

MEDICARE ADVANTAGE PLANS - GET THE FACTS

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 conditions.

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 good 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 part of the plan's network or if they will accept payment.

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.

Insurance Counseling Assistance & Referral for Elders (I-CARE)

Senior Medicare Patrol Project (SMP)

SC Access (www.aging.sc.gov)

Lieutenant Governor's Office on Aging

**1301 Gervais Street, Suite 200;
Columbia, South Carolina 29201
1-800-868-9095
(803) 734-9900**

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 contacts you in person or by phone and says they are with Medicare or Social Security. They may even hand you a red, white, and blue business card.

Medicare and Social Security does not make home visits or unsolicited phone calls.

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 pri-

mary health care coverage instead of 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 before you sign anything.

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.

Take Your Time!

Compete the 4 steps BEFORE you make changes to Medicare.

- 1) Ask Questions**
- 2) Take your time**
- 3) Understand**
- 4) Call I-CARE**

REPORT SUSPECTED HEALTHCARE FRAUD AND ABUSE to your local SMP Program at 1-800-868-9095.