

Elder Law Basics

**Medicare &
Medicare Supplemental
Insurance (Medigap)**

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What is Medicare?

- Health insurance for three groups of people
 - 65 and older
 - Under 65 with certain disabilities
 - Persons with End-Stage Renal Disease (ESRD)
 - Persons diagnosed with amyotrophic lateral sclerosis (ALS, or Lou Gehrig's disease)


- Administration
 - Centers for Medicare & Medicaid Services

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Medicare Card

- Keep it and accept Medicare Parts A and B
- Return it to refuse Part B
 - Follow instructions on back of card

Front




Back




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What are the Four Parts of Medicare?




Part A
Hospital Insurance



Part B
Medical Insurance



Part C
Medicare Advantage Plans, like HMOs and PPOs
Includes Part A & B and usually Part D coverage



Part D
Medicare Prescription Drug Coverage

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Medicare Part A Covered Services	
Inpatient Hospital Stays	Semi-private room, meals, general nursing, and other hospital services and supplies. Includes care in critical access hospitals and inpatient rehabilitation facilities. Inpatient mental health care in psychiatric hospital (lifetime 190-day limit). Generally covers all drugs provided during an inpatient stay received as part of your treatment.
Skilled Nursing Facility Care	Semi-private room, meals, skilled nursing and rehabilitation services, and other services and supplies.
Home Health Care Services	Can include part-time or intermittent skilled care, and physical therapy, speech-language pathology, a continuing need for occupational therapy, some home health aide services, medical social services, and medical supplies.
Hospice Care	For terminally ill and includes drugs, medical care, and support services from a Medicare-approved hospice.
Blood	In most cases, if you need blood as an inpatient, you won't have to pay for it or replace it.

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Paying for Medicare Part A

- Most people receive Part A premium free
 - If you paid FICA taxes at least 10 years

- If you paid FICA less than 10 years
 - Can pay a premium to get Part A
 - May have penalty if not bought when first eligible

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Paying for Inpatient Hospital Stays

For each benefit period in 2015	You Pay
Days 1-60	\$1,260 (2015) deductible \$1,288 (2016) deductible
Days 61-90	\$315 per day (2015) \$322 per day (2016)
Days 91-150	\$630 per day (2015) \$644 per day (2016) (60 lifetime reserve days)
All days after 150	All Costs

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Benefit Periods

- Measures use of inpatient hospital and skilled nursing facility (SNF) services
- Begins the day you first receive inpatient care
 - In hospital or skilled nursing facility
- Ends when not in hospital/SNF 60 days in a row
- Pay Part A deductible for each benefit period
 - \$1,260 in 2015
- No limit to number of benefit periods

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Paying for Skilled Nursing Facility Care

For each benefit period in 2015	You Pay
Days 1-20	\$0
Days 21-100	\$157.50 per day (2015) \$161.00 per day (2016)
All days after 100	All Costs

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Five Conditions for Home Health Care

1. Must be homebound
2. Must need skilled care on intermittent basis
3. Must be under care of a doctor
 - Receiving services under a plan of care that is reviewed every 60 days
4. Have face-to-face encounter with doctor
 - Prior to start of care
5. Home health agency must be Medicare-approved

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Hospice Care

- Special care for the terminally ill and family
 - Expected to live 6 months or less
- Focus on comfort and pain relief, not cure
- Doctor must certify each “benefit period”
 - Two 90-day periods
 - Then unlimited 60-day periods
 - Face-to-face encounter
- Hospice provider must be Medicare-approved

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Covered Hospice Services

- Physician and nursing services
- Medical equipment and supplies
- Drugs for symptom control and pain relief
- Short-term hospital inpatient care
- Respite care in a Medicare-certified facility
 - Up to 5 days each time, no limit to times
- Hospice aide and homemaker services
- Social worker services
- Grief, dietary and other counseling
- Physical, occupational, or speech therapy

