

What's New with Medicare in 2021



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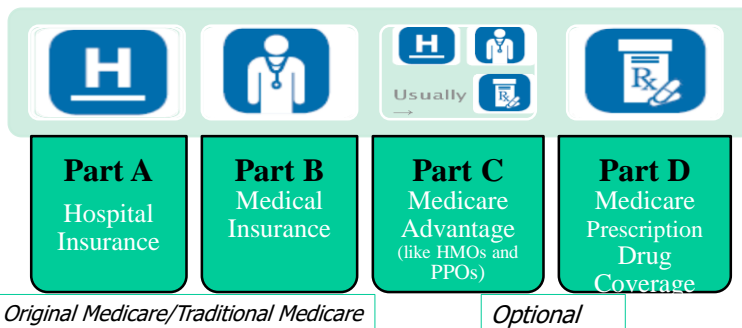
LOCAL HELP FOR PEOPLE WITH MEDICARE

SHIP is administered by the NJ Department of Human Services under a federal grant from the U.S. Administration for Community Living.

Piscataway Twp Presentation December 1, 2020

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Review of Basics: Medicare has Four Parts



Each part of Medicare has different:

- ✓ Rules for enrollment
- ✓ Monthly premiums
- ✓ Deductibles
- ✓ Cost sharing for services (coinsurance and copays)

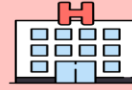
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MEDICARE COVERS COVID-19 RELATED NEEDS



Lab Tests

Medicare covers the lab tests for COVID-19. You pay no out-of-pocket costs



Necessary Hospitalizations

Medicare covers all medically necessary hospitalizations. This includes if you're diagnosed with COVID-19 and might otherwise have been discharged from the hospital after an inpatient stay, but instead you need to stay in the hospital under quarantine.



Prescriptions (when available)

At this time, there's no vaccine for COVID-19. However, if one becomes available, it will be covered by all Medicare Prescription Drug Plans (Part D).



Telehealth

Medicare covers "virtual check-ins" so you can connect with your doctor by phone or video to see whether you need to come in for a visit. If you're concerned about illness and are potentially contagious, this offers you an easy way to remain at home and avoid exposure to others

2021 Original Medicare Part A Cost Sharing

PREMIUM: No monthly premium for most enrollees...

Inpatient Services You Pay

Part A	Hospital Copays	Skilled Nursing Copays
<ul style="list-style-type: none"> ▪ Deductible \$1,484 (each benefit period) <i>New Benefit period begins each time you are out of the hospital for 60 days.</i> 	<ul style="list-style-type: none"> ▪ \$0 for days 1-60 ▪ \$371 a day for days 61-90 ▪ \$742 a day for days 91-150 (lifetime reserve days) 	<ul style="list-style-type: none"> ▪ \$0 for days 1-20 ▪ \$185.50 a day for days 21-100

2021 Original Medicare : Your Part B Costs

- **Premium: \$148.50** /month for most beneficiaries (\$144.60 in 2020)
- **Annual Deductible \$ 203** (was \$198 in 2020)
- **Coinsurance:**
 - **20%** for most Part B services
- **Excess Charge** – additional 15% coinsurance for providers who do not accept Medicare allowed amount as payment in full (**assignment**)

NOTE:

If you have **Medicare Supplement Policy (Medigap)** or have retiree health benefits from former employer, usually covers some or all of Medicare Part A and Part B cost sharing.

2021 Medicare Part B Premiums

If Your Yearly Modified Adjusted Gross Income in 2019 was		Premium you paid for Part B in 2020	Premium you pay per month for Part B in 2021
File Individual Tax Return	File Joint Tax Return		
\$88,000 or less	\$176,000 or less	\$144.60	\$148.50
\$88,001 - \$111,000	\$176,001 - \$222,000	\$202.40	\$207.90
\$111,001 - \$138,000	\$222,001 - \$276,000	\$289.20	\$297.00
\$138,001 - \$165,000	\$276,001 - \$330,000	\$376.00	\$386.10
\$165,001 - \$500,000	\$330,001 – \$750,000	\$462.70	\$475.20
Above \$500,000	Above \$750,000	\$491.60	\$504.90

IRMAA- Income-related Monthly Adjustment Amount

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Part B New Benefit

Acupuncture

covered for **chronic low back pain ONLY**



- ❖ Chronic low back pain is defined as
 - Lasting 12 weeks or longer
 - Having no identifiable systemic cause (not associated with cancer, inflammatory, or infectious disease)
 - Pain that's not associated with surgery or pregnancy

- ❖ Covers up to 12 acupuncture visits in 90 days
 - An additional 8 sessions will be covered if you show improvement.
 - No more than 20 acupuncture treatments can be given yearly
 - If your chronic low back pain isn't improving or is getting worse, then treatments will not be covered

- ❖ Must be provided by Physician or PAs, nurse practitioners /clinical nurse specialists
 - "auxiliary personnel" may furnish acupuncture if under supervision of above and they have a degree in acupuncture or Oriental Medicine from a school accredited by the Accreditation Commission on Acupuncture and Oriental Medicine (ACAOM); and a license to practice acupuncture in the state.

