

Senior Law Day Collaborative  
November 2, 2022



Emerald Medicare Presents:

Five “Myths and Realities”  
Open Enrollment and More

Mark Brownstein, CSA



**Will YOU be able to navigate all this?**



# Top Concern Of Retirees Remains in Health Care Costs

## Primary financial concern, 65+ individuals, 2021 vs. 2022

Primary concern	2021	2022
Running out of money	22%	20%
Maintaining current lifestyle	24%	23%
Healthcare costs	33%	31%
No financial concerns	17%	24%
Other	4%	3%

## ➤ *Medicare is Different for Everyone*

## ➤ *Medicare is the Same for Everyone*

- Myth #1: Medicare covers all your medical expenses.
- Myth #2: You can change your Medicare plan at any time.
- Myth #3: Medicare costs the same for everyone.
- Myth #4: Medicare covers dental and eyeglass/vision.
- Myth #5: Medicare and Medicaid are the same.
- Myth #6: Medicare Advantage plans and Medicare Supplement plans are the same thing.
- Myth #7: Medicare covers all my doctors.
- Myth #8: Prescription drug plans do not change a lot each year.



# Original Medicare

Medicare Parts A&B generally cover 80%

## Part A \$0 premium

- Inpatient hospital care
- Skilled nursing care and Home health care
- Hospice care
- Generally Premium Free –
- (provided you or your spouse have worked a minimum of 40 quarters or 10 years)
- No reason to defer (except if have HSA)
- Can enhance Hospital coverage

## Part B Base Premium \$170.10 + per person/per month

- Doctors' services and Specialists
- Outpatient Medical Services
- Some Preventive services
- Diagnostic tests – Labs, X-Rays & MRI's
- Non-Inpatient – Emergency Room & Hospital Observation
- Durable medical equipment



# What Original Medicare Does Not Cover

- Long-term /Chronic care/Custodial Care
- Hearing aids & exams (for fitting them)
  - Aides now available Over the Counter
- Dentures
- Cosmetic Surgery
- Acupuncture
- Routine foot care
- Routine dental or eye care\*

\*Major Medical Eye Care is covered by Medicare:

