

Comparing Medicare plan types

Learn all your options so you can make the right choice when it's time to enroll.

The move to Medicare is a monumental one, and you should have all the information you need to make the best choice for you.

Important Questions to Ask

Before choosing a Medicare plan, you should consider:

- ✓ **Cost** From your monthly premium to out-of-pocket expenses like deductibles, copayments and coinsurance, what is the overall cost of the plan?
- **❷ Benefits** Do you want extra benefits like vision, dental and hearing? Are you interested in fitness programs or ways to save money and wellness incentives?
- ✓ Doctors and Hospital Choice Do you want to be able to choose your preferred doctors? Do you want a primary care physician (PCP) coordinating your care?
- Prescription Drugs Is a Medicare prescription drug plan provided? Are your prescriptions on the formulary?
- ▼ Travel Do you travel often or have a home in another state? Do you need a larger provider network to cover you?
- ✓ Convenience Are providers who accept Medicare located nearby? Can you get prescription or specialty drugs through the mail?

Understanding the Medicare Parts and Plan Types

Once you've established what Medicare plan aspects are most important to you, it's time to learn about the different parts of Medicare and plan types, what they cover and how much they cost.

PART/PLAN	COVERAGE TYPE	COST
Medicare Part A	Covers inpatient hospital care, skilled nursing facility and other related care	No premium* *For most people receiving Social Security benefits
Medicare Part B	Covers doctor and outpatient services and supplies	Monthly Premium

PART/PLAN	COVERAGE TYPE	COST
Medicare Part C (Medicare Advantage)	Equivalent to Medicare Parts A and B, plus additional coverage	Cost varies by plan although many plans carry a \$0 premium
Part D (Prescription Drug)	Covers prescription drugs	Cost varies by plan and some Medicare Advantage plans include Part D benefits
Medicare Supplement (Medigap)	Pays some costs not covered by Medicare Parts A and B	Cost varies by plan

Medicare Parts and Plan Types in Detail

Medicare Part A helps cover the cost of hospital stays and other related care, such as lab tests and surgery. If you or your spouse contributed to Medicare through payroll deductions for at least 10 years or 40 quarters, then Medicare Part A will be premium-free.

Medicare Part B covers outpatient procedures and doctor visits, and depending on your monthly income, there is a premium cost. You'll need to sign up for Medicare Part B when you become eligible. Otherwise, you may have to pay a late-enrollment penalty.

Medicare Parts A and B are the federal government's health insurance plans for those 65 and older as well people with certain disabilities. Together, these two parts are considered Original Medicare.

Medicare Part C, also called **Medicare Advantage**, are plans offered by private insurers, like Florida Blue, and cover everything in Medicare Part A and Part B, plus extra benefits, like vision, hearing and dental services, fitness membership and may also include prescription drug coverage. While premiums and deductibles vary by plan, many Medicare Advantage plans have a \$0 premium.

Medicare Part D, also called **Prescription Drug Plans** (PDPs), can be stand-alone plans or combined with other Medicare plans to provide prescription drug coverage. Many Medicare Advantage plans (Part C) include Medicare Part D coverage. You may purchase a Prescription Drug plan in addition to a Medicare Supplement plan. Premiums and deductibles for Medicare Part D coverage will vary by plan.

Medicare Supplement Plans, also known as **Medigap plans**, help pay costs not covered by Medicare Parts A and B and are often paired with a Medicare Part D plan. Most Medicare Supplement plans allow you to choose any doctor, specialist or hospital that accepts Medicare. The benefits provided and premium amounts depend on the plan you choose, your age, tobacco use and county of primary residence.

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