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Annual Enrollment for People with Medicare

- From **October 15 to December 7** you can
 - ✓ Join or switch a **Medicare Prescription Drug Plan**
 - ✓ Join or switch a **Medicare Advantage Plan**
- Time to **shop & compare** health and drug plan choices
 - ✓ Is your current plan still best one for you (*best costs and coverage*)
 - ✓ Choose the plan that fits your needs
- Coverage begins on January 1, 2021
 - ✓ You'll have membership card/materials in hand



NOTE: Enrollment or changes to Medicare Supplement Policies (Medigaps) can be submitted anytime for those age 65+ (not restricted to Fall Enrollment Period)

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NJ Medicare Drug Plans 2021

- 30 drug plans available
- **Envision** changing name to **Elixir**
 - Premium increasing from \$37.50 to \$55.90
 - No longer \$0 premium for those with PAAD or Extra Help
- **Mutual of Omaha Rx Value Plan** (\$24.90 premium in 2020) ending. Members will be moved to **Mutual of Omaha Rx Plus** (\$97.70 premium in 2021).
- All **SilverScript** Part D plans now owned by **Aetna** but
 - keeping SilverScript name.
- Lowest Premiums:
 - **SilverScript Smart Rx - \$7.30 (new plan)**
 - Clear Spring Health Premier Rx -\$13.50
 - WellCare Wellness Rx -\$14.80
 - Wellcare Value -\$16.30
 - Humana Walmart Value Rx - \$17.20



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New Part D Senior Savings Model

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- ❖ Some Part D and MAPD plan offer lower out-of-pocket costs for **insulin**
 - ✓ **Maximum \$35 copay** for a 30-days' supply
 - ✓ Applies in deductible, initial coverage, coverage gap
 - ✓ Cost share changes to 5% in Catastrophic phase.
- ❖ 9 Stand Alone Part D Drug Plans participating in NJ
- ❖ NJ MAPD plans participating:
 - United Healthcare/AARP MAPDs
 - Braven MAPDs
 - 2 Humana MAPD plans- Humana Gold Plus HMOs



Each Plan chooses which insulins to include in Savings Plan



Participating Pharmaceutical Manufacturers:

1. Eli Lilly
2. Novo Nordisk
3. Sanofi-Aventis

Includes rapid-acting, short-acting & long-acting doses of common insulins such as:

- Humalog, Humalin,
- Novalog, Novalin,
- Lantus

Not ALL insulins will be on a plan's formulary. Plans decide which insulins to cover under the \$35 model.



Medicare Part D Drug Plan Costs 2021



Premium: Range \$7 - \$97, average \$37 per month

Deductible: You pay full cost of some drugs from **\$0 - \$445**

Initial Coverage Period: You pay **copay or coinsurance** until reach **\$4,130 in total drug costs**

Coverage Gap: Also called “**Donut Hole**”

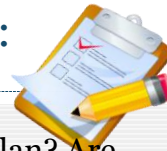
- You pay **25% of cost for either generic or brand name drug** (75% discount)
- Until your out of pocket for the year reaches **\$6,550**

NOTE: 70% of discount paid by drug manufacturer for brand drugs will count towards your out-of-pocket to get you out of donut hole faster!

Catastrophic Benefit: You pay small co pay (**\$3.70 - \$9.20 or 5%**) for rest of year



How To Compare Plans:

