

Dear Medicare Beneficiary:

We know how important your Medicare is to you and we want to help you protect it. We understand that making decisions about your Medicare can be difficult because of all the options now available to you.

Medicare Advantage plans and Part D Prescription Drug plans allow you more choices than ever about your health care coverage. You can either keep your Original Medicare benefits, or you can switch to a Medicare Advantage Plan that will provide your coverage instead of Medicare. And, you can now join a Part D Plan to help pay for your prescription drug costs.

These choices can provide good coverage depending on your current situation. However, all of these choices can create the potential for being misinformed and misguided. Sometimes fraud and abuse can also occur.

The Medicare Protection Toolkit contains information you need to protect your Medicare. It gives you important tools to use to help you make an informed decision. Make sure you have this kit with you when you sit down with anyone to discuss your Medicare!

Also included is contact information on your local Senior Health Insurance Information Program (SHIIP) and Nebraska SMP Programs. Your local SHIIP Program is here to provide you free, unbiased, and confidential counseling on your healthcare benefits.

YOUR TOOLKIT CONTAINS:

- Questions to ask your sales person and yourself
- Facts on Medicare Advantage Plans and how they work
- Red Flags to look for when considering a plan
- Four steps to safeguard your Medicare

 **Get the Facts**

MEDICARE ADVANTAGE PLANS

Medicare Advantage Plans are healthcare plans approved by Medicare and provided by private insurance companies. There are several different types of plans:

- ▶ **Health Maintenance Organization (HMO)**
Plans must cover all Part A and Part B health care. Most require you to go to doctors, specialists, or hospitals on the plan's list, except in an emergency.
- ▶ **Preferred Provider Organization (PPO)** Plans are available in a local or regional area and you may pay less if you use doctors, hospitals, and providers in their network, but pay additional costs for outside network visits.
- ▶ **Medical Savings Account (MSA)** Plans combine a high deductible health plan with a Medical Savings Account that beneficiaries can use to manage their healthcare costs.
- ▶ **Private Fee-for-Service (PFFS)** Plans allow you to go to any doctor or hospital that accepts the plan's payment. The plan decides how much it will pay and what you will pay for the services you receive.
- ▶ **Medicare Special Needs (SNP)** Plans are specially designed to meet the needs of people who live in certain institutions, are eligible for both Medicare and Medicaid, and/or have one or more chronic condition.

Medicare Advantage Plans provide all of your Part A (Hospital Insurance) and all of your Part B (Medical Insurance) coverage and other medically necessary services just like you have under Original Medicare.

Medicare Advantage Plans may provide sufficient coverage for some beneficiaries. You must make sure you can afford to pay any co-payments as well as the monthly premium. You also need to check to see if your healthcare providers are a part of the plan's network or if they will accept payment.

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It is important for people who now have Original Medicare and are considering enrolling in any Medicare Advantage Plans to understand:

- The plan will provide your primary health coverage *instead of* Original Medicare.
- Original Medicare *will no longer pay* for your health care once you enroll in the plan.
- You will be given a new Plan card, and it will *replace your Medicare card*.
- *You will continue to pay* your Part B premium even if you enroll in a Medicare Advantage Plan.
- The plan is *not* a Medicare Supplement Plan, and it does *not* replace Medicare Supplement Insurance (Medigap).
- You may be charged *extra co-payments* or cost-sharing expenses for Medicare services.

Recognize the Red Flags

 **THE MARKETING AND SELLING OF MEDICARE ADVANTAGE PLANS**

You have a lot of choices when it comes to your Medicare. Medicare Advantage Plans are health plan options approved by Medicare and run by private companies. These plans can be an alternative to traditional Medicare. Recognize the "Red Flags" before you enroll in a new plan.

- ▶ **A sales person appears at your door uninvited.** Strict marketing guidelines *do not allow* home visits unless you have given the company permission before the visit.
- ▶ **A sales person tells you the plan is a Medicare Supplement Plan, and it will not affect your Original Medicare.** The plan IS NOT a Medicare Supplement Plan. The plan will provide your primary health care coverage *instead of* Medicare.
- ▶ **A sales person contacts you in person or by phone and says they are with Medicare.** They may even hand you a red, white, and blue business card. *Medicare does not make home visits* or unsolicited phone calls. The sales person is not with Medicare!
- ▶ **A sales person tells you that your doctor accepts the new plan.** Your doctor may or may

not accept the plan. It is important to *contact your doctor directly* and check to see if he or she will accept the new plan.

