage plan to Original Medicare
(if you do so, you can also add a prescription drug plan)
 - Switch to a different Advantage plan

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SHIBA Recommendations

DOCUMENT

Whenever you talk to Medicare or Social Security, write down the date and time, who you talked to, what you asked, and what they told you.

LOOK AT YOUR MAIL

Open all correspondence from Medicare, Social Security, and **your** insurance companies.

BE AWARE OF SCAMS

Don't respond to phone, mail, or email solicitations. Check with SHIBA if you have any questions or suspicions.

REVIEW

Every Fall, review you plans and coverage. Make sure you are getting the best value for your money. **SHIBA** can help – make an appointment anytime of the year.

SHIBA Volunteering

Experience the satisfaction of helping your fellow Medicare recipients navigate the intricacies of Medicare and potentially achieve significant savings.

Requirements and Skills for SHIBA Counselors

- Time commitment of as little as two hours a week
- A desire to help others
- Enjoy helping others
- Dependable, understanding, patient, and compassionate
- Communicate well
- Protect client confidentiality
- Have no conflict of interest
- Have basic computer skills or are willing to learn
- Work well alone, one-on-one, and in a team

All training, tools, facilities, and support are provided.

Contact us or see www.oregon.gov/DCBS/shiba for more information

Individual No-cost One-on-One Appointments

Call SHIBA at 541-574-2684

Contact Bob: birderbob@gmail.com

QUESTIONS?