Cataract Surgery

Diabetic Eye Check Ups

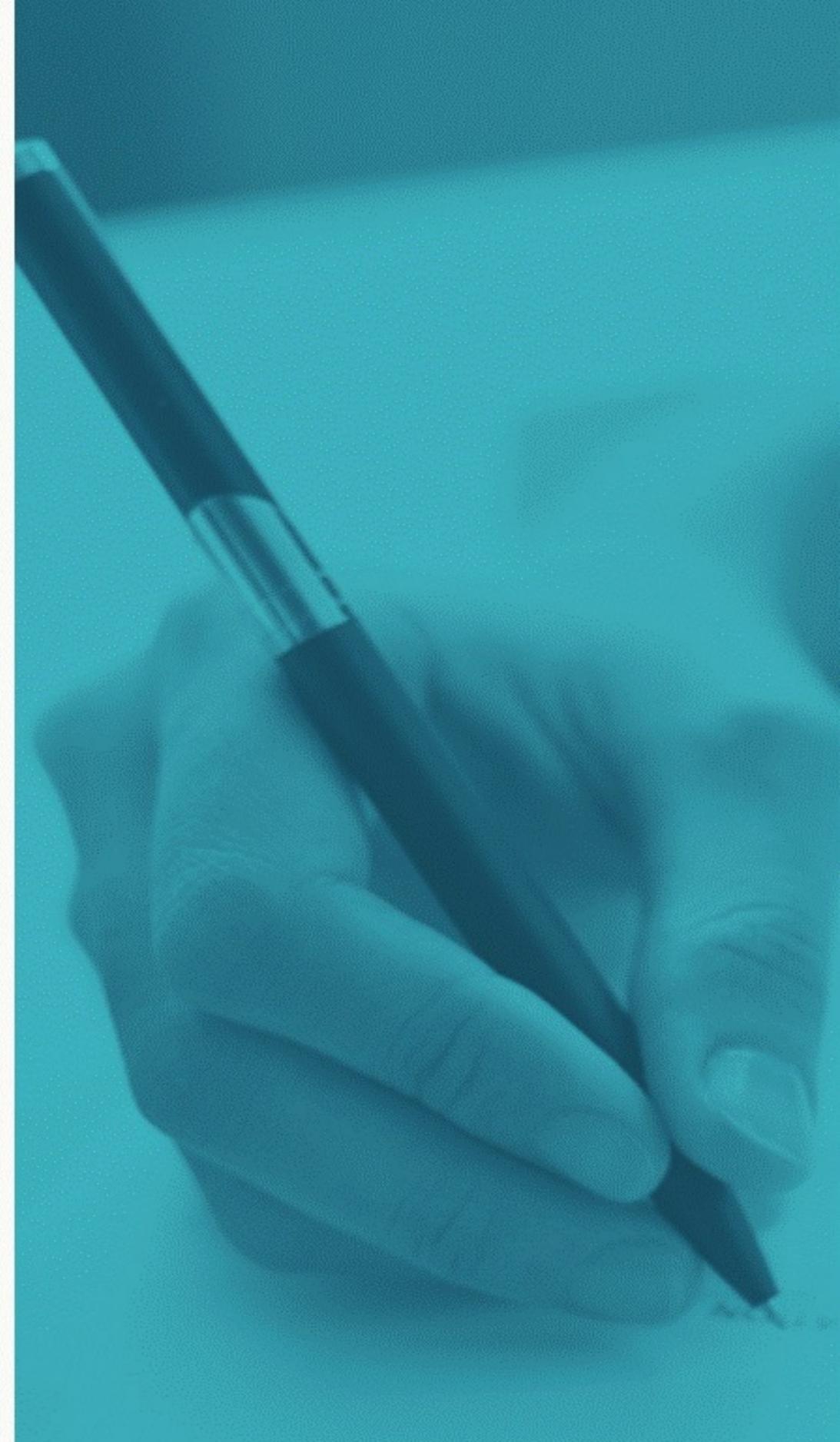
Glaucoma



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# Enrollment Periods

- **Initial Enrollment Period (IEP)**  
-7 month “Turning 65” Election Period
- **Annual Enrollment Period (AEP)**  
-October 15 to December 7
- **Open Enrollment Period (OEP)**  
-January 1 to March 31
- **Special Enrollment Periods (SEP)**  
-Individuals who drop their employer group health plan, qualify for the Extra Help (Low-Income Subsidy (LIS)) program, or eligible for both Medicare and Medicaid benefits (dual-eligibility)



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## Let's make it simpler. You have 4 choices:

1

### EMPLOYER GROUP PLAN

May have higher  
copay, deductibles,  
and coinsurance

2

### ORIGINAL MEDICARE

80/20 Split

3a

**MEDICARE  
ADVANTAGE**  
HMO Plans  
Managed care,  
Copays, networks

OR

3b

**MEDICARE  
ADVANTAGE**  
PPO Plan(s)  
Monthly premiums,  
Copays – in and out  
of networks

4

**MEDICARE  
SUPPLEMENT  
with stand-alone  
PRESCRIPTION  
DRUG PLAN**  
Monthly premiums,  
Any provider that  
accepts Medicare



# Your Doctors – Our Process

		County	Initials	Zip Code	
Name:	John Smith	Bergen	MC	07476	
Drs Name	Speciality	UHC	BCBS	Aetna	Humana
Howard Feldfogel	PCP	Y	Y	Y	N
Richard Maisel	Derm	Y	Y	Y	N
Jay Rechtweg	Cardio	N	Y	Y	Y
Paul Pervil	Ortho	Y	Y	Y	N
Quest Diagnostics		N	N	Y	N
MRI Imagine Center		Y	N	Y	Y

# 2022 – 2023

## Medicare Changes

Today, about 18% of the Gross Domestic Product is spent on health care, and voters rank health care as a top issue, reflecting the fact that health care is a major expense for many families.