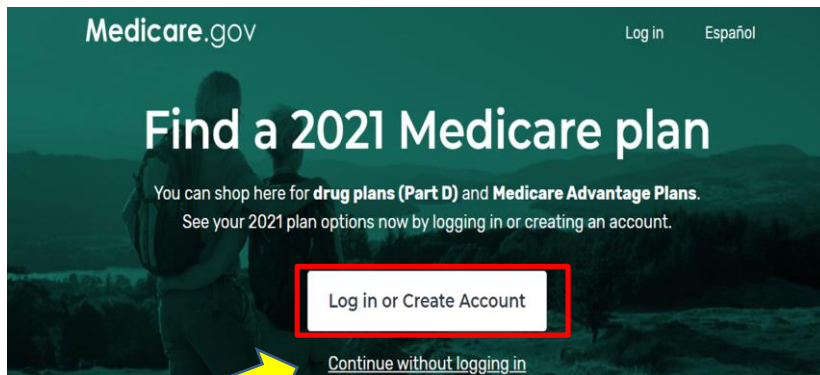


- **Coverage:** Are my drugs covered by the Plan? Are there any restrictions (*prior authorization, step therapy*)?
- **Costs:** Look at premium, copays, deductibles. Compare “*total estimated annual cost*”.
- **Convenience:** Is my pharmacy in plan’s network? Offer mail order? Have preferred pharmacy with lower copays?
- **Coordination:** Will it work with my other health or drug benefits?



Medicare Plan Finder

- Visit <https://www.medicare.gov/plan-compare>
- Select “**Find 2021 Health and Drug Plans**”



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Sample Page on Medicare Plan Finder

Clear Spring Health Premier Rx Plan:

CVS PHARMACY #00824 - Drug costs during coverage phases

✓ Preferred in-network pharmacy

Selected drugs	Retail cost	Cost before deductible	Cost after deductible	Cost in coverage gap	Cost after coverage gap
Lantus 100unit/ml solution pen injector	\$416.45	\$416.45	\$40.00	\$104.11	\$20.82
Monthly totals	\$416.45	\$416.45	\$40.00	\$104.11	\$20.82

Estimated total drug + premium cost

You will pay **\$1,183.85** per year on drug + premium cost

- You'll meet your **\$445.00 deductible** in February
- You'll enter the **coverage gap** in October
- You won't exit the **coverage gap**

Estimated monthly drug costs

This doesn't include your monthly plan premium of \$13.50.



Create a My Medicare Account

- Go to www.MYMedicare.gov
- Will be able to see all your Medicare Claims for Parts A and B (hospital and medical)
- List of your medications already uploaded if you have a Medicare Part D plan.
- How to video found on You Tube
<https://www.youtube.com/watch?v=i6imlBKikSg&feature=youtu.be>



2021 MEDICARE PART D STAND-ALONE PRESCRIPTION DRUG PLANS IN NEW JERSEY											
Data as of October 8, 2020											
Company Name	Plan Name	Benefit Type	Premium with Medicaid or LIS/Extra Help	Full Monthly Drug Premium for those w/out Extra Help	Annual Drug Deductible	Extra Coverage Offered in the Gap	Contract ID	Plan ID	Plan's Performance Rating*	\$0 premium with NJ PAAD	Preferred Pharmacy Chains in Participating in Insulin Savings Program
UnitedHealthcare 1-888-867-5564 aarpmedicareRx.com National Plan	AARP MedicareRx Walgreens	Enhanced	\$8.80	\$32.80	\$445 \$0 deduct for Tier 1 & Tier 2 drugs	No Gap Coverage	S5921	386	3.5 stars		Walgreens (CANNOT use at Walmart)
	AARP MedicareRx Saver Plus	Basic	\$0	\$34.90	\$445	No Gap Coverage	S5921	349	3.5 stars	PAAD pays the premium	Walgreens, Walmart
	AARP MedicareRx Preferred	Enhanced	\$52.80	\$89.50	\$0	No Gap Coverage	S5820	003	3.5 stars		Walgreens, Walmart
Cigna 1-800-735-1459 cignamedicareRx.com National Plan	Cigna Secure-Essential Rx	Enhanced	\$8.80	\$24.00	\$445, \$0 deduct for Tier 1 & Tier 2 drugs	No Gap Coverage	S5617	283	3.5 stars		Walgreens, Walmart
	Cigna Secure-Extra Rx	Enhanced	\$54.00	\$55.50	\$100 \$0 deduct for Tiers 1, 2, 3, 6	YES	S5617	249	3.5 stars		Walgreens, Walmart, Rite Aid
	Cigna Secure Rx	Basic	\$25.90	\$63.20	\$445 \$0 deduct for Tiers 1, 2, 3, 6	No Gap Coverage	S5617	018	3.5 stars		CVS, Walmart (CANNOT use Walgreens)

*Plan's Overall Performance Rating determined by Medicare and based on 2020 performance. Rating range is 1 to 5 stars, with 5 being the highest rating.

Plans in yellow have \$0 premium for those with Medicaid, Low Income Subsidy (also known as "Extra Help"). All yellow plans are referred to as "benchmark" plans.

