

The New-to-Medicare 10 FAQ Guide

Dave Piontek - Licensed and Certified Medicare Insurance Broker

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Dave Piontek
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Hello, my name is Dave Piontek, and I help people avoid costly Medicare mistakes.

When you are introduced to Medicare, it can be a little confusing, but you will find it provides some great benefits.

Naturally you will have questions, everyone's situation is unique, so contact me at your convenience. You will received help and advice from me, **not pressure to join a plan.**



Top 10 Medicare FAQ

- Do I have to get Medicare?
- Is Medicare right for me?
- What if I sign up later?
- What does Medicare cover?
- How much is Medicare Part B?
- How do I enroll into Medicare?
- How do I pay for Medicare?
- Which plan do I select?
- Do I need (Rx) Part D?
- Why use a broker?





Do I have to get Medicare?

Most people will want to get Medicare at age 65. Retirees that don't sign up when they first become eligible can face a late enrollment penalty.

If you are already collecting some form of Social Security (either retirement benefits or disability benefits) when you become eligible for Medicare, you usually will be automatically enrolled in both Part A and Part B.



If you are going to continue to work and have Employer Group Coverage (EGC), then you probably don't have to get Medicare.

Ask if your medical insurance is “creditable” and whether it is primary or secondary to Medicare. If it's not creditable or if it's secondary to Medicare, you'll need to enroll in Medicare to avoid late enrollment penalties.





Is Medicare Right for Me?

Even if you aren't required to sign up for Medicare, you still might want to sign up for Medicare. Why?

Medicare beneficiaries who have a Medigap plan will generally find that their coverage is better than their EGC. Depending on the cost of the employer-sponsored plan (including premiums, deductibles and out-of-pocket costs), many people end up with lower overall healthcare costs once they switch to Medicare.

We can help you compare your options.





What If I Sign Up for Medicare Later?

In most cases, as long as you have EGC with 20+ employees for whom you are still working, you can delay enrolling in Part B without being penalized later.

If you aren't signing up for Medicare, save our contact information for when it's time for you to sign up.

We look forward to helping you at that time.





What Does Medicare Cover?

Original Medicare has two parts:

- Part A is hospital insurance
- Part B is medical insurance

Original Medicare
Provided by the federal government

Part A
Helps pay for hospital stays and inpatient care

Part B
Helps pay for doctor visits and outpatient care



The image shows a Medicare Health Insurance card for John L. Smith. The card is white with a blue header and a red footer. It contains the following information:

MEDICARE HEALTH INSURANCE	
Name/Nombre	JOHN L SMITH
Medicare Number/Número de Medicare	1EG4-TE5-MK72
Enrolled for/Con derecho a	Coverage starts/Cobertura empieza
HOSPITAL (PART A)	03-01-2016
MEDICAL (PART B)	03-01-2016



Medicare Part A: Hospital Insurance

Medicare Part A covers hospital stays and inpatient care, including:

Your hospital room and meals	Skilled nursing services
Care in special units, such as intensive care	Some blood transfusions
Drugs and medical supplies used during an inpatient stay	Hospice care, including medications to manage symptoms and pain
Lab tests, X-rays and medical equipment as an inpatient	Part-time, skilled care for the homebound after a qualified inpatient stay
Operating room and recovery room services	Rehabilitation services after a qualified inpatient stay





Medicare Part A: Hospital Insurance

Quick Hits

- Premium free if you or your spouse worked and paid taxes for 10 years or longer
- Can't be denied coverage
- Coverage is nationwide, including any qualified hospital in the U.S.
- Coverage and costs are per “benefit period”
- Must be admitted as an inpatient (not on “observation status”)
- Provides additional 60 “lifetime reserve” days



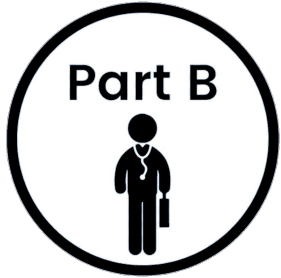
Medicare Part B: Medical Insurance

Medicare Part B covers doctor visits and outpatient care, including:

Doctor visits, including when you are in the hospital	Diabetes screenings, education and certain supplies
An annual wellness visit and preventive services, like flu shots	Mental health care
Clinical laboratory services, like blood and urine tests	Durable medical equipment for use at home, like wheelchairs and walkers
X-rays, MRIs, CT scans, EKGs and some other diagnostic tests	Ambulatory surgery center services
Some health programs, like smoking cessation and obesity counseling	Ambulance surgery center services

