

MEDICARE & YOU

Understanding Your Medicare Choices

How Do I Get Started?

You must initiate the Medicare enrollment process with Social Security. Go online, call or visit your local Social Security office to get the process started. The Social Security Administration handles most of the paperwork for joining Medicare.

If you're drawing Social Security benefits when you turn 65, Social Security should automatically enroll you in Medicare Part A and Part B but check with your local security office if you suspect there is a problem. However, if you are not collecting Social Security, then you will need to complete your Medicare Part A and Part B enrollment through Social Security. Generally, enrolling on their website seems to be the easiest way to enroll.

If you have delayed enrolling into Medicare due to working past age 65, then you should contact Social Security on instructions with late enrollment.

Applying for Part B takes a couple extra steps. You will need a Part B Application and a Request for Employment Information. Social Security can also help you find out if you're eligible for extra help with the cost of Medicare costs.

Generally, the different parts of Medicare help cover specific services. Most beneficiaries choose to receive their Parts A and B benefits through Original Medicare, the traditional fee-for-service program offered directly through the federal government. It is sometimes called Traditional Medicare or Fee-for-Service (FFS) Medicare. Under Original Medicare, the government pays directly for the health care services you receive. You can see any doctor and hospital that takes Medicare (and most do) anywhere in the country.

In Original Medicare:

■ You go directly to the doctor or hospital when you need care. You do not need to get prior permission/authorization from Medicare or your primary care doctor.

■ You are responsible for a monthly premium for Part B. Some also pay a premium for Part A.

■ You typically pay a coinsurance for each service you receive.

■ There are limits on the amounts that doctors and hospitals can charge for your care.

If you want prescription drug coverage with Original Medicare, in most cases you will need to actively choose and join a stand-alone Medicare private drug plan (PDP).

Instead of Original Medicare, you can decide to get your Medicare benefits from a Medicare Advantage Plan, also called Part C or Medicare private health plan. Remember, you still have Medicare if you enroll in a Medicare Advantage Plan. This means that you must still pay your monthly Part B premium (and your Part A premium, if you have one). Each Medicare Advantage Plan must provide all Part A and Part B services covered by Original Medicare, but they can do so with different rules, costs, and restrictions that can affect how and when you receive care.

How you choose to get your benefits and who you get them from can affect your out-of-pocket costs and where you can get your care. For instance, in Original Medicare, you are covered to go to nearly all doctors and hospitals in the country. On the other hand, Medicare Advantage Plans typically have network restrictions, meaning that you will likely be

Medicare - Four Parts

■ **Part A helps pay for hospital and facility costs.** This includes things like a shared hospital room, meals and nurse care. It can also help cover the cost of hospice, home health care and skilled nursing facilities.

■ **Part B helps pay for medical costs.** This is care that happens outside of a hospital. It includes things like doctor visits and outpatient procedures. It also covers some preventive care, like flu shots.

■ **Parts A and B together are called Original Medicare.** These two parts are run by the federal government. Find out more about what Original Medicare covers in our Help Center.

■ **Part C helps pay for hospital and medical costs, plus more.** Part C plans are only available through private health insurance companies. They're called Medicare Advantage plans. They cover everything Parts A and B cover, plus more. They usually cover more of the costs you'd have to pay for out of pocket with Medicare Parts A and B. Part C plans put a limit on what you pay out of pocket in a given year, too. Some of these plans cover preventive dental, vision and hearing costs. Original Medicare doesn't.

■ **Part D helps pay for prescription drugs.** Part D plans are only available through private health insurance companies. They're called prescription drug plans. They cover commonly used brand-name and generic drugs. Some plans cover more drugs than others.

■ Many Medicare Advantage plans include Part D prescription drug plans built right in.

more limited in your choice of doctors and hospitals. However, Medicare Advantage Plans can also provide additional benefits that Original Medicare does not cover, such as routine vision or dental care.

As a helpful guide, review the **Medicare Show Me Guide** at <https://www.medicareinteractive.org/get-answers/original-medicare>



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