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Medicare Part B Coverage	
Doctors' Services	<p>Services that are medically necessary (includes outpatient and some doctor services you get when you're a hospital inpatient) or covered preventive services.</p> <p>Except for certain preventive services, you pay 20% of the Medicare-approved amount (if the doctor accepts assignment), and the Part B deductible applies.</p>
Outpatient Medical and Surgical Services and Supplies	<p>For approved procedures (like X-rays, a cast, or stitches).</p> <p>You pay the doctor 20% of the Medicare-approved amount for the doctor's services if the doctor accepts assignment. You also pay the hospital a copayment for each service. The Part B deductible applies.</p>

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Medicare Part B Coverage	
Home Health Care Services	<p>Medically necessary part-time or intermittent skilled nursing care, physical therapy, speech-language pathology services, occupational therapy, part-time or intermittent home health aide services, medical social services, and medical supplies. Durable medical equipment and an osteoporosis drug are also covered under Part B.</p> <p>You pay nothing for covered services.</p>

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Medicare Part B Coverage	
Durable Medical Equipment	<p>Items such as oxygen equipment and supplies, wheelchairs, walkers, and hospital beds for use in the home. Some items must be rented.</p> <p>You pay 20% of the Medicare-approved amount, and the Part B deductible applies.</p>
Other (including but not limited to)	<p>Medically necessary medical services and supplies, such as clinical laboratory services, diabetes supplies, kidney dialysis services and supplies, mental health care, limited outpatient prescription drugs, diagnostic X-rays, MRIs, CT scans, and EKGs, transplants and other services are covered.</p> <p>Costs vary.</p>

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Part B Covered Preventive Services

- "Welcome to Medicare" visit
- Annual "Wellness" visit
- Abdominal aortic aneurysm screening*
- Alcohol misuse screening and counseling
- Behavioral therapy for cardiovascular disease
- Bone mass measurement
- Cardiovascular disease screenings
- Colorectal cancer screenings
- Depression screening
- Diabetes screenings
- Diabetes self-management training
- Flu shots
- Glaucoma tests
- Hepatitis B shots
- HIV screening
- Mammograms (screening)
- Obesity screening and counseling
- Pap test/pelvic exam/clinical breast exam
- Pneumococcal pneumonia shot
- Prostate cancer screening
- Sexually transmitted infection screening (STIs) and high-intensity behavioral counseling to prevent STIs
- Smoking cessation

*When referred during Welcome to Medicare physical exam

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Paying for Part B Services

- In Original Medicare you pay
 - Yearly deductible of \$147 in 2015 (\$166 in 2016)
 - 20% coinsurance for most services
- Medigap Insurance may help pay these costs

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Monthly Part B Premium for 2016

If your Yearly Income in 2014 was		You Pay
File Individual Tax Return	File Joint Tax Return	
\$85,000 or less	\$170,000 or less	\$121.80
\$85,001–\$107,000	\$170,001–\$214,000	\$170.50
\$107,001–\$160,000	\$214,001–\$320,000	\$243.60
\$160,001–\$214,000	\$320,001–\$428,000	\$316.70
above \$214,000	above \$428,000	\$389.80

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NOT Covered by Part A and Part B

- Long-term care
- Routine dental care
- Dentures
- Cosmetic surgery
- Acupuncture
- Hearing aids and exams for fitting hearing aids
- Other – check on www.medicare.gov

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Medigap Policies

- Medigap (Medicare Supplement Insurance) policies
 - Private health insurance for individuals
 - Sold by private insurance companies
 - Supplement Original Medicare coverage
 - Follow Federal/state laws that protect you

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Medigap

- Costs vary by plan, company, and location
- Medigap insurance companies can only sell a “standardized” Medigap policy
 - Identified in most states by letters
 - MA, MN, and WI standardize their plans differently
- Does not work with Medicare Advantage
- No networks except with a Medicare SELECT policy
- You pay a monthly premium

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Medigap Benefits	Medigap Plans									
	A	B	C	D	F*	G	K**	L**	M	N
Part A Coinsurance up to an addition 365 days	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Part B Coinsurance	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Blood	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Hospice Care Coinsurance	✓	✓	✓	✓	✓	✓	50%	75%	✓	✓
Skilled Nursing Coinsurance			✓	✓	✓	✓	50%	75%	✓	✓
Part A Deductible		✓	✓	✓	✓	✓	50%	75%	50%	✓
Part B Deductible			✓		✓					
Part B Excess Charges					✓	✓				
Foreign Travel Emergency (Up to Plan Limits)		✓	✓	✓	✓				✓	✓
*Plan F has a high-deductible plan *** Plan N pays 100% Part B coinsurance with copay up to \$20/\$50 for emergency room visits not resulting in inpatient							Out-of-Pocket Limit**			
						\$4,660	\$2,310			