What if your prescription is not covered by the plan you choose?



Once open enrollment is over, you are locked into your plan for the year.

1. You and your doctor should work with the plan
 - **Switch** to similar drug that is on the formulary
2. If you cannot switch drugs:
 - Your doctor can request an **Exception** to have it covered
 - If plan denies your exception request can **Appeal**
3. Change to Plan that covers your drug during next Annual Enrollment or special enrollment

Your Medicare Choices

Original Medicare

Part A
Hospital
Insurance

Part B
Medical
Insurance

Part D Prescription Drug
Coverage or other
creditable drug plan

Medicare Advantage Plan (HMO or PPO)

Medicare Part C
Combines
Part A, Part B
and
usually Part D

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What is Medicare Advantage?

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- Structured as HMOs or PPOs
- Insurance companies contract with Medicare to provide your benefits
- You must get all medical services and drugs through the plan
 - ✦ May have to use specific doctors, hospitals and labs
 - ✦ May need referrals for services and specialists
- May get **extra benefits** not covered by Original Medicare
 - eyeglasses, hearing aids, dental services, gym discounts
- NOT supplements to Medicare
 - ✦ No claims go to Medicare, all claims processed by plan



Medicare Advantage Overview

- Plans offered differ by county-
- **Premiums** range from \$0 to \$198 per month
 - Many plans have \$0 premium
 - some plans also offer reduction in member's Part B premium
 - *If plan has premium more than \$100, better to look at different Medicare plan or consider a Medigap Policy*
- Some plans have **deductible** before plan will pay
- Plans charge you **copay** every time you use a service
 - until you reach your **maximum out of pocket** (usually \$6700 - \$7500), then plan covers 100%

Sample of “Supplemental” or “Extra” benefits offered by some Medicare Advantage plans:

- **Dental benefits**- some only “routine/preventive” some cover comprehensive up to dollar cap
- **Home-delivered meals** after hospital stay
- \$100 to \$400 **spending card** to be used to purchase over-the-counter health related items *such as adult diapers, shower chairs, cold medicine*
- **Transportation** to medical appointments
- **World-wide coverage** for medical emergencies
- **“Travel benefit”**- use providers in other states

Check each Plan's **Summary of Benefits** for details.

Medicare.gov Plan Finder: How to Find the Extra Benefits in MA Plans

Medicare.gov Log in Español

There may be separate drug plans available with lower drug costs. [Tell me more](#) View 30 available drug plans

34 Medicare Advantage Plans available

Mercer, NJ [Change location](#)

[Edit your drugs & pharmacies](#)

Print
 [Filter Plans](#)
 No filters selected

Plans with these benefits

- Vision coverage
- Transportation
- Dental coverage
- Fitness benefits
- Hearing coverage

Types of plans

[Learn about plan types](#)

- HMO (Health Maintenance Organization)
- PPO (Preferred Provider Organization)

STAR RATINGS

Select star rating

INSURANCE CARRIER

Select preferred insurance carrier

DRUG COVERAGE OPTIONS

Select drug coverage

Insulin savings [What's this?](#)

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Look at Plan Summary

Amerivantage Classic (HMO)

Amerigroup Community Care | Plan ID: H3240-022-0
 Star rating: ★★★★★☆

MONTHLY PREMIUM

\$0.00 Includes: Health & drug coverage
 Doesn't include: \$144.60 Standard Part B premium

YEARLY DRUG & PREMIUM COST

\$893.97 Retail pharmacy: Estimated total drug + premium cost
 Doesn't include: Health costs

OTHER COSTS

\$0 Health deductible

\$200.00 Drug deductible

\$6,950 In-network Maximum you pay for health services

PLAN BENEFITS

- ✓ Vision
- ✓ Dental
- ✓ Hearing
- ✗ Transportation
- ✓ Fitness benefits
- ✓ Worldwide emergency
- ✓ Telehealth
- [See more benefits](#) ^
- ✓ Over-the-counter drugs
- ✗ In-home support
- ✗ Home safety devices & modifications
- ✗ Emergency response device

COPAYS/COINSURANCE

Primary doctor: \$5 copay per visit
 Specialist: \$25 copay per visit

[Enroll](#)

[Plan Details](#)

Add to compare

Go to MA Plan's website for more information
 (link on bottom of Plan Detail's Page)

Medicare Advantage Plans and End-Stage Renal Disease (ESRD)

