



Medicare Open Enrollment is here but so what?

Norm Hanson and Julianne Johnston

Yes, I know, I know that we are now in the Open Enrollment period but so what? I have to listen to ads all day-long on television reminding me of that, to the point where I just hit mute until the ads have ended! I have Original Medicare (OM) or a Medicare Advantage (MedAdv) plan that I am happy with so Open Enrollment does not affect me! I just do not see any need to change my Medicare coverage and, besides, it is too much work. And even if I did change plans, how do I know that a new plan will still cover the care provided by the physician that I have seen for years or the clinic that I go to for care?

So, why all of the ads on television telling me that me that I might not be getting all of the Medicare benefits that I deserve or that I could even get more benefits and still pay a lower premium depending upon my ZIP Code?



Those ads certainly cause many of us to be confused about our Medicare coverage and to wonder whether we are getting the most from our Medicare “dollars!” The health plans offering Medicare coverage options must understand this and are focused on helping some of us to understand things better or making it more confusing for us and perhaps to nudge us toward buying their plans. Former All-Pro quarterback for the New York Jets, Joe Namath, is trying to throw us a “pass” in some ads to an information resource and former Good Times star, J.J. Walker, is trying to sell us some “dynamite” information as well! For heavyweight champion, George Foreman also tells us that he will fight for us to make sure that we get all what we are entitled to from Medicare even if our name is not “George!” All of these spokespeople are determined to make sure that we receive all of the Medicare benefits that we should be entitled to and perhaps at lower premiums than we now pay!

“And what does my ZIP Code have to do with my Medicare coverage anyway? I moved during the past year, and I can just take my health plan with me, regardless of my ZIP Code or the county in which I now live, right?”

Well, no, not, as your health plan might not operate in the county where you currently live. The reality is that not all Medicare plans are available in every county within the state of Minnesota. Original Medicare (Parts A and B) provide coverage throughout the state for any and all hospital and medical providers that will ACCEPT Medicare. Over 500,000 Minnesotans are currently covered by Original Medicare which do not include drug coverage and each must be purchased separately. Another 500,000 Minnesotans of the 1.1 million Minnesotans Medicare eligible are covered by Medicare Advantage plans. Medicare Advantage plans (Part C), for example, provide Parts A and B coverage AND usually provide prescription drug coverage (Part D) as well. In addition, Medicare Advantage plans may coverage additional services such as the Silver Sneakers program and possibly at a zero-premium depending upon your ZIP Code and the extent of the provider network in that area.

Some programs like the Medicare Cost program that cover very few Minnesotans are reducing their coverage area and some major providers have left the Humana Medicare Advantage network leaving 7,000 members to change to another Medicare plan, i.e., St. Cloud Centra Care. The point being made here is to remind all of us to make sure that the plan that we have had for years is still available. In addition, as good consumers, we should also take the time to do some research to determine if there is a better Medicare plan in terms of cost and benefit coverage that will better serve our needs.

“So, tell me again, what is the difference between Original Medicare and the Medicare Advantage plan?” An Important question that everyone should ask let alone understand when considering moving to a Medicare Advantage plan for expanded coverage.

What to consider when making decisions about Medicare coverage

Original Medicare (OM) provides coverage, without a referral statewide, for health care services received from any provider who ACCEPTS Medicare while Medicare Advantage (MedAdv) plans require that enrollees utilize providers in their network of providers and often require a referral for specialized services. OM requires payment of 20% of the Medicare approved amount, i.e., co-insurance, which is different from what the provider may charge for a service or therapy while your out-of-pocket costs may vary under MedAdv.

You pay a monthly premium for OM (Part B) and will pay a separate premium for a Medicare drug plan. In a MedAdv plan, you will pay the Part B premium and the plan's premium that could be zero in some areas. Drug coverage is included in most MedAdv plans. With OM, there is no annual limit on your out-of-pocket costs however there is such a limit of out-of-pocket costs with MedAdv plans.

With OM, you can buy a Medigap or Medicare Supplement plan to cover some of the out-of-pocket costs that OM does not cover. You cannot buy and do not need Medigap coverage under a MedAdv plan.

Medically necessary care is covered by OM as it is under the MedAdv plans, however, the MedAdv plans may offer additional services for routine exams, vision, hearing and dental services.

With OM, you do not have to get a service or supply approved ahead of time but with some MedAdv plans you do. Neither OM nor MedAdv plans cover care received outside of the United States.



When to apply for Medicare?

In most cases, you should apply for Medicare when you turn **sixty-five**. The open enrollment period starts **three months before the month you reach age 65** and extends three months past the month you turn 65 (a seven-month window).

How Medicare works with other insurance:

If you have Medicare and other health insurance (like group health plan, retiree health, or Medicaid coverage), each type of coverage is called a "payer." When there is more than one payer, "coordination of benefits" rules decide which one pays first. The "primary payer" pays what it owes on your bills first, and then sends the rest to the "secondary payer" (supplemental payer) to pay. In some rare cases, there may also be a third payer.

Resources:

WWW/Medicare.Gov or [CMS.gov](https://www.cms.gov)

Senior Linkage Line

<https://mn.gov/senior-linkage-line>

The 2022 edition of *Health Care Choices for Minnesotans on Medicare* is now available online at www.mnhealthcarechoices.com.

Medicare and You Handbook 2022

For a copy Call (844) 957-4105