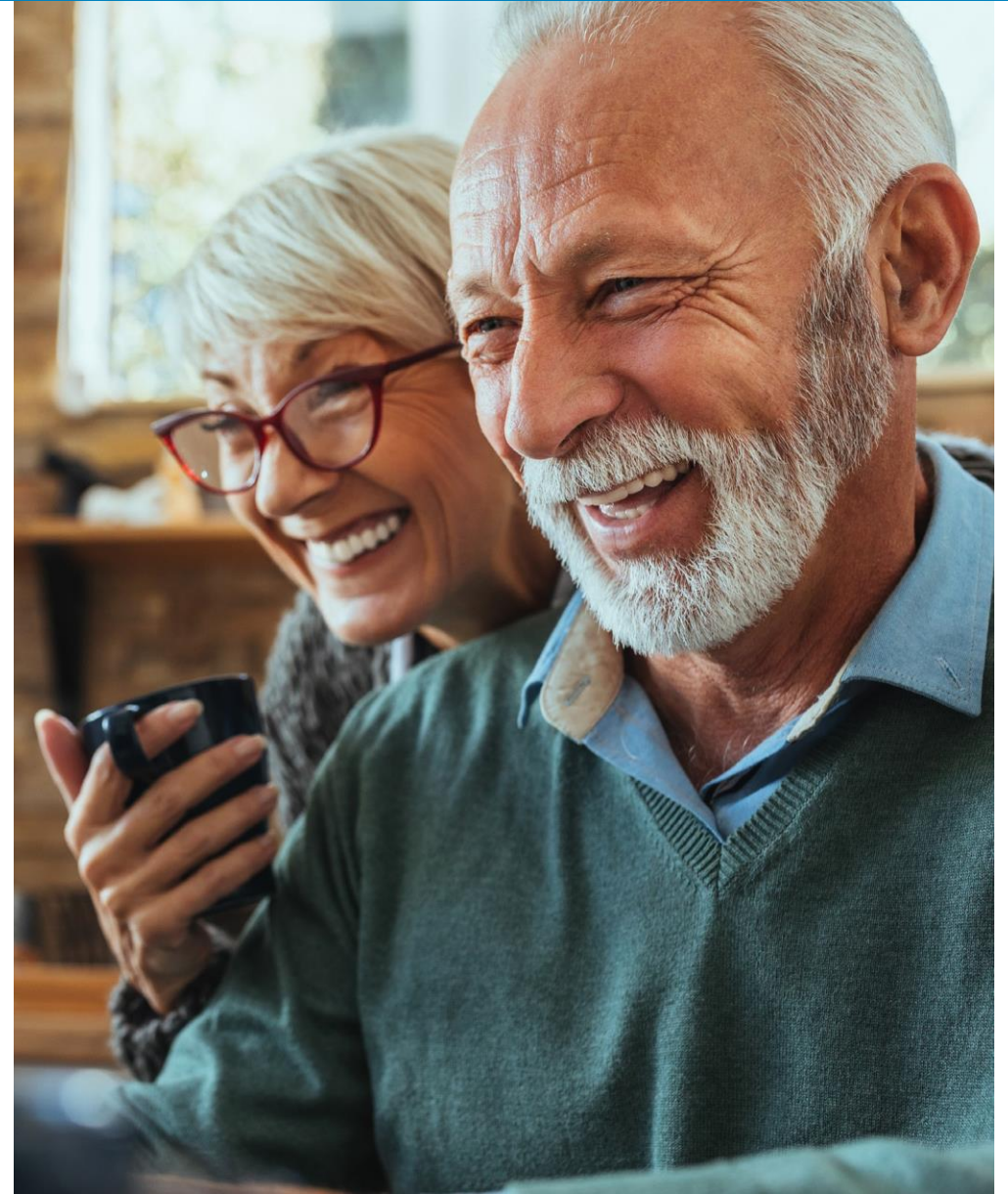




Choosing health coverage that's right for you



About Florida Blue

Florida Blue has been providing health care coverage for ***more than 75 years***, and servicing Medicare beneficiaries just like you for ***more than 26 years***.



