



MEDICARE NEWSLETTER SUMMER 2023



Summer Greetings! I thought it would be helpful to share a question with you I get asked frequently, which is, “Who am I paying on a monthly basis? I’m not quite sure.”



Who Am I Paying On A Monthly Basis?



THE BASICS – you pay your Part A and Part B directly to Social Security. You pay your Medicare Supplement Plan, Medicare Advantage Plan and your Stand-Alone Drug Plan directly to the carrier of your plan.

Part A and Part B Monthly Premium (Per Medicare.gov):

Part A is \$0 per month for most people (because they or a spouse paid Medicare taxes long enough while working - generally at least 10 years). Part B is \$164.90 each month, or higher depending on your income. Social Security will tell you if you have to pay a higher premium because of your income, and your Part B premium may change each year. There are five ways to pay your monthly premium:

1. If you are taking your Social Security Benefits, your Part B premium will be deducted from your Social Security Benefits.
2. You can pay online through your secure Medicare account.
3. You can sign up for Medicare Easy Pay.
4. Pay directly from your savings or checking account through your bank’s online bill payment service. Some banks charge a service fee.
5. Mail your payment directly to Medicare

Note: If you have limited income and resources, and need help with Part B, you may be able to get help from the state to pay your premiums and other costs.

Paying Your Medicare Supplement, Medicare Advantage Plan, and Drug Plan Premium:

1. Medicare Supplement – you will have to pay your monthly premium directly to your plan via electronic funds transfer or mail a check in directly to the plan.
2. Stand-Alone Drug Plan – you’ll receive monthly bills or an annual coupon book with monthly payment sheets from the plan. You can sign up to make automatic payments using your bank account or credit card. You can ask your plan to deduct your premium from your monthly Social Security benefits, and this automatic payment may take up to three months to take effect after your request so you must pay your premiums directly to your plan until then.
3. Medicare Advantage Plan – your plan will send monthly bills, but you may be able to sign up to make automatic payments using your bank account or credit card. In some cases, your monthly premiums can be deducted from your Social Security Benefits.

How Important Is It To Use In-Network Doctors?

Very, Very, Very Important!



Medicare Advantage plans (MAPD) have Networks of Doctors, Hospitals and Facilities that are contracted with your plan. With HMO Medicare Advantage plans, you must use a doctor/hospital/facility that is In-Network. If you use a doctor that is not In-Network, you will pay full price for that doctor appointment. PPO Medicare Advantage plans provide coverage for In-Network providers and Out-Of-Network providers. However, the Out-Of-Network provider coverage is more expensive.

So, to keep your costs as low as possible, I encourage you to use In-Network providers.

IMPORTANT! What is the correct way to confirm your provider is In-Network?

The correct way to confirm that a provider is contracted with your specific plan is to call your plan carrier directly. Do NOT call the provider office and ask them if they accept your plan. Calling the provider office seems like the logical thing to do. However, calling the provider office may result in getting incorrect information that could end up costing you money. Allow me to illustrate (this is what you DON'T want to do!) You have a United Healthcare MAPD. You want to see a doctor that has been recommended by your friend. You call that doctor's office and ask, "Do you accept my United Healthcare Medicare Advantage plan?" The doctor's office says, "Yes, we accept United Healthcare Medicare Advantage plan." So, you see that doctor and are charged the full cost of the appointment instead of your plan's co-payment. What happened? Why was I charged? Well, the problem is that each carrier typically has many different Medicare Advantage plans. In this example, that doctor office may only accept a few of the many United Healthcare MAPD plans even though the person you spoke to on the phone said they accept United Healthcare Medicare Advantage. The person on the phone had good intentions, however, they were speaking in generalities. You MUST always confirm that the doctor/hospital/facility accepts your specific Medicare Advantage plan by checking with the carrier of your plan. You confirm that the doctor/hospital/facility accepts your specific plan by calling Member Services. The phone number for Member Services is on the back of your Member ID card.

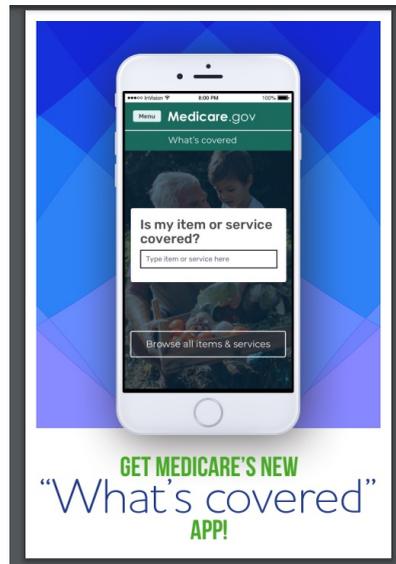
Medicare Supplement plans are a bit different. Medicare Supplement plans do not have networks of doctors. However, it is your responsibility to confirm with the doctor/hospital/facility that they accept Original Medicare. If they do Not accept Original Medicare than you will be responsible for all costs.

As always, you can also call me directly, and I am more than happy to confirm if a doctor/hospital/facility is contracted with your plan.

What's Covered By Medicare?

Ever wonder if your test, procedure, doctor visit, eye exam, dental visit, etc. is covered by Medicare?

Medicare.gov has an official app. If you type "what's covered" in your device's app store (Apple App Store or Google Play Store) and choose "Medicare What's Covered app" it's a white and green "M" labeled as "What's Covered" and says "Office Medicare coverage app. Once you have the app you can simply start typing and the context sensitive text will pull up the list of tests, procedures, etc. that correspond to what you are typing. If it's not covered, and you have Medicare with a supplement like Plan F or Plan G then that procedure is not covered. If it's not covered, and you have a Medicare Advantage Plan check your plan's Summary of Benefits to see if it's covered. Some items not covered by Medicare are covered by Medicare Advantage plans. These items often include dental, vision, hearing, exams to name a few. Be sure to check your plan's Summary of Benefits to see if you have coverage. If what you are typing is covered by Medicare than it will be covered by your plan regardless of type of plan (Supplement or Medicare Advantage). I have found this to be an invaluable resource when it comes to understanding what is and isn't covered by Medicare.



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