

PO Box 350 Willimantic, Connecticut 06226 (860)456-7790

1025 Connecticut Ave, NW Suite 709 Washington, DC 20036 (202)293-5760

MEDICARE SUMMARY 2016

Se habla español

Produced under a grant from the Connecticut State Department on Aging in conjunction with the CHOICES Program

OVERVIEW

Medicare is modeled after private health insurance. It covers some of the cost of some health care. Generally coverage is available for the cost of health care (except for hospice care and specific preventive services) *only* when the services are medically reasonable and necessary for treatment or diagnosis of illness or injury.

ELIGIBILITY AND ENROLLMENT

Individuals who are 65 years old and eligible for Social Security or Railroad Retirement benefits are automatically eligible for Medicare Part A and may choose to enroll in Part B. Disabled individuals who have received Social Security Disability benefits for 24 months are also eligible for Medicare. People with ESRD and ALS may be eligible without waiting 24 months. Individuals can enroll and get information at their local Social Security office.

TRADITIONAL MEDICARE

Medicare has been in existence since 1965. Coverage is divided between two parts of Medicare, Part A and Part B. Most beneficiaries are in the traditional program. These beneficiaries can get their health care from any provider who is certified by Medicare. The traditional program generally does not cover prescription drugs. Beneficiaries are responsible for some premiums, deductibles, and co-payments. Medicare Part D provides coverage for prescription drugs through private plans.

HELP WITH MEDICARE CO-PAYS & OTHER EXPENSES

Beneficiaries with limited incomes may be eligible for help from federal and/or state programs to cover some or all of Medicare's required co-payments and to help with prescription drug costs.

In addition, Medigap health insurance can be purchased to cover some of Medicare's coinsurances and deductibles.

MEDICARE ADVANTAGE

- Medicare beneficiaries have the option to receive their Medicare benefits through private health insurance plans. These private insurance options are authorized by Medicare Part C, which is also called Medicare Advantage (MA).
- MA plans generally require patients to obtain services only from certain providers; in return
 the plans may offer reduced premiums, deductibles and coinsurance payments, and/or
 additional benefits not offered in traditional Medicare. Many MA plans also include Part D
 prescription drug coverage.
- MA plans sign contracts with the Medicare agency annually. An MA plan may elect not to renew its contract with Medicare at the end of the contract year for any reason. MA plans can also change benefits, premiums, copays and their health care provider network each year.
- Use caution before choosing a Medicare Advantage plan. Be sure your doctors and other health care providers are in the plan.

MEDICARE APPEALS

Medicare is a complicated program. Coverage is often denied when it should be granted. If
the individual's physician orders medically necessary care that is coverable, but is denied by
Medicare, it is wise to seek help with an appeal. Medicare denials can be appealed whether
the beneficiary is in traditional Medicare or a Medicare Advantage plan. Appeals are often
successful.

PRESCRIPTION DRUG COVERAGE

• Medicare provides help paying for prescription drugs under the Medicare Part D program. Part D helps pay for certain drugs through a variety of private plans. People with Medicare are eligible to enroll in a Part D plan but usually have to take steps in order to do so.

MEDICARE COVERAGE

PART A

- Inpatient Hospital Care
- Skilled Nursing Facility Care
- Home Health Care
- Hospice Care

PART B

- Physician Services
- Home Health Care
- Outpatient Services and Therapy
- Durable Medical Equipment
- Prosthetic Devices
- Ambulance Services
- Certain Preventive Services:
 - One physical exam when 1st enrolled in Part B
 - Flu, Pneumococcal, Hepatitis B vaccines
 - Annual Mammograms
 - Some pap smears and pelvic exams
 - Colorectal Screening
 - Diabetes Self-Management Training /Tests
 - Bone Mass Measurements
 - Prostate Cancer Screening
 - Some Glaucoma Screening
 - Some Medical Nutrition Therapy Services
 - Some cardiovascular tests
 - Annual "Wellness Visit"

PART C

• A system of various private plans that deliver Medicare benefits. Also known as *Medicare Advantage*.

PART D

• Help paying for certain prescription drugs, provided through private plans.

Need help?

Contact your State's Health Insurance Assistance Program (SHIP).

In Connecticut, this is CHOICES, (800) 994-9422.

There is also a great deal of information and Self-help packets on the Center for Medicare Advocacy's website:

www.MedicareAdvocacy.org

HELP US KEEP THIS INFORMATION AVAILABLE!

Donate Securely Online At: http://www.MedicareAdvocacy.org/donate

Or Mail Your Check To: Center for Medicare Advocacy, Inc. P.O. Box 350, Willimantic, CT 06226.

Thank you!

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CENTER FOR MEDICARE ADVOCACY, INC.

The Center for Medicare Advocacy, founded in 1986, is a national non-profit law organization that works to ensure fair access to Medicare and quality health care. The Center is based in Connecticut and Washington, DC, with offices around the country.

Based on our work with real people, the Center advocates for policies and systemic change that will benefit all those in need of health care coverage and services.

Staffed by attorneys, legal assistants, nurses, and information management experts, the organization represents thousands of individuals in appeals of Medicare denials. The work of the Center also includes responding to over 7,000 calls and emails annually from older adults, people with disabilities, and their families, and partnering with CHOICES, the Connecticut State health insurance program (SHIP).

Only through advocacy and education can older people and people with disabilities be assured that Medicare and health care are provided fairly:

- We offer education and consulting services to help others advance the rights of older and disabled people and to provide quality health care.
- We draw upon our direct experience with thousands of Medicare beneficiaries to educate policy-makers about how their decisions play out in the lives of real people.

The Center for Medicare Advocacy is the most experienced organization for Medicare beneficiaries and their families.

Visit our website: www.MedicareAdvocacy.org