22 Florida Blue Centers
across the state




Dedicated Agents
located in your area



What are we going to cover today?

- Important Medicare Enrollment Periods
- What are your Medicare options?
- Medicare guidelines and facts
- What to expect when you enroll
- A look back at what we've talked about today
- What's next... where to go from here

Important Medicare Enrollment Periods

	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC
OEP Open Enrollment Period	Jan 1 – Mar 31											
IEP Initial Enrollment Period												
AEP Annual Election Period										Pre-Enrollment Starts Oct 1	Oct 15 – Dec 7	
SEP Special Election Period												

Medicare & Medicare Supplement Plans



Part A + Part B

ORIGINAL MEDICARE



Part C

MEDICARE ADVANTAGE PLANS

= Part A + Part B

You can also purchase an **MAPD** plan that includes prescription drug coverage



Medigap

MEDICARE SUPPLEMENT PLANS



Part D

MEDICARE PRESCRIPTION DRUG COVERAGE



Original Medicare



Medicare Part A

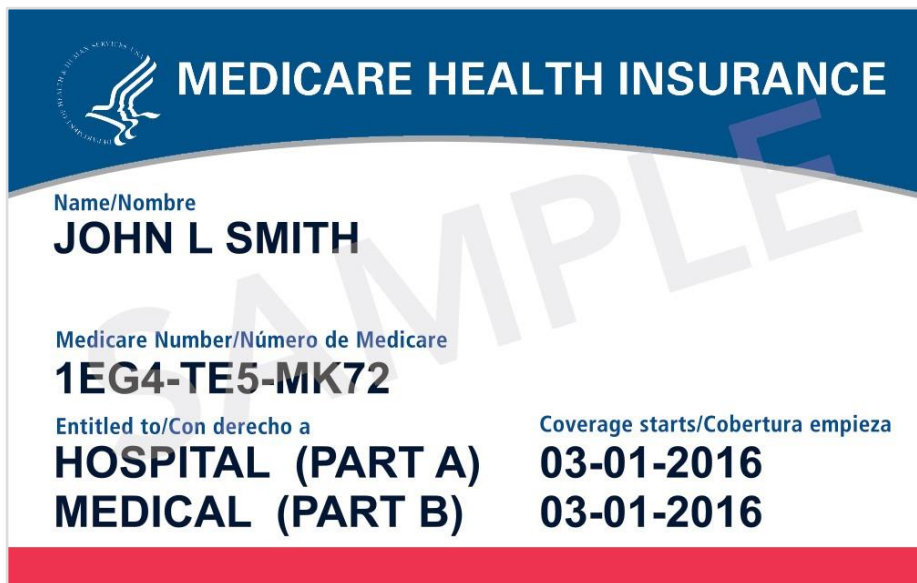
Inpatient Hospital
Skilled Nursing Facility
Home Health Care



Medicare Part B

Outpatient Services
Physician Care

Original Medicare



- You usually pay a Monthly Premium for Part B.
- You will have access to any doctor or provider that accepts Medicare patients.
- Medicare Supplement insurance and Medicare Prescription Drug Coverage (Part D) may be needed to help fill some of the gaps in Original Medicare coverage.
- If you do not sign up for Part B when you're first eligible, you may have to pay a Late Enrollment Penalty.

Original Medicare & Medicare Supplement Plans

Medicare Supplement plans work together with Original Medicare to cover costs Original Medicare doesn't pay.



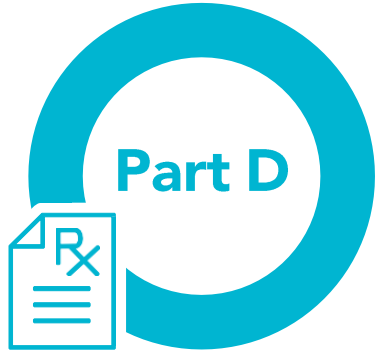
Medicare Supplement plans usually **do not have a provider network.**



Medicare Supplement plans **do not offer prescription drug coverage.**

What are Part D Prescription Drug Plans?