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Starting January 1, 2021

- People with ESRD may join any Medicare Advantage Plan
 - Prior to this rule, people with ESRD could not enroll in MA plans.
- **Caution:** most plans have 20% coinsurance for dialysis
 - But plan's Maximum Out of Pocket (MOOP) will limit member's costs for the year
 - Look for plan with lowest MOOP amount Range is \$5,500 - \$7,550



NJ MAPD Plans ending 12/30/2020

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- ***Aetna Explorer Premier PPO H5521-037***- ending coverage for members in **Hunterdon, Ocean, Somerset, Sussex and Warren** .
- ***Aetna Medicare SNJ Prime Elite PPO*** H5521 -123 ending for members in **Mercer County**
- ***Horizon Medicare Blue PPO*** in **Sussex County**.
 - If take no action, member will have no drug coverage on January 1st.
 - Have SEP until 2/28/2021 to enroll in Part D or MAPD
 - All above members will have Guaranteed Issue until March 4, 2021 to purchase a medigap policy and not be turned down.



Questions to ask before enrolling in MA Plan

- Are my doctors and hospitals in the network?
- What are copays/coinsurance for each service?
 - Doctor visits , outpatient procedures
 - Specialists, physical therapy, medical tests
 - Hospital stays, medical equipment
- Out of network coverage and costs?
- Referrals required?
- Are my drugs covered?
 - ***CANNOT ENROLL IN SEPARATE MEDICARE PART D PLAN WHEN ENROLLED IN MA PLAN***
- Will it affect my employer or union coverage?
- Details on eyeglass and dental coverage?
- What if I travel out of state?



Chart to compare Medicare Advantage Plans Available

PLAN	Amerivantage Classic HMO from Amerigroup H3240-022 1-877-470-4131 shop.amerigroup.com/medicare	Amerivantage Balance HMO from Amerigroup H3240-021 844-316-0355 shop.amerigroup.com/medicare	NEW FOR 2021 AARP Medicare Advantage Choice PPO from United Healthcare H8768-022-000 800-547-5514 aarpmedicareplans.com	AARP Medicare Advantage Plan 1 HMO from United Healthcare H0755-040-001 800-547-5514 aarpmedicareplans.com
Monthly Premium	\$0	\$37.30 (\$0 with PAAD)	\$0	\$0
Medical Deductible	\$0	\$0	\$0	\$0
Drug Deductible	\$0 Tier 1 & 2/ \$200 others	\$0 Tier 1 / \$445 others	\$0 Tier 1&2/ \$240 others	\$0 Tier 1 &2/ \$240 others
Primary doctor copay	\$5	\$0	\$0 in or out of network	\$5
Specialist copay	\$25	\$25	\$40 in or out of network	\$45
Referrals Required?	YES	YES	No	No
Hospital copays	\$350 per day 1 to 5 days	\$325 per day 1 to 5 days	\$390/ day for days 1 thru 5 in or out of network	\$335/ day for days 1 thru 6
ER copay/ Urgency Care	\$90/\$65	\$90/ \$65	\$90/\$30-40	\$90/ \$30-40
Ambulance	\$300	\$350	\$250	\$250

How to Join a New Plan

Enroll in a Medicare Health or Prescription Drug Plan by

- Enrolling on the Medicare website www.medicare.gov
- Calling 1-800-MEDICARE (1-800-633-4227)
- Calling the Plan
- Enrolling in a new plan will disenroll you from your previous drug or health plan
- If you have other coverage, like from an employer or union



Check with your plan's benefits administrator before making any changes to your coverage

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Medicare Advantage Open Enrollment Period



What if you don't like your Medicare Advantage Plan?

- From **January 1** to **March 31** you can
 - ✓ **Switch** Medicare Advantage Plans or
 - ✓ **Leave** Medicare Advantage and return to Original Medicare with a Part D Drug Plan

***NOTE:** If returning to Original Medicare can apply for a Medicare Supplement Policy (Medigaps) but are not guaranteed to be issued a policy unless you qualify for MA special trial.*