- For 2022, the Part B deductible will be **\$233 for 2022**. Up 11.5% from \$203 in 2021 (once a year)  
For 2023 the deductible will be \$226
- For 2022, the Part B premium will be \$170.10 for 2022. Up 11.5% from \$148.50 in 2021. a \$21.60 increase. For 2023 premium will be \$164.90
- For 2022, The Part D deductible is \$480. For 2021 it was \$445. This is a 7.76% increase from 2021  
For 2023 the deductible will be \$505
- Med Supplement rates held steady through COVID but rates have been raised in all states. Avg 6%

# Additional Help Covering Insulin Costs

- In 2021, the Centers for Medicare and Medicaid Services introduced the Part D Senior Savings Model, in which Medicare beneficiaries with diabetes would pay no more than \$35 per month for needed insulin
- In 2022, this model has greatly expanded. In fact, every U.S. citizen eligible for Medicare in any of the 50 states, Puerto Rico or Washington, D.C. will have the opportunity to participate in this model
- You can find a prescription drug plan that participates in the Part D Senior Savings Model

This plan offers Optional Supplemental Benefits. If you want these benefits, you must sign up for them when you enroll and pay an additional monthly premium. You can sign up by selecting the option on your application in Section 1.

Optional supplemental benefits	Your costs for in-network care	Your costs for out-of-network care
<b>Option 1 : Deluxe Dental Package</b> <b>Monthly premium: \$24</b>		
Dental services	<p>\$0 for preventive services (e.g. oral exam, x-rays and cleaning)</p> <p>20% - 50% for comprehensive services. Comprehensive services include fillings, extractions, crowns, root canals, dentures and oral surgery.</p> <p>You pay a \$50 deductible for comprehensive services. Our plan pays up to a maximum amount of \$2,000 every year. You are responsible for any costs over this amount.</p> <p>This plan uses the Aetna Dental® PPO Network. If you choose a provider outside of the network, you may be responsible for additional costs.</p>	<p>30% for preventive services (e.g. oral exam and cleaning)</p> <p>50% - 70% for comprehensive services. Comprehensive services include fillings, extractions, crowns, root canals, dentures and oral surgery.</p>
<b>Option 2 : Deluxe Dental and Vision Package</b> <b>Monthly premium: \$29.90</b>		
Dental services	<p>\$0 for preventive services (e.g. oral exam, x-rays and cleaning)</p> <p>20% - 50% for comprehensive services. Comprehensive services include fillings, extractions, crowns, root canals, dentures and oral surgery.</p> <p>You pay a \$50 deductible for comprehensive services. Our plan pays up to a maximum amount of \$2,000 every year. You are responsible for any costs over this amount.</p> <p>This plan uses the Aetna Dental® PPO Network. If you choose a provider outside of the network, you may be responsible for additional costs.</p>	<p>30% for preventive services (e.g. oral exam &amp; cleaning)</p> <p>50% - 70% for comprehensive services (e.g. fillings)</p>
Contacts and eyeglasses (frames and lenses)	We'll reimburse you up to \$200 every year.	

# Prescription Drug Plans

(aka Medicare Part D)

Extreme client sensitivity to these current or potential future expenses:

- \$0 cost or Stand-Alone monthly premiums
- Annual deductible, \$480 for 2022 \$505 for 2023
- Co-payments
- Tier – Formulary
- Pricing changes yearly
- Preferred or Standard or Mail Order Pharmacy selection
- Discount cards – GoodRx/Single Care
- Pharmaceutical grants
- Adding a cap on out-of-pocket expenses to traditional Medicare and Medicare's prescription drug benefit also could go a long way to help people make ends meet.
- 4 Coverage stages of drug costs of Part D plans
  - *Deductible*
  - *After Deductible*
  - *Coverage Gap*
  - *Catastrophic*



# Thank you!



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# Myths & Realities

## Medicare Open Enrollment



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# Medicare Advantage Plan



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# Medigap - Medicare Supplement

## Medicare Supplement (Medigap)

Insurance plans to cover the gaps in Medicare that normally you would have to pay.



Your doctor or medical service provider bills Medicare for your service or procedure



Medicare pays the approved portion and sends the excess amount to your Medigap plan



Your Medigap plan pays the excess amount according to the terms of the plan you chose

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# Best Coverage

WHICH COVERAGE IS THE BEST FOR YOU?



**Original Medicare**  
CHOOSE YOUR OWN PROVIDERS



**Medicare Advantage**  
PREDETERMINED NETWORK



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