There are two ways you can get Part D Prescription Drug Coverage



You can enroll in a stand-alone Medicare **Prescription Drug Plan**, called a PDP.



You can enroll in a **Medicare Advantage - Prescription Drug Plan** (MAPD) that includes both medical and prescription drug benefits in one convenient package.

Important things to know about Part D coverage



Make sure your drugs are listed on the plan's **Formulary**.



Plans may require you to try certain less expensive drugs first before they'll cover a more expensive drug. This is called **Step Therapy**.



If you choose NOT to enroll in a Medicare Part D plan when you're first eligible, you may have to pay a **Late Enrollment Penalty** if you later decide to enroll.

Part D Coverage Stages



Extra Help for Prescription Drug Costs



The Federal government has set aside money to help people with drug expenses, such as:

- ✓ Monthly Plan Premium
- ✓ Yearly Deductible
- ✓ Coinsurance
- ✓ Copayments

Call to see if you qualify.

1-800-MEDICARE

(1-800-633-4227) or visit www.Medicare.gov

TTY users should call 1-877-486-2048

24 hours a day, seven days a week

The Social Security Office

1-800-772-1213

TTY users should call 1-800-325-0778

between 7am - 7pm, Monday - Friday

Your State Medicaid Office

1-866-762-2237

from 8am - 5pm, Monday - Friday

What is Part C or a Medicare Advantage Plan?

All your health care coverage **ROLLED INTO ONE PLAN!**



- ✓ Medicare Advantage (MA) plans are health plans offered by private health insurers that contract with Medicare.
- ✓ They combine all the benefits of Medicare Part A and Part B, and usually include prescription drug coverage.
- ✓ Many plans include additional benefits like dental, hearing and vision.

Medicare: How Does It All Work?

STEP 1: Enroll in Original Medicare* when you are eligible



Original Medicare Part A

Covers hospital stays, skilled nursing facilities and home health care



Original Medicare Part B

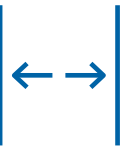
Covers doctor and outpatient visits

**Government Provided*

Medicare: How Does It All Work?

STEP 2: If you need more coverage*, you can choose:

Option 1: Keep Original Medicare and add:



Medicare Supplement Insurance

Covers some or all costs not covered by Parts A and B

and/or



Medicare Part D

Covers Prescription drugs

or

Option 2:



Medicare Advantage (Part C)

- Combines Part A and B
- Additional benefits
- Most plans also include Prescription Drug Coverage

**Offered by private companies like Florid Blue Medicare that contract with Medicare*

You have options.

There are a lot of different Medicare Advantage plans, with a lot of different benefits. Two of the most common types of Medicare Advantage plans are:



An HMO Plan

short for *Health Maintenance Organization*



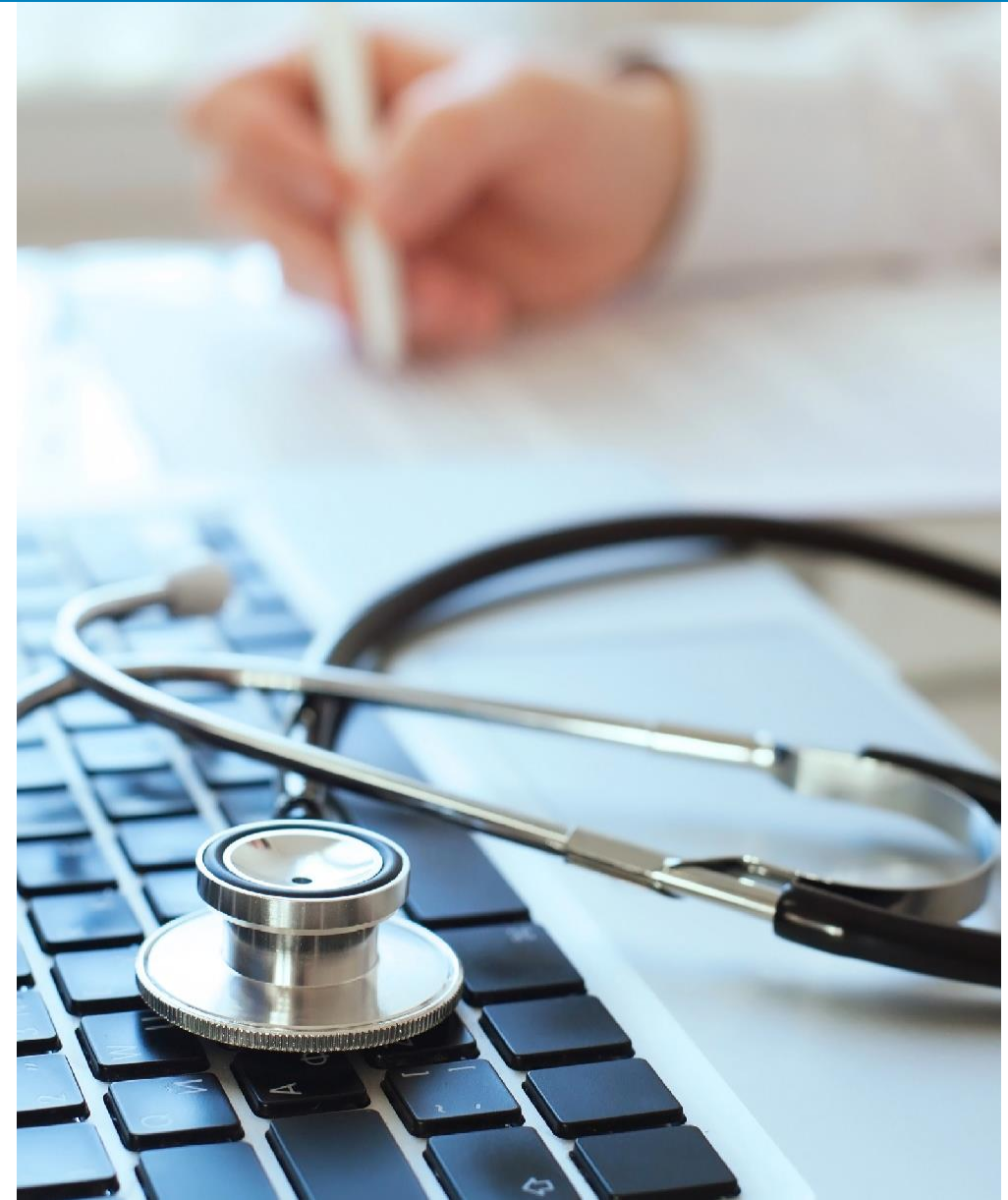
A PPO Plan

which stands for *Preferred Provider Organization*

HMO Plans

What does Enrolling in an HMO plan mean?

