

Medicare Open Enrollment

October 15 -
December 7

Know your Medicare Options

Research the difference between Medicare Part A, Medicare Part B, Medicare Part C and Medigap. Contact your local SHIINE office to help navigate the differences among Medicare plans and coverage.

Senior Health Information and Insurance Program | SHIINE

Services:

SHIINE can assist Medicare beneficiaries in the following ways:

- Understand Medicare options
- Plan comparisons or enrollments
- Medicare appeals
- Fraud prevention and education
- Medicare billing issues
- Application assistance for low-income programs

Who Is Eligible:

All Medicare beneficiaries in South Dakota are eligible for the SHIINE program.

How to Learn More:

1. Contact the regional office where you live:
 - **Western South Dakota:** 1-877-286-9072 or western_region@shiine.net
 - **Eastern South Dakota:** 1-800-536-8197 or eastern_region@shiine.net
 - **North East South Dakota:** 1-605-432-8801 or northeasternsd@shiine.net
2. Go to medicare.gov
3. Contact local agents or brokers

Traditional Medicare vs. Medicare Advantage

What is Right for You?

Traditional Medicare	Medicare Advantage
<ul style="list-style-type: none">• Federal Medicare Program• 99% of Physicians participate in Medicare anywhere in the U.S.• You can purchase Medigap, a Medicare supplement to help pay for deductibles and co-payments• Federal government sets the premium, deductible and coinsurance• No referrals needed for specialists• Limited services require prior authorization	<ul style="list-style-type: none">• Private insurance alternative to original Medicare• You choose from a network of physicians based in a specific geographic area - sometimes limited in rural communities• You are not allowed to purchase a Medigap policy• Annual out-of-pocket costs may be higher• Medicare Advantage plans often requires referral from primary care physician• Required to obtain prior authorization for some services

Before Signing up for a Medicare Advantage Plan

1 Understand the Medicare Advantage plan's network

Call your physician and local hospital or check their websites to determine which Medicare Advantage plans they accept.

2 Compare out-of-pocket costs

Examine your benefit statements and medical bills from the past year and add what you paid in deductibles, co-payments and monthly premium costs. Medicare Advantage can look inexpensive compared to original Medicare, but you must dig a little deeper to fully understand your potential out-of-pocket costs with a Medicare Advantage plan because not all medical services are covered. For many people, opting for original Medicare plus a Medigap plan offers more financial security with no surprises.

3 Investigate Medicare Advantage requirements

Are you comfortable with your care being directed by the insurance company? Medicare Advantage plans often require pre-approval to see specialists or to receive health care services such as tests, treatments and laboratory work. It's the insurance company who frequently decides whether you need care, not your physician.

Call the insurance company and ask:

- What is the service area for this insurance plan? How far must I travel to find an in network specialist or facility for specialized services? Does this plan cover rural areas?
- If the physician I need to see is out of the network, will the plan cover my visits? Will I pay more out of pocket for an out of network provider or facility?
- Does my physician need approval from the plan to admit me to a hospital?
- Do I need a referral from my physician before I can see a specialist?
- Are co-payments and deductibles higher for certain types of care, such as hospital stays, home health care or rehabilitation?
- Does the Medicare Advantage plan cover services that original Medicare does not?
- Does the plan impose coverage restrictions on prescription drugs? Can we review my prescriptions to determine if they're on the insurance plan's list of covered drugs?
- How much will I have to pay for brand name drugs?
- Can I use my local pharmacy?
- Will I be covered when I travel out of state?
- Does the plan cover skilled nursing care after hospitalization? Are there rules, policies or restrictions I need to know?

4 Consider the consequences of switching

When you enroll in Medicare at 65, you have a guaranteed right to purchase a Medigap plan. Insurers must renew coverage each year if you continue to pay your premiums.

If you try to buy a Medigap policy after the enrollment window, insurance plans can turn you down or charge you more because of preexisting conditions.

This information is a general guide and should not be construed as formal advice. Every step may not be necessary or available for everyone.



Medicare Options Comparison Worksheet

Deciding which coverage is best for you can be very difficult. You are determining the amount of risk you are willing to assume for future and unknown medical costs. There is more to medical insurance than the premium and initial deductible. Researching the plans available in your area and understanding their coverage is important. When you are deciding which expenditures on this list you wish to compare, consider your current situation as well as any potential future needs.

Instructions: Use this worksheet to do a side-by-side comparison of the plans you are interested in. Gather the information listed by calling the plans that are available in your area. If you need help finding out which plans are available in your area, contact your local SHIINE office.

Potential Expenditures to Consider While Comparing	Name of Medicare Advantage or Medicare Supplement Plan			
	<input type="checkbox"/> MA <input type="checkbox"/> Med. Supp.	<input type="checkbox"/> MA <input type="checkbox"/> Med. Supp.	<input type="checkbox"/> MA <input type="checkbox"/> Med. Supp.	Original Medicare** <input type="checkbox"/> MA <input type="checkbox"/> Med. Supp.
Medicare Advantage Maximum Out-of-Pocket				None
Medicare Advantage/Medicare Supplement Monthly Premium				None
Medicare Advantage Deductible				None
Medicare Part B Monthly Premium (usually deducted from Social Security Benefit)				\$134
Medicare Part B Deductible				\$183
Prescription Drug (Part D) Plan Monthly Premium*				Review your options, call SHIINE for assistance.
Prescription Drug (Part D) Plan Deductible				Review your options, call SHIINE for assistance.
Primary Care Provider				20%
Specialist				20%
Lab Work and X-rays				20%
Mental Health Care				20%
Outpatient Rehab/Physical Therapy				20%
Diabetic Supplies				20%
Emergency Room				20%
Ambulance				20%
Home Health Care				Depends on services, contact Home Health Agency for pricing.
Outpatient Hospital Care				20%
Inpatient Hospital Care				\$1,316 deductible (Medicare Part A) Days 1 - 60: \$0 Days 61-90: \$329 per day Days 91 (and beyond): \$658 per day, can use up to 60 days over lifetime.
Skilled Nursing Facility (SNF)				Days 1-20: \$0 (Medicare Part A) Days 21 - 100: \$164.50 per day Days 101 (and beyond): all costs
Other				Visit www.Medicare.gov for complete listing.
Non-Medicare Services Offered (hearing, dental, vision and other)				None

* Review your prescription drug coverage each year to make sure the plan is affordable, covers the prescriptions you take and the pharmacy of your choice.

** (2017) All prices are situational, call Medicare or visit www.Medicare.gov for more information. Cost is based on the Medicare approved amount, Part B Deductible applies.