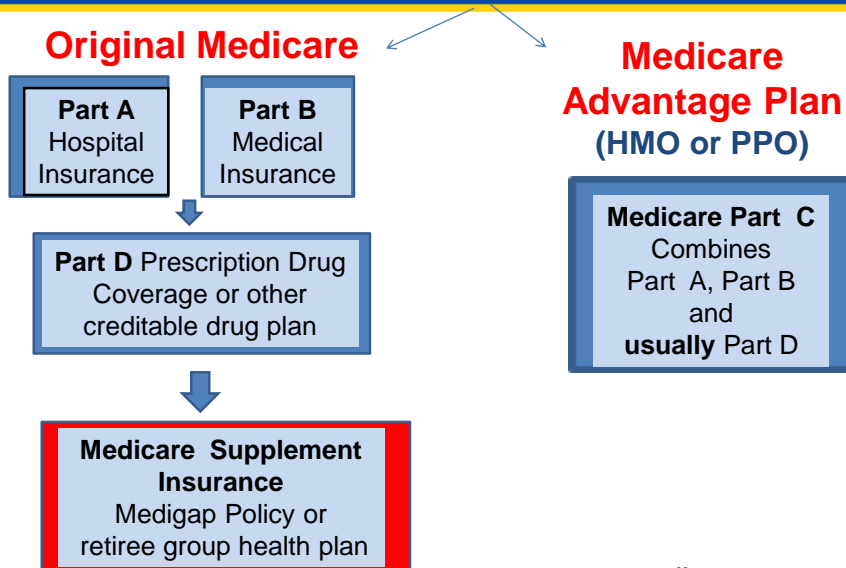
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Medicare Advantage “No Risk” Trial Situations

- ✓ If you cancel a Medicare Supplement policy 12/31/20 to enroll into a 2021 Medicare Advantage plan for the first time; OR
- ✓ If you enroll in a Medicare Advantage plan when you are new to Medicare at age 65:
 - *You have one year “trial” where any time during first 12 months in the MA plan you can:*
 - Disenroll from MA plan and return to Original Medicare; and
 - Enroll in a Part D Drug plan; and
 - Can purchase a Medicare supplement policy and not be turned down.

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Your Medicare Choices



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If stay with Original Medicare, and want a Medigap Policy

- Policies sold by insurance companies
- Cover “cost sharing” in Original Medicare Plan:
Part A & B Deductibles, Co-pays, Coinsurance
- Also called “**Medicare Supplement Insurance**”
- 10 Standardized Policies Available
 - Labeled Plan A thru N
 - Plans of same letter have same coverage
 - Only premium costs are different
- Can go to any doctor, hospital, or provider that accepts Medicare in any state

How Medigap Policies Work

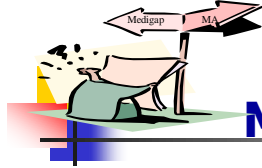
- You pay monthly premium for Medigap in addition to Medicare Part B premium
 - \$100 - \$300 per month based on plan and age
- Medigap pays claim after Medicare pays
- Only covers Medicare services
- **Company can turn you down for coverage after your first six months with Part B**
- Does NOT cover prescription drugs, need separate Medicare Part D Prescription Drug Plan
- Premiums increase with age, and increase any time of year with state approval
- Can keep the policy if you move anywhere in the U.S.

Medigap Plan Benefits For Plans Sold On or After January 2020									effective date is before 1/1/2020, you can also purchase Plan C or F	
2020	Plan A	Plan B	Plan D	Plan G*	Plan K**	Plan L**	Plan M	Plan N	Plan C	Plan F*
MEDICARE PART A COSTS										
Hospital Deductible: Covers \$1,408 in each benefit period.		★	★	★	50%	75%	50%	★	★	★
Hospital Copayment: Copay for days 61-90 (\$352) and days 91-150 (\$704) in hospital; also provides payment in full for 365 additional lifetime days.	★	★	★	★	★	★	★	★	★	★
Skilled Nursing Facility Copay: Covers \$176 a day for days 21-100 each benefit period.			★	★	50%	75%	★	★	★	★
Hospice Care: Coinsurance for respite care and other Part A-covered services.	★	★	★	★	50%	75%	★	★	★	★
MEDICARE PART B COSTS										
Part B Annual Deductible: Covers \$198 deductible in 2020									★	★
Part B Coinsurance: Covers 20% coinsurance for Part B services, such as doctors services, laboratory and x-rays, durable medical equipment. Also covers coinsurance for hospital outpatient services.	★	★	★	★	50%	75%	★	Except up to \$20 for office visits and up to \$50 for ER visits (not charged if admitted to hospital)	★	★
Part B Excess/Limiting Charges: Part B excess charges of 15% more than Medicare's approved charge when provider does not take assignment.				★						★
OTHER										
First three pints of blood.	★	★	★	★	50%	75%	★	★	★	★
Foreign Travel Emergency: Covers 80% of emergency care costs when outside the U.S., after annual \$250 deductible, up to maximum lifetime benefit of \$50,000.			★	★			★	★	★	★
*Plan F & Plan G may also offer a high-deductible option where you pay a \$2,340 deductible in 2020 before Medigap coverage starts.										
**Plans K and L pay 100% of the Part A and Part B copays after you spend a certain amount out-of-pocket. The 2020 out-of-pocket maximum is \$5,880 for Plan K and \$2,940 for Plan L.										