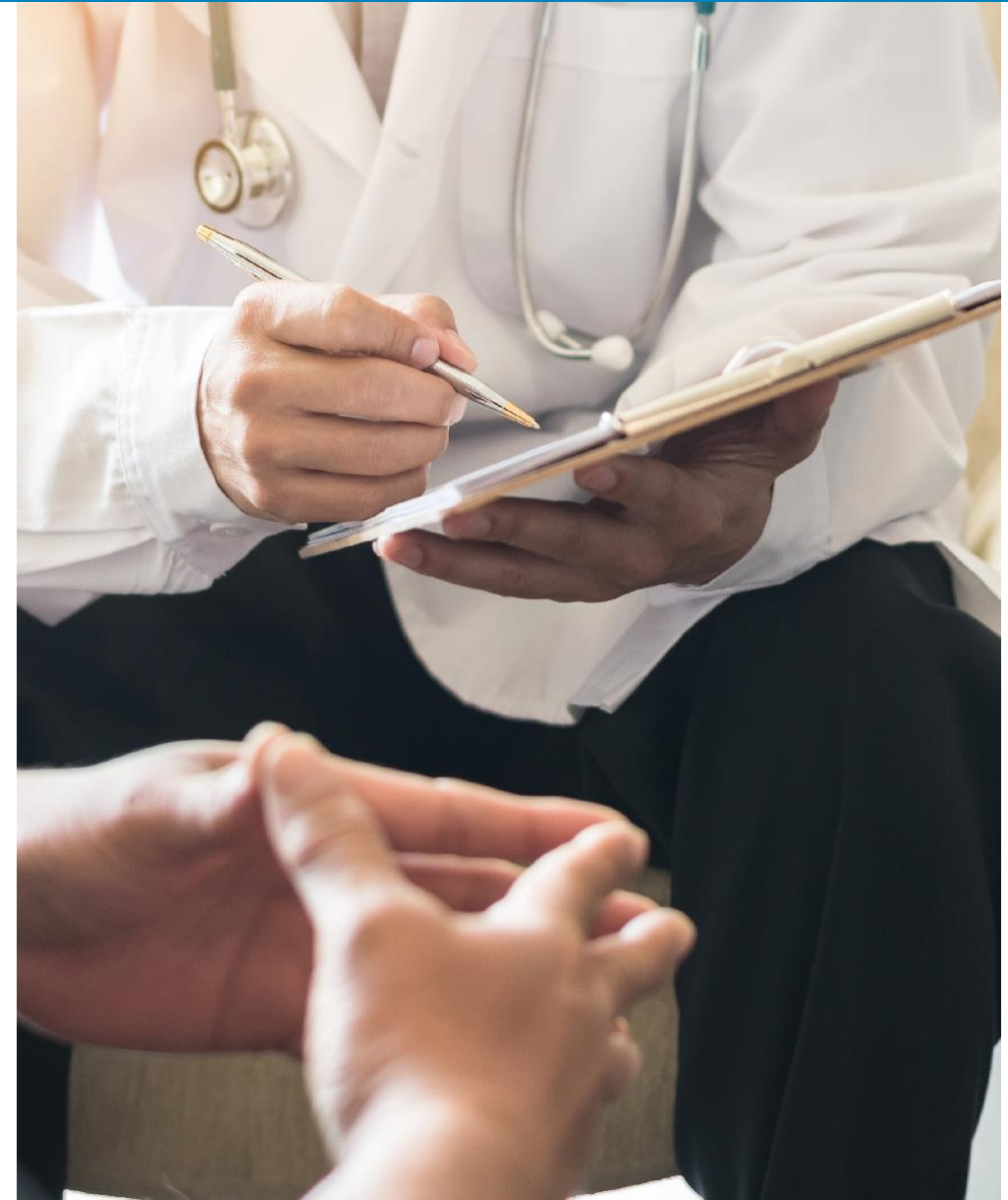
- ✓ Out-of-pocket costs may be lower than Original Medicare's.
- ✓ In most cases you will not be covered unless you use in-network providers, except for emergency or urgent care or kidney dialysis.
- ✓ You choose a primary care doctor from a network to coordinate most of your care. If you don't choose a primary care doctor, one will be assigned to you.
- ✓ You have to receive a referral from your PCP to see most kinds of specialists.



PPO Plans

What does Enrolling in a PPO plan mean?

- ✓ Most PPO plans have a monthly premium, however, you have the flexibility to see providers outside of the plan's network.
- ✓ If you are in a PPO plan you can choose healthcare providers that are in the plan's network or outside the network. However, you will usually pay more if you use an out-of-network provider, except when you need emergency or urgent care and kidney dialysis. You pay the in-network cost-sharing amount for emergency and urgent care whether you use in-network or out-of-network providers.
- ✓ Although it is not mandatory, it is still important to pick a primary doctor when you are in a PPO plan to help coordinate your health care.