- ▶ **A sales person wants to see your Medicare card and have you sign something.** *Do not* show the sales person your Medicare card! *Do not* sign anything you have not read. *Do not* sign anything you do not understand.
- ▶ **A sales person wants you to make a decision today**—without taking the time to make sure you understand the new plan.

Follow the Steps

 **Take your time!** Making any change to your Medicare is a very serious matter! Safeguard your Medicare by completing these four steps. Remember, it's your Medicare—Protect it! Complete the four steps BEFORE you make changes to your Medicare:

- 1 ASK QUESTIONS!**
 - Have the sales person complete the "Get Information" form.
 - You complete the "Ask Questions" form.
 - Keep both forms for your records.
- 2 TAKE YOUR TIME!**
 - Take time to make your decision.
 - Know what is being offered to you, and how it will affect you.
- 3 UNDERSTAND!**
 - Make sure you understand, before you make any changes.
 - Get paperwork first, and consult with someone you know and trust.
- 4 CALL SHIIP!**
 - Your SHIIP Program is here to help you.
 - SHIIP services are free and confidential.
 - Call 1-800-234-7119 for a local program in your community.

Report suspected healthcare fraud, abuse, or waste to Nebraska SMP Program at 1-800-942-7830

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 **Ask the Right Questions**

SAFEGUARD YOUR MEDICARE Making any change to your Medicare is a very serious matter! Before you make any changes, make sure it is right for YOU. Complete both sides of this form and contact your local SHIIP program at 1-800-234-7119 if you have questions or need help.

ASK QUESTIONS! Ask yourself these questions.

What is the name of your Medicare Advantage Plan? _____

Is this a Private Fee-for-Service Plan? Yes No

Does this plan include Prescription Drug (Part D) coverage? Yes No

How did the Medicare Advantage Plan company contact me?
 Mail Phone Seminar Door-to-Door
 I contacted them Family/Friend Other_____

What are the major differences between this plan and my Original Medicare? _____

How much will my new premium payment be? \$ _____

What will I have to pay when I see my doctor? \$ _____

What will I have to pay when I go into the hospital? \$ _____

Have I asked all of my medical providers if they accept the plan? Yes No

Will I have to travel to receive my health care? Yes No

Can I return to Original Medicare at any time? Yes No

Was a detailed written plan description left with me? Yes No

Have I contacted my local SHIIP Program at 1-800-234-7119? Yes No

PLEASE COMPLETE BOTH SIDES OF THIS FORM ▶

▶ **GET INFORMATION!** Have the agent complete:



Agent/Broker/Company Information _____

Agent/Broker Name _____

Company Name _____

Company Address _____

Phone Number _____ Email _____

My Nebraska license number is _____

The plan I am offering is: Medicare Advantage (MA) Plan Prescription Drug Plan only

COMPLETE THE REST OF THIS FORM ONLY IF THE PLAN IS MEDICARE ADVANTAGE.

This plan includes Prescription Drug Coverage. Yes, does include No, does not include

This Medicare Advantage (MA) Plan is:

- HMO (Health Maintenance Organization) PFFS (Private Fee-for-Service)
- PPO (Preferred Provider Organization) MSA (Medicare Medical Savings Account)
- SNP (Special Needs Plan)

This plan affects Original Medicare. Yes, will affect No, will not affect

This plan includes additional out-of-pocket expenses. Yes, will include No, will not include

The premium will be \$ _____. You will still be required to pay your Part B premium.

I have told the customer that by enrolling in the Plan (please initial):

- _____ The plan will provide the primary health coverage instead of Original Medicare.
- _____ Original Medicare will no longer pay for the health care once enrolled in the plan.
- _____ You will be given a new Plan card, and it will replace the Original Medicare card.
- _____ Once enrolled, you may be "locked" in the plan for the remainder of the year.
- _____ The plan is *not* a Medicare supplement plan, and does *not* replace Medicare supplement insurance.

Agent/Broker Signature _____ Date _____

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REPORT SUSPECTED MEDICARE FRAUD, WASTE, AND ABUSE:

Nebraska SMP
1-800-942-7830
<http://www.dhhs.ne.gov/ags/smp/>

Get free health insurance counseling and assistance:
Senior Health Insurance Information Program (SHIIP)
1-800-234-7119

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Medicare Toolkit

Steps to Safeguard Your Medicare

Your Medicare Matters. Protect it!

PRESENTED BY
Nebraska SMP
*Empowering Seniors to Prevent
Healthcare Fraud*

Nebraska Department of Health and Human Services
Division of Medicaid & Long-Term Care
State Unit on Aging
Nebraska LTC Ombudsman Program