Where to get Medigap Information

- Call 1-800-Medicare and ask for free publication *“Choosing a Medigap Policy”*
- Call companies selling Medigaps for premium quote
- Charts available from NJ SHIP
 - 1-800-792-8820 or www.aging.nj.gov
- If age 65+ can apply at **anytime**,
- Not limited to Medicare Annual Enrollment Period





Should I choose Original Medicare or Medicare Advantage Plan?

Stay with Original Medicare if...

- You have health coverage from former employer or union and want to keep it
- You are "snow bird" or travel long periods outside NJ
- You want freedom to go to any Medicare doctor anywhere in the U.S.

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Example #1:

Mrs. Healthy's costs with Medigap vs. Medicare Advantage Plan

Expense	Medicare Advantage Plan	Medigap Plan G
Part B Premium	\$144 x 12 = \$1,728	\$144 x 12 = \$1,728
Plan Premium	\$0	\$135 x 12 = \$1,620
Part B Deductible	\$0	\$200
Primary Doctor Visit	2 @ \$20 = \$40	\$0
Specialist Visit	2 @ \$50 = \$100	\$0
Outpatient surgery	\$125	\$0
Monthly diabetic supplies	20% of \$100 x 12 = \$240	\$0
Routine dental	\$0	\$150 x 2 = \$300
Eyeglasses	\$100	\$500
Blood work	\$13	\$0
TOTAL FOR YEAR	\$2,346	\$4,348

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Example #2:

Mr. Sick's costs with Medigap vs. Medicare Advantage Plan

Expense	Medicare Advantage Plan	Medigap Plan G
Part B Premium	\$144 x 12=\$1,728	\$144 x 12=\$1,728
Plan Premium	\$0	\$160 x 12 = \$1,920
Part B Deductible	\$0	\$200
Primary Doctor Visit	6 @ \$20 = \$120	\$0
Specialist Visit	12 @ \$50 = \$600	\$0
MRI outpatient	\$125	\$0
Monthly DME	20% of \$100 x 12 = \$240	\$0
2 Hospital Stays 5 days	\$295 x 10 = \$2,950	\$0
Nursing home rehab	\$125 x 10= \$1,250	\$0
Blood work	\$13 x 4 = \$52	\$0
Ambulance	\$250	\$0
ER visit	\$90	\$0
Outpatient surgery	20% of \$2000 = \$400	\$0
Physical Therapy	\$50 x 11= \$550	\$0
Eyeglasses	\$100	\$500
Routine dental	\$0	\$150 x 2 = \$300
TOTAL FOR YEAR	\$8,455	\$4,648

Programs to help with Medicare Costs

1. Medicaid
2. Medicare Savings Programs
3. NJ PAAD
4. NJ Senior Gold Drug Discount



NJ Family Care Medicaid Program



- Who is eligible? (2020 rates)
 - Monthly income less than **\$1,064 (single), \$1,437 (married)**
 - Assets less than \$4,000 (single) , \$6,000 (married)
 - Does not include value of your home or car
- Medicaid pays all your Medicare costs:
 - all Part A and B items
 - premiums, deductibles
 - coinsurance for hospital, doctors, tests
 - Lowers Prescription copay to \$1.30 or \$4.00
- Medicare pays first, Medicaid HMO pays second
- Apply at County Board of Social Services

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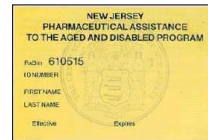
Help Paying Part B Premium- Medicare Savings Programs

- Specified Low Income Medicare Beneficiary
SLMB and **Qualified Individual**
- Who is eligible in 2020?
 - Monthly income less than
\$1,436 (single) , \$1,940 if married
 - Resources less than \$7,860 (single), \$11,800 (married)
- If you qualify for SLMB or QI, you will net additional \$145 in your Social Security check
- Apply at 1-800-792-9745 or www.aging.nj.gov

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NJ's Pharmaceutical Assistance to the Aged and Disabled Program (PAAD)

- Must meet 2020 income limits
 - single: less than **\$28,399 /yr** (about \$2,366/mth)
 - married: less than **\$34,817/yr** (about \$2,901/mth)
- PAAD members pay no more than
 - \$5 for generic drugs**
 - \$7 for brand name drugs**
- PAAD pays premium for Part D plan
- No Part D deductible, copay, or donut hole
- Apply at 1-800-792-9745 or www.aging.nj.gov 43