Medicare Facts: Guidelines and Procedures

- 1 Medicare Advantage (MA) Plans are offered by private insurance companies contracting with Medicare, and they cover everything that Original Medicare Part A and Part B cover; most also cover prescription drugs.
- 2 When you enroll in a Medicare Advantage Plan you still have Medicare, you don't lose it. The MA plan offers an alternate way to receive your Medicare benefits
- 3 The Medicare Advantage plan will issue you a new Member ID card to use when you receive medical services or prescription drugs.
- 4 When you select a MA plan, you usually still have to pay a monthly premium for your Part B coverage.

Medicare Facts: Guidelines and Procedures

5

A Medicare Advantage plan is not a Medicare Supplement plan.

6

The Centers for Medicare & Medicaid Services (CMS) requires all private insurance companies to provide all the benefits that Original Medicare covers.

7

CMS reviews and approves these plans every year.

8

If you aren't happy with the Medicare Advantage plan you enrolled in when you became eligible for Medicare Part B, you may be able to return to Original Medicare and buy a Medigap plan during the first 12 months of your MA plan membership.

Plan Star Rating



Medicare evaluates plans based on a 5-STAR rating system.

The government gives private health plans an overall star rating every year based on how well they performed in previous years.



STAR ratings are calculated each year and may change from one year to the next based on plan performance for that year.

Are you eligible for Medicare Advantage Plans?



- ✓ You must be entitled to Medicare Part A and enrolled in Medicare Part B.



- ✓ You have to live in the plan's service area.

What to expect when you enroll.

1



Your application will be sent to CMS for approval

4



You'll receive your Medicare Advantage Plan member ID card

2



You'll receive a letter to confirm that your application has been processed

5



Your member kit will arrive in your mailbox

3



Medicare will confirm your enrollment

6



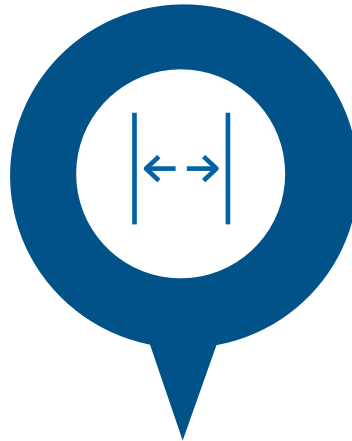
You will be contacted about completing a health questionnaire and to schedule a health evaluation

Overall Review



Original Medicare

Part A and Part B cover most costs associated with hospital stays, Skilled Nursing Facilities, home health care, visits to your doctor, and many preventive services.



In addition to Original Medicare you can purchase a **Medicare Supplement Plan** with or without a stand-alone Prescription Drug Plan.



For Drug coverage, you can purchase just a stand-alone **Prescription Drug Plan (PDP)**.



If you want an alternative to Original Medicare and to have prescription drug coverage with a single plan, you can enroll in a **Medicare Advantage Prescription Drug Plan (MAPD)**.

