

## Medicare (MCR) vs Medicare Advantage (MA)



Hospital







**Prescription drug** 

### **Traditional Medicare (MCR)**

- 80% paid by MCR, 20% co-insurance patient pays, if no supplement, after yearly deductible is met
- Eligible for Medigap (Supplement)
- No yearly maximum out of pocket for the year

**Example:** these are only an example of billed/allowed/adjustment line are not actual amounts

Traditional MCR with a Supplement plan if you do not have a supplement the Pt. resp. 20% will be paid by the patient.

MEDICARE HEA	ALTH INSURANCE
JOHN L SMITH	PLF
Medicare Number/Numero de Medicare 1EG4-TE5-MK72	
HOSPITAL (PART A) MEDICAL (PART B)	Coverage starts/Cobertura empiez 03-01-2016 03-01-2016

Type of Service	Billed	Medicare Allows	Medicare Discount	Medicare Pays 80%	Pt resp. 20%	Co- payment	Medigap Pays (Plan F or C)	Patient Pays
Office Visit	\$165.00	\$100.00	\$65.00	\$80.00	\$20.00	\$0.00	\$20.00	\$0.00
Infusion Medication	\$4,000.00	\$2,000.00	\$2,000.00	\$1,600.00	\$400.00	\$0.00	\$400.00	\$0.00
Infusion Hour	\$200	\$100.00	\$100.00	\$80.00	\$20.00	\$0.00	\$20.00	\$0.00

### Medicare Advantage Plan (MA)

- 80 % Paid by MA, 20% co-insurance patient pays, after deductible, which your plan dictates
- Copayments paid for office visits, and some additional services
- Not eligible for Medigap (Supplement)
- Has a yearly maximum out of pocket which can range from \$0 - \$6,700

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Type of Service	Billed	Medicare Advantage Allows	Medicare Advantage discount	Medicare Advantage Pays 80%	Pt resp. 20%	Co- payment	Medigap Pays (Plan F or C)	Patient Pays
Office Visit	\$165.00	\$100.00	\$65.00	\$55.00	\$0.00	\$45.00	\$0.00	\$45.00
Infusion Medication	\$4,000.00	\$2,000.00	\$2,000.00	\$1,600.00	\$400.00	\$0.00	\$0.00	\$400.00
Infusion Hour	\$200	\$100.00	\$100.00	\$80.00	\$20.00	\$0.00	\$0.00	\$20.00

This is only an example billed/allowed/adjustment lines are not actual amounts. This is only a sample of a card, there are many plans.



# Medicare (MCR) vs Medicare Advantage (MA)

### Is there a way I can get free Medicare coverage?

If you're a low-income person eligible for Medicare, you also may be eligible for Medicaid. Being eligible for both Medicare and Medicaid is called being "dual eligible." Unlike other types of Medicare coverage, you may not have premiums, deductibles, or copayments/coinsurance if you are covered by Medicaid. Medicaid may also offer additional benefits that Medicare doesn't, such as routine dental and routine vision services and hearing aids. (freemedicare)

#### If you can't afford Medicare's premiums

You may be eligible for Specified Low Income Medicare Beneficiary Program (SLMB), which helps to pay premiums for Part B. A single person can qualify in 2019 with an income up to \$1,269 per month (\$1,711/month for a couple). If you qualify as a SLMB, you're automatically eligible for Extra Help paying for Part D prescription coverage. (SLMB)

#### What do I need to consider?

Cost of MCR and Supplement (Medigap) vs Cost of MA premiums: You might have been searching for Medicare Advantage plans available in your zip code and found a plan with a \$0 monthly premium. This plan may appear to be "free" in the way that you don't have to pay an additional monthly amount to be covered by the plan. You generally still have to pay your Medicare Part B premium, deductible and OOP. Some MA plans may have a \$0 premium, however, you still have to pay your Medicare Part B premium. https://www.ehealthmedicare.com/faq/can-a-medicare-advantage-plan-be-free/

**Example:** Will your supplement be less per year than your out of pocket with the Medicare Advantage plan?

Traditional	MCR	Supplement premium		Part D	= \$ Yearly
MCR	premium+	+	Yearly Ded+	Premium	OOP
	MCR	Yearly Out Of Pocket			= \$ Yearly
MA	premium+	+	Yearly Ded+	Copayments	OOP

You can change back to Traditional Medicare however you supplemental premiums will increase. Medicare will pay for 80% of covered charges and you will be responsible for the 20% for the remainder of the year. You will not be eligible to purchase a supplemental policy to cover your 20% for the remainder of the calendar year. You must wait for open enrollment to enroll in a supplemental policy with an effective date of January 1 of the following year.

If you have a chronic condition please investigate this thoroughly **prior to making any switch.** Talk to the office staff, Medicare and a family member. Once you have switched from traditional Medicare you may pay more in supplement premiums to return.

If you would like to find out more details please visit https://aimedalliance.org/

**Know your rights!**