NJ Senior Gold Prescription Discount

- Sr. Gold income eligibility higher than for PAAD
- Income Limits 2020:
 - single: less than **\$38,399/yr** (about \$3,199/mth)
 - married: less than **\$44,817/yr** (about \$3,734/mth)
- You pay \$15 plus 50% of remaining cost for each drug
- You must be enrolled in Part D drug plan
- Senior Gold does NOT pay Part D premium
- Apply at 1-800-792-9745 or www.aging.nj.gov



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NJSave

APPLY ONLINE

Can apply on-line with ONE application for

- PAAD, Senior Gold, and federal Extra Help with prescription costs
- Help with Medicare Part B premium costs (SLMB program)
- Help with heating bills (Utility Assistance)
- And more!
- Go to www.aging.nj.gov



What about "Obama Care"/ACA?

Who can apply for coverage on the **Health Insurance Marketplace**?

Individuals and Families

- Unemployed, can replace COBRA
- Employed without health benefits
- Legal non-citizen not yet 5 years of U.S. residency
- Early retirees not yet age 65
- People collecting Social Security Disability and waiting for Medicare to begin
- For info call **877-962-8448** or www.getcovered.nj.gov
- **People with Medicare CANNOT get Marketplace Plan**



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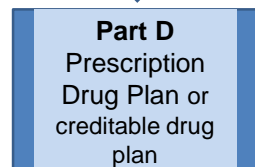
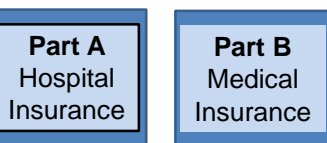
Transitioning from Marketplace Plan to Medicare

- Marketplace Plan will not automatically terminate, but **premium tax credits and subsidies will end**.
- Cheaper to drop it and purchase *Medicare Supplement policy*, or apply for other assistance programs.
 - Health Insurance Marketplace will mail person a letter explaining options.
- **DO NOT TURN DOWN MEDICARE--- NEED BOTH PART A AND PART B OF MEDICARE TO WORK WITH MARKETPLACE OR TO SWITCH TO MEDIGAP**

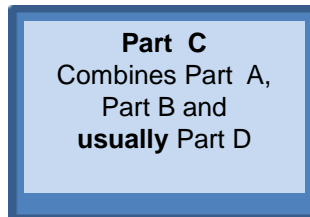
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Review: Your Medicare Coverage Choices

Original Medicare



Medicare Advantage Plan (HMO or PPO)



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Changes can be made this Fall

- Medicare Open Enrollment Period
 - Starts October 15
 - Ends December 7
- Change takes effect January 1, 2021
- Review and Compare Plans
- If in a Medicare Advantage Plan, can also make changes January 1 – March 31, 2021
- If happy with current plan, and still offered in 2021, no action needed. But review changes!



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AVOID SCAMS!

- Medicare will **NOT call you** and ask for your bank information or Social Security number
- **Protect your Medicare number** same as you would your credit card
- Medicare will **NOT send representatives** to your home--- these are insurance agents trying to sell you health care policies.

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How to Get Charts of Medicare Plans in New Jersey

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- www.aging.nj.gov
 - Click “Medicare Options” link in blue box
- www.nj.gov/humanservices/doas/services/ship/
- Call **1-800-792-8820**



LOCAL HELP FOR PEOPLE WITH MEDICARE



Where to Get Help

- Medicare Plan Finder
www.Medicare.gov/find-a-plan
- Contact the Plan
- Call 1-800-MEDICARE (1-800-633-4227)
- NJ State Health Insurance Assistance Program (SHIP) **1-800-792-8820** www.aging.nj.gov



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NJ SHIP is available to help!

Save money and get the best coverage!
It's worth taking time to compare



**OCT 15
-DEC 7**

MEDICARE OPEN ENROLLMENT

A LOCAL MEDICARE COUNSELOR CAN:



Help you compare your current Medicare health or drug plan with other Medicare plan choices



Help you sign up for a new plan



You have until **December 7** to make a final decision. Beware of high-pressure sales tactics. For trusted, unbiased Medicare information and assistance, call 1-**877-222-3737**



We have found safe, creative, and socially distanced solutions to continue serving you during the COVID-19 pandemic.

Administration for Community Living | Office of Healthcare Information and Counseling
MANAGING THROUGH COVID-19 WORK GROUP - SEPTEMBER 2020

Questions?

