

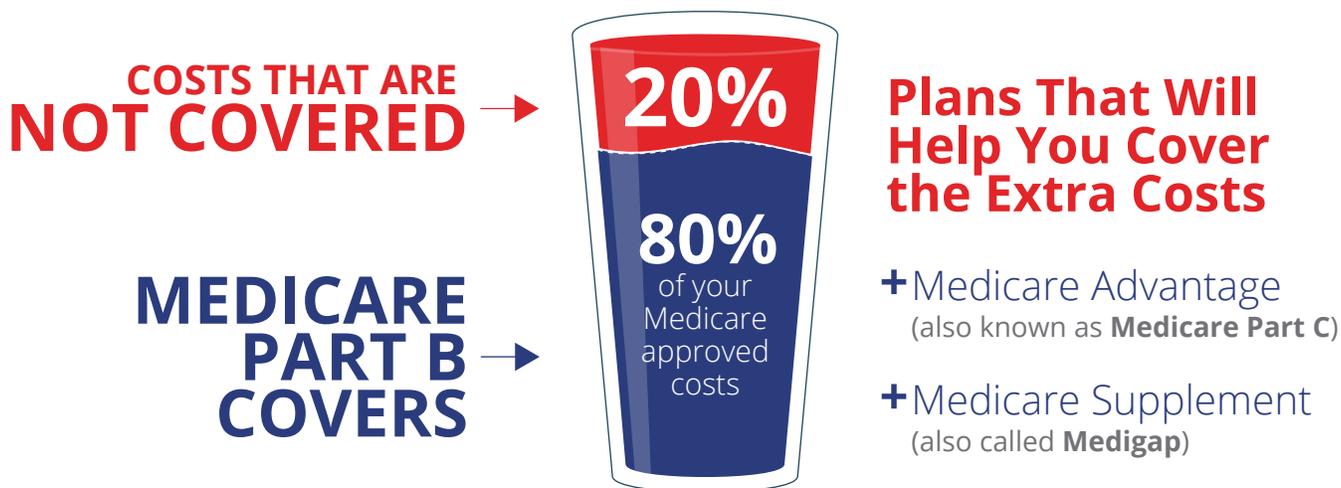
Medicare Advantage:

What You Need to Know to Get the Right Coverage



THE MEDICARE HELPLINE

Determining Medicare coverage can be complex when it comes to figuring out what works best for your health and finances. Original Medicare is a good place to start – it covers common services. But you are still liable for 20 percent of the costs, in addition to your annual Medicare Part B deductible.



20 percent may not sound like a lot but the costs can be substantial, for example:

EXAMPLE 1: Mary recently experienced a fall in her home which required a visit to the emergency room.

She was taken to the hospital by ambulance. Mary has Original Medicare so here's some of what she was responsible for:

- For the ambulance to transport Mary to the hospital she was responsible for:
 - Part B deductible (\$185 in 2019)¹
 - 20% of the Medicare-approved amount
- For the Emergency Room visit, Mary was responsible for:
 - A copayment for each emergency department visit
 - A copayment for each hospital service. (i.e. lab tests, splints, and casts)
 - Part B deductible if it hadn't already been reached (\$185 in 2019)¹
 - 20% of the Medicare-approved amount for doctor's services



EXAMPLE 2: **Fred is living with diabetes and has Original Medicare.**

According to the Centers for Disease Control, Medical costs for people with diabetes are more than double the costs for people without diabetes.² While Basic Medicare often covers diabetes supplies, it only covers insulin if you use an external insulin pump to administer the insulin. For this reason, it's important for Fred to also have a Medicare Part D prescription drug plan to help cover expenses for his insulin and other medical supplies. For his diabetes supplies that are covered by Part B, Fred is responsible for the Medicare Part B deductible (\$185 in 2019)¹ and 20% of the remaining Medicare-approved amount.



There is no yearly limit to out-of-pocket costs under Original Medicare so costs can keep accumulating.

How a **Medicare Advantage Plan** Can Help

Medicare Advantage plans are a popular choice because everything covered by Original Medicare is required to be included with Medicare Advantage. **A major difference is there is an out-of-pocket maximum that varies by plan.**

In addition, while copayment costs vary by Medicare Advantage plan, you will be aware of your copayment ahead of time since it's usually listed on the front of your Medicare insurance card.

Dental | Vision | Hearing



Not Covered by Original Medicare

Routine dental cleanings, dentures, hearing aids and eyeglasses **are not covered** for those with Original Medicare coverage.

People who have supplemental insurance, such as a Medicare Advantage plan spent \$1,253 less³, on average, than those with Original Medicare. That's a savings of more than **\$100 a month.**

Average Spending of Beneficiaries who:



With a Medicare Advantage plan, out-of-pocket costs can be reduced and are more predictable, which helps with annual healthcare expense budgeting.

Your Medicare Advantage Questions Answered

With many insurance carriers offering multiple choices of plans, Medicare Advantage can be overwhelming. The kind of plan you can get depends on where you live. Consider the following variables:

- + Medicare Advantage Plans can be based on an HMO (Health Maintenance Organization) or a PPO (Preferred Provider Organization) model.
- + Your current doctor may or may not be in the network.
- + Premium costs vary from plan to plan.
- + Enrollment periods are set for specific times of the year.

No wonder Medicare health plan enrollment can create stress! And yet, not understanding your Medicare choices can have real-life consequences. If you happen to enroll in the wrong plan, it can cost you money – maybe lots of money – and even limit your medical options. It doesn't have to be that difficult. The Medicare Helpline has knowledgeable licensed sales agents available to answer your questions and guide you through the Medicare process.