Next Steps

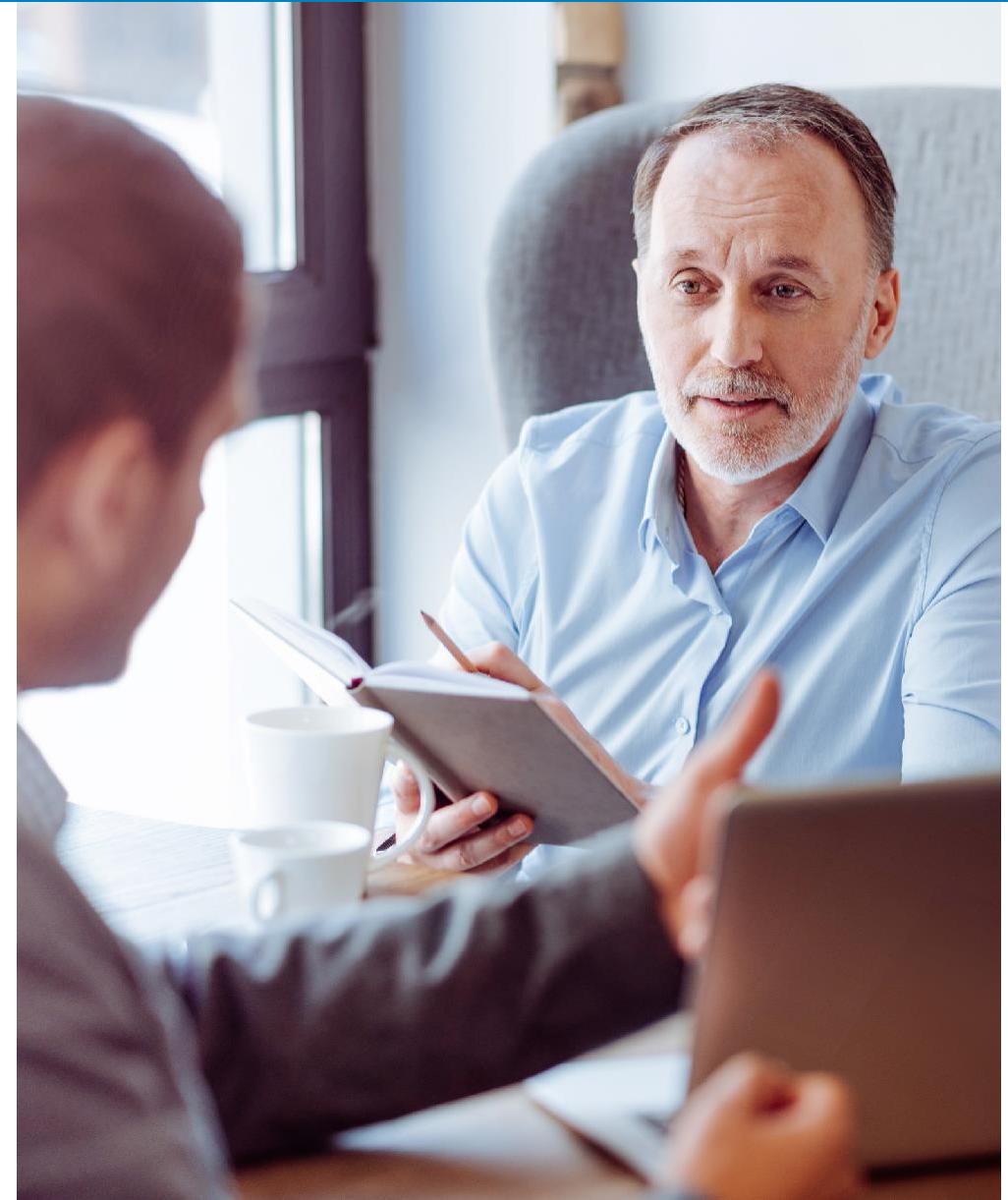
After this presentation we will review two very important documents:



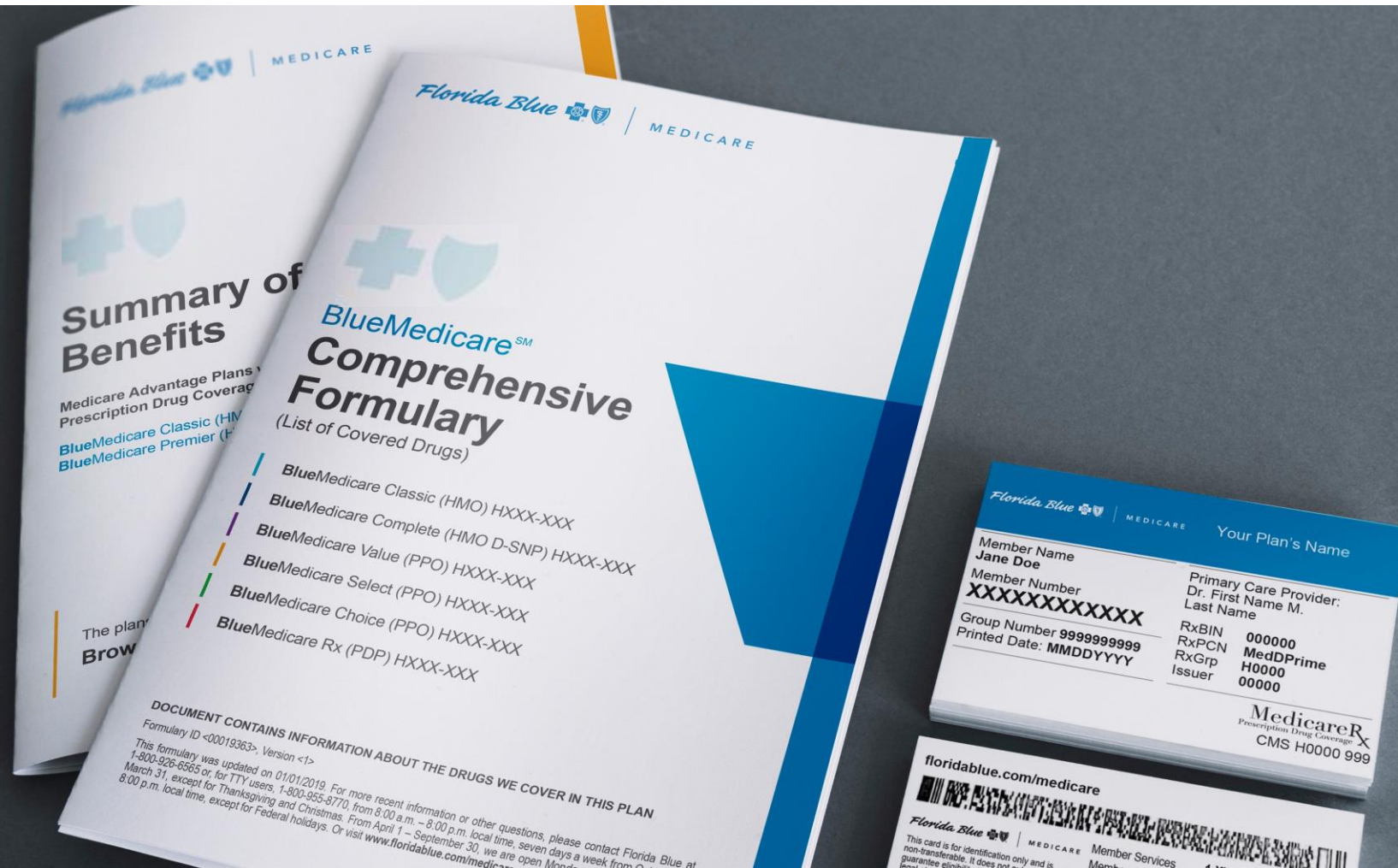
The **Summary of Benefits**, which covers important information and many of the specific features of the Florida Blue Medicare plans that are available in your area.



And the **Formulary**, which is a list of drugs covered by our plans.



Summary of Benefits & Formulary



Thank you
for attending.

Florida Blue is a PPO Plan with a Medicare contract. Florida Blue Medicare, is an HMO plan with a Medicare contract. Enrollment in Florida Blue, or Florida Blue Medicare, depends on contract renewal. Health coverage is offered by Blue Cross and Blue Shield of Florida, Inc., DBA Florida Blue. HMO coverage is offered by Florida Blue Medicare, Inc., DBA Florida Blue Medicare. These companies are affiliates of Blue Cross and Blue Shield of Florida, Inc., and Independent Licensees of the Blue Cross and Blue Shield Association.

Out-of-network/non-contracted providers are under no obligation to treat Florida Blue members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

We comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex. For more information visit floridablue.com/ndnotice.