Medigap Sample Premiums

	Plan A Long Island & NYC	Plan F Long Island & NYC
Bankers Conseco	\$335.51	\$516.20
GHI	\$169.45	\$276.24
Sterling Life	\$369.01	\$466.82
United Healthcare (AARP)	\$156.50	\$261.00

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- ### Part C - Medicare Advantage Plans
- Health plan options approved by Medicare
 - Also called Medicare Part C
 - Run by private companies
 - Medicare pays amount for each member's care
 - Another way to get Medicare coverage
 - Part of the Medicare program
 - May have to use network doctors or hospitals
 - Still in Medicare with all rights and protections
 - Still get regular Medicare-covered services
 - Some plans may provide additional benefits
 - Plan may include prescription drug coverage
 - May include extra benefits like vision or dental
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Part D- Medicare Prescription Drug Coverage

- Prescription drug plans approved by Medicare
- Run by private companies
- Available to everyone with Medicare
- Must be enrolled in a plan to get coverage
- Two sources of coverage
 - Medicare Prescription Drug Plans (PDPs)
 - Medicare Advantage Plans with Rx coverage (MA-PDs)
 - And other Medicare health plans with Rx coverage

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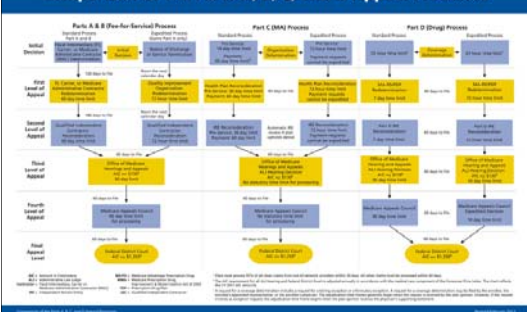
Rights and the Appeals Process

- Patient Rights
- Appeals Process
 - Part A and B (Original Medicare)
 - Medigap Rights
 - Part C (Medicare Advantage)
 - Part D (Medicare Prescription Drug Coverage)

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Parts A, B, C, and D Appeal Processes

Comparison of the Parts A, B, C, and D Appeal Processes



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Introduction to Medicare Resource Guide		
Resources		Medicare Products
<p>Centers for Medicare & Medicaid Services (CMS) 1-800-MEDICARE (1-800-633-4227) (TTY 1-877-486-2048) www.medicare.gov www.CMS.gov</p> <p>Social Security 1-800-772-1213 TTY 1-800-325-0778 http://www.socialsecurity.gov/</p> <p>Railroad Retirement Board 1-877-772-5772 http://www.rrb.gov/</p>	<p>State Health Insurance Assistance Programs (SHIPs)*</p> <p>*For telephone numbers call CMS 1-800-MEDICARE (1-800-633-4227) 1-877-486-2048 for TTY users</p> <p>http://www.medicare.gov/caregivers/</p> <p>http://www.HealthCare.gov</p> <p>http://www.Benefits.gov</p> <p>http://www.Insurekidsnow.gov</p> <p>Affordable Care Act www.healthcare.gov/law/full/index.html</p>	<p>Medicare & You Handbook CMS Product No. 10050</p> <p>Your Medicare Benefits CMS Product No. 10116</p> <p>Choosing a Medigap Policy: A Guide to Health Insurance for People with Medicare CMS Product No. 02110</p> <p>To access these products</p> <p>View and order single copies at www.medicare.gov</p> <p>Order multiple copies (partners only) at productordering.cms.hhs.gov. You must register your organization.</p>

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Thank You

- Thanks and appreciation to the Medicare Learning Network through the Centers of Medicare and Medicaid Services that designed the structure and overall content of this PowerPoint presentation.

- Thank you

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