Medicare Advantage plans are required by the government to have the same basic benefits as Medicare, however, with a Medicare Advantage plan you deal with a private insurance company and not with the government if you have questions about coverage. Some Medicare Advantage plans also have options generally not available with other types of Medicare plans.

Is Medicare Advantage **the Right Choice for You?**

Medicare Advantage plans are an “all in one” solution to getting medical coverage. Enrollment in the benefit-rich Medicare Advantage plans has risen steadily over the past decade. More than 30 percent of all Medicare enrollees use a Medicare Advantage Plan. Such a plan may be right for you if you want to cover any of the following:

- + Dental
- + Vision
- + Hearing
- + Prescription drugs
- + Savings on your annual medical costs
- + Limit your annual out-of-pocket costs

What are Costs of a Medicare Advantage Plan?

Costs vary depending on your particular coverage needs and your healthcare utilization during the year. Tiburon licensed sales agents who specialize in Medicare can help you find an affordable plan that works for you.

When Can You Enroll in a Medicare Advantage Plan?

The government regulates enrollment periods for all types of Medicare coverage. You have these opportunities for special enrollment in Medicare Advantage Plans:

- + Moving to a location where you have new plan options.
- + Retiring and losing employer coverage.
- + Diagnosed with a chronic condition, such as diabetes or chronic heart failure.
- + Moving in or out of a skilled nursing facility or long-term care hospital.
- + If a 5-Star Plan is available in your area, you may be able to switch.



In addition to special enrollment periods, you can also switch to a Medicare Advantage plan during the Annual Enrollment Period (AEP), which runs **October 15** through **December 7** each year.

Tiburon is here to help you enroll in a Medicare Advantage Plan

With so many choices available, researching and finding a plan on your own would be far too time consuming and risky. A Medicare Helpline licensed sales agent can help guide you as you weigh your options. Your agent will independently shop multiple insurance companies so you can compare services and rates. Medicare Helpline agents simplify the process, answer your questions and help you find an affordable plan that meets your needs and budget.

Before you call a Medicare Helpline licensed Medicare sales agent, see pages 6-7 for a checklist that will save you time and start you along the right path. Fill out as much information as you can. It's okay if you can't complete the entire form.



The Medicare Helpline can help find the most suitable Medicare plan for you. Our personal licensed sales agents will simplify the process, answer questions, and help you find an affordable option that meets your needs and budget. To get started, our agent will ask some basic information like your name, phone number, email address and zip code.

Our licensed sales agent will also ask some questions about your current situation to help compare your options for Medicare coverage. Before your call, please complete the worksheet below with as much information as you can. It's okay if you don't have everything, just fill out as much as you can.

1 Types of Coverage

You have a lot of options when it comes to Medicare. Starting by exploring available plans in your area, our licensed sales agents will focus on options that are of interest to you. What type of Medicare coverage are you interested in?

- Medicare Advantage
- Medicare Supplement
- Both

2 Current Insurance

To find the right health plan for you, our licensed sales agents independently shop the latest plans from more than 20 national carriers so we can compare rates together. To help compare, our licensed sales agent will need a little information about your current plan.

Additionally, you can record some information about your new plan. Typically, you can expect to receive information in the mail within 14 days but this can be helpful reference in the meantime.

	Your Current Plan	New Plan
Carrier/plan		
Monthly Premium	\$	\$
Annual Deductible	\$	\$
Type of plan (HMO, PPO)		

3 Preferred Physicians

One of the most important considerations when choosing a plan is whether or not you will be able to see your preferred physicians. List your physician's information below, and our licensed sales agents will be able to confirm whether or not your doctor accepts your new plan.

Physician's Name	Type of Physician	Phone Number	Number of visits in the last 12 months

4 Prescription Drugs

A common question we hear is, “Are my prescriptions covered?” Our licensed sales agents will make sure your medications are covered, and that you’re getting the best price.

Name of Drug		Dose		Qty		Your Cost per refill	\$
Name of Drug		Dose		Qty		Your Cost per refill	\$
Name of Drug		Dose		Qty		Your Cost per refill	\$
Name of Drug		Dose		Qty		Your Cost per refill	\$
Name of Drug		Dose		Qty		Your Cost per refill	\$

5 Consider your Priorities

In order for our agents to find a Medicare plan that’s right for you, we need to know what’s most important to you. Put a checkmark in the box next to any of the categories that you consider to be a priority to you. Be sure to mention these categories at the beginning of the phone call with your agent.

- | | |
|---|--|
| <input type="checkbox"/> The price of co-pays/co-insurance | <input type="checkbox"/> Coverage for specialized services for example: transportation to appointments and over-the-counter benefits |
| <input type="checkbox"/> The cost of your annual deductible | |
| <input type="checkbox"/> The cost of monthly premiums | <input type="checkbox"/> Coverage for specialized drugs |
| <input type="checkbox"/> The cost of prescription drugs | <input type="checkbox"/> Coverage away from home/while traveling |

6 Questions

As you can see, there is a lot to evaluate when determining your Medicare plan. In just a few minutes we compare the latest plans from more than 20 national carriers to find a plan that meets your needs and budget Use the space below to write down any questions you have for us.

Be sure to have your insurance or Medicare ID card (red, white, and blue card) handy when you call or fill out the online form. We look forward to hearing from you!

You’re going to go over a lot of information on your call with our licensed sales agent but it’s important to remember we’re here for you. Please, don’t hesitate to ask questions and reach out to us in the future with any concerns or questions you may have. You can write down your agent’s contact information below, but we’ve also provided our general customer service number as well.

My Agent’s Name	
My Agent’s Phone Number	
Customer Care	1-855-443-3709 (M-F 8 a.m.-6 p.m. CT; Sat. 9 a.m.-2 p.m. CT)