Physical therapy, occupational therapy and speech-language pathology services





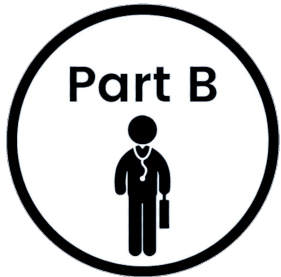
Medicare Part B: Medical Insurance

Quick Hits

- Monthly premium, adjusted for income
- Can't be denied coverage
- Coverage is nationwide, including any provider who accepts Medicare
- Premium penalty for late enrollment



Medicare Doesn't Cover Everything



Original Medicare (Parts A & B) does not cover:

- All of the cost of your care -- you have out-of-pocket costs, with no limit
- Prescription drugs
- Routine dental, vision or hearing care
- Eyeglasses, contacts or hearing aids
- Long-term or custodial care (help bathing, eating, dressing)
- Excess charges for services by doctors who don't accept Medicare assignment
- Care received outside the U.S., except for certain circumstances





How Much is Medicare Part B?

If your yearly income in 2017 (for what you pay in 2019) was			You pay each month (in 2019)
File individual tax return	File joint tax return	File married & separate tax return	
\$85,000 or less	\$170,000 or less	\$85,000 or less	\$135.50
above \$85,000 up to \$107,000	above \$170,000 up to \$214,000	Not applicable	\$189.60
above \$107,000 up to \$133,500	above \$214,000 up to \$267,000	Not applicable	\$270.90
above \$133,500 up to \$160,000	above \$85,000 up to \$107,000	Not applicable	\$352.20
above \$160,000 and less than \$500,000	above \$320,000 and less than \$750,000	above \$85,000 and less than \$415,000	\$433.40
\$500,000 or above	\$750,000 and above	\$415,000 and above	\$460.50



How Do I Enroll Into Medicare?

You have three options but most people prefer to do it online at <http://www.ssa.gov/benefits/medicare>.

You can call 800-772-1213.

You can go to a Social Security Office but be sure to make an appointment if you use this method.





How Do I Pay For Medicare Part B?

Part A has no premium for most people, but most will have to pay for Part B. If you are collecting Social Security your Part B is usually deducted from your check.

If you are continuing to work and delaying Social Security Benefits you will have to make payments. The easiest way to pay for Part B is through Medicare EASY PAY. If you don't sign up for Easy Pay, you can write a check quarterly.





Which Plan Do I Select?

A Medicare Advantage plan or a Medicare Supplement plan? It depends on many variables and there are pros and cons to each. You can compare at www.azmedicareguide.com click ***New to Medicare*** and select ***Advantage vs Supplement*** page.

It's best to work with a licensed Medicare insurance broker who can show you both Medicare Supplement Plans and Advantage Plans from multiple companies and then enroll you into the plan that best fits your needs.

We would love to help you!





Do I Need Medicare Part D?

Yes, usually you do but it depends. You will likely need an RX Prescription Drug Plan (PDP) even if you don't take any Medications.

It's important to understand how PDP plans work because many people get charged a penalty later in life for not having a Medicare Part D plan. You can contact us about PDP plans or go to www.azmedicareguide.com and click on Medicare Rx – Part D to learn more.





Why Use a Broker?

A Medicare Insurance broker represents more than one company and can save you an enormous amount of time.

- You get all the big brand insurance quotes from a single phone call.
- You get the same rates and benefits as if you contacted the insurance companies directly.
- And remember, you do not pay a fee for the services of a broker.



If you contact us as your broker:

- You get AHCCCS and Medicare Extra-Help eligibility check.
- You get our analysis of the plan that best fits your needs and why.
- You get ongoing communication to keep you on the plan that fits you best.
- You have a contact for assistance and answers to your Medicare questions.
- There is something you won't get from us, pressure to join a plan.
- Your contact info isn't shared or sold.
- You do not pay a fee for these services.





Review Your Plan Annually

This is especially true if you have a Medicare Part D plan or a Medicare Advantage plan because benefits and premiums can and usually do change every year.

As time passes your needs can change and its important to maintain the best coverage based on your current situation. Keep our contact information for when you need assistance and share it with friends and family.





Enjoy!

Thank you for reading this guide and we hope you found it helpful. We look forward to assisting you for all your Medicare needs.

You deserve the best Medicare Health plan you can get!

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